

Disclosure Report Cover

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.

Amendment
 Yes No

1. Committee Information

a. Full Name Moving Forward w/ Rod Powell		c. ID Number 934982244
b. Mailing Address (include City, State and Zip Code) 252 Corinth Church Circle Casar, NC 28020		d. Date Filed 12/15/23
		e. Phone Number 704-975-7528

2. Report Year 2024	3. Period Start Date (mm/dd/yy) 06/30/24	4. Period End Date (mm/dd/yy) 10/19/24	5. Treasurer Full Name William R. Powell, Jr.
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6. Type of Committee (Check One) <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		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 checked="" 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	
7. Type of Fund (if applicable, check one) <input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:						10. Special Report Name	
8. Number of Fundraisers this Report 1							

10. Account Information a. Financial Institution Full Name Bank of Ozark		11. Account Information a. Financial Institution Full Name	
b. Purpose campaign fund		b. Purpose	
c. Account Code		c. Account Code	
d. Period Begin Balance \$ 811.41		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 of Elections.

WILLIAM R. POWELL JR. *William R. Powell* **9/29/24**
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received:	10-29-24	Employee:	<i>[Signature]</i>	Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training
Date Postmarked:	_____	Employee:	_____	
Date Scanned:	_____	Employee:	_____	
Date Data Entered:	_____	Employee:	_____	

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.

DADE COUNTY BOE
 OCT 29 24 PM 1:46

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
Moving Forward w/ Rod Powell	2024 Third Qtr.	934982244
Start of Election Cycle: January 1, 2024	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 811.41	\$ 811.41
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 1620.00	\$ 1620.00
6) Contributions from Individuals (CRO-1210)	\$ 1315.00	\$ 3845.23
7) Contributions from Political Party Committees (CRO-1220)	\$ 250.00	\$ 250.00
8) Contributions from Other Political Committees (CRO-1230)	\$	\$
9) Loan Proceeds (CRO-1410)	\$	\$ 200.00
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$	\$
11) Other Receipt Sources		
11a) Interest on Bank Accounts (CRO-1250)	\$	\$
11b) Contributions from Not-For-Profit Organizations (CRO-1250)	\$	\$
11c) Outside Sources of Income (CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$	\$
11e) Exempt Purchase Price Sales (CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 3,185.00	\$ 5,915.23
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 2408.67	\$ 4127.49
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures (CRO-1315)	\$	\$
15) Loan Repayments (CRO-1420)	\$	\$
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$	\$
17) In-Kind Contributions (CRO-1510)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 2408.67	\$ 4127.49
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 1587.74	\$ 2599.15
ADDITIONAL INFORMATION		
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$	
22) Debts and Obligations owed by the Committee (CRO-1610)	\$	
23) Debts and Obligations owed to the Committee (CRO-1620)	\$	
24) Account Transfers Within the Committee (CRO-1720)	\$	
25) Administrative Support (CRO-1710)	\$	
26) Forgiven Loans (CRO-1440)	\$	
27) 48-Hour Notice Reports Sum (CRO-2220)	\$	
28) Contributions to be Refunded (CRO-1215)	\$	

Contributions from Political Party Committees

Pg 1 of 13

Amendment

Yes No

Use this form to report contributions from a political party

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Moving Forward w/ Rod Powell						934982244	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)						b. Comments	
Democratic Women of Cleveland Co. 106 W. Marion Street Shelby, NC 28150						from candidate fundraiser	
						c. Election Sum to Date	
						\$ 250.00	
d. Account Code	e. Form of Payment	f. In-Kind Description			g. Date (mm/dd/yyyy)	h. Amount	
	check				10/10/2024	\$ 250.00	
						\$	
						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)						b. Comments	
						c. Election Sum to Date	
						\$	
d. Account Code	e. Form of Payment	f. In-Kind Description			g. Date (mm/dd/yyyy)	h. Amount	
						\$	
						\$	
						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)						b. Comments	
						c. Election Sum to Date	
						\$	
d. Account Code	e. Form of Payment	f. In-Kind Description			g. Date (mm/dd/yyyy)	h. Amount	
						\$	
						\$	
						\$	
4. Total only this Page						\$ 250.00	
5. Total of ALL CRO-1220 Pages (This line must be on line 7 of Detailed Summary Page CRO-1100)						\$ 250.00	

