T .	•	T	\sim
Disc	losure	Report	Cover

Amendme	ent	
□ 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.

	THE RESERVE TO BE SHOULD BE SHOULD SEE THE SECOND S	te information.							
1. Committee In	ıformation								
a. Full Name									c. ID Number
		ECT CARISSA (RI	EC	EIVE	D	
	ess (include Ci	ity, State and Zip	p Code))					d. Date Filed
PO BOX 194 HAW RIVER,	NC 27258						2 5 2024		09/25/2024
					ALAN	IANC	CE COUN	ITY	e. Phone Number
							ELECTION		(336) 213-9745
2. Report Year	3. Period Sta	rt Date (mm/dd/y	уу)	4. Period	End Da	te (w	ım/dd/yy)	5. Treasur	rer Full Name
2024		01/01/2024		1	02/17/2				GRAVES
6. Type of Comn				pe of Repor	t (c)				ort from one category)
X Candidate Can			Munic				e/County		Referendum
Joint Fundraise	_		旧	Organizatio		_	Organizatio	onal	Organizational
Referendum		egal Expense Fund	-	Thirty-five		<u> </u>	Quarterly		Pre-referendum
7. Type of Fund "Booster Fund	THE RELATION OF THE PARTY OF TH	ble, check one)	<u> </u>	Pre-primary	-		First		Final
		1		Pre-election		H	Second	i	Supplemental Final
☐ Building Fund ☐ Presidential Fl	Voor Cor	the transferred		Pre-runoff	10000	H	Third		Annual
	lection Year Can		_	Semi-annua		Ш,	Fourth		☐ Special
☐ NC Public Carr	npaign Financing	g Funa		Mid Ye		_ `	Semi-annua Mid V		
Other:		1	ll l	Year Er	nd	님	Mid Yo		10. Special Report Name
		Description of the second		Final Special	1	!	Year E	nd	
8. Number of Fu		s Report	,LJ	Special	1	=	Final		
	0	1	i		J	L	Special		
3. Account Infor	mation				3. Acc	ount	Informat	ion	
a. Financial Insti		ım e	Related	ALL CALLS OF THE PARTY.		Victorian Contract to All	The state of the s	on Full Nam	e
TRULIANT FE			**************************************						
b. Purpose		c. Account Code	e		b. Purp	ose	377		c. Account Code
FOR CAMPAIC	7N	1	01						
DONATIONS	fin in) I		1				
		d. Period Begin	Balan	ce	1				d. Period Begin Balance
		S		0.00	ĺ				S
				0,00					3
Chapter 163 of funds. I furthe	the Committee of the NC Generer certify that the certification in the c	ral Statutes and t	that no	funds are true and co	commin	ngled nd th	with propagation of the state o	hibited or o	2A, 22B & 22D-22M of ther non-disclosed of by the NC State Board 09/25/2024 Date
FOR OFFICE US	EONLY	1 1 1				_			
Date Receive	d: <u>9</u>	1/25/24		Employ	yee: _	1841	<u> </u>		ivery Method Normal Mail
Date Postmar	ked:		4	Employ	/ee: _		N	- ⊠ 0	Registered Mail Hand Delivered
Date Scanned	l:			Employ	/ee: _	Quel s	CANADA A	_	Electronically Filed
Date Data Ent	tered:		_	Employ	/ee: _	12			Signer has not received mandatory training
	assistan	annot be used to nt treasurer, cust d the Statement o	todian (of books in	nformati	ion, c	or accoun	t informatio	

