Amendme	n t
□ Yes	X No

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	ıformation								
a. Full Name									c. ID Number
THE COMMIT	TEE TO ELE	CT CARISSA	GRAV	ES		50 - 20000000	Alastra com-		
b. Mailing Addre	ess (include Ci	ty, State and Zir	ρ Code)	)	RE	CEIV	ED.	)	d. Date Filed
PO BOX 194	272.58						PROFESSION STATES		09/30/2024
HAW RIVER, 1	NC 27238				SE	P 30 20	.024	}	e. Phone Number
					AI AM	IANCE CO	TINIT	ŀ	(336) 213-9745
					BOARD	OF ELEC	CTION	NS	
2. Report Year	3. Period Star	rt Date (mm/dd/y	/y)						er Full Name
2024		2/18/2024			06/30/2			CARISSA	
6. Type of Comm				pe of Report	t (c)				ort from one category)
Candidate Cam	197 100 N	•	Munic		•	State/Cou			Referendum Organizational
Joint Fundraise			H	Organizatio		Organi		<b>I</b>	Organizational
Referendum 7 True of Fund		gal Expense Fund ole, check one)	-	Thirty-five		Quarte	erly irst		Pre-referendum Final
7. Type of Fund  "Booster Fund"	SULLINA SPECIAL PROPERTY OF A SPECIAL PROPERTY.	le, спеск опе)	H	Pre-primary Pre-election	-		ırst econd	1	Supplemental Final
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_	lection Year Can	adidates Fund		Semi-annual	il.		ourth	1	Special
Andrew Control of the	npaign Financing			Mid Ye		Semi-a		4	<b>П</b> эрссілі
	thaten i merre	gr und		Year Er			aimuai 1id Yea	L	10. Special Report Name
Other:			旧	Final	10 1		ear En	1	10. Special reports
8. Number of Fu	indraisers this	Report	lii	Special	,	Final	<u> </u>	<u> </u>	j I
J. 23 ***********************************	0	A COLOR		5- <b>P</b>	1	Special	ıl		l
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b. Purpose		c. Account Code	e		b. Purp	pose		2-11	c. Account Code
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		or Fund is in co	mpliano	ce with all a	upplical	ole provisi	ions o	of Article 27	2A, 22B & 22D-22M of
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									ed by the NC State Board
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Pri	inted Name of Si	igner		Signa	ature of	Appointed	Treasu	arer	Date
FOR OFFICE US	SEONLY		_			E TON IT SO			
Date Receive	:d: <u>9</u>	30-24	77.4	Employ	yee: _	JI	可加	1	ivery Method Normal Mail
Date Postmar	rked:		_	Employ	yee: _	200	1124		Registered Mail Hand Delivered
Date Scanned	d:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Employ	yee: _	181		. <b>D</b> J	Electronically Filed
Date Data En	itered:	<u> </u>	-	Employ	Employee:			Signer has not received mandatory training	
Please Note	e: This form ca	annot be used t	o amer	nd committe	ee infor	mation suc	ch as	According to the second last	ttee address, treasurer,
		nt treasurer, cust							
Ye	ou must amena	d the Statement	of Org	ganization (	CRO-21	100A-E) to	make	e committee	e changes.

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

Amendment

Yes X No

Use this form to summarize all disclosure reporting forms a			y information		
1. Committee Full Name (and Fund if applicable)	2. Type of R			. ID N	Number
THE COMMITTEE TO ELECT CARISSA GRAVES	2024 Secon	ıd Quai	rter		
Start of Election Cycle: January 1, 2023		Re	Total this porting Period		Total this Election Cycle
4) Cash on Hand at Start		\$	245.08	\$	0.00
RECEIPTS	<del></del>	<u> </u>		<u> </u>	0.00
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	285.00	\$	306.00
6) Contributions from Individuals	(CRO-1210)	\$	840.00	\$	1,440.00
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)	\$	0.00	\$	550.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	0.00	\$	0.00
11) 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
2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	,11d and 11e)	\$	1,125.00	\$	2,296.00
EXPENDITURES			·	<u> </u>	
3) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	421.68	\$	1,328.73
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	0.00	\$	0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$	0.00	\$	0.00
4) Aggregated Non-Media Expenditures	(CRO-1315)	\$	37.23	\$	56.10
5) Loan Repayments	(CRO-1420)	\$	0.00	\$	0.00-
6) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	0.00	\$	0.00
7) In-Kind Contributions	(CRO-1510)	\$	0.00	\$	0.00
8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,	. 16 and 17)	\$	458.91	\$	1,384.83
9) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$	911.17	\$	911.17
ADDITIONAL INFORMATION	· .::			····	
0) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00		
1) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	550.00		
2) Debts and Obligations owed by the Committee	(CRO-1610)	\$	0.00		
B) Debts and Obligations owed to the Committee	(CRO-1620)	\$	0.00		
1) Account Transfers Within the Committee .	(CRO-1720)	\$	0.00		
5) Administrative Support	(CRO-1710)	\$	0.00	\$	0.00
5) Forgiven Loans	(CRO-1440)	\$	0.00	\$	0.00
7) 48-Hour Notice Reports Sum	(CRO-2220)	\$	0.00	\$	0.00
3) Contributions to be Refunded  NC State Board		\$	0.00	\$	0.00