CRO-1220

NC State Board of Elections

CLEVELAND COUNTY BOE
OCT 29 '24 PM 1:46

Aggregated Contributions from Individuals

Amendment

Yes 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			
Moving Forward with Rod Powell		934982244			
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		Cash		07/23/2024	\$ 25 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		cash		07/23/2024	\$ 25 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		check		07/23/2024	\$ 25 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		cash		07/23/2024	\$ 25 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		cash		07/23/2024	\$ 25 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		cash		07/23/2024	\$ 25 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		cash		07/23/2024	\$ 25 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		check		07/12/2024	\$ 25 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Act Blue		07/17/2024	\$ 25 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		act Blue		07/23/2024	\$ 50 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		act Blue		07/23/2024	\$ 25 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		act Blue		07/10/2024	\$ 50 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		act Blue		07/23/2024	\$ 25 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		check		07/10/2024	\$ 25 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		cash		07/23/2024	\$ 25 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		act Blue		07/10/2024	\$ 25 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		act Blue		07/23/2024	\$ 25 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		act Blue		07/10/2024	\$ 50 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		cash		07/23/2024	\$ 15 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		cash		07/23/2024	\$ 20 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		check		07/23/2024	\$ 50 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		act Blue		07/23/2024	\$ 25 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		cash		07/23/2024	\$ 25 ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove		act Blue		07/23/2024	\$ 50 ⁰⁰
4. Total only this Page					\$ 685 ⁰⁰
5. Total of ALL CRO-1205 Pages					\$ 1620 ⁰⁰
<small>(This line must be on line 5 of Detailed Summary Page CRO-1100)</small>					

G.A.
L.A.
C.B.
E.B.
C.B.
L.B.
D.B.
R.B.
J.B.
K.B.
P.B.
G.C.
F.C.
M.D.
P.D.
A.D.
D.D.
B.E.
J.F.
A.H.
P.H.
H.H.
R.H.

CLEVELAND COUNTY BOE
OCT 24 '24 11:46

Aggregated Contributions from Individuals

Amendment
 Yes 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	
Moving Forward w/ Rod Powell					93498 2244	
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		cash		07/23/2024	\$ 20 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		check		07/15/2024	\$ 50 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		cash		07/23/2024	\$ 10 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		cash		07/23/2024	\$ 25 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		cash		07/23/2024	\$ 25 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		cash		07/23/2024	\$ 25 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		Act Blue		07/21/2024	\$ 50 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		cash		07/23/2024	\$ 25 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		cash		07/23/2024	\$ 50 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		Act Blue		07/12/2024	\$ 50 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		check		07/22/2024	\$ 50 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		cash		08/10/2024	\$ 25 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		cash		08/28/2024	\$ 20 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		cash		07/23/2024	\$ 50 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		cash		07/17/2024	\$ 50 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		Act Blue		07/23/2024	\$ 50 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		Act, Blue		07/23/2024	\$ 25 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		Act Blue		07/15/2024	\$ 25 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		act Blue		07/18/2024	\$ 25 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		act Blue		09/03/2024	\$ 10 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		check		07/23/2024	\$ 50 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		cash		07/23/2024	\$ 50 ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		act Blue		07/16/2024	\$ 50 ⁰⁰	
<input type="checkbox"/> Remove						
4. Total only this Page					\$ 850 ⁰⁰	
5. Total of ALL CRO-1205 Pages					\$ 1620 ⁰⁰	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

C.J.
 J.J.
 T.J.
 B.K.
 J.L.
 L.L.
 A.L.
 H.L.
 C.M.
 R.M.
 F.M.
 E.M.
 E.M.
 S.M.
 G.N.
 L.P.
 J.P.
 T.R.
 J.S.
 K.S.
 B.S.
 G.T.
 A.T.

