Disclosure Repor					Amendment Yes No
Use this form for general re	eport and committee info	ormation, must be	signed and subr	nitted along w	ith other detailed forms.
Do not use this form to up 1. Committee Information					
a. Full Name				le le	ID Number
ROB WAGMAN CAMPA	AIGN COMMITTEE				LCL-000000-0-000
b. Mailing Address (include	City, State and Zip Cod	(e)		d	Date Filed
314 KAITLYN LANE					
KINGS MOUNTAIN, NO	28086			_	01/12/2024
				e.	Phone Number
2. Report Year 3. Period 5	Start Date (mm/dd/yy)	4. Period End I	Date (mm/dd/yy)	5. Treasurer	Full Name
2023	10/24/2023	12/31	/2023	MARC SEE	LINGER JR
6. Type of Committee (Che	ck One) 9. T	ype of Report (check only one	type of repor	from one category)
		icipal	State/County		eferendum
The second secon	PAC 🔲	Organizational	Organizatio	onal	Organizational
	Legal Expense Fund	Thirty-five day	Quarterly	of the major through the same of the same	Pre-referendum
	cable, check one)	Pre-primary	☐ First	ļC	Final
Booster Fund"		Pre-election	Second		Supplemental Final
Building Fund	Own File Port	Pre-runoff	Third		Annual
Presidential Election Year NC Public Campaign Finan	· · · · · · · · · · · · · · · · · · ·	Semi-annual	Fourth	.	Special
14C 1 done Campaign Finan	_	Mid Year Year End	Semi-annua		
Other:		Final	Mid Ye	1000	. Special Report Name
Number of Fundraisers	this Report	Special	Year E	na	
	mis resolut	Special	15		
0			Special		
. Account Information . Financial Institution Full	Name		count Informati ancial Institutio	the state of the s	
WELLS FARGO				A PUD IVAINE	
. Purpose	c. Account Code	b. Pu	rpose	c.	Account Voil AND CO
OPERATING ACCOUNT	001				
	d. Period Begin Bala	nce		d.	Period Begin Balance
	\$	109.62		\$	
ERTIFICATION	ee or Fund is in complia	nce with all applica	hle provisions	of Article 22A	22B & 22D-22M of
I certify that the Committe		The second second second			, 220 00 2200 - 2200 01
I certify that the Committee Chapter 163 of the NC Ge funds. I further certify th	neral Statutes and that	no funds are comm	ringled with prol	hibited or othe	er non-disclosed
Chapter 163 of the NC Ge funds. I further certify the	neral Statutes and that	no funds are comm	ringled with prol	hibited or othe	or non-disclosed by the NC State Board 01/12/2024
Chapter 163 of the NC Ge funds. I further certify the Marc Scelia Printed Name of the Name	neral Statutes and that	no funds are comm	ningled with prol	hibited or other been trained be	by the NC State Board
Chapter 163 of the NC Ge funds. I further certify the Marc Scelia Printed Name of the Name	neral Statutes and that	no funds are comme, true and correct	ningled with prol	hibited or other been trained be	by the NC State Board 01/12/2024
Chapter 163 of the NC Ge funds. I further certify the Marc Scelia Printed Name of the Name	neral Statutes and that	no funds are comme, true and correct	ningled with prol	hibited or other been trained to surer Delive	oy the NC State Board 01/12/2024
Chapter 163 of the NC Ge funds. I further certify the Market Printed Name OR OFFICE USE ONLY	neral Statutes and that	no funds are comme, true and correct Signature 6	ningled with prol	been trained been trained been trained been trained believe	oy the NC State Board 01/12/2024 Date
Chapter 163 of the NC Ge funds. I further certify th Printed Name OR OFFICE USE ONLY Date Received:	neral Statutes and that	Signature 6	ningled with prol	hibited or other been trained been trained believed. Delived Records	oy the NC State Board 01/12/2024 Date ry Method rmal Mail gistered Mail

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

NC State Board of Elections

assistant treasurer, custodian of books information, or account information.

