Amendme	nt		
☐ Yes	X	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

Do not abo this form to apaut	O IIIIOIIIIIIIIII				
1≟Committee Information a. Full Name				( (A. A	c. ID Number
FRIENDS FOR DAN INGLE	3				
b. Mailing Address (include Ci	ty, State and Zip Code	)	RATE CONTROL		d. Date Filed
6388 RASCOE RD BURLINGTON, NC 27217					01/08/2023
Boldsitolon, no 27217					e. Phone Number
2. Report Year S.Period Sta	rt Date (mm/dd/yy)	4) Ruriod Lad Da	te (mm/ad/yy) 5.	Propositi	ër#kull Name 1888 (
2022	0/23/2022	12/31/2	2022 R	EBEKAF	H W LOY
6. Type of Committee (Checks	One) o 9. Tyr	re of Report (c)	neck anivaneity	e of rem	irt from one category)
X Candidate Campaign Pa	-	*****	State/County		Referendum
☑ Joint Fundraiser ☑ PA ☑ Referendum ☐ Le	AC gal Expense Fund	Organizational Thirty-five day	Organizational Quarterly	!	Organizational Pre-referendum
Type of Fund St. (if applicab		Pre-primary	First	İ	Final
"Booster Fund"		Pre-election	Second		Supplemental Final
Building Fund	<b></b>	Pre-runoff	Third		Annual
Presidential Election Year Can	l	Semi-annual	Fourth	]	Special
NC Public Campaign Financing	g Fund	Mid Year Year End	Semi-annual  Mid Year		
Other:		Final	Year End		10. Special Report Name
S.Number of Fundraisers this		Special	Final	ŀ	
0			Special		
3.5Account information	<b>24</b>	30/4/70	ກັບກັບໄກໂຄະການຄົນເ		
a. Financial Institution Full Na	me *		ncial Institution		e
TRUIST				en Steri III V	nua pina (
b. Purpose	c. Account Code	b. Purp	ose		c. Account Code
CHECKING	01		IAN	102	73
	d. Period Begin Balan	ce	AUAUA		d, Period Begin Balance
	\$	5,158.34	COARD (	OF RELEX	<b>8</b> 0
CERTIFICATION	<u> </u>	I	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	967 (1 <sub>60</sub> A	
I certify that the Committee					
Chapter 163 of the NC Gener					
funds. I further certify that t	his report is complete,	true and correct a	nd that I have be	en traine	d by the NC State Board
Robovahwilo	)c,	Rebelahi	2 BOW		01/08/2023
Printed Name of S	igner	Signature of	Appointed Treasure	r	Date
FOR OFFICEUSE ONLY				S 2.5 C	(Sugar
Date Received:	1/10/23	Employee: _	<u>CT : 2</u>	H 100 000 000 000 000 000 000 000 000 00	<u>very Method</u> Normal Mail
Date Postmarked:		Employee: _		COLON NO CONTRACTOR NO CONTRAC	Registered Mail
Daw I ostimiscu,	2 (1900)	Employee.			Hand Delivered
Date Scanned:	e de la companya de	Employee:		[L] 1	Electronically Filed
Date Data Entered:		Employee:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	PROBLEM STATE	Signer has not received randatory training
Please Note: This form c	annot be used to amen	ıd committee infor	nation such as th		
	nt treasurer, custodian				
You must amen	d the Statement of Org	anization (CRO-21	00A-E) to make c	ommittee	changes.

T				4
Dis	: hii	1221	ame	ntc

				Amendm	ent
Pg	_1_	of	2_	Yes	X No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

