Amendment

Disclosure Report Cover

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 In	iformation									Ş
a. Full Name						RECE	=1\/	_ 1 1	c. ID Number	
CARTER 4 AL					r					
b. Mailing Addre	ess (include Ci	ty, State and Zij	Code)			UCI 3	1 20	177	d. Date Filed	
2779 S. CHUR BURLINGTON	•	E 331			ALA	AMANCI	E COL	JNTY	10/31/2022	
	.,				BOA	RD OF	ELEC:	TIONS	e. Phone Number	_
									(336) 213-2056	
2. Report Year	3. Period Star	t Date (mm/dd/y	(y)	4. Period	End Da	ite (mm/c	ld/yy)	5. Treasu	irer Full Name	. :
2022	07	7/01/2022		10/22/2022 REBE			REBEKA	AH W LOY		
6. Type of Comm)ne)		e of Repor	t (c	heck on	ly one	type of re	port from one category)	
Candidate Can		•	Munic			State/C			Referendum	
Joint Fundrais				Organizatio		Orga		nal	Organizational	
Referendum		gal Expense Fund		Thirty-five			rterly		Pre-referendum	
7. Type of Fund	(大学の大学を表現していません。	le, check one) 😁		Pre-primar	•		First		Final	
Booster Fund	l"			Pre-election	a		Second		Supplemental Final	
Building Fund		111 / 101 1		Pre-runoff	•		Third		Annual	
	lection Year Can		_	Semi-annua	_		Fourth		Special	
☐ NC Public Can	npaign Financing	gruna	브	Mid Ye			i-annua		unumin liberari milimus e un percent en la reconstruction e	
Other				Year E	na		Mid Ye		10. Special Report Nam	e
Other:				Final			Year Ei	nd		
8, Number of Fu	indraisers this	Report		Special		☐ Fina				i
	0					□ Spec	ial			
3. Account Infor	mation		A STATE OF THE STA		3. Acc	ount Inf	ormati	on		Š
a. Financial Insti	CONTRACTOR CONTRACTOR CONTRACTOR	me	er confirmed from	K. 31111156 (DATELLE				n Full Na	me	-
FIRST BANK										
b. Purpose		c. Account Cod	e		b. Pur	pose			c. Account Code	1
CAMPAIGN		1								
		d. Period Begin	ce .				d. Period Begin Balance			
		s		0,104.60	04.60				\$	
CERTIFICATIO	N								<u></u>	۲
I certify that the Chapter 163 of funds. I further Rebel	he Committee of f the NC Gener	al Statutes and his report is cor	that no	funds are true and co	commin orrect a bak	ngled wi	th prol I have)	hibited or been train	22A, 22B & 22D-22M of other non-disclosed and by the NC State Board 10/31/2022 Date	
FOR OFFICE US	SEONLY							•		٦
Date Receive	ed: <u>/</u>	0/31/22	_	Employ	yee: _	M		<u>De</u>	elivery Method Normal Mail	
Date Postma	rked:		_	Employ	yee: _			- <u>-</u>	Registered Mail Hand Delivered	
Date Scanne	d:		_	Employ	yee: _	•			Electronically Filed	
Date Data Er	ntered:		_	Emplo	yee: _				Signer has not received mandatory training	
Please Note		annot be used t							nittee address, treasurer,	1
Y		d the Statement								

Amendment ☐ Yes 🗶 No

Detailed Summary
Use this form to summarize all disclosure reporting forms and to total monetary information

	2. Type of Re	port	3. 1	D Number
CARTER 4 ALAMANCE	2022 Third (Quarter		
Start of Election Cycle: January 1,2021		1	otal this rting Period	Total this Election Cycle
4) Cash on Hand at Start	_	\$	20,104.60	\$ 557.86
<u>RECEIPTS</u>	MATE - 18 (Mar. 1901) 1 (Mar. 1904) 1 (10) 1 (10) 1 (10) 1 (10) 1 (10) 1 (10) 1 (10) 1 (10)			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	175.00	\$ 1,155.00
6) Contributions from Individuals	(CRO-1210)	\$	1,659.00	\$ 28,764.00
7) Contributions from Political Party Committees	(CRO-1220)	\$	300.00	\$ 300.00
8) Contributions from Other Political Committees	(CRO-1230)	\$	0.00	\$ 850.00
9) Loan Proceeds	(CRO-1410)	\$	0.00	\$ 5,000.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	0.00	\$ 32.94
(1) 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)	\$	2,134.00	\$ 36,101.94
EXPENDITURES			, . <u>.</u> .	
(3) Disbursements				
13a) Operating Expenditures	(CRO-1310)	\$	9,851.21	\$ 22,526.92
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)	\$	0.00	\$ 295,49
15) Loan Repayments	(CRO-1420)	\$	0.00	\$ 0.00
(6) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	0.00	\$ 0.00
17) In-Kind Contributions	(CRO-1510)	\$	0.00	\$ 1,450.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,	. 16 and 17)	\$	9,851.21	\$ 24,272.41
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$	12,387.39	\$ 12,387.39
ADDITIONAL INFORMATION	ere i percenta a la constanta de la constanta			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	5,000.00	
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

