

Disclosure Report Cover

Amendment
 Yes No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

1. Committee Information	
a. Full Name RICKY HOOKS FOR WAYNE COUNTY SHERIFF	c. ID Number
b. Mailing Address (include City, State and Zip Code) 895 FRIENDLY DRIVE GOLDSBORO, NC 27530	d. Date Filed 01/14/2026
	e. Phone Number (919) 222-4236

2. Report Year 2025	3. Period Start Date (mm/dd/yy) 07/01/2025	4. Period End Date (mm/dd/yy) 12/31/2025	5. Treasurer Full Name LAURA HILL
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6. Type of Committee (Check One) <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Referendum <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Legal Expense Fund	9. Type of Report (check only one type of report from one category)		
	Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
	10. Special Report Name 		
7. Type of Fund (if applicable, check one) <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:	8. Number of Fundraisers this Report 1		

3. Account Information		3. Account Information	
a. Financial Institution Full Name SOUTHERN BANK AND TRUST	a. Financial Institution Full Name RECEIVED	JAN 14 2026	
b. Purpose CAMPAIGN FUNDS	c. Account Code 1	b. Purpose WCBOE	d. Account Code
	d. Period Begin Balance \$ 8,230.03		d. Period Begin Balance \$

CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board

Laura Hill Laura Hill 01/14/2026
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: _____ Employee: _____

Date Postmarked: _____ Employee: _____

Date Scanned: _____ Employee: _____

Date Data Entered: _____ Employee: _____

Delivery Method

Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed
 Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

Amendment
 Yes No

Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF	2025 Year End Semi-Annual		
Start of Election Cycle: January 1, <u>2025</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 8,230.03	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 3,074.93	\$ 3,174.93
6) Contributions from Individuals	(CRO-1210)	\$ 24,644.35	\$ 31,029.95
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.00	\$ 0.00
9) Loan Proceeds	(CRO-1410)	\$ 10,000.00	\$ 15,000.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.00	\$ 0.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.00	\$ 0.00
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ 0.00	\$ 0.00
11c) Outside Sources of Income	(CRO-1250)	\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 37,719.28	\$ 49,204.88
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 22,583.97	\$ 25,123.55
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 282.29	\$ 293.13
15) Loan Repayments	(CRO-1420)	\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0.00	\$ 0.00
17) In-Kind Contributions	(CRO-1510)	\$ 3,274.68	\$ 3,979.83
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 26,140.94	\$ 29,396.51
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 19,808.37	\$ 19,808.37
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 15,000.00	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$ 0.00	
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$ 0.00	
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0.00	
25) Administrative Support	(CRO-1710)	\$ 0.00	\$ 0.00
26) Forgiven Loans	(CRO-1440)	\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0.00	\$ 0.00
28) Contributions to be Refunded	(CRO-1215)	\$ 0.00	\$ 0.00

Aggregated Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)					2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		11/03/2025	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/10/2025	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/10/2025	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		12/20/2025	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electric Funds Tran		09/27/2025	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		10/21/2025	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$	40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/12/2025	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		10/14/2025	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/12/2025	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		09/13/2025	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		09/08/2025	\$	26.29
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		10/19/2025	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		10/06/2025	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		10/24/2025	\$	1.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		07/17/2025	\$	26.29
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		10/14/2025	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$	40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$	40.00
4. Total only this Page					\$	773.58
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$	3,074.93

Aggregated Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)					2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF					
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/10/2025	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electric Funds Tran		10/14/2025	\$ 5.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electric Funds Tran		10/14/2025	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		10/17/2025	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		07/14/2025	\$ 15.89
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/12/2025	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		12/20/2025	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electric Funds Tran		10/09/2025	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		08/14/2025	\$ 5.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		10/06/2025	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		10/08/2025	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		09/13/2025	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		10/12/2025	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/12/2025	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		09/25/2025	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		11/15/2025	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		10/07/2025	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/12/2025	\$ 25.00
4. Total only this Page					\$ 735.89
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 3,074.93

Aggregated Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)					2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		10/10/2025	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		10/10/2025	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		10/17/2025	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$	40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		09/10/2025	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		10/01/2025	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		09/10/2025	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		07/19/2025	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		11/15/2025	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		10/24/2025	\$	1.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		10/17/2025	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/12/2025	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		10/25/2025	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		09/08/2025	\$	26.29
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		10/09/2025	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$	40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/10/2025	\$	25.00
4. Total only this Page					\$	\$692.29
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$	\$3,074.93

Aggregated Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)					2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		07/17/2025	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		08/04/2025	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		07/08/2025	\$ 26.29	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		10/22/2025	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		09/13/2025	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		10/21/2025	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		07/09/2025	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		10/12/2025	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/12/2025	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/12/2025	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		12/01/2025	\$ 20.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		11/15/2025	\$ 20.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/11/2025	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/12/2025	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		11/15/2025	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		09/08/2025	\$ 41.88	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/04/2025	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		11/15/2025	\$ 25.00	
4. Total only this Page					\$ 783.17	
5. Total of ALL CRO-1205 Pages					\$ 3,074.93	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

Aggregated Contributions from Individuals

Page 5 of 5

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)					2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add	1	Cash		11/09/2025	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Cash		09/25/2025	\$ 40.00	
<input type="checkbox"/> Remove						
4. Total only this Page					\$ 90.00	
5. Total of ALL CRO-1205 Pages					\$ 3,074.93	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
FREDDIE ADAMS 100 CASSEDALE DRIVE GOLDSBORO, NC 27534		OWNER				
		c. Employer's Name/Specific Field				
		JEF PHARMACY		e. Election Sum to Date		
				\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		11/04/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
DEBBIE BAILEY 538 PRINCETON ROAD PRINCETON, NC 27569		RETIRED				
		c. Employer's Name/Specific Field				
		RETIRED		e. Election Sum to Date		
				\$ 1,400.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		10/07/2025	\$ 1,000.00	
<input type="checkbox"/>	1	Check		11/09/2025	\$ 100.00	
<input type="checkbox"/>	1	Check		11/09/2025	\$ 300.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
JENNIFER BAILEY 631 PRINCETON ROAD PRINCETON, NC 27569		SECRETARY				
		c. Employer's Name/Specific Field				
		WAYNE UNC		e. Election Sum to Date		
				\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		11/06/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
					\$ 1,600.00	
					\$ 24,644.35	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
SHANNON BEASLEY 302 NORTH COTTONWOOD DRIVE GOLDSBORO, NC 27530			RECEPTIONIST			
			c. Employer's Name/Specific Field WILSON HOSPITAL			
					e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		11/12/2025	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JIM BENNETT 715 TURNER SWAMP ROAD FREMONY, NC 27830			RETIRED			
			c. Employer's Name/Specific Field RETIRED			
					e. Election Sum to Date	
					\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		09/05/2025	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
MARK BLIZZARD 207 SPINGCREST DRIVE SEVEN SPRINGS, NC 28578			NURSE PRACTITIONER			
			c. Employer's Name/Specific Field MOUNT OLIVE FAMILY MEDICINE CENTER			
					e. Election Sum to Date	
					\$ 75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		11/15/2025	\$ 75.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1,275.00	
Total All Contributions					\$ 24,644.35	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
TRACY BRANTHAM 271 NC HWY 581 S GOLDSBORO, NC 27530			NONE			
			c. Employer's Name/Specific Field			
			NONE		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		10/01/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JOHNNIE BRYANT 580 MCARTHUR POAD ROAD MT. OLIVE, NC 28365			SALES ASSOCIATE			
			c. Employer's Name/Specific Field			
			FIRST LIGHT GUNS AND AMMO		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	In-Kind	PARTIAL CONTRIBUTION ON GUN FOR RAFFLE	09/23/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
TIMOTHY BUNCH 114 TITLEIST DRIVE GOLDSBORO, NC 27530			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		09/25/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
Total for this Page					\$ 300.00	
Total for All CRO-1210 Pages					\$ 24,644.35	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable) RICKY HOOKS FOR WAYNE COUNTY SHERIFF	2. ID Number
--	---------------------

