REPORT FILED
ELECTRONICALLY
SEE STATE WEBSITE
FOR COMPLETE REPORT
WWW.NCSBE.GOV

Amendment ☐ Yes ☐ No

Independent Expenditure Report Cover

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

Red Wine and Blue

b. Mailing Address (include City, State and Zip Code) and Phone Number

3675 Warrensville Center Road #202359
Cleveland, OH 44120

d. Entity Type (Check One)

- ☐ Individual
- ☐ Other Organization
- ☑ Nonprofit Organization

e. Federal ID Number (if applicable)

f. Date Filed

7/9/2026

g. Employer's Name or Principal Place of Business

h. Occupation

c. Report Type

☐ Initial ☐ 48 Hour

Quarterly: ☑ First ☑ Second ☐ Third ☐ Fourth

Semi-Annual: ☐ Mid Year ☐ Year End ☐ Other (Specify) _____

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)
2026	2/15/2026	6/30/2026

5. Custodian of Books

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

Katherine Paris

b. Mailing Address (include City, State and Zip Code) and Phone Number

3675 Warrensville Center Road #202359
Cleveland, OH 44120

c. Employer's Name or Principal Place of Business

Red Wine and Blue

d. Occupation

CEO

6. Total Donations ALL Pages	$0.00
7. Total Expenditures ALL Pages	$173.36

CERTIFICATION

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

Katherine Paris — Printed Name of Signer

Signature

7/9/2026 — Date

RECEIVED
JUL 9 2026
FORSYTH COUNTY
BOARD OF ELECTIONS

Donations 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.Donation 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
	No Donations to Disclose			$
				$
				$
				$
				$
				$

2. Total Donations THIS Page *(sum all the '1e' entries on this page)*	$ 0.00
3. Total Donations ALL Pages *(sum all the '1e' entries on all receipt pages)*	$ 0.00

Incurred Costs for Independent Expenditures

Use this form to report Independent Expenditures within 30 days after they exceed $100 or 10 days before an election they affect. This form should also be used to report incurred costs of $5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO - 2520.

1. Expenditure Information

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))
NC2026BOCCFORSYTH	2/27/2026	2/27/2026	Staff Time for Organizing and GOTV

e. Full Name, Mailing Address (include city, state, and zip) & Phone Number	f. Amount
	$ 18.43

Candidate Full Name		Amount	Office Sought
Natasha Smith	☑ Support ☐ Oppose	$ 18.43	☐ House ☐ Senate District:____ ☑ Co./Municipal Office Forsyth County BOCC Co. Forsyth ☐
	☐ Support ☐ Oppose	$	☐ House ☐ Senate District:____ ☐ Co./Municipal Office____ Co.____ ☐ Other Office:____ County/District:____

Referendum Name		Date	Level
	☑ Support ☐ Oppose		☐ State ☑ County ☐ Municipality

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))
NC2026SCHOOLFORSYTH1	2/27/2026	2/27/2026	Staff Time for Organizing and GOTV

e. Full Name, Mailing Address (include city, state, and zip) & Phone Number	f. Amount
	$ 18.43

Candidate Full Name		Amount	Office Sought
Valerie Brockenbrough	☑ Support ☐ Oppose	$ 18.43	☐ House ☐ Senate District:____ ☐ Co./Municipal Office FORSYTH COUNTY BOARD OF EDUCATION ☐ Co. Forsyth
	☐ Support ☐ Oppose	$	☐ House ☐ Senate District:____ ☐ Co./Municipal Office____ Co.____ ☐ Other Office:____ County/District:____

Referendum Name		Date	Level
	☐ Support ☐ Oppose		☐ State ☐ County ☐ Municipality

2. Total Expenditures THIS Page	*(sum all the 'If' entries on this page)*	$ 36.86
3. Total Expenditures ALL Pages	*(sum all the 'If' entries on all expenditure pages)*	$ 173.36

Incurred Costs for Independent Expenditures

Use this form to report Independent Expenditures within 30 days after they exceed $100 or 10 days before an election they affect. This form should also be used to report incurred costs of $5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO - 2520.