Aggrega	nted Contrik	outions from I	ndividuals Page	. <u>1</u> of _	1_	Amendme Yes	nt 🛛 No
Optional for	rm used to repor	t NC Contributions	From Individuals of \$	550 or less			
1. Committe	e Full Name (and	Fund if applicable)			2, ID I	Number	
CARTER 4	ALAMANCE						
3. Contribut	or Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)		f. Amount	
Add Remove	1	Cash		09/01/202	22	\$	50.00
Add Remove	1	Cash		. 09/01/202	22	\$	50.00
Add Remove	1	Cash		08/25/202	22	\$	25.00
Add Remove	1	Cash		08/25/202	22	\$	25.00
Add Remove	1	Check		10/02/202	22	\$	25.00
	ly this Page				\$		\$175.00
	ALL CRO-12 oust be on line 5 of D	05 Pages etailed Summary Page	CRO-1100)		\$		\$175.00
CRO-1205		N	C State Board of Elections				April 2007

Contributions from Individuals 1 Yes 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 **CARTER 4 ALAMANCE** 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) NOT EMPLOYED DALE AARON c. Employer's Name/Specific Field **1013 EDITH STREET** BURLINGTON, NC 27215 NOT EMPLOYED e. Election Sum to Date 300.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check 10/12/2022 \$ 200.00 \$ \$ 🗖 Add 🔲 Remove 3. Contributor Information a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) OWNER **RUSTY COX** c. Employer's Name/Specific Field 604 GRAYROCK RD WHITSETT, NC 27377 COX TOYOTA e. Election Sum to Date 734.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check -09/06/2022 \$ 584.00 1 \$ \$ 3. Contributor Information ☐ Add ☐ Remove b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) SALES LEE ISLEY c. Employer's Name/Specific Field 8173 COBLE MILL RD SNOW CAMP, NC 27349 LAMAR ADVERTISING 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 Check 44 09/21/2022 \$ 100.00 \$ 4. Total only this Page 884.00 \$ 5. Total of ALL CRO-1210 Pages \$

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Amendment

Con	tributions fr	om Individual	S		Pg	2	of 2		Amendmei Yes	nt X No	
Use thi	s form to report ir	ndividual contribution	s over \$50 or c	ontributions	unde			1205	is not used	. 7	
1Com	mittee Full Name	(and Fund if applicab	ile)	5 (\$ 14)			Andrew State	2.	ID Number		
CART	ER 4 ALAMANO	CE							•		
3. Cont	ributor Informat	ion		Add 🔲	Remo)ve					
	Name, Mailing Ad			b. Job Title		State Service Contraction Contraction	ALSO MANEE ALSO SERVICIONE MONTONE	d. Comments			
(incl	ude city, state, & z	ip)		OWNER							
WILLI	IAM J LENNON							↓			
	POND ROAD			c. Employer	r's Na	me/Sp	ecific Field	-			
BURL	INGTON, NC 2	7215		COX CHR	RYSL	ER-D	ODGE	e. Election Sum to Date			
									erection Sun		
								\$		700.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j.	Date	(mm/dd/yyyy)	k. Amount		
	1	Check				0	9/30/2022		\$	700.00	
		i							\$		
								•	\$		
3. Cont	ributor Informati	on:		Add 🔲	Remo	ve					
a. Full !	Name, Mailing Ad	dress & Phone	n in make stille transfer i sligen he kind og fred til sligen fra stille stille stille stille stille stille st	b. Job Title/Profession					d. Comments		
(inclu	ide city, state, & z	ip)		NOT EMP	LOY	ED					
	ENE REID										
	OUNBAR PLACE			c. Employer			ecific Field	-			
BURL	INGTON, NC 27	7215		NOT EMP	PLOY	ΈD		<u> </u>	ection Sum	to Date	
								—	action bun		
		•		<u></u>				\$		175.00	
f. Prior	_	h. Form of Payment	i. In-Kind Des	cription	j.	Date (mm/dd/yyyy	<u> </u>	k. Amount		
	1	Check				0	8/25/2022		\$	75.00	
									\$		
									\$		
4. Tot	al only this Pa	ge	(Mariantes)				agint all agint as a significant of the significant	\$		775.00	
	al of ALL CR	O-1210 Pages 6 of Detailed Summary 1	Page CRO-1100)					\$		1,659.00	