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) CLIFTON CONNOR 100 HOOD DRIVE GOLDSBORO, NC 27530	b. Job Title/Profession RETIRED	d. Comments
	c. Employer's Name/Specific Field RETIRED	
	e. Election Sum to Date \$ 100.00	

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	Check		10/16/2025	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) DARRYLL COONER 660 LAUREL PLACE SEVERNA PARK, MD 21146	b. Job Title/Profession OWNER	d. Comments
	c. Employer's Name/Specific Field COONER INVESTMENTS	
	e. Election Sum to Date \$ 104.23	

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	Credit Card		07/08/2025	\$ 104.23
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) JAMES CORNELL 100 SUSAN CIRCLE GOLDSBORO, NC 27530	b. Job Title/Profession RETIRED	d. Comments
	c. Employer's Name/Specific Field RETIRED	
	e. Election Sum to Date \$ 100.00	

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	Electric Funds Tran		10/10/2025	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

Total only this Page	\$ 304.23
Total for ALL CRO-1210 Pages	\$ 24,644.35

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JOE DAUGHTERY 125 OXFORD DRIVE GOLDSBORO, NC 27534			RETIRED			
			c. Employer's Name/Specific Field RETIRED			
					e. Election Sum to Date	
					\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		10/20/2025	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
PAM DAUGHTRY 70 WILSHIRE WAY CLAYTON, NC 27527			NURSE CARE COORDINATOR			
			c. Employer's Name/Specific Field WAKE MED HEART AND VASCULAR			
					e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Electric Funds Tran		09/27/2025	\$ 200.00	
<input type="checkbox"/>	1	Cash		11/15/2025	\$ 50.00	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
KRIQUETTE DAVIS 2341 DAVIS MILL ROAD FREMONT, NC 27830			CEO/FOUNDER			
			c. Employer's Name/Specific Field KRIQUETTE'S KIDS			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Electric Funds Tran		10/08/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1,350.00	
5. Total for ALL CRO-1210 Pages					\$ 24,644.35	
<i>(Use the amount on line 6 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JOSEPH DAWSON 106 TORHUNTA DRIVE GOLDSBORO, NC 27534				POLICE OFFICER			
				c. Employer's Name/Specific Field			
				STATE OF NC		e. Election Sum to Date	
						\$ 602.27	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	Cash		10/06/2025	\$ 50.00		
<input type="checkbox"/>	1	In-Kind	COOLER FOR RAFFLE	10/15/2025	\$ 400.00		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
LEONARD DOWNES 731 MCARTHUR POND ROAD MT. OLIVE, NC 28365				OWNER			
				c. Employer's Name/Specific Field			
				DOWNES AUTO PARTS		e. Election Sum to Date	
						\$ 400.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	Check		10/07/2025	\$ 400.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JOHN DUNCAN 103 MOSS HILL DRIVE GOLDSBORO, NC 27530				CHIEF OF POLICE			
				c. Employer's Name/Specific Field			
				WAYNE COMMUNITY COLLEGE		e. Election Sum to Date	
						\$ 312.09	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	Credit Card		08/14/2025	\$ 312.09		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1,162.09	
5. Total of ALL CRO-1210 Page						\$ 24,644.35	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
IVONNE DUSTIN 202 MOSSBURG DRIVE GOLDSBORO, NC 27530			NONE			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			NONE		\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		10/06/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
DAWN EASON 100 DORIS DRIVE GOLDSBORO, NC 27534			PROJECT COORDINATOR			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			TA LOVING		\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		11/15/2025	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
SCOTT EASTON 266 ARRINGTON BRIDGE ROAD GOLDSBORO, NC 27530			OWNER			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			CSS		\$ 1,050.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Cash		10/06/2025	\$ 50.00	
<input type="checkbox"/>	1	Credit Card		11/20/2025	\$ 1,000.00	
<input type="checkbox"/>					\$	
Total only this Page					\$ 1,350.00	
Total of ALL CRO-1210 Pages					\$ 24,644.35	
<i>This line must be on line 6 of Detailed Summary Page CRO-1100</i>						

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
CRAIG EDWINS 3193 SALEM CHURCH ROAD GOLDSBORO, NC 27530			RETIRE			
			c. Employer's Name/Specific Field			
			RETIRE		e. Election Sum to Date	
					\$ 125.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Cash		10/09/2025	\$ 25.00	
<input type="checkbox"/>	1	Check		11/15/2025	\$ 100.00	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
GEORGIA FAIRCLOTH 3459 STEVENS MILL ROAD GOLDSBORO, NC 27530			SECRETARY			
			c. Employer's Name/Specific Field			
			GEORGE'S BODY SHOP		e. Election Sum to Date	
					\$ 125.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Cash		10/14/2025	\$ 25.00	
<input type="checkbox"/>	1	Check		10/14/2025	\$ 100.00	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
SHELLEY FLORES 121 ACREVIEW DRIVE GOLDSBORO, NC 27530			RETIRE			
			c. Employer's Name/Specific Field			
			RETIRE		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		11/15/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total on this Page					\$ 350.00	
5. Total on ALL CRO 1210 Pages					\$ 24,644.35	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
BOBBY FONES 2745 OLD SMITHFIELD ROAD PRINCETON, NC 27569			OWNER			
			c. Employer's Name/Specific Field FONE'S LAWN CARE			
					e. Election Sum to Date	
					\$ 90.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Cash		09/26/2025	\$ 40.00	
<input type="checkbox"/>	1	Cash		11/12/2025	\$ 50.00	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
TARA FONES 2745 OLD SMITHFIELD ROAD PRINCETON, NC 27569			CASH REC TEAM LEAD			
			c. Employer's Name/Specific Field QXO			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		09/25/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JASON GRAHAM 102 SERENITY CIRCLE GOLDSBORO, NC 27530			MECHANIC			
			c. Employer's Name/Specific Field ATLANTIC & SOUTHERN EQUIPMENT			
					e. Election Sum to Date	
					\$ 202.27	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		08/23/2025	\$ 52.27	
<input type="checkbox"/>	1	Credit Card		11/09/2025	\$ 150.00	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 392.27	
5. Total of ALL CRO 1210 Pages					\$ 24,644.35	
<i>(This line must be on line 6 of Detailed Summary Page CRO 1100)</i>						