December 2007

Detailed Summary

Amendment

Yes X No

Detailed Summary Use this form to summarize all disclosure reporting forms an	nd to total mor	netary infor	mation	□ Y ₆	es 💟 No	
1. Committee Full Name (and Fund if applicable)	2. Type of Re	port	3.	. ID Number		
ROB WAGMAN CAMPAIGN COMMITTEE	2023 Year E	nd Semi-An	inual	LCL-000000-0-000		
Start of Election Cycle: January 1, 2023		Total this Reporting Peri		Total this Dection Cycle		
4) Cash on Hand at Start		\$	109.62	\$	0.00	
RECEIPTS						
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	70.00	\$	457.30	
6) Contributions from Individuals	(CRO-1210)	\$	3,819.53	\$	10,986.81	
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)	\$	0.00	\$	0.00	
(0) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	0.00	\$	0.00	
(1) 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	<u> </u>	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)	\$	3,889.53	\$	11,444.11	
EXPENDITURES						
13) Disbursements	demonstration of fine Administration (American)					
13a) Operating Expenditures	(CRO-1310)	\$	402.88	\$	4,089.70	
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	0.00	\$	0.00	
13c) Coordinated Party Expenditures	(CRO-1310)	\$	0.00	\$	0.00	
(4) Aggregated Non-Media Expenditures	(CRO-1315)	\$	114.59	\$	379.93	
15) Loan Repayments	(CRO-1420)	\$	0.00	\$	0.00	
(6) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	0.00	\$	550.00	
17) In-Kind Contributions	(CRO-1510)		3,429.53	\$	6,372.33	
8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,	16 and 17)		3,947.00	\$	11,391.96	
(9) Cash on Hand at End (Add lines 4 and 12 together, then sub-	tract line 18)	\$	52.15	\$	52.15	
ADDITIONAL INFORMATION						
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00			
1) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	0.00			
2) Debts and Obligations owed by the Committee	(CRO-1610)	\$	0.00			
3) Debts and Obligations owed to the Committee	(CRO-1620)	\$	0.00			
(4) 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	
7) 48-Hour Notice Reports Sum	(CRO-2220)	\$	0.00	\$	0.00	
(8) Contributions to be Refunded	(CRO-1215)	\$	0.00	\$	0.00	

Optional fo	rm used to repo		ndividuals Page From Individuals of \$		Amendm D Yes	ent No
1. Committe	e Full Name (and	Fund if applicable)		2. ID	Number	
ROB WAG	MAN CAMPAIG	N COMMITTEE]	LCL-00000	0-0-000
3. Contribu	tor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy) f. Amoun	t
Add Remove	001	Credit Card		10/26/2023	\$	35.00
Add Remove	001	Credit Card		10/26/2023	\$	35.00
4. Total o	nly this Page			\$	······································	\$70.00
	f ALL CRO-12 oust be on line 5 of L	205 Pages Detailed Summary Page	CRO-1100)	\$		\$70.00
CRO-1205		N	C State Board of Elections			April 2007

				Amendme	ent
Contributions from Individuals	Pg	1 of	2	☐ Yes	No No
110			. ODO 100	·	1

