

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 THE COMMITTEE TO ELECT RYAN COLLINS	c. ID Number
b. Mailing Address (include City, State and Zip Code) 259 THRUSH TRL HAMPSTEAD, NC 28443	d. Date Filed 01/09/2026
	e. Phone Number (612) 747-1878

2. Report Year 2025	3. Period Start Date (mm/dd/yy) 10/20/2025	4. Period End Date (mm/dd/yy) 12/31/2025	5. Treasurer Full Name RYAN CHRISTOPHER COLLINS
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6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	Municipal	State/County	Referendum
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum	<input type="checkbox"/> Legal Expense Fund	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Other:		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
		<input type="checkbox"/> Final	<input checked="" type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	
8. Number of Fundraisers this Report 1		10. Special Report Name		

3. Account Information		3. Account Information	
a. Financial Institution Full Name FIRST CITIZENS BANK		a. Financial Institution Full Name	
b. Purpose GENERAL OPERATING ACCOUNT	c. Account Code RC1	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 0.00		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

Ryan Collins Printed Name of Signer [Signature] Signature of Appointed Treasurer 01/09/2026 Date

FOR OFFICE USE ONLY

Date Received: 1/16/26 Employee: all **Delivery Method**

Date Postmarked: _____ Employee: _____ Normal Mail

Date Scanned: _____ Employee: _____ Registered Mail

Date Data Entered: _____ Employee: _____ Hand Delivered

_____ _____ Electronically Filed

_____ _____ Signer has not received mandatory training

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	
THE COMMITTEE TO ELECT RYAN COLLINS		2025 Year End Semi-Annual			
Start of Election Cycle: January 1, 2025		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 0.00		\$ 0.00	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 842.03		\$ 842.03	
6) Contributions from Individuals (CRO-1210)		\$ 5,418.47		\$ 5,418.47	
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	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00		\$ 0.00	
11) 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		\$ 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)		\$ 6,260.50		\$ 6,260.50	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 1,759.48		\$ 1,759.48	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00		\$ 0.00	
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00		\$ 0.00	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 95.88		\$ 95.88	
15) Loan Repayments (CRO-1420)		\$ 0.00		\$ 0.00	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00		\$ 0.00	
17) In-Kind Contributions (CRO-1510)		\$ 1,507.50		\$ 1,507.50	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 3,362.86		\$ 3,362.86	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 2,897.64		\$ 2,897.64	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0.00			
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 0.00			
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0.00			
24) 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	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0.00		\$ 0.00	
28) Contributions to be Refunded (CRO-1215)		\$ 0.00		\$ 0.00	

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	
THE COMMITTEE TO ELECT RYAN COLLINS						
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	RC1	Cash		12/06/2025	\$	20.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Cash		12/06/2025	\$	20.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Cash		12/06/2025	\$	20.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Cash		12/06/2025	\$	40.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Cash		12/06/2025	\$	50.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Cash		12/06/2025	\$	10.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Cash		10/21/2025	\$	50.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Electric Funds Tran		12/06/2025	\$	40.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Cash		12/06/2025	\$	10.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Cash		12/06/2025	\$	20.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Cash		12/06/2025	\$	11.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Cash		12/06/2025	\$	20.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Cash		12/06/2025	\$	25.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Cash		12/06/2025	\$	50.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Cash		12/06/2025	\$	15.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Cash		12/06/2025	\$	20.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Cash		12/06/2025	\$	10.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Cash		12/06/2025	\$	30.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Electric Funds Tran		12/06/2025	\$	26.03
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Cash		12/06/2025	\$	10.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Cash		12/06/2025	\$	20.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Cash		12/06/2025	\$	10.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	RC1	Cash		12/06/2025	\$	40.00
<input type="checkbox"/> Remove						
4. Total only this Page					\$	\$567.03
5. Total of ALL CRO-1205 Pages					\$	\$842.03
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

Aggregated Contributions from Individuals

Page 2 of 2

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	
THE COMMITTEE TO ELECT RYAN COLLINS						
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	RC1	Cash		12/06/2025	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	RC1	Cash		12/06/2025	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	RC1	Cash		12/06/2025	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	RC1	Cash		12/06/2025	\$	5.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	RC1	Cash		12/06/2025	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	RC1	Electric Funds Tran		12/06/2025	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	RC1	Cash		12/06/2025	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	RC1	Cash		12/06/2025	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	RC1	Cash		12/06/2025	\$	15.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	RC1	Electric Funds Tran		12/06/2025	\$	15.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	RC1	Cash		12/06/2025	\$	20.00
4. Total only this Page					\$	\$275.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$	\$842.03