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
DANNY GRANT JR 318 CLAY BROOK DRIVE GOLDSBORO, NC 27530			OWNER			
			c. Employer's Name/Specific Field			
			MODERN HOUSING	e. Election Sum to Date		
				\$ 500.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		09/29/2025	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
JULIE GREGORY 114 WILDWOOD GOLDSBORO, NC 27530			NURSE			
			c. Employer's Name/Specific Field			
			WAYNE UNC	e. Election Sum to Date		
				\$ 60.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Cash		09/25/2025	\$ 50.00	
<input type="checkbox"/>	1	Cash		10/07/2025	\$ 10.00	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
KENNETH GRICE 105 JJ LANE GOLDSBORO, NC 27530			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED	e. Election Sum to Date		
				\$ 150.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Cash		09/29/2025	\$ 50.00	
<input type="checkbox"/>	1	Cash		10/05/2025	\$ 50.00	
<input type="checkbox"/>	1	Cash		10/06/2025	\$ 50.00	
Total on this Page					\$ 710.00	
Total of ALL CRO-1210 Pages					\$ 24,644.35	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JOHN HANSBOROUGH 202 SEVENDALES DRIVE GOLDSBORO, NC 27534			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 80.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		11/15/2025	\$ 80.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
BARBARA HILL 101 EAST APRIL LANE GOLDSBORO, NC 27530			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		10/22/2025	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
LAURA HILL 104 ASHWORTH DRIVE GOLDSBORO, NC 27530			INSURANCE QUALITY MANAGER			
			c. Employer's Name/Specific Field			
			MT OLIVE FAMILY MEDICINE		e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		10/09/2025	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 480.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1210)</i>					\$ 24,644.35	

Contributions from Individuals

Amendment
 Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information						
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
GERALD HOOKS 6523 SHIRE LANE WILMINGTON, NC 28411			NO JOB TITLE			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED		e. Election Sum to Date	
					\$ 5,396.75	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		11/15/2025	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information						
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JANE HOOKS 3104 DIANA STREET GOLDSBORO, NC 28534			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		10/22/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information						
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
LISA HOOKS 895 FRIENDLY DRIVE GOLDSBORO, NC 27530			EXECUTIVE DIRECTOR			
			c. Employer's Name/Specific Field			
			MT OLIVE FAMILY MEDICINE CENTER, INC		e. Election Sum to Date	
					\$ 12,494.48	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	In-Kind	DEPOSIT FIREHOUSE VENUE DUPLICATE	08/28/2025	\$ 0.00	
<input type="checkbox"/>	1	In-Kind	VENUE PAYMENT FOR KICKOFF	08/28/2025	\$ 1,250.00	
<input type="checkbox"/>	1	In-Kind	HOOKS PENS	09/01/2025	\$ 226.84	
Total Only this Page					\$ 1,776.84	
Total ALL CRO-1210 Page					\$ 24,644.35	
<i>(This is not to be filed, it is a detailed summary Page CRO-110b)</i>						

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)	2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF	

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
LISA HOOKS 895 FRIENDLY DRIVE GOLDSBORO, NC 27530	EXECUTIVE DIRECTOR	
	c. Employer's Name/Specific Field	
	MT OLIVE FAMILY MEDICINE CENTER, INC	e. Election Sum to Date
		\$ 12,494.48

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	In-Kind	CAR STICKERS	10/13/2025	\$ 221.25
<input type="checkbox"/>	1	In-Kind	PHOTOGRAPHOR AT KICKOFF	10/19/2025	\$ 320.25
<input type="checkbox"/>	1	In-Kind	COOKIESK, ROLLS AND WATER FOR KICKOFF	11/13/2025	\$ 92.89

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
DARRELL HORNE 100 CASSEDALE DRIVE GOLDSBORO, NC 27534	RETIRED	
	c. Employer's Name/Specific Field	
	RETIRED	e. Election Sum to Date
		\$ 600.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	Check		07/08/2025	\$ 500.00
<input type="checkbox"/>	1	Check		10/18/2025	\$ 100.00
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
VIRGINIA HUGHES 1704 CHALLENGER AVENUE DAVENPORT, FL 33897	RETIRED	
	c. Employer's Name/Specific Field	
	RETIRED	e. Election Sum to Date
		\$ 3,000.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	Check		10/25/2025	\$ 1,000.00
<input type="checkbox"/>	1	Check		11/26/2025	\$ 1,000.00
<input type="checkbox"/>	1	Check		12/26/2025	\$ 1,000.00

Total on this Page	\$ 4,234.39
Total on ALL CRO 1210 Pages	\$ 24,644.35

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
GEOFF HULSE 233 E. WALNUT STREET GOLDSBORO, NC 27530			ATTORNEY			
			c. Employer's Name/Specific Field HBHK LAW OFFICES			
					e. Election Sum to Date	
					\$ 104.23	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		09/09/2025	\$ 104.23	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
HELEN JERNIGAN 314 YEARLING DRIVE GOLDSBORO, NC 27534			OWNER			
			c. Employer's Name/Specific Field MCAUTHUR RENTALS			
					e. Election Sum to Date	
					\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		11/15/2025	\$ 300.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
KARL KING 1727 HOOD SWAMP ROAD LA GRANGE, NC 28551			OWNER			
			c. Employer's Name/Specific Field KINGS TRANSMISSIONS			
					e. Election Sum to Date	
					\$ 750.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		10/16/2025	\$ 100.00	
<input type="checkbox"/>	1	Check		10/16/2025	\$ 500.00	
<input type="checkbox"/>	1	Cash		11/15/2025	\$ 50.00	
Total on this Page					\$ 1,054.23	
Total of ALL CRO-1210 Pages					\$ 24,644.35	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
KARL KING 1727 HOOD SWAMP ROAD LA GRANGE, NC 28551			OWNER			
			c. Employer's Name/Specific Field			
			KINGS TRANSMISSIONS		e. Election Sum to Date	
					\$ 750.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Cash		11/22/2025	\$ 50.00	
<input type="checkbox"/>	1	Cash		11/29/2025	\$ 50.00	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
RANDY KING 1042 COUNTRY CLUB ROAD MOUNT OLIVE, NC 28365			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		10/15/2025	\$ 100.00	
<input type="checkbox"/>	1	Check		10/15/2025	\$ 100.00	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
ROGER KING 142 STONEY HILL ROAD GOLDSORO, NC 27530			CONSTRUCTION			
			c. Employer's Name/Specific Field			
			SELF EMPLOYED		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		10/07/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 400.00	
5. Total of All CRO-1210 Pages <i>(This line must be on the 6 of Detailed Summary Page CRO-1100)</i>					\$ 24,644.35	

