			RE	CEIV	FD	7		
Disclosure Rep	nort Co	ver					Amendment	*********
Use this form for gene	eral report a	and committee	information, n	nust be sign	25 and su	ibmitted alor	Yes No	ns.
Do not use this form t	A CONTROL OF THE PARTY OF THE P	formation.	PV.	f. control yester		(1 - 20 - 10 - 10 - 10 - 10 - 10 - 10 - 1		STATES.
1. Committee Inform	nation		State of the second	X			c. ID Number	Many.
a. Full Name	1	-	1	_			c. ID Number	
Corrie She		For 1913S	5 School	Boord	Į			
b. Mailing Address (inclu							d. Date Filed	
3363 Covington Trail Melsone NC 27302							10/29/2 Y e. Phone Number	
Mescre	5 MC	. 2150	2				(336)578-405	9_
2. Report Year 3. Pe	riod Start	Date (mm/dd/y	y) 4. Period F	ind Date (m	m/dd/yy)	5. Treasure	er Full Name	
2024 7	1/1/24	1	10/10	9/24		Corrie		حا
6. Type of Committe						type of repo	rt from one category) Referendum	
Candidate Campaign	Party Refe	erendum	funicipal Organizational		te/County Organizati	ional	Organizational	-7-27
Independent Expendit		t Fundraiser	Thirty-five day		Quarterly		Pre-referendum	
Legal Expense Fund	- Bank Strategy	IT.	Pre-primary	´   🗆	First		Final	
			Pre-election		Seco	ınd	Supplemental Final	
ALL THE PARTY OF T	if applicable, o	check one)	Pre-runoff		Thire	đ	Annual	
Booster Fund		-	Semi-annual		Four		☐ Special	
Building Fund		ŀ	Mid Year		Semi-annu	1000000	50 C	verosa:
- Other		ŀ	Year End	, IH	Mid Year	1000	10. Special Report Nam	ie.
Other:  8. Number of Fundra	cicere this	Deport	Final Special	片	Year Final	Ena		
	discis tins .	keport	_ special	lH	Special			
none			THE STATE OF THE S	11. Accou				000000
11. Account Informa  a. Financial Institution Fu				a. Financial				APRING.
			11.	de l'internation	IIIOHIHIHI V.	I'du i'duic		
Truliant F	edera	c. Account Code	r Union				·	
b. Purpose		c. Account Code	, my n _ = 1 m = 1	b. Purpose			c. Account Code	
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THE PERSON NAMED IN		\$1,92	<u>۳۲.۵.</u>	<u> </u>			<b>3</b>	_
							3 & 22D-22M of Chapter 16 ands. I further certify that this	
report is complete, true							inus. Trutinei voidi jumi di	15
Corrier Printed?	N. She Name of Signe	pherd	Sig	nature of Appo	ointed Treas	uphod suret	1/15/25 Date	ē.
FOR OFFICE USE (	ONLY							ell and
Date Received:	1-19	5-25	Employ	yee: JA	, 		ivery Method Normal Mail	
Date Postmarked:	å <u></u>	× ×	Employ	/ee:		7	Registered Mail Hand Delivered	
Date Scanned:			Employ	/ee:		_	Electronically Filed	
Date Data Entered			Employ				Signer has not received mandatory training	
Please Note: The			o amend commi				mittee address, treasurer, tion.	
Von m			of Organization					