850⁰⁰ HANCOCK COUNTY BOE
 1620⁰⁰ OCT 28 '24 11:47

Contributions from Individuals

Pg 5 of 13

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) Moving Forward w/ Rod Powell	2. ID Number 934982244
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3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Kent Blevins 2511 Rockford Rd. Shelby, NC 28152	b. Job Title/Profession retired c. Employer's Name/Specific Field retired
d. Comments fundraiser	
e. Election Sum to Date \$ 100.00	
f. Prior <input type="checkbox"/>	g. Account Code
h. Form of Payment Act Blue	i. In-Kind Description
j. Date (mm/dd/yyyy) 07/16/2024	k. Amount \$ 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) Becky Brown 4405 Lake Forwat Rd. Denver, NC 28037	b. Job Title/Profession attorney c. Employer's Name/Specific Field Brown, Horn, Pack Law Office
d. Comments	
e. Election Sum to Date \$ 250.00	
f. Prior <input type="checkbox"/>	g. Account Code
h. Form of Payment Act Blue	i. In-Kind Description
j. Date (mm/dd/yyyy) 08/08/2024	k. Amount \$ 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) Kathleen Champion 405 W. Mtn. St. Kings Mtn. NC 28086	b. Job Title/Profession retired c. Employer's Name/Specific Field retired
d. Comments	
e. Election Sum to Date \$ 210.00	
f. Prior <input type="checkbox"/>	g. Account Code
h. Form of Payment Act Blue	i. In-Kind Description
j. Date (mm/dd/yyyy) 07/10/2024	k. Amount \$ 10.00
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

4. Total only this Page	\$ 340.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$ 1315

3410 LENOIR COUNTY BOE
OCT 29 '24 PM 1:47

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	
MOVING FORWARD w/ Rod Powell						934982244	
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 Cummings 104 Three Oaks Ln. Kings Mtn. NC 28086				Attorney		fundraiser	
				c. Employer's Name/Specific Field		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"/>		check		07/27/24	\$ 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	
Gail Daves P.O. Box 1059 Boiling Springs, NC 28017				not employed		fundraiser	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				not 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"/>		Act Blue		07/16/2024	\$ 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	
Pamela Maddox 1202 Masonic Dr. Shelby, NC 28150				educator		fundraiser	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				Rutherford Co. Schools		\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		Act Blue		07/19/2024	\$ 50.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 250.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 1315.00	

WELLS COUNTY BOE
07/27/24 1:47

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	
Moving Forward w/ Rod Powell						934982244	
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	
Terry McCollum 6116 Casar-Lawndale Rd. Lawndale, NC 28090				retired		donation for yard sign	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				Retired Clev. Co. Schools		\$ 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"/>		Cash		07/23/2024	\$ 20 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	
Martin Mongiello 301 Clev. Ave. Grover, NC 28073				CEO		Fundraiser	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				CEO Inn of the Patriots		\$ 70.23	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		Act Blue		07/23/2024	\$ 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	
Stormy Mongiello 301 Cleveland Ave. Grover, NC 28073				CEO			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				CEO/owner Inn of the Patriots		\$ 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"/>		Act Blue		07/01/2024	\$ 10.00		
<input type="checkbox"/>		Act Blue		07/15/2024	\$ 50.00		
<input type="checkbox"/>		Act Blue		08/01/2024	\$ 10.00		
4. Total only this Page						\$ 140.00	
5. Total of ALL CRO-1210 Pages						\$ 1315.00	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