[] Committee [7] FRIENDS FOR	fill Name (and Fun R DAN INGLE	dif applicable)				45	##************************************	2. ID No	mber 🗽 🗸 🔌
		Teuse separate (IK)		and the second	<i>7.7.</i> 7.	- Chieffe	4300		
X Operating Exp	penses 😨 Co:	ontributions to Candidat					~~~~		expenditures
4. Payreelliiniiin	iation e. **	11.6.1			Rein				
a. Full Name, Ma (include city, sta	ailing Address & F	hone		b. Coordinate	d Cor	nmittee Na	am e 🧢	d. Comm	ients -
	ate, & zip) COUNTY REPUB	LICAN PARTY	<u> Zadžanavi</u>	<del>-</del>					
2643 RAMADA	A RD	Diomitana		c. Level Regis					
BURLINGTON	I, NC 27215			Federal State	1	County: Municip		e. Electic	on Sum to Date
			١	Alamance		<u></u>		\$	250.00
f. Account Code	g. Form of Paymen	nt h. Purpose Code	i. Date	 : (mm/dd/yyyy)	ј. <u>А</u> г	nount	k, Re	quired Re	
01	Check	В		0/27/2022	\$	250.00	PRIN	VTING P	OLLING
					\$		HAN	DOUIS	
4. Payee Inform	ation <b>f</b>			Add 🗔 🦠	l elken	ñ/e 💯 📝			
a. Full Name, Ma	ailing Address & P	hone		b. Coordinate		CONTRACTOR OF THE STATE OF THE	am e	d. Comm	ents
(include city, stat		<u></u>	Enterior (C.P. Carlogo						
ALAMANCE N 114 WEST ELM			1	c. Level Regis	tered	(Specify)			
GRAHAM, NC			1	Federal		County:			
I			!	State	<u>E</u>	Mum1cip:	ality:		n Sum to Date
								\$	4,310.00
				(mm/dd/yyyy)				quired Re	
01	Check	A	<del> </del>	0/25/2022	\$			/SPAPER	<del></del>
01	Check	A		1/01/2022	\$		NEW	/SPAPER	ADS
4: Payce Informa	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT		Control of the Contro	The state of the s	Rem	MALES A DAY SERVICE AND ASSESSED.	7		
a. Full Name, Ma (include city, stat	ailing Address & P ite, & zip)	hone		b. Coordinate	d Com	imittee iva	.me	d. Comm	ents
VANS ADVER			Marie Control Consumer					ı	
2954 ELDER LA	ANE			c. Level Regis	- 2000 - 0000	(Specify)	pict ex		
BURLINGTON,	, NC 27215			State		<ul><li>County:</li><li>Municipa</li></ul>	L	e. Electio	n Sum to Date
			Ţ					\$	2,444.44
f Account Code	o. Form of Paymen	if h. Purpose Code	i. Date	(mm/dd/vyyy)	li. An	ount.	k. Re	quired Re	<u> </u>
01	Check	0		1/28/2022	\$		3,588	YL SIGN:	
01	Check	0		1/28/2022	\$			PER STI	
5. Total only this	s Page			) The				\$	2,396.16
	CRO-1310 Pages	1110	APPL Serve			21 L		-	
		l Summary Page CRO-					A 13.32	\$	2,791.16
=	=	l Summary Page CRO l Summary Page CRO	-				mm)	Ψ	<b>,</b> : -
		d expenditure code	-	Oncede Commission in	9-1				
A* - Media	B* - Printi	ing	C* - Fu	undraising		<b>D</b> - To /	Anoth	er Candid	late
E - Salaries	F* - Equipm	ment	G - Poli	litical Party	0500003	282222222111011111111111111111111111111		o commission and a feet of the feet	office Expenses
I - Postage O* Other	J - Penalti	ies	K* - U	ffice Expenses	<b>J</b>	Q* - Do	natio	a to Lega	l Expense Fund
	detailed explanat	ion in required rem	arks fi	eld (k)		7,177			

D	ic	h	nr	92	m	e	nts
	12	v	ш	3	. 111		1113

				Amendment						
Pg	2	of	2	☐ Yes	X No					

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

ja Committee ku	UNama (and Bun	1		*				ID/Number	
FRIENDS FOR			N. 106					шиник	
LKIENDS FOR	DAN INOLE								
Statype of Dishar	ktamen s <i>itéltet</i> k	ansesammue OK	(0.918)11)	forms for eac	h ivn	เสอเสียหม่อน	istamente	(1) (A) (A)	柳 车屋
X Operating Expe	ANY CONTRACTOR OF THE PROPERTY	itributions to Candid		CO. C.	AND DESCRIPTION OF THE PARTY OF	NAMES AND DESCRIPTIONS OF THE PERSON NAMED IN COLUMN 2 AND DESCRIPTION OF THE	Charles and the contract of th	arty Expend	itures
4 Payes informs			-	Add 🗆	R			7 1	974 SPT 4
Programme and the programme and the programmer	iling Address & P	hone		b. Coordinate	ed Co	mmittee N	ame d.	Comments	
(include city, stat		40 <u>4</u> 200 4 0 4							
WOMACK PUB							ļ		
PO BOX 530	LIBITING			c. Level Regi	stered	(Specify)			
CHATHAM, VA	24531			Federal		County:			
011111111111111111111111111111111111111	2 .001			■ State		Municip	ality: e.l	Election Sur	m to Date
						_	\$		1 570 12
							, a		1,570.13
f. Account Code	g. Form of Paymen	t h. Purpose Code	e i. Date	(mm/dd/yyyy	) j. Aı	nount	k. Requi	red Remark	(S
01	Check	A	10	)/24/2022	\$	395.00	NEWSF	APER AD	S
					s				
6 1 30 30 30 30 30 30 30 30 30 30 30 30 30	E-ent			LANGE CANA	Ψ 				
5) Total only this	2778407780000000000000000000000000000000				a.		\$		395.00
6:(Total of ALL)	RO-1310/Pages					1.0			
(This line goes in	line 13a of Detailed	Summary Page CR	0-1100 if	Operating Exp	enses)	ongoggestar (state of the state	\$		2,791.16
	line 13b of Detailed	, ,	-				omm)   "		2,771.10
(This line goes in	line 13c of Detailed	Summary Page CR	0-1100 if	Coordinated Pa	ırty Ex	penditures)			
7, Piirpose Co	des (List detaile	d expenditure cod	e in (h.)g	(D)(AVE)(AVE)	in in	1000		(4) A	
A* - Media	B* - Printi	· · · · · · · · · · · · · · · · · · ·		undraising		<b>D</b> - To	Another	Candidate	Springer
E - Salaries	F* - Equip		Same of the State of the same	itical Party	munch NACHATICA	CONTRACTOR OF THE OWNER		blic Office	Expenses
I - Postage	J - Penalt	och peublic powier ny ne włdogoddodegoszenegosodgo	N. Santana ang atawa an	ffice Expense	S			Legal Exp	
O* Other								J 1	
#Corex require	depiledexylanat	on in required re	marks fi	eld(k)+	10		and the state of		
		110	<b>a</b>	1 0 = 1					

CRO-1310

NC State Board of Elections

December 2009