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

Amendment
Yes No

Use this form to summarize all disclosure reporting forms and 1. Committee Full Name (and Fund if applicable)	2. Type of		3. ID Number
Currie Shepherd for ABSS School Burg		Total this	Total this
Start of Election Cycle: January 1, $262^{\circ}$	1	Reporting Perio	
4) Cash on Hand at Start		\$ 1,924,54	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 1,150.00	\$ 3,175.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ 256.60	\$ 750.00
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	(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)	\$ Z,750.00	> \$ 4,775.00
<u>EXPENDITURES</u>			
13) Disbursements	70 July 30 July 44 ALC		
13a) Operating Expenditures	(CRO-1310)	\$ 3,786.94	\$ 3,885.40
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, 13	5, 16 and 17)	\$ 3,786,94	\$ 3,885.40
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$ 889.60	\$ 889.60
ADDITIONAL INFORMATION	Supplement and deposit on the Medical Supplemental of the Supplemental		AMPRICATE STRANGERS AND
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	the state of the s
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$	
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$	Δ.
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)	\$	\$
	(CRO-1215)	\$	\$
CRO-1100 NC State Boar	d of Elections		August 2008

		rom Individua ndividual contribution		Pg contributions und			Yes No
ARCHITECTURE OF THE PARTY OF	and the second and the second	ne (and Fund if app	CHARLEST TO A STATE OF THE STATE OF THE STATE OF	Ontributions und	er abu ii ioiiii Ci	ALCOHOL: NAME OF THE PARTY OF	D Number
Ω		erd for ABSS		rd			
3. Conf	tributor Informa	ation		Add Ren	move		
B 688 1000 8	lame, Mailing Addre	ess & Phone		b. Job Title/Profe		d. C	Comments
	de city, state, & zip)	11-11 x 0-		Self E.	moloyed		
	, , , ,	-Hatkopf Pa	ge	c. Employer's Nar	ne/Specific Field	1	
	100 york R					<u>_</u>	
Burlington, NC 27215				Not Em	ploned	e. El	lection Sum to Date
	719) 599-0				, J	\$	250.00
		h. Form of Payment	i. In-Kind Descrip	ition	j. Date (mm/dd/yy)	yy)	k. Amount
	١	Check			7/31/24		\$ 250.00
							\$
							\$
	tributor Informa			AMERICAN PROPERTY OF THE STREET	move		
	ame, Mailing Addre	ss & Phone		b. Job Title/Profes	ssion	d. C	omments
	(include city, state, & zip)						
Leonard Harrison				c. Employer's Nan	ne/Specific Field	1	
3161 Fieldstone Lone Metone NC 27302				Corefree	. Merchant	L_	
				Processi.		e. Ei	lection Sum to Date
	1)881-4		T. v. 1D			\$	200.00
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	ame, Mailing Addre le city, state, & zip)			b. Job Title/Profes	4	d. Co	omments
7 7 7 7				ISD A	ndyst		
10	ren Stro	iwher		c. Employer's Nan	ne/Specific Field		
12	-37 Pebbl	16 DC.		DNC He	ealthcare	e. El	ection Sum to Date
(6)	rchan N	- 5811		0130 (10		\$	100.00
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	\	cash			9/6/24		\$ 100.00
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And developed the Land		O-1210 Pages				\$	ارا
		of Detailed Summary Po	age CRO-1100)			φ	1)130.00

Amendment

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agencial of description of the same	CONTRACTOR SALES OF THE PARTY O	ne (and Fund if app				4	D Number
(	orrie Sh	exherd for	ABSS S	School B	oard		
3. Con	tributor Informa	atibn			move		
	ame, Mailing Addre	ess & Phone		b. Job Title/Profe		d. C	Comments
	le city, state, & zip)			Bell So	technicion.	1	
	nald B	A A TOTAL DE	:\	c. Employer's Nar	ne/Specific Field		
	3025 Tranquility Trail				mployed	e. E	lection Sum to Date
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	ame, Mailing Addre	ess & Phone		b. Job Title/Profes	ssion	d. C	Comments
	le city, state, & zip)	0 \ \ -		nur	50		
Ci	our they	Geels		c. Employer's Name/Specific Field			
38	14 Cole	Geels mill Rd.				L	
	Durhan NC 27712			Duke Rigional			lection Sum to Date
(	9191 50	3-6738				\$	160.00
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	1	check			10/7/24		\$ 100.00
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E 2000 C/47 40	ame, Mailing Addre	ess & Phone		b. Job Title/Profes	ssion	d. C	omments
(inciud	le city, state, & zip)	\ \		Operati	ions makes	4	
2	sez (br	epherd ington Tro NC 2730	il	c. Employer's Nan			
): \(\sigma^2\)	10/20 25	NC 2730		NC Val	ues	e. El	lection Sum to Date
1,	33(1)57	8-4059	2			\$	325.00
f. Prior		h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	y)	k. Amount
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SEASON AND THE		of Detailed Summary Pa	ige CRO-1100)			\$	1,150.00