				Amendme	ent
Aggregated Contributions from Individuals	Page	1 of	1	☐ Yes	X No
Optional form used to report NC Contributions From Individua	ls of \$5	0 or less			

1. Committe	e Full Name (ánd	Fund if applicable)			2. ID 1	Number	1
THE COM	MITTEE TO ELE	CT CARISSA GRA	VES				
3. Contribut	or Information				- - J.		taki k
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	c. Date (mm/de	1/yyyy)	f. Amount	.,,
☐ Add ☐ Remove	01	Check		06/12/20	24	\$	25.00
Add Remove	01 -	Credit Card		03/14/20:	24	\$	50.00
☐ Add ☐ Remove	01	Credit Card		06/20/202	24	\$	50.00
Add Remove	01	Debit Card		04/01/202	24	\$	20.00
Add Remove	01	Debit Card		04/08/202	24	\$	25.00
Add Remove	01	Credit Card		02/27/202	24	\$	5.00
Add Remove	01	Debit Card		03/27/202	24	\$	5.00
Add Remove	01	Debit Card		04/27/202	24	\$	5.00
Add Remove	01	Debit Card		04/18/202	24	\$	50.00
Add Remove	01	Debit Card		05/05/202	24	\$	50.00
. Total only this Page							\$285.00
5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)							\$285.00
TPO 1205		3.12	State Board of Floations				4: 1 200

CRO-1205

NC State Board of Elections

April 2007

## Amendment Pg l of ☐ Yes X No

**Contributions from Individuals** 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 THE COMMITTEE TO ELECT CARISSA GRAVES 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) ACCOUNT MANAGER VICTOR BOATRIGHT c. Employer's Name/Specific Field 1108 CURTISS DRIVE GARNER, NC 27529 **BOATRIGHT TUTORING** e. Election Sum to Date (919) 999-9807 **SERVICES** 100.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Debit Card 01 04/07/2024 \$ 100.00 \$ \$ 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) TEACHER IRIS ELAM c. Employer's Name/Specific Field 3101 GALBERRY ROAD CHESAPEAKE, VA 23323 CHESAPEAKE SCHOOL e. Election Sum to Date (757) 618-3771 **SYSTEM** 100.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Debit Card 01 03/06/2024 \$ 25.00 Debit Card 01 04/06/2024 \$ 25.00 Debit Card 01 05/06/2024 \$ 25.00 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) TEACHER IRIS ELAM c. Employer's Name/Specific Field 3101 GALBERRY ROAD CHESAPEAKE, VA 23323 CHESAPEAKE SCHOOL e. Election Sum to Date (757) 618-3771 **SYSTEM** 100.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Debit Card 01 06/06/2024 25.00 \$ \$ \$

200.00

840.00

\$

\$

4. Total only this Page

5. Total of ALL CRO-1210 Pages

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

					Amendme	n t	
Contributions from Individuals	Pg	_2_	of	3	☐ Yes	X	No
Use this form to report individual contributions over \$50 or contribution	s un	der \$50	if form	CRO 120.	5 is not used	i	

1. Com	mittee Full Name	(and Fund if applicab	le)			2.	ID Number	
		ELECT CARISSA C						
3. Cont	ributor Informati	ion		Add 🔲 J	Remove	1	ng ngangangan Kabupangangan	
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(inclu	ıde city, state, & z	ip)		TAX				
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	E T GRAVES			TANT/CONSTRUCTI	]			
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	NGTON, NC 27	215	!	HAYDEN (	COMPANY	<u> </u>	7 - 4 - u Puun	4- Date
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# Contribu

