Do not use this form to update information		neral repo	ort and committee	informa	tion, must be	e signed	and sub	mitted along with	in other detailed forms.	l No
Committee to Flect Stephanic Bourland Nating Address (tectus Stephanic Bourland 122 Avenue of Trees Flon, NC 27244 ALMANACE COUNTY BOARD OF ELECTIONS 2. Report Year 3. Period Start Date (uniddly) 2022 01/01/22 01/03/23 4. Period End Date (uniddly) 06/30/22 Dowby Kay Bourland 6. Type of Committee (Check One) 9. Type of Report (check only othe type of report from one category) Combidate Compatign Puty Municipal Select County Refereation Dowby Kay Bourland 1. Type of Team Dowby Kay Bourland 1. Type of Remote Compatign Puty Municipal Select County Refereation Dowby Kay Bourland 1. Type of Remote Date Dowby Kay Bourland Organizational Dowby Kay Bourland Organizational Dowby Kay Bourland Organizational Dowby Kay Bourland Organizational Dowby Kay Bourland Dowby Kay	Fig. 1, 45 had been made and the second	. Silve de di sue su c	information	ov 2021 st. i	a filo of the fact	and a	ty likely	ALAN DA UKSAL K	or a something with the complete	9 pr. e 11 - 22 (22
Committice to Elect Stephania Bourland 8. Naising Address (include City, State and 24) Code) 122 Avonue of Trocs 120, NC 27244 1210, NC 27244 122 Avonue of Trocs 123 Avonue of Trocs 124 Period End Date (emiddy3) 125 Avonue of Trocs 126 Avonue of Trocs 127 Avonue of Trocs 128 Avonue of Trocs 129 Avonue of Trocs 129 Avonue of Trocs 120 Avonue of Trocs	Notes to the Annual Agents was expected about the	mation		Personal and						
Modified Authors (Included City, State and Zip Code) RECEIVED G. Date Filed	a. Pun Name	· · · · · · · · · · · · · · · · · · ·	<u>.</u>	•					c. 1D Number	<u> </u>
122 Account Information 11. Account Information 15. Account Information 15. Account Information 15. Account Code 16. Purpose 16. Purpose 16. Account Code 16. Purpose 16. Pu	Committee to Elect	Stephanie	e Bourland				- = 1A	New York		
Figure Second S		-				RE	CEI	VED	d. Date Filed	
ALARIANCE COUNTY ROARD OF ELECTIONS 2. Report Year 3. Period Start Date (minddy) 2022 01/01/		S					0 v 64 A	መስ ማ ባ		
Report Year 3. Period Start Date (mm/od/yr) 4. Period End Date (mm/od/yr) 5. Treasurer Full Name 336-447-0195	Elon, NC 27244							01/30/23		
2. Report Year 3. Period Start Date (mm/dd/yy) 6. Type of Committee (Check One) 9. Type of Report (check only) one type of report from one category) Condidate Compaign Party Municipal Start/County Referendum Organizational Organ										
Condidate Campaign Party Municipal State/County Referredum Organizational Org									336-447-0195	i
Candidate Campaign	2. Report Year	3. Period	l Start Date (mm/c	ld/yy)	(mm/dd/yy) 5. 1 reasurer Fu				1.05	
Candidate Campaign	2022	2022 01/01/22			06/30/22 Dorthy Kay Bo			urland		
PAC Referendum Organizational Pre-referendum Pr						t (ci	reck onl	y one type of rep	ort from one category)	
Independent		iign	•	Munici						1
Expenditure			Referendum	Ш	Organizationa	ď		Organizational	Organizational	
Booster Pand"	Expenditure	ure Joint Fundraiser			Thirty-five da	lay Quarterly			Pre-referendum	
Building Fund	A A STATE OF A STATE O	*** · · · · · · · · · · · · · · · · · ·	ible, check one)		Pre-primary			First	Final	
Other: Semi-annual Semi-annual Special Special Special Semi-annual Semi-annual Semi-annual Semi-annual Year End Wid Year 10. Special Report Name Semi-annual Year End Special	Booster Fund"				Pre-election	ļ		Second	Supplemental Final	
Other:	Building Fund					ł		Third		
Vear End				N					Special	
8. Number of Fundraisers this Report Special Final Final Special Final Final Special Final Special Final Final Final Special Final	Cother:					- 1			10 C ID N	YMANGE BARKS