Contributions from Individuals

Amendment
 Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
THERESA KING 1727 HOOD SWAMP ROAD LA GRANGE, NC 28551			CO-OWNER			
			c. Employer's Name/Specific Field			
			KINGS TRANMISSION		e. Election Sum to Date	
					\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Cash		11/15/2025	\$ 50.00	
<input type="checkbox"/>	1	Cash		11/22/2025	\$ 50.00	
<input type="checkbox"/>	1	Cash		11/29/2025	\$ 50.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JAMES KORNEGAY 162 CRICKET RIDGE ROAD MOUNT OLIVE, NC 28365			AGENT			
			c. Employer's Name/Specific Field			
			FARM BUREAU		e. Election Sum to Date	
					\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		09/24/2025	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
GINGER LANGLEY 104 STARGRASS CIRCLE GOLDSBORO, NC 27534			GI OFFICER			
			c. Employer's Name/Specific Field			
			USAF		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		11/15/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1210)</i>					\$ 24,644.35	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
KRISTY LASSITER 500 LASSITER ROAD PRINCETON, NC 27569			PHOTOGRAPHY			
			c. Employer's Name/Specific Field			
			SELF EMPLOYED		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		10/02/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
SHANE MANUEL 101 GROSVENOR DRIVE RALEIGH, NC 27615			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		08/05/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
BRIANNA MAZUR 2196 OLD SMITHFIELD ROAD GOLDSBORO, NC 27530			SERVICE COORDINATOR			
			c. Employer's Name/Specific Field			
			PRECISION PLUMBING		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		10/04/2025	\$ 25.00	
<input type="checkbox"/>	1	Credit Card		10/09/2025	\$ 75.00	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 300.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 24,644.35	

Contributions from Individuals

Amendment
 Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
MICHELLE MERRITT 105 BETHANY PLACE GOLDSBORO, NC 27530			SELF EMPLOYE			
			c. Employer's Name/Specific Field			
			SELF EMPLOYED		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		11/15/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
KARRIE MONDELL 219 SOUTH SPENCE AVENUE GOLDSBORO, NC 27534			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Cash		11/15/2025	\$ 20.00	
<input type="checkbox"/>	1	Cash		11/22/2025	\$ 40.00	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
GARY MOORE 916 FRIENDLY DRIVE GOLDSBORO, NC 27530			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		11/15/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
Total only this page					\$ 260.00	
Total of ALL CRO 1210 Pages <i>(Use the number on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 24,644.35	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
GEORGE MOYE 238 SPRING BANK ROAD GOLDSBORO, NC 27534			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
				\$ 75.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		11/15/2025	\$ 75.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
PHILLIP MOYE 709 LAKE SHORE DRIVE GOLDSBORO, NC 27534			PHYSICIAN			
			c. Employer's Name/Specific Field			
			MT OLIVE FAMIY MEDICINE CENTER INC		e. Election Sum to Date	
				\$ 300.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		08/29/2025	\$ 100.00	
<input type="checkbox"/>	1	Credit Card		10/11/2025	\$ 100.00	
<input type="checkbox"/>	1	Check		11/15/2025	\$ 100.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
RYLEE MYERS 111 N. MERGANSER DRIVE PIKEVILLE, NC 27863			SALES PERSON			
			c. Employer's Name/Specific Field			
			DEACON JONES FORD		e. Election Sum to Date	
				\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Electric Funds Tran		10/14/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
Total Only this Page					\$ 475.00	
Total of ALL CRO-1210 Pages					\$ 24,644.35	
<i>(This total must be on line 6 of District Summary Page CRO-1100)</i>						

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
PAUL NEWSOME 111 TED STREET LA GRANGE, NC 28551			FARMER			
			c. Employer's Name/Specific Field			
			SELF EMPLOYED			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		10/25/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
CAROLINE PARKER P.O. BOX 458 GOLDSBORO, NC 27533 (919) 635-0033			OWER			
			c. Employer's Name/Specific Field			
			BROOKS & REID EVENTS			
					e. Election Sum to Date	
					\$ 250.33	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	In-Kind	TABLE CLOTHS AT VENUE	10/15/2025	\$ 250.33	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
HERMAN PATEL 207 CASSEDALE DRIVE GOLDSBORO, NC 27534			SELF EMPLOYED			
			c. Employer's Name/Specific Field			
			SELF EMPLOYED			
					e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		12/10/2025	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 600.33	
5. Total of ALL CRO-1210 Pages <small>(This is not to be on top of Detailed Summary Page CRO-1100)</small>					\$ 24,644.35	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JOHN PEACOCK 207 FRIENDSWOOD DRIVE GOLDSBORO, NC 27530				FIELD REIMBURSEMENT MANAGER			
				c. Employer's Name/Specific Field PFIZER			
				e. Election Sum to Date		\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	Check		10/13/2025	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ETHAN PEARCE 1604 OLD SMITHFIELD ROAD GOLDSBORO, NC 27530				COMB TECH			
				c. Employer's Name/Specific Field DUKE ENERGY			
				e. Election Sum to Date		\$ 120.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	Cash		11/15/2025	\$ 20.00		
<input type="checkbox"/>	1	Credit Card		11/15/2025	\$ 100.00		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
KEN PENNINGTON 113 BERRY HILL DRIVE RALEIGH, NC 27615				BROKER			
				c. Employer's Name/Specific Field BPG MANAGEMENT COMPANY			
				e. Election Sum to Date		\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	Credit Card		08/24/2025	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 320.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be verified against the Detailed Summary Page CRO-1110)</i>						\$ 24,644.35	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
KRISTEN PENNINGTON 113 BERRY HILL DRIVE RALEIGH, NC 27615			NONE			
			c. Employer's Name/Specific Field			
			NONE		e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		11/16/2025	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JASON PERDUE 628 HOCUTT FARM DRIVE CLAYTON, NC 27527			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 130.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		10/08/2025	\$ 100.00	
<input type="checkbox"/>	1	Cash		11/15/2025	\$ 30.00	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
DESMOND ROBBINS 861 N NC 581 GOLDSBORO, NC 27530			OWNER			
			c. Employer's Name/Specific Field			
			ERNEST GLASS		e. Election Sum to Date	
					\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		08/08/2025	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total on this Page					\$ 880.00	
5. Total of ALL CRO-1210 Pages <i>(This figure must be on line 6 of Detailed Summary Page CRO-1210)</i>					\$ 24,644.35	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
KAREN ROGERS 1725 PATE TOWN ROAD GOLDSBORO, NC 27530				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
				e. Election Sum to Date			
						\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	1	Credit Card		09/25/2025		\$ 100.00	
<input type="checkbox"/>	1	Check		10/01/2025		\$ 100.00	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
TRACI ROUSE 102 STONEWOOD DRIVE GOLDSBORO, NC 27530				SENIOR REP SPECIALIST			
				c. Employer's Name/Specific Field			
				RICCOBENE ASSOCIATES			
				e. Election Sum to Date			
						\$ 125.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	1	Cash		11/15/2025		\$ 50.00	
<input type="checkbox"/>	1	Credit Card		11/15/2025		\$ 75.00	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CHRIS SASSER 2429 N BESTON ROAD LA GRANGE, NC 28551				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
				e. Election Sum to Date			
						\$ 450.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	1	Check		08/21/2025		\$ 400.00	
<input type="checkbox"/>	1	Cash		11/15/2025		\$ 50.00	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 775.00	
5. Total of ALL CRO-1210 Pages						\$ 24,644.35	
<i>(This total must be on line 5 of Detailed Summary Page CRO-1210)</i>							

