	R	ECEIVE	
Disclosure Report Cover		The second secon	Amendment
Use this form for general report and commit	tee information, r	nustible signed and a	the test along with other detailed forms
Do not use this form to update information.		6, 4 6, 4	
1. Committee Information	BAF	Y \	
a. Full Name	1	The same of the sa	c. ID Number
Corrie Shepherd for 4	ABSS Schoo	Board	
b. Mailing Address (include City, State and Zip Cod			d. Date Filed
3363 Covington To Melsone NC 273	rail		1/15/25
Melane NC 273	(336) 578-4059		
2. Report Year 3. Period Start Date (mm/d	d/yy) 4. Period I	End Date (mm/dd/yy)	5. Treasurer Full Name
2024 10/20/24	12/	31/24	Corrie Miller Shepchero
6. Type of Committee (Check One)			type of report from one category)
Candidate Campaign Party PAC Referendum	Municipal	State/County	Referendum
	Organizationa Thirty-five day	— ~	
☐ Independent Expenditure ☐ Joint Fundraiser☐ Legal Expense Fund	Pre-primary	Quarterly First	Pre-referendum Final
Logar Expense i and	Pre-election	Secon	
7. Type of Fund (if applicable, check one)	Pre-runoff	Third	
Booster Fund	Semi-annual	Fourt	
☐ Building Fund	☐ Mid Year	Semi-annu	
	Year End	Mid `	Year 10. Special Report Name
Other:	Final	☐ Year	
8. Number of Fundraisers this Report	Special	Final	
none		☐ Special	w .
11. Account Information		11. Account Inform	The state of the s
a. Financial Institution Full Name		a. Financial Institution l	Full Name
Truliant Federal Credit	Union		
b. Purpose c. Account Co		b. Purpose	c. Account Code
Conview Timber			
Compaign Funds			
d. Period Beg			d. Period Begin Balance
\$ 880	9.60		\$
CERTIFICATION			
I certify that the Committee or Fund is in compli of the NC General Statutes and that no funds are	iance with all applic	cable provisions of Arti	icle 22A, 22B & 22D-22M of Chapter 163
report is complete, true and correct and that I ha	ve been trained by	the NC State Board of I	Elections.
Coopie M Shadaal	0	· L m	1. 1 1/15/24
Printed Name of Signer	Sign	ature of Appointed Treasu	urer Date
FOR OFFICE USE ONLY			
Date Received: 1-15 - 25	_ Employe	ee: <u>J</u> ‡	Delivery Method Normal Mail
Date Postmarked:	Employe	ee:	Registered Mail Hand Delivered
Date Scanned:	_ Employe	ee:	☐ Electronically Filed
Date Data Entered:	_ Employe		Signer has not received mandatory training
Please Note: This form cannot be used	to amend commi	ttee information such	as the committee address, treasurer.
assistant treasurer, cu			

Detailed SummaryUse this form to summarize all disclo

Amendment

Yes No

1. Committee Full Name (and Fund if applicable)	2. Type of	THE THE TOTAL PROPERTY OF THE	ID Number
Corrie Shepherd for ABSS School		ourth averter	
Start of Election Cycle: January 1, 262		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 889.60	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$	\$ 3,175.00
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$ 250.00
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$ 1,350.00
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	s (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	c,11d and 11e)		\$ 4,775.00
EXPENDITURES	A comment of processing participation and state of		
13) Disbursements	A STATE OF THE STA		
13a) Operating Expenditures	(CRO-1310)	\$ 763.22	\$ 4648.62
13b) Contributions to Candidates/Political Committees	s (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, 1	15, 16 and 17)	\$ 763.22	\$ 4,648.62
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18)		\$ 124.38
ADDITIONAL INFORMATION	Charles de California de Calif		
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	Owners to seem out the service sections of	\$	36 S. C.
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)	\$	\$
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$