8. Number of Fundraisers this Report Special Final Special	Outer.					,	H		10. Special Report Na	me
Special Special Special Special Special Special Special Sp	8. Number of Funds	aisers th	is Report	Ħ			☐ F			
11. Account Information a. Financial Institution Full Name Bank of America b. Purpose c. Account Code b. Purpose c. Account Code c. Account		Λ			•	ľ	_			
a. Financial Institution Full Name Bank of America b. Purpose c. Account Code For all SEB campaign expenses d. Period Begin Balance \$ 162.24 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. Trinted Name of Signer FOR OFFICE USE ONLY Date Received: Date Postmarked: Employee: Delivery Method Normal Mail Registered Mail 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,	11 Account Informs	ation		Districts		11 Ac				34834, 858 <i>0</i>
Bank of America b. Purpose c. Account Code For all SEB campaign expenses d. Period Begin Balance \$ 162.24 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. Dorthy Bourtand	A SECTION AND ADDRESS OF THE ADDRESS		(Magaza) (Georgia Garaga)	<u> </u>			<u> </u>	2 1 7 2 2 1 1 1 1 1 2 1 1 1 1 1 1 1 1 1		
SEB campaign expenses d. Period Begin Balance \$ 162.24 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. Dor No Bolter Date	Bank of America	· · · · · · · · · · · · · · · · · · ·	·						***************************************	
campaign expenses d. Period Begin Balance \$ 162.24 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. Dorting Signature of Appointed Treasurer Date	b. Purpose	c. A	Account Code			b. Purpo	se		c. Account Code	
campaign expenses d. Period Begin Balance \$ 162.24 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. Dorthy Bourland	For all		· "							
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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.		d.]	d. Period Begin Balance						d. Period Begin Balance	
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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. Dor How Bow Down Dow	CEDTIEICATION									
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Please Note: This form cannot be used to amend committee information such as the committee address, treasurer,	the NC General Status	tes and th	at no funds are cor	nmingle	d with proh	ibited or	other ne	on-disclosed fund	B, & 22D-22M of Chapter 1 ls. I further certify that this r	63 of report
FOR OFFICE USE ONLY Date Received: 1.30.23 Employee: Delivery Method Normal Mail Date Postmarked: Employee: Registered Mail Date Scanned: 1.30.23 Employee: Employee: Employee: 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,			id that I have been	trained		: /·		<i>A</i>	1-21-17	ļ
Date Received: 1.30.23 Employee: Delivery Method Normal Mail Date Postmarked: Employee: Registered Mail Date Scanned: 1.30.23 Employee: Employee: 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,	. 10111		ame of Signer							[
Date Postmarked: Date Postmarked: Employee: Date Scanned: Date Scanned: Date Data Entered: Employee: Em	FOR OFFICE USE OF					Bridities OI	прроши	. Troubarer	Date	
Date Postmarked: Date Scanned: Date Scanned: Date Data Entered: Employee: Date Received:	1-	30.23		Employee:		W	- .			
Date Scanned: 1.30-23 Employee:	Date Postmarked	: <u> </u>]	Employee:			**************************************	Registered Mail	
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer,	Date Scanned:	1	30-23	Ì	Employee:	-	W	· · · · · · · · · · · · · · · · · · ·	Electronically Filed Signer has not rece	
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer,	Date Data Entere	d:]	Employee:			·	mandatory training	
	Please Note: This	form can	not be used to ame	nd com	mittee infor	mation s	uch as tl	ne committee add	ress, treasurer, assistant trea	surer,