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)	2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF	

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
SYLVIA SASSER 2429 N. BESTON ROAD LA GRANGE, NC 28551	RETIRED	
	c. Employer's Name/Specific Field	
	RETIRED	e. Election Sum to Date
		\$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	Check		10/18/2025	\$ 300.00
<input type="checkbox"/>	1	Cash		11/15/2025	\$ 50.00
<input type="checkbox"/>	1	Check		11/15/2025	\$ 150.00

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
CHRIS SITTIG 108 PENN CIRCLE GOLDSBORO, NC 27530	DRIVER	
	c. Employer's Name/Specific Field	
	NRFP	e. Election Sum to Date
		\$ 55.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	Cash		11/12/2025	\$ 50.00
<input type="checkbox"/>	1	Cash		11/15/2025	\$ 5.00
<input type="checkbox"/>					\$

Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
JOSH SMITH 107 DOBBERS CREEK DRIVE GOLDSBORO, NC 27530	TEACHER	
	c. Employer's Name/Specific Field	
	WAYNE COUNTY PUBLIC SCHOOLS	e. Election Sum to Date
		\$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	Credit Card		11/15/2025	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

Total only this Page \$ 655.00

Total of ALL CRO 1210 Pages \$ 24,644.35

(Total must be on back of Detailed Summary Page CRO-1210)

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
NICHOLAS SMITH 219 N SPENCE AVENUE GOLDSBORO, NC 27534			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 525.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		08/13/2025	\$ 500.00	
<input type="checkbox"/>	1	Cash		11/10/2025	\$ 25.00	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
DANNY STANLEY 506 PARKWOOD LANE GOLDSBORO, NC 27530			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 438.12	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	In-Kind	TURTLE BOX FOR RAFFLE	09/18/2025	\$ 413.12	
<input type="checkbox"/>	1	Cash		11/11/2025	\$ 25.00	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
BOBBY STONE 105 BURNSIDE LANE GOLDSBORO, NC 27534			CONTRACTOR			
			c. Employer's Name/Specific Field			
			STONE CONSTRUCTION		e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Cash		10/14/2025	\$ 50.00	
<input type="checkbox"/>	1	Cash		10/22/2025	\$ 50.00	
<input type="checkbox"/>	1	Cash		11/15/2025	\$ 50.00	
4. Total on this Page					\$ 1,113.12	
5. Total of All CRO-1210 Pages <i>(This figure must be on line 5 of Detailed Summary Page CRO-1210)</i>					\$ 24,644.35	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
BOBBY STONE 105 BURNSIDE LANE GOLDSBORO, NC 27534			CONTRACTOR			
			c. Employer's Name/Specific Field			
			STONE CONSTRUCTION		e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Cash		11/22/2025	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
WAYNE TAYLOR 2725 CAMERON POND DRIVE CARY, NC 27519			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		10/02/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
WILL THURSTON 1470 NC 403 HIGHWAY MOUNT OLIVE, NC 28365			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		11/15/2025	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 350.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on 6/26 of Detailed Summary Page CRO-1100)</i>					\$ 24,644.35	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
DANIEL TRUHAN 123 ALBERT DRIVE GOLDSBORO, NC 27530			POLICE OFFICER			
			c. Employer's Name/Specific Field			
			WAYNE COMMUNITY COLLEGE		e. Election Sum to Date	
					\$ 239.85	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		08/13/2025	\$ 26.29	
<input type="checkbox"/>	1	Credit Card		08/13/2025	\$ 35.00	
<input type="checkbox"/>	1	Credit Card		09/25/2025	\$ 26.29	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
DANIEL TRUHAN 123 ALBERT DRIVE GOLDSBORO, NC 27530			POLICE OFFICER			
			c. Employer's Name/Specific Field			
			WAYNE COMMUNITY COLLEGE		e. Election Sum to Date	
					\$ 239.85	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		09/25/2025	\$ 52.27	
<input type="checkbox"/>	1	Credit Card		11/15/2025	\$ 100.00	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JEFFREY VERNON 635 ROSEWOOD ROAD GOLDSBORO, NC 27530			BRANCH MANAGER			
			c. Employer's Name/Specific Field			
			ARC3 GASES		e. Election Sum to Date	
					\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		07/28/2025	\$ 200.00	
<input type="checkbox"/>	1	Check		11/15/2025	\$ 100.00	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 539.85	
5. Total of ALL CRO-1210 Pages					\$ 24,644.35	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1210)</i>						

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
EAN WADE 1940 HINNANT ROAD PIKEVILLE, NC 27863			POLICE OFFICER			
			c. Employer's Name/Specific Field CITY OF GOLDSBORO			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		10/09/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JULIE WEST 202 AIRPORT ROAD NE PIKEVILLE, NC 27863			RETIRED			
			c. Employer's Name/Specific Field RETIRED			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		11/19/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
EMMETT WILLIAMS 115 SOUTH BESTON ROAD LA GRANGE, NC 28551			PASTOR			
			c. Employer's Name/Specific Field WALKER CHURCH			
					e. Election Sum to Date	
					\$ 62.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		10/25/2025	\$ 50.00	
<input type="checkbox"/>	1	Cash		11/15/2025	\$ 12.00	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 262.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on the 4 of Detailed Summary Page CRO-1100)</i>					\$ 24,644.35	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JONATHAN WILLIAMS 205 NORTH WOODRIDGE DRIVE PIKEVILLE, NC 27863			FIELD SERVICE TECH			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			HIAB		\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		11/15/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
BARB WILLIAMSON 863 LUBY SMITH ROAD PRINCETON, NC 27569			LAWN CARE			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			SELF EMPLOYED		\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Cash		11/15/2025	\$ 50.00	
<input type="checkbox"/>	1	Cash		11/22/2025	\$ 50.00	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
LINDA WILLIAMSON 863 LUBY SMITH ROAD PRINCETON, NC 27569			RETIRED			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			RETIRED		\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Cash		11/15/2025	\$ 50.00	
<input type="checkbox"/>	1	Cash		11/22/2025	\$ 50.00	
<input type="checkbox"/>					\$	
Total only this Page					\$ 300.00	
Total of ALL CRO-110 Pages					\$ 24,644.35	
<i>(This must be on line 6 of Detailed Summary Page CRO-110)</i>						