Disburse	ments					Amendment
Use this form	to report expenditur	es from the com	mittee fo	r operating	Pg	of Yes Nutions to candidate/political
1 Committees at	nd coordinated party	expenditures		- operating	expenses, contrib	utions to candidate/political
1. Committee	Full Name (and Fr	ınd if applicabl	e)		(5) (8) Y (8) (5) (4) (6) (5) (8) (8)	2. ID Number
Corri	e Shedhe	- Lack	7 N CC	5 1	10 1	2. 1D Number
3. Type of Di		20 101	CCCIT)cho	of Board	
Operating E	ENGREE NORTH BANKS AND STREET	ontributions to Co	CKO-13	10 forms fo	r each type of Di	sbursement.)
4. Payee Info		ontributions to Cano	ildates/Poli	Elizabeth of the state of the s		oordinated Party Expenditures
a. Full Name,	Mailing Address & F	hone		Add [Remove	
(include city, stat	e, & zip)			b. Coordin	ated Committee Nar	me d. Comments
Alono	nce Neu	20				
	Elm St.			c. Level Re	gistered (Specify)	
B	m NC 27	7 ()		Federa		
				L State	Municip Municip	pality: e. Election Sum to Date
)228-785	5				\$ 687.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	li Amama	
	debit cord	A		12. 12.	\$ 220 NA	k. Required Remarks
		1	110/	24/24	\$ 229,00	Advertising
4. Payee Inform	mation	Control with the control of the con-	vo's Educació	Oher (D.)	\$	
a. Full Name, Mail	ing Address & Phone			Add	Remove	
(include city, sta	te, & zip)			b. Coordina	ted Committee Name	d. Comments
~ (na News	,				
		>		c. Level Regi	stered (Specify)	
119 15	Im St.			☐ Federal	County:	
Graha	m NC 27	253		☐ State	Municipal	lity: e. Election Sum to Date
	1228-7					, and Date
Account Code		h. Purpose Code	li Deta (/33/		\$ 687.00
1	debitard	Δ	1	1		k. Required Remarks
	COMPARE		101	29/24	\$ 458.00	Advertising
ST CONTRACT OF STREET	AW 1-16 Granus Commencer				\$	
Payee Inform	ation			Add 🔲	Remove	
(include city, state	g Address & Phone		It		d Committee Name	d. Comments
100000000000000000000000000000000000000						- Comments
1 411	Custom (risting	-			
4907	Green Reigh NC 2	1. Ste In	9 1	Federal	ered (Specify)	
Dale	igh wir 7	7611-	İ	State	County:	The state of
191	91221	, , , ,	[- Municipant	y: e. Election Sum to Date
ccount Code g.	Form of Payment h	<u> </u>				\$ 7622
		Purpose Code i	. Date (mn	n/dd/yyyy) j.	Amount k.	Required Remarks
, 1	lebit card	B	11/1	124 \$	76.22	Palm cards
PORT William Control of the Control				\$		120111 00197
Total only this						48
Total of ALL C	RO-1310 Pages					\$ 763.22
This line goes in lin	e 13a of Detailed Summe	ry Page CRO-1100	if Operasi	na Eva		
and Poes the test	e 130 of Detailed Summe	TU Page CDA 1100	200			\$
CONTRACTOR OF THE PARTY OF THE	- State of Designation	rv rage CKILIION	if Condin	-4- J D	penditures)	763.22
m pose Cod	es (List detailed ex	penditure code in	n (h.) abo	ve)		1 1 2 3 2 2
TITOUILL	D" - Printing	C	* - Fund	raising	D To A	4-0-11
- Salaries Postage	G - Politica			al Party H* - Holding Public Office F		
Other	J - Penalties	K	* - Offic	e Expenses	Q* - Donat	tion to Legal Expense Fund
	etailed evalonas:					to regai texpense rund
0-1310	etailed explanation	in required rem	arks fiel	d (k)		