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	
THE COMMITTEE TO ELECT RYAN COLLINS							
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		
BOBBY BENTON 102 CEDAR HOPE CV WILMINGTON, NC 28411			OWNER				
			c. Employer's Name/Specific Field BENTON ELECTRICAL SERVICE LLC				
						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"/>	RC1	Check		12/06/2025	\$ 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		
RYAN COLLINS 259 THRUSH TRAIL HAMPSTEAD, NC 28443			TACTICAL TRAINING SPECIALIST				
			c. Employer's Name/Specific Field INNOVATIVE REASONING LLC				
						e. Election Sum to Date	
						\$ 1,307.72	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	RC1	In-Kind	MAILING OF DOCUMENTS TO BOARD	10/21/2025	\$ 13.76		
<input type="checkbox"/>	RC1	Cash		10/21/2025	\$ 50.00		
<input type="checkbox"/>	RC1	In-Kind	WEBSITE AND EMAIL SERVICE	10/24/2025	\$ 449.64		
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		
RYAN COLLINS 259 THRUSH TRAIL HAMPSTEAD, NC 28443			TACTICAL TRAINING SPECIALIST				
			c. Employer's Name/Specific Field INNOVATIVE REASONING LLC				
						e. Election Sum to Date	
						\$ 1,307.72	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	RC1	Check		10/30/2025	\$ 400.00		
<input type="checkbox"/>	RC1	In-Kind	META ADVERTISING SERVICES	11/14/2025	\$ 150.00		
<input type="checkbox"/>	RC1	In-Kind	FILING FEE	12/01/2025	\$ 216.64		
4. Total only this Page						\$ 1,380.04	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 5,418.47	

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	
THE COMMITTEE TO ELECT RYAN COLLINS						
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	
RYAN COLLINS 259 THRUSH TRAIL HAMPSTEAD, NC 28443			TACTICAL TRAINING SPECIALIST			
			c. Employer's Name/Specific Field			
			INNOVATIVE REASONING LLC		e. Election Sum to Date	
				\$ 1,307.72		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	RC1	In-Kind	NAME TAG	12/05/2025	\$ 27.68	
<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	
TERRENCE COLLINS 9767 GABLE DRIVE EDEN PRAIRIE, MN 55347			DIRECTOR OF COMMUNITY RELATIONS			
			c. Employer's Name/Specific Field			
			RIGHT AT HOME LLC		e. Election Sum to Date	
				\$ 500.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	RC1	Check		12/28/2025	\$ 500.00	
<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	
TERESA COSTON 180 MOORES LANDING EXT HAMPSTEAD, NC 28443			INSTRUCTIONAL ASSISTANT			
			c. Employer's Name/Specific Field			
			PENDER COUNTY SCHOOLS		e. Election Sum to Date	
				\$ 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"/>	RC1	Electric Funds Tran		12/06/2025	\$ 60.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 587.68	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,418.47	

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	
THE COMMITTEE TO ELECT RYAN COLLINS							
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		
WILLIAM DURBIN 212 CONTRAIL RD HAMPSTEAD, NC 28443			OWNER				
			c. Employer's Name/Specific Field BD CONSTRUCTION AND HANDYMAN LLC				
						e. Election Sum to Date	
						\$ 52.05	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	RC1	Electric Funds Tran		12/06/2025	\$ 52.05		
<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		
BRAD GEORGE 102 DORAL DR HAMPSTEAD, NC 28443			Maintenance Coordinator				
			c. Employer's Name/Specific Field GE Vernova				
						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"/>	RC1	Electric Funds Tran		11/01/2025	\$ 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		
ALLEN HEGARTY 800 HIGHLANDS DR HAMPSTEAD, NC 28443			RETIRED				
			c. Employer's Name/Specific Field RETIRED				
						e. Election Sum to Date	
						\$ 104.10	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	RC1	Electric Funds Tran		12/06/2025	\$ 104.10		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 256.15	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 5,418.47	