		cal Party Committees s from a political party	G Pg of	Amendment Yes No
AND A CONTROL OF THE PARTY OF T	Full Name (and Fund it			2. ID Number
Carcia	Shapharl	for ABSS School	1 Board	
3. Contributor	The second lives and the second lives are a second lives and the second lives are a second lives and the second lives are a sec	□ Add	Remove	
	ling Address & Phone	<b></b>		o. Comments
(include city, sta				
Alama	nce Repul	blican Women L St. 27215	NC	
296	S. Charc	→ 51.		. Election Sum to Date
Burli	nsten NC	27215		\$ 250.00
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				\$
				\$
3. Contributor	Information	Add	Remove	
a. Full Name, Mail	ling Address & Phone		b	. Comments
			-	. Election Sum to Date
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	ing Address & Phone		b	. Comments
(include city, sta	те, & ир)			
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				\$
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				\$
4. Total only				\$ 250.00
	LL CRO-1220 Pag e on line 7 of Detailed Summ			\$ 250.00

	ons from Other l			of	1	Amendment Yes No
probable something in a finish	report contributions from		ferendum or PA	C committees	In T	
^	full Name (and Fund if a				2. 1	D Number
	Shepherd for	ABBS School	Board			
3. Contributor			Nin (e. Single Constitution and the Constitution of the Constituti	nove		
A transcript of the second sec	ing Address & Phone		b. Type of Commi		d. C	omments
(include city, stat			Candidate	☐ PAC		
	I for NC House	64	c. Level Registere	d (Specify)		
(0343	Beale Rd.		Federal Federal	County:	<u> </u>	
SOME	temp, NC 27	1349	State	Municipality:	e. E	ection Sum to Date
(33(2)	214-656	ч			\$ 350.00	
	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yyy	(v)	j. Amount
i. Account Cour	,	III III IIII DOLLARI				
1	Check			10/14/21	4	\$350.00
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3. Contributor	Information		Add Ren	nove		
a. Full Name, Maili	ing Address & Phone		b. Type of Commi	ttee	d. C	omments
(include city, stat	e, & zip)		Candidate	PAC		
Torru	Johnson		Referendum			
2021	Spanish Oak	11:11 0 1	c. Level Registered			
3939	spanish und	min Rd.	State	☐ County: ☐ Municipality:	e. El	ection Sum to Date
Snow	camp NC 2	7349	State			
	0) 229-200				\$	1,000.00
		h. In-Kind Description		i. Date (mm/dd/yyy	y)	j. Amount
		Poud 1,000 to Graphics for 3		ted 9/171	124	\$ 1,060,00
			J			\$
						\$
3. Contributor l	Information		Add 🔲 Ren	nove		
	ng Address & Phone	2 7 1	b. Type of Commit		d. C	omments
(include city, state	e, & zip)		Candidate	☐ PAC		
			Referendum	1.60 10.		
			c. Level Registered Federal	County:		
			State		e. El	ection Sum to Date
			blace	- Wanterparty.		cedon Sum to Bute
S Assermet Code	- Form of Bormant	h In Vind Description		i Doto (mm/dd/mm	\$	: A
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yyy	<b>y</b> )	j. Amount
					_	\$
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4. Total only thi	s Page				\$	1,350.00
5. Total of ALL	CRO-1230 Pages				¢	1,350.00
	on line 8 of Detailed Summa	ry Page CRO-1100)			\$	1,350.00