1. Expenditure Information

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))
NC2026SCHOOLFORSYTH2	2/27/2026	2/27/2026	Staff Time for Organizing and GOTV

e. Full Name, Mailing Address (include city, state, and zip) & Phone Number	f. Amount
	$ 18.43

Candidate Full Name		Amount	Office Sought
Linda Winikoff	☑ Support ☐ Oppose	$ 18.43	☐ House ☐ Senate District:____ ☑ Co./Municipal Office FORSYTH COUNTY BOARD OF EDUCATION ☐ Co. Forsyth
	☐ Support ☐ Oppose	$	☐ House ☐ Senate District:____ ☐ Co./Municipal Office_____ Co._____ ☐ Other Office:_____ County/District:_____

Referendum Name		Date	Level
	☑ Support ☐ Oppose		☐ State ☑ County ☐ Municipality

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))
NC2026SCHOOLFORSYTH3	2/27/2026	2/27/2026	Staff Time for Organizing and GOTV

e. Full Name, Mailing Address (include city, state, and zip) & Phone Number	f. Amount
	$ 18.43

Candidate Full Name		Amount	Office Sought
Ronda Mays	☑ Support ☐ Oppose	$ 18.43	☐ House ☐ Senate District:____ ☑ Co./Municipal Office FORSYTH COUNTY BOARD OF EDUCATION ☑ Co. Forsyth
	☐ Support ☐ Oppose	$	☐ House ☐ Senate District:____ ☐ Co./Municipal Office_____ Co._____ ☐ Other Office:_____ County/District:_____

Referendum Name		Date	Level
	☐ Support ☐ Oppose		☐ State ☐ County ☐ Municipality

2. Total Expenditures THIS Page	*(sum all the 'If' entries on this page)*	$ 36.86
3. Total Expenditures ALL Pages	*(sum all the 'If' entries on all expenditure pages)*	$ 173.36

Incurred Costs for Independent Expenditures

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1. Expenditure Information

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))
NC2026SCHOOLFORSYTH4	2/27/2026	2/27/2026	Staff Time for Organizing and GOTV

e. Full Name, Mailing Address (include city, state, and zip) & Phone Number	f. Amount
	$ 18.42

Candidate Full Name		Amount	Office Sought
Steve Folmar	☑ Support ☐ Oppose	$ 18.42	☐ House ☐ Senate District:____ ☑ Co./Municipal Office FORSYTH COUNTY BOARD OF EDUCATION ☐ Co. Forsyth
	☐ Support ☐ Oppose	$	☐ House ☐ Senate District:____ ☐ Co./Municipal Office_____ Co._____ ☐ Other Office:_____ County/District:_____

Referendum Name		Date	Level
	☑ Support ☐ Oppose		☐ State ☑ County ☐ Municipality

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))
NC2026SCHOOLFORSYTH5	2/27/2026	2/27/2026	Staff Time for Organizing and GOTV

e. Full Name, Mailing Address (include city, state, and zip) & Phone Number	f. Amount
	$ 18.42

Candidate Full Name		Amount	Office Sought
Curtis Fentress	☑ Support ☐ Oppose	$ 18.42	☐ House ☐ Senate District:____ ☑ Co./Municipal Office FORSYTH COUNTY BOARD OF EDUCATION ☑ Co. Forsyth
	☐ Support ☐ Oppose	$	☐ House ☐ Senate District:____ ☐ Co./Municipal Office_____ Co._____ ☐ Other Office:_____ County/District:_____

Referendum Name		Date	Level
	☐ Support ☐ Oppose		☐ State ☐ County ☐ Municipality

2. Total Expenditures THIS Page	*(sum all the 'If' entries on this page)*	$ 36.84
3. Total Expenditures ALL Pages	*(sum all the 'If' entries on all expenditure pages)*	$ 173.36

Incurred Costs for Independent Expenditures

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1. Expenditure Information

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))
NC2026SCHOOLFORSYTH6	2/27/2026	2/27/2026	Staff Time for Organizing and GOTV

e. Full Name, Mailing Address (include city, state, and zip) & Phone Number	f. Amount
	$ 18.42

Candidate Full Name		Amount	Office Sought
Susan Conway	☑ Support ☐ Oppose	$ 18.42	☐ House ☐ Senate District:____ ☑ Co./Municipal Office FORSYTH COUNTY BOARD OF EDUCATION ☐ Co. Forsyth
	☐ Support ☐ Oppose	$	☐ House ☐ Senate District:____ ☐ Co./Municipal Office_____ Co._____ ☐ Other Office:_____ County/District:_____

Referendum Name		Date	Level
	☑ Support ☐ Oppose		☐ State ☑ County ☐ Municipality

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))
NC2026SCHOOLFORSYTH7	2/27/2026	2/27/2026	Staff Time for Organizing and GOTV

e. Full Name, Mailing Address (include city, state, and zip) & Phone Number	f. Amount
	$ 18.42

