Independent Expenditure Report

Amendment ☒ Yes ☐ No

This form should be accompanied by forms CRO-2210B and CRO-2210C. For statutory guidance, please refer to N.C.G.S. § 163-278.12 & 163.278.6(9a).

1. Reporting Entity Information

a. Full Name of Entity Making Disbursement	d. Entity Type (Check One)	e. Federal ID Number (if applicable)
NORTH CAROLINA (NC) FAMILIES FIRST	☐ Individual ☐ Other Organization ☒ Nonprofit Organization	45 - 3626206
b. Mailing Address (include City, State and Zip Code) and Phone Number		**f. Date Filed**
NORTH CAROLINA (NC) FAMILIES FIRST POST OFFICE BOX 255 RALEIGH, NC 27602		11/03/2022
	g. Employer's Name or Principal Place of Business	**h. Occupation**

c. Report Type

☐ Initial Quarterly: ☐ First ☐ Second ☐ Third ☐ Fourth

☒ 48 Hour Semi-Annual: ☐ Mid Year ☐ Year End

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)
2022	10/25/2022	10/27/2022

5. Custodian of Books

a. Full Name of Entity's Custodian of Books and Accounts

MCIHAEL J SCHIERBEEK

b. Mailing Address (include City, State and Zip Code) and Phone Number	c. Employer's Name or Principal Place of Business
MCIHAEL J SCHIERBEEK POST OFFICE BOX 255 RALEIGH, NC 27602	ACCOUNTANT
	d. Occupation
	SELF EMPLOYED

6. Total Contributions ALL Pages	$	645,000.00
7. Total Expenditures ALL Pages	$	471,341.00

CERTIFICATION

I certify that this statement is complete, true and correct.

MICHAEL L WEISEL — Printed Name of Signer

Michael L. Weisel — Signature

11/03/2022 — Date

Receipts for Independent Expenditures

Use this form to identify each person or entity making a donation of more than $100, or $1,000 during the 48 hour reporting period to the entity filing the report if the donation was made to further the reported independent expenditure or contributions

1. Receipt Information

a. Item Num	b. Full Name, Mailing Address & Phone Number (include city, state, and zip)	c. Principal Occupation of Donor	d. Date (mm/dd/yyyy)	e. Amount
1	NEA ADVOCACY FUND 1201 16TH STREET NW WASHINGTON, DC 20036		10/26/2022	$ 20,000.00
2	PROGRESS NORTH CAROLINA ACTION PO BOX 945 RALEIGH, NC 27602		10/25/2022	$ 625,000.00
2. Total Receipts THIS Page *(sum all the 'e' entries on this page)*				$ 645,000.00
3. Total Receipts ALL Pages *(sum all the 'e' entries on all receipt pages)*				$ 645,000.00

Disbursements for Independent Expenditures

Persons or entities permitted to make contributions but not otherwise required to report should use this form to report independent expenditures in excess of $100 and to report independent expenditures in excess of $5,000 within the 48 hour reporting period.

1. Disbursement Information

a. Item Number	b. Disbursement Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))
1	10/27/2022	10/27/2022	LIVE CALL PROGRAM

e. Full Name, Mailing Address (include city, state, and zip) & Phone Number	f. Amount
STONES PHONES - CAMPAIGN COMMUNICATION SOLUTIONS (760) 773-9019 41-750 RANCHO LAS PALMAS DR STE E-3 RANCHO MIRAGE, CA 92270	$ 18,856.00

Candidate Full Name		Amount	Office Sought
MARCIA MORGAN	☒ Support ☐ Oppose	$ 18,856.00	☐ House ☒ Senate District: 7 ☐ Co./Municipal Office _____ Co. _____ ☐ Other Office: _____ County/District: _____
Candidate Full Name		Amount	Office Sought
	☐ Support ☐ Oppose	$	☐ House ☐ Senate District: ____ ☐ Co./Municipal Office _____ Co. _____ ☐ Other Office: _____ County/District: _____
Candidate Full Name		Amount	Office Sought
	☐ Support ☐ Oppose	$	☐ House ☐ Senate District: ____ ☐ Co./Municipal Office _____ Co. _____ ☐ Other Office: _____ County/District: _____

2. Total Disbursements THIS Page	*(sum all the 'f' entries on this page)*	$ 471,341.00
3. Total Disbursements ALL Pages	*(sum all the 'f' entries on all disbursement pages)*	$ 923,826.00

Disbursements for Independent Expenditures

Persons or entities permitted to make contributions but not otherwise required to report should use this form to report independent expenditures in excess of $100 and to report independent expenditures in excess of $5,000 within the 48 hour reporting period.

1. Disbursement Information

a. Item Number	b. Disbursement Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))
2	10/26/2022	11/03/2022	MEDIA ADVERTISING

e. Full Name, Mailing Address (include city, state, and zip) & Phone Number	f. Amount
THE NEW MEDIA FIRM 1730 RHODE ISLAND AVE, NW STE 213 WASHINGTON, DC 20036 (202) 775-1440	$ 452,485.00

Candidate Full Name		Amount	Office Sought
LUCY INMAN	☒ Support ☐ Oppose	$ 113,121.00	☐ House ☐ Senate District: ☐ Co./Municipal Office Co. ☒ Other Office: SUPREME COURT County/District: STAT
	☐ Support ☐ Oppose	$	☐ House ☐ Senate District: ☐ Co./Municipal Office Co. ☐ Other Office: County/District:
	☐ Support ☐ Oppose	$	☐ House ☐ Senate District: ☐ Co./Municipal Office Co. ☐ Other Office: County/District:

a. Item Number	b. Disbursement Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))
2	10/26/2022	11/03/2022	MEDIA ADVERTISING

e. Full Name, Mailing Address (include city, state, and zip) & Phone Number	f. Amount
THE NEW MEDIA FIRM 1730 RHODE ISLAND AVE, NW STE 213 WASHINGTON, DC 20036 (202) 775-1440	$ 452,485.00

Candidate Full Name		Amount	Office Sought
SAMUEL J ERVIN IV	☒ Support ☐ Oppose	$ 113,121.00	☐ House ☐ Senate District: ☐ Co./Municipal Office Co. ☒ Other Office: SUPREME COURT County/District: STAT
RICHARD DIETZ	☐ Support ☒ Oppose	$ 113,121.00	☐ House ☐ Senate District: ☐ Co./Municipal Office Co. ☒ Other Office: SUPREME COURT County/District: STAT
CURTIS "TREY" ALLEN III	☐ Support ☒ Oppose	$ 113,122.00	☐ House ☐ Senate District: ☐ Co./Municipal Office Co. ☒ Other Office: SUPREME COURT County/District: STAT

2. Total Disbursements THIS Page	*(sum all the 'f' entries on this page)*	$ 452,485.00
3. Total Disbursements ALL Pages	*(sum all the 'f' entries on all disbursement pages)*	$ 923,826.00