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
PAT WILSON 2002 WESTOVER DRIVE GOLDSBORO, NC 27530			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		11/15/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
WAYNE WISE 108 HOMESTEAD DRIVE GOLDSBORO, NC 27530			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election Sum to Date	
					\$ 375.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		08/24/2025	\$ 50.00	
<input type="checkbox"/>	1	Credit Card		09/07/2025	\$ 50.00	
<input type="checkbox"/>	1	Check		10/21/2025	\$ 100.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
WAYNE WISE 108 HOMESTEAD DRIVE GOLDSBORO, NC 27530			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election Sum to Date	
					\$ 375.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		11/15/2025	\$ 175.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total on this Page					\$ 475.00	
5. Total of ALL CRO 1210 Pages					\$ 24,644.35	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
GEORGE WORRELL 500 EDEN CHURCH ROAD SNOW HILL, NC 28580			RETIRE			
			c. Employer's Name/Specific Field			
			RETIRE		e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Credit Card		07/25/2025	\$ 100.00	
<input type="checkbox"/>	1	Credit Card		09/25/2025	\$ 100.00	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 200.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 24,644.35	

Loan Proceeds

Pg 1 of 1

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report proceeds from a loan and loan endorser's information
 A loan proceeds statement must accompany each loan that is from an individual

1. Committee Full Name (and Fund if applicable)		2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF			
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
LISA HOOKS 895 FRIENDLY DRIVE GOLDSBORO, NC 27530		EXECUTIVE DIRECTOR	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		MT OLIVE FAMILY MEDICINE CENTER, INC	10/22/2025
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment
0.000 %	NONE	1	Check
			k. Amount
			\$ 10,000.00
l. Full Name of Lending Institution			m. Loan Number
4. Endorsers/Makers: (The people who guarantee the loan.)			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field
		d. Percentage	e. Amount
		%	\$
5. Total of ALL CRO-1410 Pages (This line must be on line 9 of Detailed Summary Page CRO-110)			k. Amount
			\$ 10,000.00

Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
ACCUCOPY 322 N. JOHN STREET GOLDSBORO, NC 27530						
				c. Level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						\$ 6,093.21
5. Disbursement Table						
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	O	07/18/2025	\$ 214.57	HATS	
1	Debit Card	O	08/12/2025	\$ 214.57	HATS	
6. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
ACCUCOPY 322 N. JOHN STREET GOLDSBORO, NC 27530						
				c. Level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						\$ 6,093.21
7. Disbursement Table						
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	O	09/05/2025	\$ 1,602.32	SHIRTS	
1	Debit Card	O	09/23/2025	\$ 644.24	SHIRTS	
8. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
ACCUCOPY 322 N. JOHN STREET GOLDSBORO, NC 27530						
				c. Level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						\$ 6,093.21
9. Disbursement Table						
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	O	09/25/2025	\$ 128.10	RAFFLE TICKETS	
1	Debit Card	O	10/02/2025	\$ 218.84	SHIRTS WITH LOGO	
						\$ 3,022.64
Total Operating Expenses						\$ 3,022.64
Total Contributions						\$ 22,583.97
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>						
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>						
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						
Purpose Codes (also detailed expenditures)						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund
O* Other						
<i>Require detailed explanation in required remarks field (k)</i>						

Disbursements

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)						2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACCUCOPY 322 N. JOHN STREET GOLDSBORO, NC 27530							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 6,093.21	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	O	10/08/2025	\$ 272.21	SWEATSHIRTS		
1	Debit Card	O	10/23/2025	\$ 278.18	KOOZIES WITH LOGO		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACCUCOPY 322 N. JOHN STREET GOLDSBORO, NC 27530							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 6,093.21	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	O	10/23/2025	\$ 376.29	SHIRTS AND JACKETS		
				\$	WITH LOGO		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
AGE GRAPHICS 678 COLLINS ROAD LITTLE HOCKING, OH 45742 (740) 989-0006							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 2,615.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	O	11/04/2025	\$ 1,000.00	BIG YARD SIGNS		
1	Debit Card	O	12/10/2025	\$ 1,615.00	YARD SIGNS		
5. Total only this Page						\$ 3,541.68	
6. Total of ALL CRO-1310's						\$ 22,583.97	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)							
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
7. Purpose Codes (As detailed in Appendix code in the Manual)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
Codes require detailed explanation in required remarks field (k)							

Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)						2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
AMAZON 440 TERRY AVE N SEATTLE, WA 98109 (206) 266-1000							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 160.41	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	O	11/12/2025	\$ 160.41	EVENT DECOR		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
DANIEL BAYNES 221 LANE TREE DRIVE GOLDSBORO, NC 27530							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 300.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	O	11/15/2025	\$ 300.00	ENTERTAINMENT AT KICKOFF		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
BICYCLE WORD 137 N CENTER STREET GOLDSBORO, NC 27530 (919) 735-2964							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 0.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	O	09/18/2025	\$ 0.00	SPEAKER FOR RAFFLE		
1	Debit Card	O	10/15/2025	\$ 0.00	COOLER FOR RAFFLE		
5. Total Only this Page						\$ 460.41	
6. Total of All CRO-1310 Pages						\$ 22,583.97	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)						2. ID Number																			
RICKY HOOKS FOR WAYNE COUNTY SHERIFF																									
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)																									
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures																									
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove																									
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments																			
BIG BLUE COUCH MEDIA LLC 212 NORTH JOHN STREET GOLDSBORO, NC 27530																									
				c. Level Registered (Specify)		e. Election Sum to Date																			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 0.00																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 10%;">f. Account Code</th> <th style="width: 15%;">g. Form of Payment</th> <th style="width: 10%;">h. Purpose Code</th> <th style="width: 15%;">i. Date (mm/dd/yyyy)</th> <th style="width: 10%;">j. Amount</th> <th style="width: 40%;">k. Required Remarks</th> </tr> <tr> <td>1</td> <td>Debit Card</td> <td>O</td> <td>10/19/2025</td> <td>\$ 0.00</td> <td>PHOTOGRAPER AT KICKOFF</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>\$</td> <td></td> </tr> </table>								f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	1	Debit Card	O	10/19/2025	\$ 0.00	PHOTOGRAPER AT KICKOFF					\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks																				
1	Debit Card	O	10/19/2025	\$ 0.00	PHOTOGRAPER AT KICKOFF																				
				\$																					
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove																									
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments																			
BROOKS AND REID EVENTS P O BOX 458 GOLDSBORO, NC 27533																									
				c. Level Registered (Specify)		e. Election Sum to Date																			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 0.00																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 10%;">f. Account Code</th> <th style="width: 15%;">g. Form of Payment</th> <th style="width: 10%;">h. Purpose Code</th> <th style="width: 15%;">i. Date (mm/dd/yyyy)</th> <th style="width: 10%;">j. Amount</th> <th style="width: 40%;">k. Required Remarks</th> </tr> <tr> <td>1</td> <td>Debit Card</td> <td>O</td> <td>10/15/2025</td> <td>\$ 0.00</td> <td>TABLE CLOTHS</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>\$</td> <td></td> </tr> </table>								f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	1	Debit Card	O	10/15/2025	\$ 0.00	TABLE CLOTHS					\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks																				
1	Debit Card	O	10/15/2025	\$ 0.00	TABLE CLOTHS																				
				\$																					
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove																									
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments																			
BUILDERS DISCOUNT CENTER 1301 COLLIER STREET GOLDSBORO, NC 27530 (919) 731-7877																									
				c. Level Registered (Specify)		e. Election Sum to Date																			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 148.20																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 10%;">f. Account Code</th> <th style="width: 15%;">g. Form of Payment</th> <th style="width: 10%;">h. Purpose Code</th> <th style="width: 15%;">i. Date (mm/dd/yyyy)</th> <th style="width: 10%;">j. Amount</th> <th style="width: 40%;">k. Required Remarks</th> </tr> <tr> <td>1</td> <td>Debit Card</td> <td>O</td> <td>10/29/2025</td> <td>\$ 148.20</td> <td>WOOD FOR SIGN DISPLAYS</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>\$</td> <td></td> </tr> </table>								f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	1	Debit Card	O	10/29/2025	\$ 148.20	WOOD FOR SIGN DISPLAYS					\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks																				
1	Debit Card	O	10/29/2025	\$ 148.20	WOOD FOR SIGN DISPLAYS																				
				\$																					
5. Total only this Page						\$ 148.20																			
6. Total of ALL CRO-1310 Pages						\$ 22,583.97																			
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)																									
7. Purpose Codes (List detailed expenditure code in (b) above)																									
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate																			
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses																			
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund																			
O* Other																									
Codes require detailed explanation in required remarks field (k)																									

Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)	2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF	

3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)		
<input checked="" type="checkbox"/> Operating Expenses	<input type="checkbox"/> Contributions to Candidates/Political Committees	<input type="checkbox"/> Coordinated Party Expenditures

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) CANVA US INC 3212 EAST CESAR CHAVEZ STREET AUSTIN, TX 78702			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 363.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	O	09/01/2025	\$ 243.00	SOFTWARE	
				\$	SUBSCRIPTION	

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) FIREHOUSE VENUE P O BOX 458 GOLDSBORO, NC 27533			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 1,250.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	O	08/28/2025	\$ 0.00	DEPOSIT VENUE	
1	Debit Card	O	10/14/2025	\$ 1,250.00	VENUE RENTAL FOR KICKOFF	

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) FIRST LIGHT GUNS 111 S CASWELL STREET LAGRANGE, NC 28551 (252) 268-3701			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 400.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Cash	O	09/23/2025	\$ 0.00	GUN FOR RAFFLE	
1	Check	O	09/26/2025	\$ 400.00	RAFFLE PRICE GUN	

5. Total only this Page	\$ 1,893.00
6. Total ALL CRO-1310 Pages	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)	\$ 22,583.97

7. Purpose Codes (List detailed expenditure code in (b) above)			
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund
O* Other			
Codes require detailed explanation in required remarks field (k)			

Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable): RICKY HOOKS FOR WAYNE COUNTY SHERIFF	2. ID Number
---	---------------------

3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)		
<input checked="" type="checkbox"/> Operating Expenses	<input type="checkbox"/> Contributions to Candidates/Political Committees	<input type="checkbox"/> Coordinated Party Expenditures

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) GRAPHIX UNLIMITED 1087 N. BERKLELEY BLVD GOLDSBORO, NC 27534 (919) 778-0097			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 253.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	O	07/16/2025	\$ 253.00	DECALS	
				\$		

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) JANE HOOKS 3104 DIANA STREET GOLDSBORO, NC 28534			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 500.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	O	11/13/2025	\$ 500.00	KICKOFF	
				\$	FOOD/CAKES/PICKUP	

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) LAMAR 5200 ATLANTIC AVE RALEIGH, NC 27616 (919) 755-1900			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 5,545.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	O	09/02/2025	\$ 1,295.00	BILLBOARD	
1	Debit Card	O	10/14/2025	\$ 725.00	BILLBOARD	

ADVERTISING

5. Total only this Page	\$ 2,773.00
6. Total of ALL CRO-1310s <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>	\$ 22,583.97

7. Purpose Codes (Use detailed expenditure code in (h) above)			
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund
O* Other			
* Codes require detailed explanation in required remarks field(k).			

Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)						2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
LAMAR 5200 ATLANTIC AVE RALEIGH, NC 27616 (919) 755-1900							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 5,545.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	O	10/14/2025	\$ 1,725.00	BILLBOARD		
1	Draft	O	10/22/2025	\$ 1,800.00	ADVERTISING BILLBOARD		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
LOWES 1202 N BERKELEY BLVD GOLDSBORO, NC 27534 (919) 778-9969							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 236.70	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	O	11/11/2025	\$ 136.29	WOOD FOR SIGNS		
1	Debit Card	O	12/15/2025	\$ 55.87	WOOD FOR SIGNS		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
NEW OLD NORTH MEDIA, LLC 1403 EAST MULBERRY STREET GOLDSBORO, NC 27530							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 1,000.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	O	08/11/2025	\$ 1,000.00	ADVERTISING		
				\$			
5. Total only this Page						\$ 4,717.16	
6. Total of ALL CRO-1310s						\$ 22,583.97	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
7. Purpose Codes (Last detailed expenditure code in (j) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
Code _____ require detailed explanation in required remarks field (k)							

Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)						2. ID Number
RICKY HOOKS FOR WAYNE COUNTY SHERIFF						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
SAMS CLUB 2811 NORTH PARK DRIVE GOLDSBORO, NC 27534						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						e. Election Sum to Date
						\$ 342.06
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	O	11/02/2025	\$ 132.03	SUPPLIES FOR KICKOFF	
1	Debit Card	O	11/13/2025	\$ 0.00	PLATES FORKS KICKOFF SUPPLIES	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
SAMS CLUB 2811 NORTH PARK DRIVE GOLDSBORO, NC 27534						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						e. Election Sum to Date
						\$ 342.06
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit Card	O	12/03/2025	\$ 210.03	PARADE CANDY	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
DANNY STANLEY 506 PARKWOOD LANE GOLDSBORO, NC 27530						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						e. Election Sum to Date
						\$ 560.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	O	11/18/2025	\$ 560.00	MEAL FOR KICKOFF	
				\$		
5. Total on this Page						\$ 902.06
6. Total of ALL CRO-1310 Pages						\$ 22,583.97
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						
7. Purpose Codes (Last detailed expenditure code in (k) above)						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund
O* Other						
Codes require detailed explanation in required remarks field(k)						

Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)						2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
STRIPE 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080-1912							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 494.90	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Draft	O	10/31/2025	\$ 59.46	OCTOBER		
1	Electric Funds Tran	O	11/30/2025	\$ 95.37	STRIPE/SQUARE FEES CREDIT CARD PROCESSING FEES		

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
SUPER CHEAP SIGNS 12800 ANDERSON MILL ROAD BLDG D-1 CEDAR PARK, TX 78613 (512) 833-9900							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 3,858.19	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	O	07/07/2025	\$ 108.04	SIGNS		
1	Debit Card	O	07/07/2025	\$ 295.52	SIGNS YARD SIGNS		

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
SUPER CHEAP SIGNS 12800 ANDERSON MILL ROAD BLDG D-1 CEDAR PARK, TX 78613 (512) 833-9900							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 3,858.19	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	O	08/11/2025	\$ 1,483.03	YARD SIGNS		
1	Debit Card	O	08/24/2025	\$ 795.81	YARD SIGNS		