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	
THE COMMITTEE TO ELECT RYAN COLLINS						
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
CAROLYN JUSTICE 102 CORAL CT HAMPSTEAD, NC 28443				PROPERTY MANAGER		
				c. Employer's Name/Specific Field HAMPSTEAD SERVICES		
				e. Election Sum to Date		
				\$ 275.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	RC1	In-Kind	MEMBERSHIP FEE	11/19/2025	\$ 25.00	
<input type="checkbox"/>	RC1	Check		12/07/2025	\$ 250.00	
<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
STEVE MCDOWELL 28 S. LAMPLIGHTERS WALK HAMPSTEAD, NC 28443				RETIRED		
				c. Employer's Name/Specific Field RETIRED		
				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"/>	RC1	Electric Funds Tran		12/06/2025	\$ 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
JAY MILAM 6075 STAG PARK ROAD BURGAW, NC 28425				RETIRED		
				c. Employer's Name/Specific Field RETIRED		
				e. Election Sum to Date		
				\$ 520.21		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	RC1	Electric Funds Tran		12/06/2025	\$ 520.21	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 895.21	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 5,418.47	

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	
THE COMMITTEE TO ELECT RYAN COLLINS							
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	
CHARLES NORWOOD 240 RAVENWOOD RD HAMPSTEAD, NC 28443				RETIRED			
				c. Employer's Name/Specific Field RETIRED			
						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	
<input type="checkbox"/>	RCI	Check		12/07/2025		\$ 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)				b. Job Title/Profession		d. Comments	
MILTON PACKARD 518 HUGHES ROAD HAMPSTEAD, NC 28443				TECH SPECIALIST			
				c. Employer's Name/Specific Field CORNING INC			
						e. Election Sum to Date	
						\$ 52.05	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	RCI	Electric Funds Tran		12/06/2025		\$ 52.05	
<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	
RALPH PENNINGTON 2390 SCOTTS HILL LOOP RD HAMPSTEAD, NC 28443				RETIRED			
				c. Employer's Name/Specific Field RETIRED			
						e. Election Sum to Date	
						\$ 52.05	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	RCI	Electric Funds Tran		12/06/2025		\$ 52.05	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 354.10	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 5,418.47	

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	
THE COMMITTEE TO ELECT RYAN COLLINS						
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	
TOMMY REEVES 471 ANDREWS ROAD HAMPSTEAD, NC 28443			PRESIDENT			
			c. Employer's Name/Specific Field			
			ACE HARDWARE			
					e. Election Sum to Date	
					\$ 1,124.78	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	RC1	In-Kind	NEWSPAPER AD FOR FUNDRAISER	12/04/2025	\$ 125.00	
<input type="checkbox"/>	RC1	In-Kind	FOOD FOR FUNDRAISER	12/05/2025	\$ 499.78	
<input type="checkbox"/>	RC1	Check		12/06/2025	\$ 500.00	
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	
DONNA RICTER 114 RANSEY CT HAMPSTEAD, NC 28443			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election Sum to Date	
					\$ 520.51	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	RC1	Electric Funds Tran		12/05/2025	\$ 520.51	
<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	
CHARLES ROOK 105 N BENNETT ST BURGAW, NC 28425			FARM SERVICES			
			c. Employer's Name/Specific Field			
			ROOK FARM SERVICES			
					e. Election Sum to Date	
					\$ 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"/>	RC1	Check		12/06/2025	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1,845.29	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 5,418.47	

Contributions from Individuals

Pg 7 of 7

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	
THE COMMITTEE TO ELECT RYAN COLLINS					
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
TAMORA SMITH PO BOX 2147 WILMINGTON, NC 28402			ATTORNEY		
			c. Employer's Name/Specific Field		e. Election Sum to Date
			PENNINGTON AND SMITH LLC		
					\$ 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"/>	RC1	Electric Funds Tran		12/06/2025	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 100.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,418.47

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	
THE COMMITTEE TO ELECT RYAN COLLINS							
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	
CRAZY CHEAP POLITICAL SIGNS 11525A STONEHOLLOW DR STE 100 AUSTIN, TX 78758				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:			
						\$ 1,674.08	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
RC1	Debit Card	O	12/09/2025	\$ 1,674.08	YARD SIGNS		
				\$			
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	
EXPRESS TECH SHIPPING 15200 US HWY N HAMPSTEAD, NC 28443				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:			
						\$ 85.40	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
RC1	Debit Card	O	11/06/2025	\$ 85.40	PALMS CARDS		
				\$			
5. Total only this Page						\$ 1,759.48	
6. Total of ALL CRO-1310 Pages						\$ 1,759.48	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
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)							