CLEVELAND COUNTY BOE
07/25/24 PM 1:48

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	
Moving Forward w/ Rod Powell						934982244	
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	
Stormy Monyiello 301 Cleveland Ave. Grover, NC 28073				CEO/owner			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				Inn of the Patriots		\$ 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"/>		Act Blue		09/01/2024	\$ 10.00		
<input type="checkbox"/>		Act Blue		10/01/2024	\$ 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	
Teresa Olsen 2320 New House Rd. Shelby, NC 28150				unemployed			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$ 225.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		act Blue		07/23/2024	\$ 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	
Kim Powell 252 Corinth Ch. Circle Casar, NC 28020				retired			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				retired Clev. Co. Schools		\$ 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"/>		act Blue		07/05/2024	\$ 10.00		
<input type="checkbox"/>		act blue		08/05/2024	\$ 10.00		
<input type="checkbox"/>		act blue		09/05/2024	\$ 10.00		
		act Blue		10/05/2024	\$ 10.00		
4. Total only this Page						\$ 160.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 1315.00	

Contributions from Individuals

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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	
Moving Forward w/ Rod Powell						934982244	
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	
Carol Rose P.O. box 202 Shelby, NC 28150				not employed		fundraiser "angel"	
				c. Employer's Name/Specific Field		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"/>		check # 21		07/23/2024	\$ 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	
Frances + Lewis Webber 1416 Wesson Rd. Shelby, NC 28152				not employed		fundraiser	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		Cash		07/23/2024	\$ 25.00		
<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	
Margaret Wells 725 Dixon School Rd. Kings Mtn. NC 28080				retired educator		fundraiser	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				retired		\$ 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"/>		act blue		07/22/2024	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 325.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 1315.00	

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	
Moving Forward w/ Rod Powell						934982244	
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	
LaCresha Henderson 3010 Cedar Point Drive Shelby NC 28150				educator		fundraiser	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				Clay Co. Schools		\$ 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"/>		cut Blue		07/10/2024		\$ 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	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>						\$	
<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	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 50.00	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 5 of Detailed Summary Page CRO-1100)</small>						\$ 1315 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	
Moving Forward w/ Rod Powell						934982244	
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	
Jerry Burnbaugh 804 W. Warren Street Shelby, NC 28150						reimbursement for ticket printing	
				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:		\$ 22.04	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	check	C	07/22/2024	\$ 22.04			
				\$			
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	
Kevin Clary 303 W. Gold St. Kings Mtn. NC 28086						pay band for fundraiser	
				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:		\$ 400.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	check	C	07/23/2024	\$ 400.00			
				\$			
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	
Dragonfly Wine Market 101 W. Warren St. Shelby, NC 28150						Bar - fundraiser	
				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:		\$ 487.85	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	check	C	07/23/2024	\$ 487.85			
				\$			
5. Total only this Page						\$ 909.89	
6. Total of ALL CRO-1310 Pages						\$ 2408.67	
<small>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</small>							
<small>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</small>							
<small>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</small>							
7. 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	
Moving Forward w/ Rod Powell						934982244	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)							
<input 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	
Renec Bumbaugh 864 W. Warren Street Shelby, NC 28150						reimburse food + decor for fundraiser	
				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:		\$ 72.95	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	check	C	07/24/2024	\$ 72.95	food / decoration		
				\$			
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	
Kim Powell 252 Corinth Church Circle Casar NC 28020						reimburse food for fundraiser	
				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:		\$ 270.10	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	check	C	07/25/2024	\$ 39.56	Food		
	check	C	07/25/2024	\$ 230.54	Food		
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	
Creative Business Essentials						yards signs	
				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:		\$ 2426.64	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	check	A	08/07/2024	\$ 800.63	yards signs		
	check	B	10/04/2024	\$ 268.01	palm cards		
5. Total only this Page:						\$ 1411.69	
6. Total of ALL CRO-1310 Pages:						\$ 2408.67	
7. 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	
Moving Forward w/ Rod Powell						934982244	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input 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	
Act Blue P.O. Box 441146 Somerville, MA 02144 617-517-7400						Fees collected by Act Blue	
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 160.92	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	draft	0		\$ 87.09	service 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	
				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:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				\$			
				\$			
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	
				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:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				\$			
				\$			
5. Total only this Page						\$ 87.09	
6. Total of ALL CRO-1310 Pages						\$ 2408.67	
(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 (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)							