Candidate Full Name		Amount	Office Sought
Lee Childress	☑ Support ☐ Oppose	$ 18.42	☐ House ☐ Senate District:____ ☑ Co./Municipal Office FORSYTH COUNTY BOARD OF EDUCATION ☑ Co. Forsyth
	☐ Support ☐ Oppose	$	☐ House ☐ Senate District:____ ☐ Co./Municipal Office_____ Co._____ ☐ Other Office:_____ County/District:_____

Referendum Name		Date	Level
	☐ Support ☐ Oppose		☐ State ☐ County ☐ Municipality

2. Total Expenditures THIS Page	*(sum all the 'If' entries on this page)*	$ 36.84
3. Total Expenditures ALL Pages	*(sum all the 'If' entries on all expenditure pages)*	$ 173.36

Incurred Costs for Independent Expenditures

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1. Expenditure Information

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))
NC2026BOCCFORSYTH	3/3/2026	3/3/2026	Staff Time for Organizing and GOTV

e. Full Name, Mailing Address (include city, state, and zip) & Phone Number	f. Amount
	$ 3.25

Candidate Full Name		Amount	Office Sought
Natasha Smith	☑ Support ☐ Oppose	$ 3.25	☐ House ☐ Senate District:____ ☑ Co./Municipal Office Forsyth County BOCC Co. Forsyth ☐
	☐ Support ☐ Oppose	$	☐ House ☐ Senate District:____ ☐ Co./Municipal Office____ Co.____ ☐ Other Office:____ County/District:____

Referendum Name		Date	Level
	☑ Support ☐ Oppose		☐ State ☑ County ☐ Municipality

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))
NC2026SCHOOLFORSYTH1	3/3/2026	3/3/2026	Staff Time for Organizing and GOTV

e. Full Name, Mailing Address (include city, state, and zip) & Phone Number	f. Amount
	$ 3.25

Candidate Full Name		Amount	Office Sought
Valerie Brockenbrough	☑ Support ☐ Oppose	$ 3.25	☐ House ☐ Senate District:____ ☐ Co./Municipal Office FORSYTH COUNTY BOARD OF EDUCATION ☐ Co. Forsyth
	☐ Support ☐ Oppose	$	☐ House ☐ Senate District:____ ☐ Co./Municipal Office____ Co.____ ☐ Other Office:____ County/District:____

Referendum Name		Date	Level
	☐ Support ☐ Oppose		☐ State ☐ County ☐ Municipality

2. Total Expenditures THIS Page	*(sum all the 'If' entries on this page)*	$ 6.50
3. Total Expenditures ALL Pages	*(sum all the 'If' entries on all expenditure pages)*	$ 173.36

Incurred Costs for Independent Expenditures

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1. Expenditure Information

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))
NC2026SCHOOLFORSYTH2	3/3/2026	3/3/2026	Staff Time for Organizing and GOTV

e. Full Name, Mailing Address (include city, state, and zip) & Phone Number	f. Amount
	$ 3.25

Candidate Full Name		Amount	Office Sought
Linda Winikoff	☑ Support ☐ Oppose	$ 3.25	☐ House ☐ Senate District:____ ☑ Co./Municipal Office FORSYTH COUNTY BOARD OF EDUCATION ☐ Co. Forsyth
	☐ Support ☐ Oppose	$	☐ House ☐ Senate District:____ ☐ Co./Municipal Office_____ Co._____ ☐ Other Office:_____ County/District:_____

Referendum Name		Date	Level
	☑ Support ☐ Oppose		☐ State ☑ County ☐ Municipality

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))
NC2026SCHOOLFORSYTH3	3/3/2026	3/3/2026	Staff Time for Organizing and GOTV

e. Full Name, Mailing Address (include city, state, and zip) & Phone Number	f. Amount
	$ 3.25

Candidate Full Name		Amount	Office Sought
Ronda Mays	☑ Support ☐ Oppose	$ 3.25	☐ House ☐ Senate District:____ ☐ Co./Municipal Office FORSYTH COUNTY BOARD OF EDUCATION ☐ Co. Forsyth
	☐ Support ☐ Oppose	$	☐ House ☐ Senate District:____ ☐ Co./Municipal Office_____ Co._____ ☐ Other Office:_____ County/District:_____

Referendum Name		Date	Level
	☐ Support ☐ Oppose		☐ State ☐ County ☐ Municipality

2. Total Expenditures THIS Page	*(sum all the 'If' entries on this page)*	$ 6.50
3. Total Expenditures ALL Pages	*(sum all the 'If' entries on all expenditure pages)*	$ 173.36

Incurred Costs for Independent Expenditures

Use this form to report Independent Expenditures within 30 days after they exceed $100 or 10 days before an election they affect. This form should also be used to report incurred costs of $5,000 or more before an election but after the period covered by the last report due before that election. Registered committees use form CRO - 2520.