		dividual contributions		ontributions und	ler \$50 if form CRO			
		(and Fund if applicabl				2.]	D Num	ber
ROB W	VAGMAN CAME	PAIGN COMMITTEI	Ε]	LCL-00	0000-0-000
3. Conti	ributor Informati	on .		Add 🔲 Rem	nove:			
	Name, Mailing Ado			b. Job Title/Pro	fession	d. C	Comme	ıts
(inclu	ide city, state, & z	ip)		MARKETING				
ROB W	VAGMAN							
312 KA	AITLYN LANE			c. Employer's N	ame/Specific Field	1		
KINGS	MOUNTAIN, N	IC 28086		STRAIGHT P	ATH MEDIA		90	
						e. E	dection	Sum to Date
						\$		9,472.33
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amo	unt
	<u> </u>	Electric Funds Tran	n. m-Mad Des	Cirpeton			1.00 (0.00 (1	
	001	Dictario i anais i i an	·		10/24/2023		\$	100.00
	001	In-Kind	ZIP TIES/BUN	NGEE CORDS	10/25/2023		\$	7.75
	001	In-Kind	SHIRTS					****
	001		SHIKIS		10/25/2023		\$	591.78
3. Cont	ributor Informati	on		Add 🔲 Rem	юve			
a. Full N	Name, Mailing Ado	lress & Phone		b. Job Title/Pro	fession	d. C	comme	ıts
(inclu	ide city, state, & z	ip)		MARKETING				
ROB W	VAGMAN					1		
312 KA	AITLYN LANE			c. Employer's N	ame/Specific Held	1		
KINGS	MOUNTAIN, N	IC 28086		STRAIGHT P	ATH MEDIA			
						e. I	lection	Sum to Date
						\$		9,472.33
f Drior	a Account Cade	h. Form of Payment	i. In-Kind Des	cription .	j. Date (mm/dd/yyyy)	1.500.00	k. Amo	nni
	001	In-Kind	GUM			and the		6 15 C 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	001		GOM		11/01/2023		\$	1,060.00
	001	In-Kind	LIP BALM, C	HOCOLATES	11/02/2023		•	1,770.00
		·			11/02/2023		\$	1,770.00
	001	Electric Funds Tran		-	11/06/2023		\$	150.00
						StarWiA	1000 000 500	
2 20 K 186 C 18 C 18 C 18	ributor Informati		<u> Ц</u>	Add Rem	A CONTRACTOR OF THE PROPERTY O	la c		
	Name, Mailing Ado ide city, state, & zi	나라 나라 그녀를 잃었다면 하셨습니까 하였다. 이 사람들은		b. Job Title/Pro		u. c	Comme	118
	VAGMAN			MARKETING	ī			
	MITLYN LANE			c. Employer's N	ame/Specific Field	1		
	MOUNTAIN, N	IC 28086		STRAIGHT P		1		
ILLIAGO	, 1,10011111111, 11	20000		DIRAGOITI-I		e. E	lection	Sum to Date
						\$		9,472.33
								····
f. Prior		h. Form of Payment	i. In-Kind Des	cription]	j. Date (mm/dd/yyyy)		k. Amo	unt
	001	Electric Funds Tran			11/21/2023		\$	100.00
							\$	
							Ψ	
	_						\$	
4. Tot	al only this Pa	ge				\$		3,779.53
	al of ALL CR					\$		3,819.53
(This	line must be on line	6 of Detailed Summary ,	Page CRO-1100)			1		,

		om Individuals		Pg	,	of <u>2</u>	_	☐ Yes	No No
Use thi	s form to report in	dividual contribution	s over \$50 or c	ontributions w	nder \$50	if form CRO	1205	is not u	sed
1. Com	mittee Full Name	(and Fund if applicab	le)		100		2.	ID Numb	er
ROB V	VAGMAN CAMI	PAIGN COMMITTE	Е					LCL-000	0000-0-000
Service of the service of the	ributor Informati			And the second second	move				
a. Full	Name, Mailing Ad	dress & Phone		b. Job Title/P	rofession	1	d. Comments		
	(include city, state, & zip) STEPHEN WRIGHT					MGMT			
STEPHEN WRIGHT 1547 PIEDMONT AVE KINGS MOUNTAIN, NC 28086				c. Employer's	Name/S	1			
				WRIGHT SO		1			
Kiivo	KINGS MOUNTAIN, NC 20000			Widdin Sobolions			e. Election Sum to Date		
									102.30
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind De	scription	j. Date	(mm/dd/yyyy)	k. Amou	int
П	001	Credit Card				11/15/2023		\$	20.00
	001	Credit Card		~ * * * * * * * * * * * * * * * * * * *	12/15/2023			\$	20.00
								\$	
4. To	al only this Pa	ge				u.	\$		40.00
15-15 mail (10-20 per 20-20)		O-1210 Pages 6 of Detailed Summary	Page CRO-1100))			\$		3,819.53

