

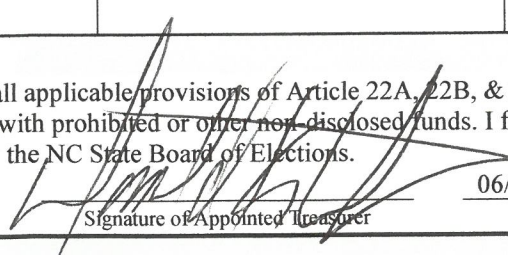
Disclosure Report Cover

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 Campaign to Elect Donald Dunn			c. ID Number
b. Mailing Address (include City, State and Zip Code) 1330 Waughtown St Winston-Salem, NC 27107			d. Date Filed 06/30/2026
			e. Phone Number 336-345-6494
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2025	02/15/2026	06/30/2026	Mahdia Marilyn Assaf Cason
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
☒ Candidate Campaign ☐ PAC ☐ Independent Expenditure ☐ Legal Expense Fund ☐ Party ☐ Referendum ☐ Joint Fundraiser		Municipal ☐ Organizational ☐ Thirty-five day ☐ Pre-primary ☐ Pre-election ☐ Pre-runoff ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special State/County ☒ Organizational ☐ Quarterly ☐ First ☐ Second ☐ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☒ Final ☐ Special Referendum ☐ Organizational ☐ Pre-referendum ☐ Final ☐ Supplemental Final ☐ Annual ☐ Special	
7. Type of Fund (if applicable, check one)		10. Special Report Name	
☐ "Booster Fund" ☐ Building Fund ☐ Other:			
8. Number of Fundraisers this Report			
11. Account Information		11. Account Information	
a. Financial Institution Full Name Allegacy Credit Union		a. Financial Institution Full Name Allegacy Credit Union	
b. Purpose Committee Funds	c. Account Code 720	b. Purpose Committee Funds	c. Account Code 2/3 0/0
	d. Period Begin Balance \$ 372.36		d. Period Begin Balance \$ 0
10.86			
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.			
Mahdia M Assaf Cason Printed Name of Signer		06/30/2026 Date	
			
FOR OFFICE USE ONLY			
Date Received: _____	Employee: _____	Delivery Method ☐ Normal Mail ☐ Registered Mail ☐ Hand Delivered ☐ Electronically Filed ☐ 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.			

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	
Campaign to Elect Donald Dunn		Secon Quarter Report			
Start of Election Cycle: January 1, 2024		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 372.36		\$ 0	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 91.21		\$ 121.22	
6) Contributions from Individuals (CRO-1210)		\$ 791.64		\$ 3766.64	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$		\$	
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)		\$		\$	
11 e) Exempt Purchase Price Sales (CRO-1265)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 882.85		\$ 3887.86	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 794.91		\$ 3235.13	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
13c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 160.30		\$ 352.73	
15) Loan Repayments (CRO-1420)		\$		\$	
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$ 300.00		\$ 300.00	
17) In-Kind Contributions (CRO-1510)		\$		\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1255.21		\$ 3887.86	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 0		\$ 0	
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)		\$		\$	

Aggregated Contributions from Individuals

Page

1 of 1

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	
Campaign to Elect Donald Dunn						
3. Contributor Information						
a. Amend		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐	Add	720	Online Contribu		02/19/2026	\$ 23.95
☐	Remove					
☐	Add	720	Online Contribu		02/26/2026	\$ 19.12
☐	Remove					
☐	Add	720	Online Contribu		02/26/2026	\$ 48.14
☐	Remove					
☐	Add					\$
☐	Remove					\$
☐	Add					\$
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☐	Add					\$
☐	Remove					\$
☐	Add					\$
☐	Remove					\$
☐	Add					\$
☐	Remove					\$
☐	Add					\$
☐	Remove					\$
4. Total only this Page					\$ 91.21	
5. Total of ALL CRO-1205 Pages					\$ 91.21	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

Pg 1 of 2

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	
Campaign to Elect Donald Dunn						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Leisha Willis 333 S Doheny Dr Apt 405 Los Angeles, CA 900848			Insurance Sales			
			c. Employer's Name/Specific Field			
			State Farm		e. Election Sum to Date	
				\$ 241.64		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	720	Online		02/23/2026	\$ 241.64	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
David Cooper 955 Longrun Dr Kernersville, NC 27284			Realtor			
			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	
☐	720	Ck#13205		02/18/2026	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Jacqueline Young 648 Hanes Mall Blvd #280 Winston-Salem, NC 27103			Computer Consultant			
			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	
☐	720	Ck#2039		02/24/2026	\$ 250.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 591.64	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 791.64	

Contributions from Individuals

Pg 2 of 2

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	
Campaign to Elect Donald Dunn						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Vera Roseborough 1080 Kings Meadow Drive Winston-Salem, NC 27127			b. Job Title/Profession Retired		d. Comments	
			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
☐	720	Ck #8577		02/26/2026		\$ 100.00
☐						\$
☐						\$
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Donald Dunn 8580 Brook Meadow Ct Lewisville, NC 27023			b. Job Title/Profession Retired/ Candidate		d. Comments	
			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
☐	720	Ck1354		02/13/26		\$ 100.00
☐						\$
☐						\$
3. Contributor Information ☐ Add ☐ 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
☐						\$
☐						\$
☐						\$
4. Total only this Page					\$ 200.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 791.64	