CRO-1000

NC State Board of Elections

December 2007

Detailed Summary

Amendment

Detailed Summary	14-4-4-1		£		Yes 🔀 No
Use this form to summarize all disclosure reporting forms a 1. Committee Full Name (and Fund if applicable)	2. Type of Re			ID N	umber
THE COMMITTEE TO ELECT CARISSA GRAVES	2024 First Q				
Start of Election Cycle: January 1, 2023		ſ	otal this		Total this Election Cycle
4) Cash on Hand at Start		\$	0.00		0.00
RECEIPTS				<u> </u>	
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	21.00	\$	21.00
6) Contributions from Individuals	(CRO-1210)	\$	600.00	\$	600.00
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)	\$	550.00	\$	550.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	0.00	+	0.00
11) Other Receipt Sources			3.30		
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)	·	\$	1,171.00	+	1,171.00
EXPENDITURES			1,171.00		1,111.00
[3) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	907.05	\$	907.05
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)	\$	18.87		18.87
15) Loan Repayments	(CRO-1420)	\$	0.00	1	0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	0.00	+	0.00
17) In-Kind Contributions	(CRO-1510)	\$	0.00	 	0.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15	5, 16 and 17)	\$	925.92	\$	925.92
19) Cash on Hand at End (Add lines 4 and 12 together, then su		\$	245.08	\$	245.08
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	550.00		Exists and one of the second statement
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
CRO-1100 NC State Boar	a of Elections				August 2008

Aggrega	nted Contrib	outions from I	ndividuals _{Page}		1	Amendme Yes	nt X No
Optional fo	rm used to repor	t NC Contributions	From Individuals of \$	50 or less			
1. Committe	e Full Name (and	Fund if applicable)			2. ID 1	Yumber	
THE COM	MITTEE TO ELE	CT CARISSA GRA	VES				
3: Contribut	or Information	tar it is a second					40.75
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd	/уууу)	f. Amount	
☐ Add ☐ Remove	01	Credit Card		01/17/202	24	\$	10.00
Add Remove	01	Debit Card		02/17/202	24	\$	10.00
Add Remove	01	Debit Card		01/06/202	24	\$	1.00
4. Total or	ıly this Page			-	\$		\$21.00
	ALL CRO-12 ust be on line 5 of D	05 Pages etailed Summary Page	CRO-1100)		\$		\$21.00
CRO-1205		N	C State Board of Elections				April 2007

_								Amendmei	nt
Cont	ributions fr	om Individual	S	P	g <u>l</u>	of <u>1</u>	_	☐ Yes	No No
Use this	s form to report in	idividual contribution	s over \$50 or co	ontributions ı	inder \$50	if form CRO	1205	is not used	
1. Com	mittee Full Name	(and Fund if applicat	de)	Marie 14	76 kg () 2 kg ()		2.	ID Number	
THE C	OMMITTEE TO	ELECT CARISSA (GRAVES						
3. Cont	ributor Informati	ОП		Add 🔲 R	emove.	A ASSESS		Wind Holiv	ya sana
a. Full l	lame, Mailing Ad	dress & Phone	b. Job Title/I	Profession		đ. (Comments		
(inclu	ide city, state, & z	ip)		RETIRED A	ND REA	L ESTATE			
	NDA BLOUNT								
	ICTORIA CT			c. Employer'		ecitic Field	-		
	NC 27244			STATE OF	NC			Dection Sun	to Dota
(336) 2	63-6661						-	ACCION SUB	I to Date
							\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date ((mm/dd/yyyy)		k. Amount	
	01	Credit Card			0	1/23/2024		\$	100.00
								\$	
								\$	
3. Cont	ibutor Informati	on		Add □ R	emove				en vale
a. Full N	ame, Mailing Add			b. Job Title/P	b Title/Profession			Comments	
(inclu	đe city, state, & z	ip)		RETIRED					
	E E GRAVES								
	OLUMBUS AVI			c. Employer's Name/Specific Field					
	APEAKE, VA 23	3323		RETIRED NAVSHIP			e. Election Sum to Date		
(737)4	77-2862			NEWPORT	NEW 5			acciron Sun	
							\$		500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
	01	Debit Card			0	1/09/2024		\$	500.00
								\$	
								\$	
4. Tota	il only this Pa	ge 💮					\$		600.00
5. Tota	il of ALL CRO		Page CRO-1100)				\$		600.00

