

Disclosure Report Cover

Amendment

☐ Yes ☒ 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.

| | | | | |
|---|--|--|-------------------------------|---|
| 1. Committee Information | | | | |
| a. Full Name | | | c. ID Number | |
| BALTUTIS FOR BURLINGTON | | | | |
| b. Mailing Address (include City, State and Zip Code) | | | d. Date Filed | |
| 702 W DAVIS ST BURLINGTON, NC 27215 | | | 08/20/2025 | |
| | | | e. Phone Number | |
| | | | (763) 218-0266 | |
| 2. Report Year | 3. Period Start Date (mm/dd/yy) | 4. Period End Date (mm/dd/yy) | 5. Treasurer Full Name | |
| 2025 | 07/07/2025 | 07/17/2025 | IAN BALTUTIS | |
| 6. Type of Committee (Check One) | | 9. Type of Report (check only one type of report from one category) | | |
| <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party | | Municipal | | |
| <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC | | <input checked="" type="checkbox"/> Organizational | | |
| <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund | | <input type="checkbox"/> Thirty-five day | | |
| | | <input type="checkbox"/> Pre-primary | | |
| | | <input type="checkbox"/> Pre-election | | |
| | | <input type="checkbox"/> Pre-runoff | | |
| | | <input type="checkbox"/> Semi-annual | | |
| | | <input type="checkbox"/> Mid Year | | |
| | | <input type="checkbox"/> Year End | | |
| | | <input type="checkbox"/> Final | | |
| | | <input type="checkbox"/> Special | | |
| 7. Type of Fund (if applicable, check one) | | State/County | | |
| <input type="checkbox"/> "Booster Fund" | | <input type="checkbox"/> Organizational | | |
| <input type="checkbox"/> Building Fund | | <input type="checkbox"/> Quarterly | | |
| <input type="checkbox"/> Presidential Election Year Candidates Fund | | <input type="checkbox"/> First | | |
| <input type="checkbox"/> NC Public Campaign Financing Fund | | <input type="checkbox"/> Second | | |
| | | <input type="checkbox"/> Third | | |
| | | <input type="checkbox"/> Fourth | | |
| | | <input type="checkbox"/> Semi-annual | | |
| | | <input type="checkbox"/> Mid Year | | |
| | | <input type="checkbox"/> Year End | | |
| | | <input type="checkbox"/> Final | | |
| | | <input type="checkbox"/> Special | | |
| 8. Number of Fundraisers this Report | | 10. Special Report Name | | |
| 0 | | | | |
| 3. Account Information | | | | |
| a. Financial Institution Full Name | | | | |
| WELLS FARGO | | | | |
| b. Purpose | | c. Account Code | | d. Period Begin Balance |
| FOR RECEIPTS AND EXPENSES | | 1 | | \$ 0.00 |
| 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 | | | | |
| <u>Ian Baltutis</u> | | <u>[Signature]</u> | | 08/20/2025 |
| Printed Name of Signer | | Signature of Appointed Treasurer | | Date |
| FOR OFFICE USE ONLY | | | | |
| Date Received: _____ | | Employee: _____ | | Delivery Method |
| Date Postmarked: _____ | | Employee: _____ | | <input type="checkbox"/> Normal Mail |
| Date Scanned: _____ | | Employee: _____ | | <input type="checkbox"/> Registered Mail |
| Date Data Entered: _____ | | Employee: _____ | | <input type="checkbox"/> Hand Delivered |
| | | | | <input checked="" type="checkbox"/> Electronically Filed |
| | | | | <input type="checkbox"/> 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. | | | | |

RECEIVED

SEP 11 2022

ALABAMA COUNTY
BOARD OF ELECTIONS