NC State Board of Elections

April 2007

Amendment

*		•			4
13	10	h	T'C'	m	ents

				Am	endm	ent		
Pg	1_	of	2_		Yes	X	No	

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

	coordinated party ex	<u> </u>			100 mm 10			2000 1000	The Party of State of
	full Name (and Fund i				100			2. ID Numbe	
ROB WAGMA	AN CAMPAIGN CO	MMITTEE						LCL-0000	000-0-000
- Total	Dlagea	CD	A 1210			N. 1.	6027 <u>0</u> 2325	-41	
 Type of Disbusy Operating Exp 	Mills of the Control	use separate CRG ributions to Candidat	A STATE OF THE STA		to the same and the same and the same		the state of the state of the state of	<i>ent.)</i> ted Party Expen	1
Production of the second of th		ADMIONS to Canada	les/rom		had chemicand intermediate	j 000	Talliat	.ed Party Expen	ditures
4. Payee Inform			<u></u>	Add 🔲	Remove	N.		T	
	lailing Address & Pho	one		b. Coordinate	d Committ	tee Na	ıme	d. Comments	j
(include city, sta		<u> </u>		4					I
Į.	UE VALUE - KINGS	S MOUNTAIN		c. Level Regis	d (Sne	-1 -5- 2)	Tiny;	4	I
301 W KING S				Federal		ounty:	<u> </u>	4	I
KINGS MOUN	NTAIN, NC 28086			State		funicip:		e. Election Su	om to Date
						Mar	24.1.		
							:	\$	195.69
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	imm/dd/yyyy)	i. Amoun	t	k. Re	equired Remar	rks
001	Debit Card	0		0/24/2023		3.45	1	N SUPPLIES	***************************************
				J12-112-0-0	ļ				
			<u> </u>		\$				
4. Payee Inform	فيستنظم فالمستنطق فالمستنطق والمستنب والمستنب والمستنب			Add 🔲	Remove				
a. Full Name, Ma	lailing Address & Pho	one		b. Coordinate	d Committ	tee Na	ıme	d. Comments	
(include city, sta	ate, & zip)		<u> </u>				,		
OG SHINE							·		
107 CAMELOT	ſ CT		1	c. Level Regist]	
	NTAIN, NC 28086		I	Federal	_	ounty:			
	•		1	☐ State	L M	lunicipa	ality:	e. Election Su	ım to Date
I			1				1	\$	570.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	e (mm/dd/yyyy)	j. Amoun	t J	k. Re	equired Remar	rks
001	Electric Funds Tran	О		2/01/2023	T	0.00		HICLE LETTI	
	LAVORTO	<u> </u>		2/ U 1: 2020	<u> </u>	/	Y	HCLL	SKII 10
					\$				
4. Payee Inform				Some and the control of the same of the sound of the same of the s	Remove				1864
Makasaki di Sanasaki Alamida ili M	ailing Address & Pho	one		b. Coordinate	d Committ	ee Na	me	d. Comments	
(include city, sta	ıte, & zip)					***************************************			***************************************
	BAKE KITCHEN							_	
	IEM CHURCH RD		1	c. Level Regist					
KINGS MOUN	TAIN, NC 28086		1	Federal	☐ Co	_			
			1	State		unicipa	ality:	e. Election Su	m to Date
			1	1			1	\$	219.00
f Locaret Code	g. Form of Payment	h. Purpose Code	I. Date	(mm/dd/yyyy)	F	er en en	ı. De	quired Remar	
001	Electric Funds Tran	O							
001	Electric runus 11au	10	11		\$ 219	,00	VOL	LUNTEER FO	OD
	1	1	1	- 1	\$				
5. Total only this	s Page							\$	352.45
	CRO-1310 Pages				7			<u> </u>	
	in line 13a of Detailed S	Summary Page CRO	_1100 if	Onerating Expe	nsos)	Missin		1_	100.00
	in line 13b of Detailed S		-			ical Cı	omm)	\$	402.88
	in line 13c of Detailed S		-				1		
place and making a consideration of the stage of the stag	odes (List detailed	de como de la compansión de la como de la co	ucigana dipari disah	rental expedition engineers are not because ye	-				
ATTENDED TO COME THE PARTY OF THE PARTY OF THE PROPERTY OF THE PARTY O	Take the second of the second terminal control of the second the record	ent in a control of the feed of states in a sea that the second was a second with a second of the se	2 - 75 - 75 - 75 - 75 - 75 - 75 - 75 - 7	and the second s		To	^ - ot	ther Candidate	
A* - Media	B* - Printin	Talahan ing talahan A		Fundraising Olitical Party	化二甲基二苯甲基苯基二甲基			ner Candidate g Public Offic	
E - Salaries I - Postage	F* - Equipme J - Penalties		The second second	olitical Party Office Expenses				g Public Offic on to Legal Ex	
1 - Postage O* Other	J - Folianio.	S .	N - v	Mice rapenses	€ State State Control	^ - 1 /\	Mauro	M to Legal La	Delise ruisa
	e detailed explanation	n in required ren	narks f	ield(k)				acathire de la company	15 (12 (24 (24 (25 (24 (25 (25 (25 (25 (25 (25 (25 (25 (25 (25