1. Expenditure Information

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))
NC2026SCHOOLFORSYTH4	3/3/2026	3/3/2026	Staff Time for Organizing and GOTV

e. Full Name, Mailing Address (include city, state, and zip) & Phone Number	f. Amount
	$ 3.24

Candidate Full Name		Amount	Office Sought
Steve Folmar	☑ Support ☐ Oppose	$ 3.24	☐ House ☐ Senate District:____ ☑ Co./Municipal Office FORSYTH COUNTY BOARD OF EDUCATION ☐ Co. Forsyth
	☐ Support ☐ Oppose	$	☐ House ☐ Senate District:____ ☐ Co./Municipal Office_____ Co._____ ☐ Other Office:_____ County/District:_____

Referendum Name		Date	Level
	☑ Support ☐ Oppose		☐ State ☑ County ☐ Municipality

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))
NC2026SCHOOLFORSYTH5	3/3/2026	3/3/2026	Staff Time for Organizing and GOTV

e. Full Name, Mailing Address (include city, state, and zip) & Phone Number	f. Amount
	$ 3.24

Candidate Full Name		Amount	Office Sought
Curtis Fentress	☑ Support ☐ Oppose	$ 3.24	☐ House ☐ Senate District:____ ☑ Co./Municipal Office FORSYTH COUNTY BOARD OF EDUCATION ☑ Co. Forsyth
	☐ Support ☐ Oppose	$	☐ House ☐ Senate District:____ ☐ Co./Municipal Office_____ Co._____ ☐ Other Office:_____ County/District:_____

Referendum Name		Date	Level
	☐ Support ☐ Oppose		☐ State ☐ County ☐ Municipality

2. Total Expenditures THIS Page	*(sum all the 'If' entries on this page)*	$ 6.48
3. Total Expenditures ALL Pages	*(sum all the 'If' entries on all expenditure pages)*	$ 173.36

Incurred Costs for Independent Expenditures

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1. Expenditure Information

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))
NC2026SCHOOLFORSYTH6	3/3/2026	3/3/2026	Staff Time for Organizing and GOTV

e. Full Name, Mailing Address (include city, state, and zip) & Phone Number	f. Amount
	$ 3.24

Candidate Full Name		Amount	Office Sought
Susan Conway	☑ Support ☐ Oppose	$ 3.24	☐ House ☐ Senate District:____ ☑ Co./Municipal Office FORSYTH COUNTY BOARD OF EDUCATION ☐ Co. Forsyth
	☐ Support ☐ Oppose	$	☐ House ☐ Senate District:____ ☐ Co./Municipal Office_____ Co._____ ☐ Other Office:_____ County/District:_____

Referendum Name		Date	Level
	☑ Support ☐ Oppose		☐ State ☑ County ☐ Municipality

a. Item Number	b. Incurred Date (mm/dd/yyyy)	c. Communication Start Date	d. Purpose (including title(s) of communication(s))
NC2026SCHOOLFORSYTH7	3/3/2026	3/3/2026	Staff Time for Organizing and GOTV

e. Full Name, Mailing Address (include city, state, and zip) & Phone Number	f. Amount
	$ 3.24

Candidate Full Name		Amount	Office Sought
Lee Childress	☑ Support ☐ Oppose	$ 3.24	☐ House ☐ Senate District:____ ☑ Co./Municipal Office FORSYTH COUNTY BOARD OF EDUCATION ☑ Co. Forsyth
	☐ Support ☐ Oppose	$	☐ House ☐ Senate District:____ ☐ Co./Municipal Office_____ Co._____ ☐ Other Office:_____ County/District:_____

Referendum Name		Date	Level
	☐ Support ☐ Oppose		☐ State ☐ County ☐ Municipality

2. Total Expenditures THIS Page	*(sum all the 'If' entries on this page)*	$ 6.48
3. Total Expenditures ALL Pages	*(sum all the 'If' entries on all expenditure pages)*	$ 173.36