RECEIVED 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 Information ALAMANCE COUNTY BOARD OF ELECTIONS												
a. Full Name					DUMIN	U Ur ELEU	c. ID Number					
The Committee to Elect Charlie Beasley b. Mailing Address (include City, State and Zip Code) d. Date Filed												
				7			d. Date Filed					
	dross Stre						07/25/24					
burling	on, NC a	1/415					e. Phone Number					
336-269-9716												
2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasurer Full Name												
2024 01/01/24		V					ew Steel					
6. Type of Com	mittee (Check C		9. Type of Report (check only one type of re									
Candidate Cam			Municipal Organization	THE STREET, ST. S. PROS. BY ST. ST. S. P. LEWIS CO., LANSING, S. P. LE	te/County	Control of the Contro	Referendum					
PAC Refe			Organization		Organizat	ional	Organizational					
Legal Expense I		t Fundraiser	☐ Thirty-five da☐ Pre-primary		Quarterly First		Pre-referendum Final					
Legal Expense	ruliu	l l	Pre-election	H	Seco		Supplemental Final					
7. Type of Fund	(if applicable,	check one)	Pre-runoff	H	Thire	11.0	Supplemental Final Annual					
Booster Fund	(у прристол.,	check one;	Semi-annual	Fourth			Special					
Building Fund		l,	Mid Yea	r -	Semi-annı	570	Special					
		li	Year End		Mid	7.000	10. Special Report Name					
Other:		Į,	Final		Year End		10. Special Report Finance					
8. Number of Fu	indraisers this	Report	Special		Final							
	0			Special								
11. Account Info				11. Accoun								
a. Financial Institut	ion Full Name			a. Financial	Institution	Full Name						
Truist							ar versus areas and a second					
b. Purpose		c. Account Code	e	b. Purpose			c. Account Code					
Campaign Finance		0	1									
Finance		d. Period Begin	Balance				d. Period Begin Balance					
0000 TOOLS -		\$ 366.9	19				\$					
CERTIFICATION	ON											
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. Andrew Steel Printed Name of Signer Signature of Appointed Treasurer Date												
FOR OFFICE U		1										
Date Receive	ed: 7/	Employee: De			- 0	<u>very Method</u> Normal Mail						
Date Postmarked:			Employee:				Registered Mail Hand Delivered					
Date Scanned:			Employ	/ee:		•	☐ Electronically Filed					
Date Data Entered:			Employ				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, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.											
Y	ou must amend t	ne statement	oi Organizatioi	1 (CKO-210	UA-E) to	make commi	itee changes.					

*

Detailed Summary

Amendment ☐ Yes **⋈** No

Use this form to summarize all disclosure reporting forms and to total monetary information 1. Committee Full Name (and Fund if applicable) 3. ID Number 2. Type of Report Mid-Year The Committee to Elect Charlie Beasles Total this Total this 2024 Start of Election Cycle: January 1. Reporting Period **Election Cycle** 4) Cash on Hand at Start 3 66,49 \$ 366.49 RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) \$ 6) Contributions from Individuals (CRO-1210) \$ \$ 7) Contributions from Political Party Committees (CRO-1220) \$ \$ 8) Contributions from Other Political Committees \$ (CRO-1230) 9) Loan Proceeds (CRO-1410) \$ \$ \$ 10) Refunds/Reimbursements to the Committee (CRO-1240) \$ 11) Other Receipt Sources 11a) Interest on Bank Accounts (CRO-1250) \$ 11b) Contributions from Not-For-Profit Organizations (CRO-1250) \$ \$ 11c) Outside Sources of Income (CRO-1250) \$ \$ 11d) Legal Expense Fund - Other Sources (CRO-1270) \$ \$ 11e) Exempt Purchase Price Sales (CRO-1265) \$ \$ 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e) 0.00 0,00 \$ **EXPENDITURES** 13) Disbursements 13a) Operating Expenditures (CRO-1310) 14.99 \$ 14.99 \$ 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ 13c) Coordinated Party Expenditures \$ (CRO-1310) \$ 14) Aggregated Non-Media Expenditures (CRO-1315) 15) Loan Repayments (CRO-1420) \$ \$ 16) Refunds/Reimbursements from the Committee \$ (CRO-1320) \$ 17) In-Kind Contributions (CRO-1510) \$ \$ 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) 14.99 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) 351.50 351.50 ADDITIONAL INFORMATION (CRO-1330) \$ 20) Non-Monetary Gifts Given to Other Committees 21) Outstanding Loans (incl. ones from 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 Committee (CRO-1720) \$ 25) Administrative Support \$ (CRO-1710) \$ 26) Forgiven Loans (CRO-1440) \$ RECEIVED 27) 48-Hour Notice Reports Sum (CRO-2220) \$ 28) Contributions to be Refunded (CRO-1215) \$ August 2008

Disbursen	nents				Pg <u>l</u> o	of <u>1</u>	Amendment Yes No
	report expenditures		tee for o	perating exp	enses, contribu	tions to	candidate/political
	coordinated party ex						
1. Committee I	Full Name (and Fun	d if applicable)					2. ID Number
	nittee to Ele						
3. Type of Disk		e use separate Cl					
Operating Exp		ntributions to Candid				ordinate	d Party Expenditures
4. Payee Inform			Add \square	Remove			
	Iailing Address & Ph	ione	b. Coordinate	ed Committee Nan	ne o	I. Comments	
(include city, state	, & zip)						
Canva				a I aval Dagi	stered (Specify)		Monthly
3212 E.	Cesar Chavez	. 5t.	Federal	County:		runing	
Austin, T.	X 78702		State			e. Election Sum to Date	
855-228							
377 200	1117						\$ 14.99
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Red	quired Remarks
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4 Dover F.C.				A 4.2 -	<u>Β</u>	in formal internation	
4. Payee Inform				SCHOOL SURVEY	Remove		
a. Full Name, Mai (include city, sta	ling Address & Phone			b. Coordinate	ed Committee Nan	ne c	I. Comments
. Account Code	g. Form of Payment	h. Purpose Code	li Data (Federal State	Stered (Specify) County: Municip	pality: e	. Election Sum to Date \$ quired Remarks
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AND ADDRESS OF THE PARTY OF THE	ling Address & Phone			b. Coordinate	d Committee Nan	ne d	. Comments
(include city, sta	te, & zip)						
				c. Level Regis Federal State	ctered (Specify) County: Municip		. Election Sum to Date
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S A second G-3	- F	h Dumoss Cad-	l. p	(11)			**
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (r	nm/dd/yyyy)	j. Amount	K. Ked	uired Remarks
					\$		
					\$		
5. Total only th	is Page						\$ 14.99
	CRO-1310 Pages						Ψ [(,)]
(This line goes in (This line goes in (This line goes in	line 13a of Detailed Sun line 13b of Detailed Sun line 13c of Detailed Sun	nmary Page CRO-11 nmary Page CRO-11	00 if Cont 00 if Coor	rib to Candida dinated Party	tes/Political Comn	n)	\$ 14.99
	odes (List detailed						
A* - Media	B* - Printi	ndraising D - To Another Candidate					
E - Salaries	F* - Equip	tical Party HR Holling Public Office Expenses					
I - Postage O* Other	J - Penalti	es	K* - O	ffice Expens	ses Q* - D	onatio	n to Legal Expense Fund
	re detailed explanati	ion in required r	emarks	field (k)	JU	JL 25	5 2024

BOARD OF ELECTIONS