Disbursen	nents				Por	. 7	Amendment Yes No	
		from the commit	tee for o	onerating ex		10 to 100	Description proprieting and the state of the property of the state of	
Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures								
1. Committee I	Full Name (and Fund	d if applicable)					2. ID Number	
Corrie		br ABSS	Sch	100 B	oard			
3. Type of Dish	Children and Child	use separate CR				sburs	ement.)	
Operating Exp	CONTRACTOR OF THE PARTY OF THE	tributions to Candida	ates/Politi	cal Committee		oordina	ated Party Expenditures	
4. Payee Inform	Constitution and Language of martin constitutions and institution of the property of the constitution of t	100		Add	Remove			
	Mailing Address & Pho	one		b. Coordinat	ted Committee Na	me	d. Comments	
(include city, state				-				
UTHO	e Depot S. Church	C1		c. Level Reg	istered (Specify)		1	
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Ruch	noton NC 2	7215		☐ State	Munici	pality:	e. Election Sum to Date	
(33()	(3) 1 -61	72					\$ 42.70	
f. Account Code			i Date (	mm/dd/yyyy)	li Amount	k, R	lequired Remarks	
\	debitand	2	0	15/24	\$ 42.70	-	Business cards	
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	Employee State of the Company of the State o	THE PARTY OF THE P	Service de	Add $\square$	\$ Remove	TAX SECRET	ne 1 Garago est magnitude entre domant e munico de geographico el chomo est e consedente de la companya e	
4. Payee Inform		T-						
and the second s	ling Address & Phone			b. Coordinat	ted Committee Nar	me	d. Comments	
^	(include city, state, & zip)							
Canva	, com	ol	١	c. Level Regi	istered (Specify)		1	
3212	E. Cesco	Chavez 5	۲.	☐ Federal	County			
Build	ing I, suit	e 1300		State	Munici	pality:	e. Election Sum to Date	
Austin	TX 7870	20					\$ 188,00	
			i. Date (	mm/dd/yyyy)	j. Amount	k, R	equired Remarks	
)	debit card	3	8/	25/24	\$ 188.00		Palm cords	
	0-31				\$		101	
4. Payee Inform				Add 🔲	Damarra	action of the		
With the process of t	ling Address & Phone		L	MERCHANICAL PROPERTY -	Remove ed Committee Nar	ne	d. Comments	
(include city, sta				Di Cooi annu	Cu Commune I		u. Comments	
^	1a.com							
COUNT	$\alpha.\omega \alpha$	11-0-107 (	Ĺ		stered (Specify)			
3212	q. Cesar ( ding 1, suit	12:200	) T.	Federal	County:			
Builo	ding 1, sent	1500		L State	☐ Municip	pality:	e. Election Sum to Date	
Aust	rin TX 70	2702					\$ 202.99	
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\	debit card	B	9/	, ,	\$ 14.99	P	colm cords	
				1/ = 1	\$	+"		
5. Total only th	is Page						\$ 245.69	
Maria de Caración	CRO-1310 Pages						213101	
(This line goes in	line 13a of Detailed Sum				A00000		\$ 3,786.94	

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

(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)

A\* - Media

B\* - Printing

C\* - Fundraising

D - To Another Candidate

E - Salaries

F\* - Equipment

G - Political Party

D-10 Allouici Calididate

I - Postage

J - Penalties

K\* - Office Expenses

H\* - Holding Public Office Expenses Q\* - Donation to Legal Expense Fund

O\* Other

\* Codes require detailed explanation in required remarks field (k)

		$\sim$		$\sim$	Amendmen	
Disbursements	Pg	_	of	2	Yes	☐ No
TT 41.6				020	particular Parantarian Services	Anna Carre Present and Carre Present