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Amendment

Amendment \boxtimes No

Detailed SummaryUse this form to summarize all disclosure reporting forms and to total monetary information.

1. Committee Full Name (and Fund		Type of Report		3. ID Number
Committee to Elect Stephanie Bourlan	nd N	Iid Year		•
Start of Election Cycle: J	January 1,	2021	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start			\$ 162.24	\$ 0.00
REGERTS				
5) Aggregated Contributions from	m Individuals	(CRO-1205)	\$	\$
6) Contributions from Individual	<u>ls</u>	(CRO-1210)	\$	\$ 2155.00
7) Contributions from Political Page 1	arty Committees	(CRO-1220)	\$	\$ 100.00
8) Contributions from Other Poli	tical Committees	(CRO-1230)	\$	\$
9) Loan Proceeds		(CRO-1410)	\$	\$
10) Refunds/Reimbursements To t	he Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources				
11a) Interest on Bank Account	S	(CRO-1250)	\$	\$
11b) Contributions from Not-fo	or-Profit Organizations	(CRO-1250)	\$	\$
11c) Outside Sources of Income	e	(CRO-1250)	\$	\$
11d) Legal Expense Fund – Otl	her Sources	(CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sa	ales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5,	6, 7, 8, 9, 10, 11a, 11b, 11c, 1	ld and 11e)	\$ 0.00	\$ 2255.00
<u>idzohunidhadrius)</u>				
13) Disbursements				
13a) Operating Expenditures		(CRO-1310)	\$ 96.00	\$ 2083.76
13b) Contributions to Candidat	tes/Political Committee	s <i>(CRO-1310)</i>	\$	\$
13c) Coordinated Party Expend	ditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expend	ditures	(CRO-1315)	\$	\$
15) Loan Repayments		(CRO-1420)	\$	\$
16) Refunds/Reimbursements From	n the Committee	(CRO-1320)	\$	\$
17) In-Kind Contributions		(CRO-1510)	\$	\$ 105.00
18) TOTAL EXPENDITURES (Ada	l lines 13a, 13b, 13c, 14, 15, 10	5 and 17)	\$ 96.00	\$ 2188.76
19) Cash on Hand at End (Add lines 4	and 12 together, then subtrac	t line 18)	\$ 66.24	\$ 66.24
PÁNDIDI UN KOINVAN BAUNTRÓ IRAM PAMIN (Na area and area and area			
20) Non-Monetary Gifts Given to C	Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones f	rom 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 ((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		·		
Continuations to be Kelunded		(CRO-1215)	\$	\$

Disbursem Use this form to committees and	nents to report expenditures d coordinated party ex	s from the commit	tee for; operating ex	Pg penses,	$\frac{1}{2}$ of s, contributions to	2 Yes No candidate/political
1. Committee I	Full Name (and Fun	nd if applicable)				2. ID Number
	Elect Stephanie Bour					The second secon
3. Type of Dish Operating I	The second secon		CRO-1310 forms for andidates/Political Commit			
4. Payee Inform		COntributions to Car		itees		oordinated Party Expenditures
	mation iling Address & Phone		Add b. Coordinated Comm	44aa N	Remove	
(include city, state,			D. Cool uluaten Comme	Aittee	ame	d. Comments
Bank of Americ			-			
141 S. Main St			c. Level Registered (S			-
Graham, NC 2			Federal Federal	Para.	County:	-
			State	\boxtimes	Municipality:	e. Election Sum to Date

