

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 Robert Barr for School Board		c. ID Number SCQ55Q																			
b. Mailing Address (include City, State and Zip Code) 1966 Waterford Village Drive Clemmons, NC 27012		d. Date Filed 10/26/2026																			
		e. Phone Number 336-399-6374																			
2. Report Year 2026	3. Period Start Date (mm/dd/yy) 07/01/2026	4. Period End Date (mm/dd/yy) 10/17/2026	5. Treasurer Full Name Donna B Parsons																		
6. Type of Committee (Check One) ☒ Candidate Campaign ☐ PAC ☐ Independent Expenditure ☐ Legal Expense Fund ☐ Party ☐ Referendum ☐ Joint Fundraiser		9. Type of Report (check only one type of report from one category) <table border="1"><thead><tr><th>Municipal</th><th>State/County</th><th>Referendum</th></tr></thead><tbody><tr><td>☐ Organizational ☐ Thirty-five day ☐ Pre-primary ☐ Pre-election ☐ Pre-runoff ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special</td><td>☐ Organizational ☐ Quarterly ☐ First ☐ Second ☒ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special</td><td>☐ Organizational ☐ Pre-referendum ☐ Final ☐ Supplemental Final ☐ Annual ☐ Special</td></tr></tbody></table>		Municipal	State/County	Referendum	☐ Organizational ☐ Thirty-five day ☐ Pre-primary ☐ Pre-election ☐ Pre-runoff ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special	☐ Organizational ☐ Quarterly ☐ First ☐ Second ☒ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special	☐ Organizational ☐ Pre-referendum ☐ Final ☐ Supplemental Final ☐ Annual ☐ Special												
Municipal	State/County	Referendum																			
☐ Organizational ☐ Thirty-five day ☐ Pre-primary ☐ Pre-election ☐ Pre-runoff ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special	☐ Organizational ☐ Quarterly ☐ First ☐ Second ☒ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special	☐ Organizational ☐ Pre-referendum ☐ Final ☐ Supplemental Final ☐ Annual ☐ Special																			
7. Type of Fund (if applicable, check one) ☐ "Booster Fund" ☐ Building Fund ☐ Other:		10. Special Report Name																			
8. Number of Fundraisers this Report .0																					
11. Account Information		11. Account Information																			
a. Financial Institution Full Name First Citizens Bank		a. Financial Institution Full Name																			
b. Purpose Contribution Expenses	c. Account Code 1980	b. Purpose	c. Account Code																		
	d. Period Begin Balance \$ 121.85		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. Donna B Parsons Printed Name of Signer Signature of Appointed Treasurer 10/26/2026 Date																					
FOR OFFICE USE ONLY <table border="1"><thead><tr><th>Date Received:</th><th>Employee:</th><th>Delivery Method</th></tr></thead><tbody><tr><td></td><td></td><td>☐ Normal Mail</td></tr><tr><td>Date Postmarked:</td><td>Employee:</td><td>☐ Registered Mail</td></tr><tr><td>Date Scanned:</td><td>Employee:</td><td>☐ Hand Delivered</td></tr><tr><td>Date Data Entered:</td><td>Employee:</td><td>☐ Electronically Filed</td></tr><tr><td></td><td></td><td>☐ Signer has not received mandatory training</td></tr></tbody></table>				Date Received:	Employee:	Delivery Method			☐ Normal Mail	Date Postmarked:	Employee:	☐ Registered Mail	Date Scanned:	Employee:	☐ Hand Delivered	Date Data Entered:	Employee:	☐ Electronically Filed			☐ Signer has not received mandatory training
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Date Data Entered:	Employee:	☐ 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	
Robert Barr for School Board		3rd Quarter Report		SCQ55Q	
Start of Election Cycle: January 1, 2026		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 121.85		\$ 121.85	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$	
6) Contributions from Individuals (CRO-1210)		\$ 3719.54		\$ 3719.54	
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)		\$ 3719.54		\$ 3719.54	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 28.75		\$ 28.75	
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)		\$ 1569.54		\$ 1569.54	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1598.29		\$ 1598.29	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 2243.10		\$ 2243.10	
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 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	
Robert Barr for School Board				SCQ55Q	
3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Robert L Barr Jr 1966 Waterford Village Drive Clemmons, NC 27012 336-399-6374 robmbarr@bellsouth.net		Pastor			
		c. Employer's Name/Specific Field			
		Agape Faith Church 2101 Lewisville Clemmons Road Clemmons, NC 27012		e. Election Sum to Date	
				\$ 5359.01	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		C Card	Postcards	09/05/2026	\$ 247.55
☐		C Card	Marketing(text)	10/13/2026	\$ 1321.99
☐					\$
3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Dawn Morgan 112 Rockford Court Kernersville, NC 27284		Mayor			
		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
☐	1980	Stripe		07/02/2026	\$ 100.00
☐					\$
☐					\$
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Aaron Harris 658 Clemson Circle Winston Salem, NC 27107 336-486-3403		Retired			
		c. Employer's Name/Specific Field			
				e. Election Sum to Date	
				\$ 2900.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1980	check		08/31/2026	\$ 1200.00
☐					\$
☐					\$
4. Total only this Page				\$ 2869.54	
5. Total of ALL CRO-1210 Pages				\$ 3719.54	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					

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	
Robert Barr for School Board					SCQ55Q	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Michael Smith 6000 Holder Road Clemmons, NC 27012						
			c. Employer's Name/Specific Field			
					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
☐	1980	Stripe		09/28/2026		\$ 250.00
☐						\$
☐						\$
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Peter Couture 317 Susanna Drive Kernersville, NC 27284			Retired			
			c. Employer's Name/Specific Field			
					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
☐	1980	Stripe		10/12/2026		\$ 500.00
☐						\$
☐						\$
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Pedro Espino 1475 South Peace Haven Road Clemmons, NC 27012			Project Safety Manager			
			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
☐	1980	Stripe		10/14/2026		\$ 100.00
☐						\$
☐						\$
4. Total only this Page					\$ 850.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 3719.54	

Disbursements

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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	
Robert Barr for School Board					SCQ55Q	
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) Stripe Fees			b. Coordinated Committee Name		d. Comments e. Election Sum to Date \$ 10.75	
			c. Level Registered (Specify)			
			☐ Federal ☒ County: ☐ State ☐ Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1980	Stripe	O	07/02/2026	\$3.20	Stripe Fees	
1980	Stripe	O	09/28/2026	\$7.55	Stripe Fees	
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Stripe			b. Coordinated Committee Name		d. Comments e. Election Sum to Date \$ 28.75	
			c. Level Registered (Specify)			
			☐ Federal ☒ County: ☐ State ☐ Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1980	Stripe	O	10/12/2026	\$14.80	Stripe Fees	
1980	Stripe	O	10/14/2026	\$3.20	Stripe Fees	
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments e. Election Sum to Date \$	
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ 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					\$	
6. Total of ALL CRO-1310 Pages						
<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>					\$ 28.75	
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)						

In-Kind Contributions

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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	
Robert Barr for School Board		SCQ55Q	
3. Contributor Information ☒ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
Robert Barr Jr 1966 Waterford Village Drive Clemmons, NC 27012		☐ Individual ☒ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
		d. Election Sum to Date	
		\$ 5259.01	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Postcards		09/05/2026	\$ 247.55
Marketing (text)		10/13/2026	\$ 1321.99
			\$
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
Robert Barr Jr		☐ Individual ☒ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
		d. Election Sum to Date	
		\$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
		☐ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
		d. Election Sum to Date	
		\$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
4. Total only this Page		\$ 1569.54	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 1569.54	