n	ic	h		C 0	m	Δ	nts	
v:	IJ	U	ш	36	111	C.	HU.	•

				Am	en dm	ent		
Pg	2_	of	2_		Yes	X	No	

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

committees and	coordinated party 6	expenditures					
1. Committee Fu	ill Name (and Fund	if applicable)				2. ID Numl	
ROB WAGMA	N CAMPAIGN CO	MMITTEE				LCL-00	0000-0-000
3. Type of Disbu	rsement <i>(Please</i>	use separate CRO-	1310 forms for eac	h type of Disbu	rseme	<u>nt.)</u>	
Operating Exp	enses 🔲 Con	tributions to Candidates	s/Political Committees	s 🔲 Coo	ordinat	ed Party Exp	enditures
4. Payee Inform	ation		☐ Add ☐	Remove			
a. Full Name, Ma	ailing Address & Pl	ione	b. Coordinate	ed Committee N	ame	d. Commen	ts
(include city, sta	te, & zip)						
WALGREENS	- KINGS MOUNT	AIN					
601 E KING ST				stered (Specify)			
KINGS MOUN	TAIN, NC 28086		Federal	County		man	
			State	☐ Municip	painty:	e. Mection	Sum to Date
			j			\$	50.43
f. Account Code	g. Form of Payment	h. Purpose Code i	. Date (mm/dd/yyyy)	j. Amount	k. Re	quired Rem	arks
001	Debit Card	0	11/03/2023	\$ 50.43	OFF	ICE SUPPL	JES
				\$			
5. Total only this	s Page					\$	50.43
(This line goes in (This line goes in	n line 13b of Detailed	Summary Page CRO-1 Summary Page CRO-1 Summary Page CRO-1	100 if Contrib to Can	didates/Political C		\$	402.88
7. Purpose Co	o des (List detailed	l expenditure code ii	Control of the second of the s				
A* - Media	B* - Printi	医乳基氏性结肠 化二二二烷 化二氯甲基甲基 化二氯甲基甲基二氯甲基	C* - Fundraising		400-750-00	ner Candida	
E - Salaries	F* - Equipa	连续的时间 医二氯化物 海绵 化二十二烷 经价值的	G - Political Party	and the second of the second o	_	to the entre of a second of the entre	ice Expenses
I - Postage O* Other	J - Penalti	es	K* - Office Expense	»s Q* - D	onatio	n to Legal	Expense Fund
* Codes require	e detailed explanati	on in required rema	rks field(k)				
CPO 1210		NC &a	te Board of Elections				December 2009