Aggregated Non-Media Expenditures

Page 1 of 1

Amendment

☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Campaign to Elect Donald Dunn							
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	
☐ Add ☐ Remove	720	Debit	O	02/23/2026	\$ 36.00	Square Space/website	
☐ Add ☐ Remove	720	Debit	O	03/23/2026	\$ 36.00	Square Space/website	
☐ Add ☐ Remove	720	Debit	O	04/23/2026	\$ 36.00	Square Space/website	
☐ Add ☐ Remove	720	Debit	O	02/16/26	\$ 1.00	Doc GD Form Bank fees	
☐ Add ☐ Remove	720	Debit	O	12/27/25	\$ 3.48	Bank Fees Online Contribu	
☐ Add ☐ Remove	720	Debit	O	12/31/25	\$ 6.73	Bank Fees Online Contribu	
☐ Add ☐ Remove	720	Debit	O	01/14/26	\$ 3.48	Bank Fees Online Contribu	
☐ Add ☐ Remove	720	Debit	O	01/15/26	\$ 6.73	Bank Fees Online Contribu	
☐ Add ☐ Remove	720	Debit	O	01/20/26	\$ 1.86	Bank Fees Online Contribu	
☐ Add ☐ Remove	720	Debit	O	01/22/26	\$ 6.73	Bank Fees Online Contribu	
☐ Add ☐ Remove	720	Debit	O	01/26/26	\$ 1.86	Bank Fees Online Contribu	
☐ Add ☐ Remove	720	Debit	O	02/09/26	\$ 1.86	Bank Fees Online Contribu	
☐ Add ☐ Remove	720	Debit	O	02/11/26	\$ 8.36	Bank Fees Online Contribu	
☐ Add ☐ Remove	720	Debit	O	02/12/26	\$ 1.86	Bank Fees Online Contribu	
☐ Add ☐ Remove	720	Debit	O	02/25/26	\$ 8.35	Bank Fees Online Contribu	
☐ Add ☐ Remove					\$		
☐ Add ☐ Remove					\$		
☐ Add ☐ Remove					\$		
☐ Add ☐ Remove					\$		
☐ Add ☐ Remove					\$		
☐ Add ☐ Remove					\$		
4. Total only this Page					\$ 160.30		
5. Total of ALL CRO-1315 Pages					\$ 160.30		
<i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>							
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			
I - Postage		J - Penalties		H* - Holding Public Office Expenses			
O* - Other				K* - Office Expenses			
				Q* - Donations to Legal Expense Fund			
* Codes require detailed explanation in required remarks field (g)							

Disbursements

Pg 1 of 2

Amendment

☐ Yes ☒ 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	
Campaign to Elect Donald Dunn						
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures						
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
McHoward Business Coaching P O Box 4452 Winston-Salem, NC 27115						
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
					\$ 72.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
720	Paypal	O	02/24/2026	\$72.00	FB Marketing	
				\$		
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Morgan Craft 101 E Sixth St Unit 412 Winston-Salem., NC 27101						
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
					\$ 75.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
720	Check # 406	O	03/05/2026	\$75.00	Palm Cards	
				\$	s	
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Kendra Koyle P O Box 141 Winston-Salem, NC 27101						
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
					\$ 125.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
720	ACH	O	03/11/2026	\$125.00	Graphic Art Des	
				\$		
5. Total only this Page					\$ 272.00	
6. Total of 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)					\$ 794.91	
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

Pg 2 of 2

Amendment

☐ Yes ☒ 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	
Campaign to Elect Donald Dunn						
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures						
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
100signs.com 31198 Beck Rd Novi, Michigan 48377						
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
					\$ 295.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
720	ACH	O	02/17/2026	\$295.00	Yard Signs	
				\$		
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
CP Solutions 1355 South Park Dr Kernersville, NC 27284						
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
					\$ 227.91	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
720	Ck# 405	O	03/02/2026	\$227.91	Printing	
				\$		
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
					\$	
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					\$ 522.91	
6. Total of 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)					\$ 794.91	
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)						

Refunds/Reimbursements From the Committee

Pg 1 of 1

Amendment	
☐ Yes	☒ No

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Campaign to Elect Donald Dunn					
3. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date	
Donald Dunn 8580 Brook Meadow Court Lewisville, NC 27023		☒ Candidate ☐ PAC ☐ Referendum ☐ Party		12/08/2025	
		e. Level Registered (Specify)		i. Original Receipt Amount	
		☐ Federal ☐ County: ☐ State ☐ Municipality:		\$ 300.00	
		f. Purpose Code		j. Election Sum to Date	
P				\$	
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code	
Retired 720				720	
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount		
Check # 404	Reimbursement for filing fee	05/18/2026	\$ 300.00		
3. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date	
		☐ Candidate ☐ PAC ☐ Referendum ☐ Party			
		e. Level Registered (Specify)		i. Original Receipt Amount	
		☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
		f. Purpose Code		j. Election Sum to Date	
				\$	
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code	
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount		
			\$		
3. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date	
		☐ Candidate ☐ PAC ☐ Referendum ☐ Party			
		e. Level Registered (Specify)		i. Original Receipt Amount	
		☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
		f. Purpose Code		j. Election Sum to Date	
				\$	
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code	
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount		
			\$		
4. Total only this Page				\$ 300.00	
5. Total of ALL CRO-1320 Pages (This line must be on line 16 of Detailed Summary Page CRO-1100)				\$ 300.00	
L - Returned to Contributor M - Overpayment for Service N - Exceeded Contribution Limit P* - Reimbursement of In-Kind O* Other					
* Codes require detailed explanation in required remarks field (m)					