CRO-1210

NC State Board of Elections

April 2007

Loan F	Proceeds		Pg <u>1</u>	of <u>2</u>	Amend Yes		
	orm to report proceeds from a loan an						
	ceeds statement must accompany ea		n an individu:	al			
1. Commit	tee Full Name (and Fund if applicabl	ė)			2. ID Num	per	
	MMITTEE TO ELECT CARISSA G						
2500 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Information 宁	CO	Remove				
a. Full Nan	ne, Mailing Address & Phone	b. Job Titl	e/Profession		d. Commen	ts	
(include	city, state, & zip)	TAX AC	COUNTANT	-			
	GRAVES RAWAY DRIVE				e. Start Dat	e (mm/dd/yyyy)	
1	4, NC 27253	c. Employ	r's Name/Spe	cific Field	01/	18/2024	
(336) 213-	•	DE TAX	AND ACCO	UNTING	1	10/2021	
[()			111211000	0111110	f. End Date (mm/dd/yyyy)		
<u> </u>							
g. Rate	h. Security Pledged	i. Account Code	j. Form of Pa	yment	k. Amount		
%		01	С	heck	\$	250.00	
I. Full Nam	e of Lending Institution	•	•		m. Loan Number		
4. Endorse	rs/Makers (The people who guarantee i	he loan)					
a. Full Nam	e, Mailing Address & Phone	b. Job Title	e/Profession	c. Employ	er's Name/S	pecific Field	
(include	city, state, & zip)						
		d. Percent	age	e. Amoun	t		
			9,	6 \$			
The Secretary Control of the Control	of ALL CRO-1410 Pages : must be on line 9 of Detailed Summary Pa	iee CRO-1100) = 3			\$	550.00	
CRO-1410	Annual Control of the	C State Board of Elec	tions	a marie de la companya de la company		April 2007	

								Amendn	ient	
Loan I	Proceeds			Pg _	2	of2	<u>2</u>	☐ Yes	№ No	
Use this fo	orm to report proceeds from a loan	and loan	endorser's i	nform	ation			The state of the s		
	ceeds statement must accompany					al				
1. Commi	tee Full Name (and Fund if applic	able)		1 .Twee	1.5		2.	ID Numb	r spanis	
THE COM	MMITTEE TO ELECT CARISSA	GRAVES	3							
3. Lênder	Information		Add √□	Rémo)ve			toring of the second	建工程的数据	
	ae, Mailing Address & Phone		b. Job Titl	e/Prof	ession		đ,	Comment	S	
(include	city, state, & zip)		TAX AC	COUN	NAT	Τ	ı			
CARISSA	GRAVES						<u> </u>		77 1997 19	
	RAWAY DRIVE		T2 1	1 - NT -	10-	ecific Field	e. 1		(mm/dd/yyyy)	
GRAHAM, NC 27253					<u>-</u> _			02/0	2/2024	
(336) 213-9745			DE TAX	AND	ACCC	DUNTING	f. F	f. End Date (mm/dd/yyyy)		
									33337	
g. Rate	h. Security Pledged	i. Acc	ount Code	j. For	m of P	ayment		k. Amou	nt	
%			01		C	Check		\$	300.00	
l. Full Nam	e of Lending Institution					****	m.	Loan Nun	nber	
21-512-55-13-	STATES OF THE ST	elore ilee	18568 35063	্য ক্র	Lokis-sii	Para Tabilanda	(#) 4×4;	etti takkee		
to the second of the second	rs/Makers (The people who guaran	iee ine ioun.	b. Job Title	<u> </u>	Circa Lady (17 Self-circ co.	Y Zatrayes		No-off	ecific Field	
	ne, Mailing Address & Phone city, state, & zip)		D. 100 1111	e/Prote		c. Empre	yers	- Маше/ор	eciale Field	
Theraue	city, state, & zip)		4							
			d. Percent	age		e. Amou	ınt			
						% s				
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	of ALL CRO-1410 Pages .						s		550.00	
(This line	must be on line 9 of Detailed Summar	y Page CRO	-1100)		222					