Aggregated Non-Media Expenditures

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
THE COMMITTEE TO ELECT RYAN COLLINS						
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
<input type="checkbox"/> Add <input type="checkbox"/> Remove	RC1	Electric Funds Tran	O	10/27/2025	\$ 32.88	BANK ACCOUNT CHECKS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	RC1	Electric Funds Tran	O	11/01/2025	\$ 2.00	PAYMENT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	RC1	Electric Funds Tran	O	12/06/2025	\$ 5.06	PAYMENT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	RC1	Electric Funds Tran	O	12/05/2025	\$ 20.51	PAYMENT PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	RC1	Electric Funds Tran	O	12/06/2025	\$ 35.43	PAYMENT PROCESSING FEE
4. Total only this Page					\$	95.88
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$	95.88
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			
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donations to Legal Expense Fund			
O* - Other						
* Codes require detailed explanation in required remarks field (g)						

In-Kind Contributions

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
THE COMMITTEE TO ELECT RYAN COLLINS			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
RYAN COLLINS 259 THRUSH TRAIL HAMPSTEAD, NC 28443		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
			\$ 1,307.72
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
MAILING OF DOCUMENTS TO BOARD OF ELECTIONS		10/21/2025	\$ 13.76
WEBSITE AND EMAIL SERVICE		10/24/2025	\$ 449.64
META ADVERTISING SERVICES		11/14/2025	\$ 150.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
RYAN COLLINS 259 THRUSH TRAIL HAMPSTEAD, NC 28443		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
			\$ 1,307.72
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
FILING FEE		12/01/2025	\$ 216.64
NAME TAG		12/05/2025	\$ 27.68
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
CAROLYN JUSTICE 102 CORAL CT HAMPSTEAD, NC 28443		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
			\$ 275.00
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
MEMBERSHIP FEE		11/19/2025	\$ 25.00
			\$
			\$
4. Total only this Page			\$ 882.72
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$ 1,507.50

In-Kind Contributions

Pg 2 of 2

Amendment
 Yes No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
 Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

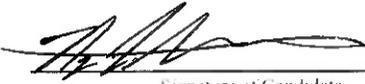
1. Committee Full Name (and Fund if applicable)		2. ID Number	
THE COMMITTEE TO ELECT RYAN COLLINS			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
TOMMY REEVES 471 ANDREWS ROAD HAMPSTEAD, NC 28443		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 1,124.78	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
NEWSPAPER AD FOR FUNDRAISER		12/04/2025	\$ 125.00
FOOD FOR FUNDRAISER		12/05/2025	\$ 499.78
			\$
4. Total only this Page		\$ 624.78	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 1,507.50	

OCT 29 2025

Statement of Organization - Candidate Committee

Is this statement:	
<input type="checkbox"/> New	<input checked="" type="checkbox"/> Amended

Use this form to create a new or update an existing candidate committee.
 This form must be accompanied by form CRO-3500. An amended form is required for each new election year.

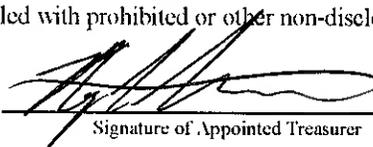
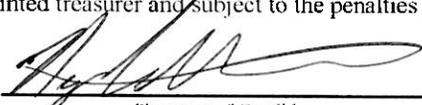
1. Committee Information			
a. Name of Committee		d. ID Number	
The Committee to Elect Ryan Collins			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
259 Thrush Trail Hampstead, NC 28443		20 Oct 2025	
c. Committee Website (Optional)		f. Phone Number	
		612-747-1878	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Ryan Christopher Collins		Republican	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
259 Thrush Trail Hampstead, NC 28443		County Commissioner, 2nd District	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
612-747-1878	ryan.c.collins81@gmail.com	2026	Pender County
<input checked="" type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Ryan Christopher Collins			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
259 Thrush Trail Hampstead, NC 28443			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
612-747-1878	ryan.c.collins81@gmail.com		
Send report notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of report notices	
5. Custodian of Books Information (Keeper of Records)		6. Account Information (incl CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
		First Citizens Bank	
b. Mailing Address (include City, State, and Zip Code)			
c. Phone Number	d. Email Address	b. Account Code	c. Type
		RC1	Checking
<input type="checkbox"/> Email copy of report notices			
<p>I certify that the Committee is in compliance with all applicable provisions of Article 22A 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.</p>			
Ryan C Collins Printed Name of Treasurer		 Signature of Appointed Treasurer	21 Oct 2025 Date
<p>I certify that the information above is correct, and I, as the candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties in Article 22A of Chapter 163 of the NC General Statutes.</p>			
Ryan C Collins Printed Name of Candidate		 Signature of Candidate	21 Oct 2025 Date