5. Total only this Page						\$ 2,837.23	
6. Total of ALL CRO-1310's						\$ 22,583.97	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							

7. Purpose Codes (last detailed expenditure code in (a) above)							
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate				
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses				
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund				
O* Other							
*Codes require detailed explanation in required remarks field (k)							

Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)						2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
SUPER CHEAP SIGNS 12800 ANDERSON MILL ROAD BLDG D-1 CEDAR PARK, TX 78613 (512) 833-9900							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 3,858.19	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	O	10/06/2025	\$ 1,175.79	YARD SIGNS		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
US POST OFFICE 200 NORTH WILLIAM STREET GOLDSBORO, NC 27530							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 78.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	O	12/08/2025	\$ 78.00	STAMPS		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
VISTA PRINT 95 HAYDEN AVE LEXINGTON, MA 02421							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 0.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	O	09/01/2025	\$ 0.00	HOOKS PENS		
1	Debit Card	O	10/13/2025	\$ 0.00	CAR STICKERS		
5. Total on this Page						\$ 1,253.79	
6. Total of ALL CRO-1310 Pages						\$ 22,583.97	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
Purpose Codes (List detailed expenditure code in (h) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
Codes require detailed explanation in required remarks field (k)							

Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)						2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) WAYNE COUNTY BOARD OF ELECTIONS 309 EAST CHESTNUT STREET GOLDSBORO, NC 27530 (919) 731-1441				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify)			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
						\$ 1,034.80	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	O	12/03/2025	\$ 1,034.80	FILING FEE		
				\$			
5. Total only this Page						\$ 1,034.80	
6. Total of ALL CRO-1310 Pages						\$ 22,583.97	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>							
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>							
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
7. Purpose Codes (List detailed expenditure code in (i.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
*Codes require detailed explanation in required remarks field (k.)							

Aggregated Non-Media Expenditures

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Optional form used to report NC Non-Media Expenditures of \$50 or less.

RICKY HOOKS FOR WAYNE COUNTY SHERIFF

3. Payee Information

a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Debit Card	O	10/08/2025	\$ 28.62	POST BOOST
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Debit Card	O	11/06/2025	\$ 1.17	FACEBOOK BOOST
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Debit Card	O	11/10/2025	\$ 44.54	WOOD FOR SIGNS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Draft	O	10/08/2025	\$ 10.00	RETURN CHECK FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Debit Card	O	11/14/2025	\$ 18.67	DOOR PRIZE TICKETS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Draft	O	07/31/2025	\$ 22.40	JULY STRIPE/SQUARE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Draft	O	08/31/2025	\$ 35.25	AUGUST STRIPE/SQUARE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Draft	O	09/30/2025	\$ 48.41	SEPTEMBER STRIPE/SQUARE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electric Funds Tran	O	12/31/2025	\$ 11.52	CREDIT CARD FEES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Debit Card	O	12/23/2025	\$ 11.71	PHOTO PAPER
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Debit Card	O	11/04/2025	\$ 50.00	GOLDSBORO CHRISTMAS PARADE

4. Total only this Page \$ 282.29

5. Total of ALL CRO-1315 Pages \$ 282.29
(This line must be on the 11th printed Summary Page CRO-1100)

B* - Printing	D - To Another Candidate
E - Salaries	G - Political Party
O* - Other	Q* - Donations to Legal Expense Fund

* Codes require detailed explanation in required remarks field (g)

In-Kind Contributions

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
 Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
JOHNNIE BRYANT 580 MCARTHUR POAD ROAD MT. OLIVE, NC 28365		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
			\$ 100.00
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
PARTIAL CONTRIBUTION ON GUN FOR RAFFLE		09/23/2025	\$ 100.00
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
JOSEPH DAWSON 106 TORHUNTA DRIVE GOLDSBORO, NC 27534		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
			\$ 602.27
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
COOLER FOR RAFFLE		10/15/2025	\$ 400.00
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
LISA HOOKS 895 FRIENDLY DRIVE GOLDSBORO, NC 27530		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
			\$ 12,494.48
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
DEPOSIT FIREHOUSE VENUE DUPLICATE		08/28/2025	\$ 0.00
VENUE PAYMENT FOR KICKOFF		08/28/2025	\$ 1,250.00
HOOKS PENS		09/01/2025	\$ 226.84
			\$ 1,976.84
			\$ 3,274.68

In-Kind Contributions

Amendment
 Yes No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
 Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
LISA HOOKS 895 FRIENDLY DRIVE GOLDSBORO, NC 27530		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date	
		\$	12,494.48
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
CAR STICKERS		10/13/2025	\$ 221.25
PHOTOGRAPHOR AT KICKOFF		10/19/2025	\$ 320.25
COOKIESK, ROLLS AND WATER FOR KICKOFF		11/13/2025	\$ 92.89
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
CAROLINE PARKER P.O. BOX 458 GOLDSBORO, NC 27533 (919) 635-0033		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date	
		\$	250.33
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
TABLE CLOTHS AT VENUE		10/15/2025	\$ 250.33
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
DANNY STANLEY 506 PARKWOOD LANE GOLDSBORO, NC 27530		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date	
		\$	438.12
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
TURTLE BOX FOR RAFFLE		09/18/2025	\$ 413.12
			\$
			\$
4. Total only this Page		\$	1,297.84
5. Total of All CRO-1510 Pages		\$	3,274.68

Outstanding Loans

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
RICKY HOOKS FOR WAYNE COUNTY SHERIFF			
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
LISA HOOKS 895 FRIENDLY DRIVE GOLDSBORO, NC 27530		EXECUTIVE DIRECTOR	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		MT OLIVE FAMILY MEDICINE CENTER, INC	10/22/2025
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
0.00%	NONE	\$ 10,000.00	\$ 10,000.00
k. Full Name of Lending Institution			l. Loan Number
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
RICKY HOOKS 895 FRIENDLY DRIVE GOLDSBORO, NC 27530		NONE	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		NOT EMPLOYED	05/09/2025
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 5,000.00	\$ 5,000.00
k. Full Name of Lending Institution			l. Loan Number
			\$ 15,000.00
			\$ 15,000.00



NORTH CAROLINA STATE BOARD OF ELECTIONS

Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

- Name of committee to receive loan: Ricky Hooks for Wayne County Sheriff
- Person or committee to make loan: Lisa Hooks
- Date of loan to committee: 10/22/2025
- Name of lending institution (source):

- Amount of loan: 10,000.00
- Description (if in-kind loan): _____
- Names of all parties responsible for payment of loan (guarantors):

- Period of loan: _____
- Rate of interest of loan: _____
- Security pledged for loan: _____

I, Lisa Hooks,
(Person lending money to committee) acknowledge that all of the information provided is complete, true, and accurate. I further understand I may not forgive a loan that has an outstanding balance to any source.



Signature of Lender

10/22/2025

Date Signed



Signature of Treasurer of Committee

10/22/025

Date Signed