NC State Board of Elections

CRO-1410

April 2007

Disbursen	nents				Pg	1_ of	_1	Amer	idment	X No
Use this form to	report expenditures		ee for o	perating exper	_	•	ons to			
	coordinated party ex		one e prografia	er i skular likuri kilongyytt	· · · · · · · · · · · · · · · · · · ·	e Banda de Garago de La Carta de Carta	referrings	A TTY AL	್ಕ್(ಭಿಲ್ತ ್	Presentation, ag
	ull Name (and Fund i					<u>Venture</u>		2. ID Nu	nber	
THE COMMIT	TTEE TO ELECT C.	ARISSA GKA v e	S							
3. Type of Disbi	ursement <i>(Please</i>	use separate CR()- <u>1310</u>	förms for eacl	h tyj	e of Disbu	rsemê	nt.)	5-4-4 P*/4 5-4-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5-	
Operating Exp		ributions to Candidat	es/Polit	ical Committees				ed Party Ex	cpenditu	res
4. Payee Inform		新 的原理是现在是		Add □		2 1 10 24 1			*>	
•	ailing Address & Pho	one		b. Coordinate	d Co	mmittee Na	ıme	d. Comm	ents	
(include city, sta										
	FERS MN PHOTOG	rRAPHY	I	c. Level Regist	tere	d (Snecify)	\dashv			I
SPRING STRE			I	Federal		County:		ĺ		
(336) 693-5292	•		I	State		Municip		e. Election	n Sum	to Date
(000) 000 020			ļ					\$		157.05
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Re	quired Re	marks	
01	Debit Card	AB	1		\$	157.05	CAM	PAIGN I	PICTU.	RES
					\$		 I			
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	ailing Address & Pho		is, to say of the say	b. Coordinated	*14. 0 -1- cs .	A C. Market C. Linguista Co. C. Colones		d. Comm	en ts	ALTERNATION AND ADDRESS OF THE PARTY OF THE
(include city, sta	_							·		
MICAH WHIT										
132 STEAMBO			ļ	c. Level Regist	tere	d (Specify) County:				
BURLINGTON			ļ	Federal State		☐ County:	_ L	e. Hection	Sum !	to Date
(757) 266-0102			ŀ	LI Grand		Arabaar eng		\$		500.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Red	quired Re	marks	
01	Check	Е	1	1/19/2024	\$	250.00			***************************************	,
01	Check	0	-	2/03/2024	\$		CAM	IPAIGN N	MANA	GER
4. Payee Inform			<u> </u>	No to the contract of the cont	1	nove			7. 7.	0
	ailing Address & Pho			b. Coordinated			m e	d. Comme	ents	
a. 1 an Itanie, wie (include city, sta	=									
MICAH WHITI										
132 STEAMBO	OAT LANE		!	c. Level Regist	tere					
BURLINGTON	I, NC 27217		!	☐ Federal ☐ State		County:	alitar.	e. Election	- Com 1	to Nate
				L State		☐ Municipa	anty.		194111	
								\$		250.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Re	quired Re	marks	
01	Check	E	01	1/12/2024	\$	250.00				
_					\$					
5. Total only this	s Page		1600 A		GW 2			\$		907.05
The state of the s	CRO-1310 Pages				7					-
والمناز والمستناء والمتناء والمتناء والمتناء	n line 13a of Detailed S	Summary Page CRO	1100 if	Operating Exper	nses)	g <u>ig Cafa ta afta</u> c	ur Ridu	\$		907.05

(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

7. Purpose Codes (List detailed expenditure code in (h.) above)

907.05

Aggregated Non-Media Expend	ditures
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	Amendment
Page1_ of1_	☐ Yes 🛛 No