Statement of Organization - Candidate Committee

Is this statement:	
<input checked="" type="checkbox"/> New	<input type="checkbox"/> Amended

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by form CRO-3500. An amended form is required for each new election year.

1. Committee Information			
a. Name of Committee		d. ID Number	
The Committee to Elect Ryan Collins			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
259 Thrush Trail Hampstead, NC 28443		20 Oct 2025	
c. Committee Website (Optional)		f. Phone Number	
		612-747-1878	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Ryan Christopher Collins		Republican	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
259 Thrush Trail Hampstead, NC 28443		County Commissioner, 2nd District	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
612-747-1878	ryan.c.collins81@gmail.com	2026	Pender County
<input checked="" type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Ryan Christopher Collins			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
259 Thrush Trail Hampstead, NC 28443			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
612-747-1878	ryan.c.collins81@gmail.com		
Send report notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of report notices	
5. Custodian of Books Information (Keeper of Records)		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
b. Mailing Address (include City, State, and Zip Code)			
c. Phone Number	d. Email Address	b. Account Code	c. Type
<input type="checkbox"/> Email copy of report notices			
<p>I certify that the Committee is in compliance with all applicable provisions of Article 22A 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.</p> <p> <u>Ryan C Collins</u> Printed Name of Treasurer </p> <p>  Signature of Appointed Treasurer </p> <p> <u>20 Oct 2025</u> Date </p> <p> I certify that the information above is correct, and I, as the candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties in Article 22A of Chapter 163 of the NC General Statutes. </p> <p> <u>Ryan C Collins</u> Printed Name of Candidate </p> <p>  Signature of Candidate </p> <p> <u>20 Oct 2025</u> Date </p>			



NORTH CAROLINA

STATE BOARD OF ELECTIONS

Certification of Threshold

This Certification is used to declare or withdraw a committee's intent to raise or spend \$1,000 or less in the current election cycle.

This Certification is only valid for political party committees and candidates for a county office, municipal office, local school board office, soil & water conservation district board of supervisors, or sanitary district board.

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

FILED BY:

Committee Name: The Committee to Elect Ryan Collins

Treasurer Name: Ryan Collins

Treasurer Address: 259 Thrush Trail
(include city, state, & zip) Hampstead, NC 28443

Treasurer Phone: 612-747-1878

Check One:

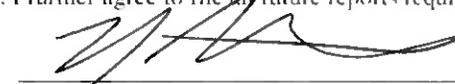
I certify that this committee intends to neither receive nor expend more than \$1,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$1,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports.

THIS DECLARATION CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.

I am withdrawing my Certification to remain at or under the \$1,000 threshold. I will now be required to file the next scheduled report for all contributions and expenditures that have not been previously reported from the beginning of the current election cycle. I further agree to file all future reports required.

3 November 2025

Date Signed


Signature



NORTH CAROLINA STATE BOARD OF ELECTIONS

Certification of Threshold

This Certification is used to declare or withdraw a committee's intent to raise or spend \$1,000 or less in the current election cycle.

This Certification is only valid for political party committees and candidates for a county office, municipal office, local school board office, soil & water conservation district board of supervisors, or sanitary district board.

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

FILED BY:

Committee Name: THE COMMITTEE TO ELECT RYAN COLLINS

Treasurer Name: RYAN COLLINS

Treasurer Address: 259 THURSH TRAIL

(include city, state, & zip) HAMPSTEAD, NC 28443

Treasurer Phone: 612 747-1878

Check One:

I certify that this committee intends to neither receive nor expend more than \$1,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$1,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports.

THIS DECLARATION CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.

I am withdrawing my Certification to remain at or under the \$1,000 threshold. I will now be required to file the next scheduled report for all contributions and expenditures that have not been previously reported from the beginning of the current election cycle. I further agree to file all future reports required.

21 Oct 2025
Date Signed

[Signature]
Signature