		· · · · · · · · · · · · · · · · · · ·				\$ 63.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyy	уу)	j. Amount	k. Required Remarks
SEB	Banktransfer	О	01/01/22		\$16.00	Bank fee
					\$	
4. Payee Inform	nation		Add		Remove	
	ling Address & Phone		b. Coordinated Comm	aittee Ne	Marie 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	d. Comments
(include city, state,	, & zip)					
Bank of Americ		1				
141 S. Main Str		1	c. Level Registered (Sp	pecify)		1
Graham, NC 27	7253	ı	Federal		County:	
		ı	State		Municipality:	e. Election Sum to Date
					· · ·	\$ 79.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyy	/ y)	j. Amount	k. Required Remarks
SEB	Banktransfer	0	02/01/22		\$16.00	Bank fee
					\$	
4. Payee Inform	ation		Add		Remove	
	ing Address & Phone	•	b. Coordinated Commi	ittee Na		d. Comments
(include city, state,			[
Bank of Ameria			(-		
141 S. Main Stre		1	c. Level Registered (Sp	recify)		
Graham, NC 27	/253	1	Federal		County:	
		 	State	Ш_	Municipality:	e. Election Sum to Date
			ĺ			\$ 95.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy	<u>y)</u>	j. Amount	k. Required Remarks
SEB	Banktransfer	0	03/01/22		\$16.00	Bank fee
and the second of the second	0 1 2 M 1 1 4 1 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>	-		\$	
5. Total only this						\$ 48.00
(This line goes in l (This line goes in l	CRO-1310 Pages line 13a of Detailed Summ line 13b of Detailed Summ line 13c of Detailed Summ	ımary Page CRO-1100 i	if Contrib to Candidates/			\$ 96.00
7. Purpose Code	es (List detailed expe	oenditure code in (h	h.) above)			
A* - Media E - Salaries I - Postage O* - Other	 Salaries F* - Equipment G - Political Postage J - Penalties K* - Office 			<u> </u>		er Candidate Public Office Expenses a to Legal Expense Fund
Contract of and	deranen exhianario	In tedanteries	marks Heid (k)	2018 <u>(1966)</u> 2	4 4 1 4 <u>4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4</u>	

Amendment

Disbursem	ients		Pg	2 of	2 Yes No
Use this form to committees and	report expenditures coordinated party e	s from the commit xpenditures.	tee for; operating expenses	, contributions to	
	Full Name (and Fu				2. ID Number
	Elect Stephanie Bour		CRO-1310 forms for each i	*** * *****	
3. Type of Dist					
Operating 1		ordinated Party Expenditures			
4. Payee Inform			Add	Remove	
	ling Address & Phone		b. Coordinated Committee N	ame	d. Comments
(include city, state Bank of Ameri			4		
141 S. Main St			c. Level Registered (Specify)		-
Graham, NC 2			Federal Federal	County:	-
Orangin, NC 2	1233		State	Municipality:	e. Election Sum to Date
			State	Municipanty.	e. Election Sum to Date
					\$ 111.00
£ Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
SEB	Banktransfer	0	04/01/22	\$16.00	Bank fee
,				\$	
4. Payee Inform	agtion		Add	Remove	
	ing Address & Phone	<u> </u>	b. Coordinated Committee N		d. Comments
(include city, state,	- .		Di Coordinated Committee 14	unic .	u. Comments
Bank of Americ			-		
141 S. Main Str			c. Level Registered (Specify)		-
Graham, NC 2			Federal	County:	ĺ
,		`	State	Municipality:	e. Election Sum to Date
					\$ 127.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
SEB	Banktransfer	О	05/01/22	\$16.00	Bank fee
		_		413.03	
				\$	
4. Payee Inform	nation		Add	Remove	
a. Full Name, Maili	ing Address & Phone		b. Coordinated Committee Na	ime	d. Comments
(include city, state,					
Bank of Ameria					1
141 S. Main Str			c. Level Registered (Specify)		
Graham, NC 27253			Federal	County:	
			State	Municipality:	e. Election Sum to Date
					\$ 143.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
SEB	Banktransfer	0	06/01/22	\$16.00	Bank fee
				\$	
			e san arta differentia di mangalang di V		f) 40.00
5. Total only thi	is Page CRO-1310 Pages	\$ 48.00			
	line 13a of Detailed Sum				
			ry Operaung Expenses) if Contrib to Candidates/Politica	al Camm)	\$ 96.00
		· -	if Coordinated Party Expenditus	· · · · · · · · · · · · · · · · · · ·	
	es (List detailed ex				
A* - Media	B* - Printing	C* - Fund	21 21 22 22 22 22 22 22 22 22 22 22 22 2	D - To Anothe	r Candidate
E - Salaries	F* - Equipment	G - Politic	al Party		Public Office Expenses
I - Postage	J - Penalties	K* - Offic	e Expenses	Q* - Donation	to Legal Expense Fund
O* - Other * Codes require	e detailed evnlanati	on in required re	morks field (1-)		

Amendment