NC State Board of Elections

CRO-1210

April 2007

Contribution	ons from Politi	cal Party Committee	S Pg 1 of	1	Amendme Yes	ent Mo
		s from a political party	- —		Conservation of the conser	
1. Committee Fu	Il Name (and Fund if a	ipplicable)		2. ID	Number	
CARTER 4 ALA	AMANCE					
3. Contributor Ir	oformation .	□ Add □	Remove		2.7%(and the second s
a. Full Name, Ma (include city, s	iling Address & Phone tate, & zip)			b. Cor	nments	
ALAMANCE R 4220 CHIPPEN GRAHAM, NC		EN		c. Elec	tion Sum t	o Date
			•	\$		300.00
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/de	l/yyyy)	h. Amoun	t
1	Check		08/29/20	22	\$	300.00
					\$	
					\$	
4. Total only t	this Page			\$	•	300.00
	L CRO-1220 Pag e on line 7 of Detailed Su	es Immary Page CRO-1100)		\$		300.00
CRO-1220		NC State Board of Elec	ions			April 2007

•

Disbursements	Pg	<u>·1</u>	of
	_		

				Amendment					
g	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

1. Committee Fi	ill Name (and Fund	if applicable)			W\$Y			2. ID N	umber
CARTER 4 AL	AWANCE								
3. Type of Disbu	irsement <u>(Please</u>	use separate CRO	<i>)-1310</i>	forms for eac	h ty				
X Operating Exp	enses Cont	ributions to Candidat	tes/Polit	ical Committees			ordinat	ed Party	Expenditures
4. Payee Inform	And independent of the Standard Constitution of the standard o			Add 🔲	1 1 1 1 1	move		Vive of the Control o	
	ailing Address & Ph	one		b. Coordinate	d C	ommittee N	ame	d. Com	ments
(include city, sta									
COX'S ADVER				c. Level Regis	tere	d (Specify)		ł	
3860 DANBRO BURLINGTON				Federal		County	 :	ł	
BUKLINGTON	1, NC 2/213			☐ State				e. Elect	ion Sum to Date
								\$	1,750.0
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. /	Amount	k. Re	quired I	Remarks
1	Check	A	10)/10/2022	\$	1,750.00	BILI	LBOAR	D
****					\$		AD\	ERTIS	ING
				alionero e i i deco	<u> </u>		ese was		ACTOR DESIGNATION AND AND AND AND AND AND AND AND AND AN
4: Payee Inform	atton ailing Address & Pho			Add	garage and a	move	0 m A	d. Com	mants
a. rull Name, Ma (include city, sta	-	one		b. Cooldinate	u C	ominittee 14	a iii C	u. Com	ments
DISCOVER	ie, œ zipj								
PO BOX 6103				c. Level Regis	tere	d (Specify)			
CAROL STREAM, IL 60197				Federal County:					
	·			State		■ Municip	ality:	e. Electi	ion Sum to Date
								\$	4,434.10
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Re	quired F	Remarks
1	Check	0	09	0/19/2022	\$	2,400.00	PAY	OFF D	ISCOVER
1	Check	0	10)/18/2022	\$	68.18	PAY	OFF D	ISCOVER
4. Payee Inform	ation	report of the state of the stat		Add	Re	move			
	niling Address & Pho	one	242-1412 Pr	b. Coordinate		(3.1, 50.00 600, 119.0000)	tm e	d. Com	ments
(include city, sta	_					•			
DISCOVER									
PO BOX 6103			į	c. Level Regis	tere				
CAROL STREA	AM, IL 60197			State		County:		e Flecti	ion Sum to Date
				<u> </u>		- Marion	unry.		
								\$	4,434.10
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Re	quired F	temarks
1	Check	О	10	/18/2022	\$	1,800.00	PAY	OFF D	ISCOVER
					\$				
5. Total only this	s Page		i (M) El Yester					\$	6,018.18
6. Total of ALL	CRO-1310 Pages		17. C. C.		in a service of				
and the state of the second second second second	n line 13a of Detailed S	Summary Page CRO-	-1100 if	Operating Expe	nses	9 (19 19 19 19 19 19 19 19 19 19 19 19 19 1	Profession (1994)	e.	0.951.0
	n line 13b of Detailed S		_				omm)	\$	9,851.21
(This line goes ii	n line 13c of Detailed S	ummary Page CRO-	1100 if	Coordinated Pa	rty E	expenditures)			
7. Purpose Co	des (List detailed	expenditure code	in (h.) a	ibove)		en de la company			
A* - Media	B* - Printin	•		undraising				ner Cano	
E - Salaries	F* - Equipme			itical Party			_		Office Expenses
I - Postage	J - Penaltie	s	K* - O	ffice Expenses	3	Q* - D	onatio	n to Leg	gal Expense Fun
O* Other * Codes remire	detailed explanatio	n in remited to	gybe fi	eld (lz)	1920		yan eti		Ludi (Satisa ila
SOUTS TEGULFE	~neranca exhianano	u un reduiten Lein	ai KS II	cia(k)	$\langle i_{i}^{\mu\nu} i_{j}^{\nu} i_{j}^{\nu} \rangle$		en ski	ar va ye indî	perengan kan dari