					Amendm	ent
Contributions from Individuals	Pg	3_	of	3	☐ Yes	X No
Use this form to report individual contributions over \$50 or contribution	s und	ler \$50	if form	CRO 1205	is not use	:d

1. Com	mittee Full Name		<b>2.</b> J	ID Number					
THE C	OMMITTEE TO	ELECT CARISSA C	RAVES						
3. Cont	ributor Informati	ion		Add 🔲 R	emove		e Bole William		
	Name, Mailing Ado		10 1 5190-gc	b. Job Title/P		d. (	Comments		
(inclu	ide city, state, & z	ip)		GENESIS II					
	N ISLEY			2 Employer's	Name/Specific Field	-			
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HASHIM KHATEEB 4646 NC HIGHWAY 87				INVESTOR/RETIRED c. Employer's Name/Specific Field					
GIBSONVILLE, NC 27249				RETIRED					
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PO BO			1	c. Employer's	Name/Specific Field				
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	al of ALL CRO	O-1210 Pages 6 of Detailed Summary P	age CRO-1100)			\$		840.00	

- A - W					Amendme	en t
Disbursements	Pg	1	of	1	☐ Yes	С

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

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3. Type of Disbu	ursement <i>(Please</i>									
Operating Exp		tributions to Candidat					ordinat	ed Party Ex	•	es
4. Payee Inform			<u> </u>	Add 🔲			7 42 4 4 4	i varti.		
	ailing Address & Pl	ione		b. Coordinate	d Com	mittee N	ame	d. Comm	ents	
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2025 HAMILTO				c. Level Regis		County:				
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a. Full Name, Ma	ailing Address & Ph	ione		b. Coordinate	d Comp	nittee Na	ıme	d. Comme	ents	
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- Salaries	F* - Equipme	ent	G - Pol	litical Party		<b>H*</b> - <b>H</b> o	lding	Public Of	fice Exp	enses
- Postage	J - Penalties	s ·	K* - O	ffice Expenses				n to Legal		
O* Other				<del>-</del>		-		_	•	
Codes require	detailed explanatio	n in required rema	arks fi	eld(k)						

X No

Aggregated	Non-Media	<b>Expenditures</b>
. 1551054104	I TOM ITECUM	Expenditures

				Amendment				
Page	11	of	1		Yes	X	No	

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

<u> </u>		ort NC Non-Media					
l Committ	ee Rull Name (an	i Funditappicable)	CONTRACTOR OF		23ID3	umber 4	A PROPERTY OF THE PARTY OF THE
THE COM	MITTEE TO EL	ECT CARISSA GRA	AVES				
					<u> </u>		
3. Payee In	formation	ing brasil or the spirit of impairs.	Andrew Commencer		Att. 401		
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amo	unt	g. Required Remarks
Add Remove	01	Draft	0	03/01/2024	\$	0.23	SERVICE FEE CC
Add Remove	01	Electric Funds Tran	0	04/01/2024	\$	2.86	SERVICE FEE
Add Remove	01	Draft	O	05/01/2024	\$	3.54	SERVICE FEE
☐ Add ☐ Remove	01	Draft	O	06/01/2024	\$	1.36	SERVCE FEE
Add Remove	01	Debit Card	O	06/01/2024	\$	15.69	MEMBERSHIP AND DONATION
Add Remove	01	Draft	0	06/29/2024	\$	13.55	LOGO DESIGN FOR YARD SIGNS
. Total o	nly this Page			Tirke i ja tilli kalendar kalendar. Isasi kalendar kalendar kalendar kalendar kalendar kalendar kalendar kalendar kalendar kalendar kalendar kalend	\$		37.23
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s Parginsi	e Codes (List)	बिह्मीन्ते कर्नुनर्गित्र					
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CRO-1315

NC State Board of Elections

December 2009

				Amendm	ent	
Pg	1	of	1	☐ Yes	X No	į

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 applicable	)			2. ID Number		
	MMITTEE TO ELECT CARISSA GE						
	Information	☐ Add	46. A-			<u> </u>	
	ne, Mailing Address & Phone		ob Title/Profession		d. Comments		
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633 CARRAWAY DRIVE GRAHAM, NC 27253		c. En	c. Employer's Name/Specific Field				
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(330) 213	. 7713		TAR AND ACC	JUNTING	f. End Date (m)	m/dd/yyyy)	
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g. Rate	h. Security Pledged		i. Original Loan A	mount	j. Remaining I	Loan Balance	
%			\$	250.00	\$	250.00	
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December 2007