Aggregated	Non-Media	Expenditures
		L

	Amendment		
Page1_ of1_	☐ Yes	X	No

Optional form used to report		expenditures of	(\$30 OF 1622.	1207127-02-0-0-0-0-7-0-0-0-0-0-0-0-0-0-0-0-0-	THE THE PROPERTY OF THE PROPER		
1. Committee Full Name (and Fund if applicable) ROB WAGMAN CAMPAIGN COMMITTEE			2. ID Number LCL-000000-0-000				
3. Payee Information				I.	I =		
i. Amend b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks		
Add 001	Debit Card	0	11/06/2023	\$ 34.64	SIGN SUPPLIES		
Add 001	Debit Card	0	11/17/2023	\$ 1.00	WEBSITE		
Add 001 Remove	Debit Card	О	12/18/2023	\$ 1.00	WEBSITE		
Add 001	Debit Card	0	10/25/2023	\$ 22.37	SIGN SUPPLIES		
Add 001 Remove	Debit Card	0	12/26/2023	\$ 31.93	FOOD - CAMPAIGN STAFF		
Add 001 Remove	Debit Card	0	11/16/2023	\$ 23.65	POSTAGE		
4. Total only this Page				\$ 114.59			
5. Total of ALL CRO-1315 Pages (This line must be on line 14 of Detailed Summary Page CRO-1100) \$ 114.59					114.59		
6. Purpose Codes (List detailed expenditure code in (d) above)							
B*-Printing C*-Fundraising D-To Another Candidate							
E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses			OTHER DESIGNATION OF THE RESIDENCE OF THE PROPERTY OF THE PROP				
I - Postage J - Penalties K* - Office Expenses Q* - Donations to Legal Expense Fund O* - Other							
* Codes require detailed explanation in required remarks field (g)							

NC State Board of Elections

December 2009

In-Kind Contributions Use this form to report non-monetary contributions, do	Pg nations, goods or servi	1 ces pro	of _ ovided to	1	Amendn Yes nittee or	No No
Use CRO-1215 if In-Kind Contributions were or will 1. Committee Full Name (and Fund if applicable) ROB WAGMAN CAMPAIGN COMMITTEE	be refunded within	7 days	3.	2, ID No	ımber	All of the North All of
3. Contributor Information a. Full Name, Mailing Address & Phone (include city, state, & zip) ROB WAGMAN 312 KAITLYN LANE KINGS MOUNTAIN, NC 28086	b. Type of Cont Individual Candidate Party PAC Referendum Other Recei	ributo				to Date
e. Description		f. Date	e (mm/do	\$ Vyyyy)	g. Fair	9,472.33 Market Amount
ZIP TIES/BUNGEE CORDS		1	10/25/20	23	\$	7.75
SHIRTS]	10/25/20	23	\$	591.78
GUM	7]	1/01/20	23	\$	1,060.00
3. Contributor Information a. Full Name, Mailing Address & Phone (include city, state, & zip) ROB WAGMAN 312 KAITLYN LANE KINGS MOUNTAIN, NC 28086	b. Type of Con Individual Candidate Party PAC Referendum Other Rece	1		c. Com		n to Date 9,472.33
e. Description		f. Dat	e (mm/d	т Иуууу)	g. Fair	Market Amount
LIP BALM, CHOCOLATES			1/02/20	23	\$	1,770.00
					\$	

4. Total only this Page

5. Total of ALL CRO-1510 Pages
(This line must be on line 17 of Detailed Summary Page CRO-1100) NC State Board of Elections

3,429.53 December 2007

3,429.53

\$

\$

\$



Certification of Inactive Status

This certification is used by Candidate, Party, PACs and Referendum Committees to declare their intent to be inactive, which is not raising or spending any money on behalf of the campaign.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

TIT	ED	RV.
	,	

Committee Name:

Rob Wagman Campaign Committee

Treasurer Name:

Marc Seelinger

Treasurer Address:

803 Cathedral Dr

(include city, state, & zip)

Belmont, NC 28012

CLEVELAND COUNTY BOE JAN 19 '24 PM4:0

Treasurer Phone:

919-302-4791

I certify that the above named candidate/political committee intends to receive no contributions, nor make any expenditures, until the committee resumes activity.

I understand that if the above circumstances change, it will be necessary for the person responsible for filing financial disclosure reports to file an amended Statement of Organization and the Certification to Return to Active Status form (CRO-3300) within ten days.

1/11/24

Date Signed

Ju Signature