Disbursen	nents				Ps	g 2 of		_	endment Yes D	No.
Use this form to	report expenditures	from the committ	ee for o	perating expen	_		_	2 (2 (2)) (2) (2)	and the state of the state of	2 20 20 20 20 2
committees and	coordinated party e	xpenditures		-						
1. Committee F	ull Name (and Fund	if applicable)	TVO (E)		700).			2. ID N	umber	
CARTER 4 AL	AMANCE									
3. Type of Disbu	irsement <u>(Please</u>	use separate CR(<i>)-1310</i>	forms for eac	h ty	pe of Disbu	rseme	ent.)		
Operating Ex	penses	ributions to Candida	es/Polit	ical Committees		Coo	ordinat	ed Party I	Expenditur	es
4. Payee Inform	ation			24 March 1985 1884 1884	Section .	emove		N. Grande S.		
a. Full Name, M	ailing Address & Ph	one		b. Coordinate	d C	ommittee N	ame	d. Comr	nents	
(include city, sta	te, & zip)			1						
UPS STORE				a Laval Dogia	40.00	od (Cun at fur)		_		
2779 S. CHUR				c. Level Regis Federal	ter	County:		4		
BURLINGTON	N, NC 27215			State	Municip		e. Electi	on Sum t	o Date	
								\$		901.33
f Assount Code	g. Form of Payment	h Purnosa Coda	li Doto	(mm /dd/sysyan)	l:	1	l De	quired R	om arles	701.55
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					\$					
4. Payee Inform	ation			Add 🔲	Re	move				
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(include city, sta	te, & zip)									
VANS ADVER				. 7. 150	,	170 70 7	·			
2954 ELDER L				c. Level Regis Federal	tere	County:		1		
BURLINGTON	I, NC 2/215			State		Municip		e. Flecti	on Sum to	o Date
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		h. Purpose Code				·		quired R		
1	Check	0	09	9/14/2022	\$	269.65	VOL	UNTEE	R T SHII	RTS
1	Check	0	10)/10/2022	\$	3,374.38	SHIE	RTS, MA	GNETS,	YARD
and the finite field of the first party of the first property of t			E-7-200 E-20	may that a setted as a second	4, 12, 12, 14		SIG	VS.		
5. Total only thi	s Page	are appear to the residence of the second	523 M	GV-5 com signific		8 8 10 2 10 10 10	Part of the	\$	3,	833.03
6. Total of ALL	CRO-1310 Pages									
(This line goes i	n line 13a of Detailed S	Summary Page CRO-	1100 if	Operating Expe	nses))	Dest feet a	\$	0	851.21
	n line 13b of Detailed S n line 13c of Detailed S						omm)	Ψ	,	,051.21
7. Purpose Co	odes (Eist detailed	expenditure code	in (h.)	above)	(F.)		Talifa iku ula Salifa katuat			
A* - Media	B* - Printin	14004 100 100 100 100 100 100 100 100 10	10 100 to \$1.55 to	undraising		D - To	Anotl	ner Cand	idate	
E - Salaries	F* - Equipmo	ent		litical Party					Office Ex	penses
I - Postage	J - Penaltie	S	K* - O	ffice Expenses	3	Q* - De	onatic	n to Leg	al Expens	se Fund
O* Other		anggan gawa garang wasan wasan sa		gingi Roda Sirrii () ainirria	engen er	ray ne kengalary ng ng merata k	cue turane	ggagagagaga a sa	0,40,000,000	respective of act
	e detailed explanatio					MA (2.186,376,397)	es day	ja investiĝi.		1 6000
CRO-1310		NC Si	ate Boa	rd of Elections					Decen	iber 2009