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

P	tional to	in asoa to rept	OICTIO TION WICK	Zirporranear on a	τ φυσ στ που.			
	<u>commit</u>	ae Rulli Name (an)	ilikuildfagdkalda)	A CONTRACTOR OF THE PARTY OF THE PARTY.		24IDAm	nher	
TF	E COM	MITTEE TO EL	ECT CARISSA GRA	AVES		i		
L					- 4 - 5 - 4 - 4 - 5 - 5 - 5 - 5 - 5 - 5	<u> </u>		The state of the s
		formation —	Silva Certh	and the history	Service of the service	Mes is street in	777	And the second of the second o
á. A	mend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amoun	t S	g. Required Remarks
	Add	01	Draft	FO	02/01/2024	\$	9.17	ACTBLUE SERVICE
	Remove	į	<u> </u>		02,01,202			FEE
	Add	01	Debit Card	0	01/24/2024		9.70	CAMPAIGN
	Remove	1		<u>.</u>	V1/27/2023		9.70	MEETING- DINNER
4.	Íotal o	nly this Page				\$		18.87
5.4	Total o	fALL CRO-1	315 Pages			¢		18.87
			of Detailed Summary Pa	ge CRÓ-1100)		Φ		10.07
<u>6</u>	Romans	e (Chrites (Liste	ন্ত্ৰীয়াৰ জ্বৰ চিত্ৰীপ্ৰভৃতি	re code in (d) a	(DOVAC)			
	البيا		' - Printing	Ces = Pointe		Γο Anothe		
E	E - Salari	ies 🏥	= Inniment	G - Political	Party E	Holding	Pob	fie Office Dapperses
Ī	= Posen	go J - '	Penalties	e <u>vili(0) = 621</u>	Exquinces Q* -	Donatio	ns to	Legal Expense Fund
(O* - Otl	her M		<u> </u>				
*	Codes	require detai	iled explanation in	n required rer	narks field (g)			

CRO-1315

NC State Board of Elections

December 2009

Outstanding Loans

				Amendment				
Pg	1	of	1	☐ Yes	X	No		

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Commi	ttee Full Name (and Fund if applicabl	2. ID Number					
THE CO	MMITTEE TO ELECT CARISSA G	RAVES					
3. Lender	Information	Ad	d 🔲 Remo	ove	<u> </u>	n Septim Persing	
	ne, Mailing Address & Phone	··· · <u> </u>	ob Title/Prof	the second secon	d. Comments		
	city, state, & zip)	TA	X ACCOU	NTANT	<u> </u>		
CARISS/	A GRAVES						
633 CARRAWAY DRIVE				***	e. Start Date (mm/dd/yyyy)	
	M, NC 27253			me/Specific Field	01/18/2024		
(336) 213	-9745	DE	DE TAX AND ACCOUNTING			f. End Date (mm/dd/yyyy)	
						1. Eld Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged		i. Original L	oan Amount	j. Remaining l	Loan Balance	
%			\$	250.00	\$	250.00	
k. Full Nan	ne of Lending Institution				l. Loan Number		
3. Lender	Information	☐ Ado	d 🔲 Remo	ive ,			
	ie, Mailing Address & Phone	b. Je	ob Title/Profe	ession	d. Comments		
(include	city, state, & zip)	TA	X ACCOUN	ITANT			
	GRAVES				St. 4 P.4. 7		
	RAWAY DRIVE	o Fr	lovarie Na	me/Specific Field	e. Start Date (mm/dd/yyyy)		
	4, NC 27253				02/02/2024		
(336) 213-	-9745	DE	DE TAX AND ACCOUNTING			f. End Date (mm/dd/yyyy)	
g. Rate h. Security Pledged			i. Original Loan Amount			oan Balance	
	and section of the se						
%	<u>.</u> .	ĺ	\$	300.00	\$	300.00	
k. Full Nam	e of Lending Institution	l. Loan Number					
4. Total o	only this Page	\$	550.00				
	of ALL CRO-1430 Pages must be on line 21 of Detailed Summary)	Prior CRO-11(10)		\$	550.00	

CRO-1430 NC State Board of Elections December 2007