Debts and Obligat	tions Owed By	the Cor	mmittee Pg	1	of _		es 🗓 No	
Use this form to report any			by the committee, to	inclu	ide can	<u> </u>		ases.
1. Committee Full Name (a CARTER 4 ALAMANCE		<u>verances encount</u>		388757	X8100 23	2. ID Nur	nber	
CARTER 4 ALAWANCE								
3. Creditor Information			Add 🔲 Rem	ove	2000 2000 <u>100</u>			
a. Full Name, Mailing Addre			Note: All paymen					
(include city, state, & zip) DISCOVER			form CRO-131			yee listed a	s this credito	r.
PO BOX 6103			b. Description of Cr DISCOVER CC USED			GN EXPENSI	ES	
CAROL STREAM, IL 60197			B.000 / E.1 C I I I I			OI , L		
c. Beginning Balance	d. Total Amount Paid	i	e. Total Amount Inc	urred	l	f. Remain	ing Balance	
\$ 0.00	0 \$	68.18	\$		68.18	\$		0.00
g. Incurred Debts (what the c		-				· · · · · · · · · · · · · · · · · · ·		
gl. Purchase Place Full Nam	ie, Mailing Address & P	hone	g2. Date (mm/dd/yy)	yy)	g3. Ar	nount		
(include city, state, & zip) CICIS PIZZA			10/18/2022		\$		6	8.18
3356 S. CHURCH ST			g4. Purpose Code	g5	. Requi	red Remark	s	
BURLINGTON, NC 27215	URLINGTON, NC 27213					R VOLUNTEE		
g1. Purchase Place Full Nam	ie, Mailing Address & Pl	hone	g2. Date (mm/dd/yy	yy)	g3. Aı	nount		
(include city, state, & zip) LAMAR ADVERTISING			10/18/2022		\$		1,80	0.00
105-A EAST JJ DRIVE			g4. Purpose Code	g5	. Regui	red Remark	S	
27215			A			RD ADVERTIS		
g1. Purchase Place Full Nam	e, Mailing Address & Pl	hone	g2. Date (mm/dd/yyy	yy)	g3. Ar	nount		
(include city, state, & zip)	· · · · · · · · · · · · · · · · · · ·		10/19/2022		\$		2,40	0.00
LAMAR ADVERTISING 105-A EAST JJ DRIVE				ے ا				
27215			g4. Purpose Code		g5. Required Remarks BILLBOARD ADVERTISE			
	<u> </u>		A					
g1. Purchase Place Full Nam	e, Mailing Address & Pl	hone	g2. Date (mm/dd/yyy	yy)	g3. An	mount		
(include city, state, & zip)			4		\$			
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5. Total of ALL CRO- (This line must be on line 22		Page CRO-1	(100)		\$		(0.00
6. Pupose Codes (List	- Description and Description of the August State of the Company o	sanga angana angana	CONCRETE TENENT CONTRACTOR TO THE SALE OF THE	Mariana Mariana				
	* - Printing		undraising	D	- To Ar	other Cand	idate	<u> </u>
	* - Equipment		litical Party				Office Expen	ises
2	- Penalties		ffice Expenses	O,	* - Oth	er		
 Codes require detailed exp 	Jianation in required rer	marks field ((g5.)					

Amendment

Outsta	nding Loans		Pg _	1 of 1	Amendm Yes	ent No		
Use this fo	rm to report any outstanding loans re	eceived dur	ing a previou	s reporting period	l and until the	loan is paid in full.		
	tee Full Name (and Fund if applicable	•)			2, ID Numbe	r		
CARTER	4 ALAMANCE							
3. Lender	Information	☐ Ad	d 🔲 Remo	ve				
	ie, Mailing Address & Phone	b. J	ob Title/Profe	ssion	d. Comment	d. Comments		
			NKER					
STEVE C 3312 DOI		İ		e. Start Date	(mm/dd/yyyy)			
	GTON, NC 27215	c. E	mployer's Na	me/Specific Field		30/2021		
		NO	OT EMPLOY	4 5 15 7				
					f. End Date (1	mm/dd/yyyy)		
g. Rate	h. Security Pledged		i. Original L	oan Amount	j. Remaining	g Loan Balance		
%			\$	5,000.00	\$	5,000.00		
k, Full Nan	ne of Lending Institution				l. Loan Num	ber		
4. Total	only this Page	Syria in the			\$	5,000.00		
5. Total o	of ALL:CRO-1430 Pages must be on line 21 of Detailed Summary 1	Page CRO-11	00)		\$	5,000.00		

NC State Board of Elections

CRO-1430

December 2007