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

	ull Name (and Fund					2. ID Number		
The same of the sa	Shepherd !		The state of the s		Name and Address of the Owner, where the Party of the Owner, where the Party of the Owner, where the Owner, which is			
3. Type of Disb	SEPARATOR STRUCTURE ASSESSMENT	use separate Ch				ERODE DESERVE AZTRONOM ENVERANCES		
Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures								
4. Payee Inform	<ul> <li>Additional Control of Section (Control of Section Control /li></ul>		Ц	Add $\square$	Remove			
	ailing Address & Pho	one		b. Coordinate	ed Committee Nam	e d. Comments		
(include city, state, & zip)								
Accelerated Graphics 412 Bradley St. Burlington, NC 27215				c. Level Regin	stered (Specify)  County:			
415.8	raciey o	72.5		State	A TOTAL STATE OF THE STATE OF T	ality: e. Election Sum to Date		
Burlin	ston, Nic	2121S			······································	\$ 3,165.46	p	
f. Account Code		h. Purpose Code	i. Date (	nm/dd/yyyy)	j. Amount	k. Required Remarks		
j.	Check	3	91	30/24	\$ 2,165.46	signs		
	0.100.	3	''			In kind Donati	500	
4. Payee Inforn	ntion	· ·			Remove			
	ing Address & Phone				ed Committee Nam	e d. Comments		
(include city, stat				Di Coox dinate	ou Committee Ham	ui Comments		
Canva	100							
Carros	C 202 - 01-	17 -01.0			stered (Specify)			
3212 €	. Cesar Cr	1700		☐ Federal	County:			
Ruildin	Cesar Ch	1300		☐ State	☐ Municipa	ality: e. Election Sum to Date		
Austi						\$ 217.98		
		h. Purpose Code	i. Date (r	nm/dd/yyyy)	i. Amount	k. Required Remarks		
				,	\$ 14.99	Palm cards		
					\$			
4. Payee Inform	ation		П	Add 🔲	Remove			
	ng Address & Phone			AND THE PERSON NAMED IN	ed Committee Name	e d. Comments	10.362,562,561	
(include city, stat	e, & zip)							
Dichi	ic Service	2						
0.00	ig Service . Glencre	ct Da			tered (Specify)			
1909 8	. GIENCI'E	20200		Federal State	County:  Municipa	ality: e. Election Sum to Date	_	
Sooke	ne, WA	4420s		State	Wumerpa			
157	5) 623-	3660				\$ 247.58		
f. Account Code	g. Form of Payment		i. Date (n	nm/dd/yyyy)	j. Amount	k. Required Remarks		
ì	debit cord	A	10/	14/24	\$ 247.58	Robo Call Ad		
	Control		107		\$	Ross		
C Trade I and the	D		ver or Kely	STATE OF THE STATE	<b>4</b>	1 2 1 2 5 63		
5. Total only thi						\$ 3,428.63		
(This line goes in	CRO-1310 Pages line 13a of Detailed Sum					, \$ 3,786.9	Ч	
	(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)								
A* - Media	B* - Printin				<b>D</b> _ To	Another Candidate	CANAL S	
E - Salaries							ses	
I - Postage	J - Penaltie			fice Expens		onation to Legal Expense F		
O* Other				_	_	3 r		
* Codes require	e detailed explanation	n in required r	emarks	field (k)				

-					
1 34	ch	urs	am	an	tc
1/1	3IJ	ui 9	СШ	СП	L

	2		2	Amendment	
Pg	_2	of	2	☑ Yes	□ No

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

1. Committee F	. Committee Full Name (and Fund if applicable)							
Corrie	Shepher	9 fa b	BSS	School	Boar	-d		
3. Type of Disb	ursement <i>Please</i>	use separate Ċl	RO-1310	forms for e	ach type of	Disburs	ement.)	
Operating Expe	THE RESIDENCE OF THE PARTY OF T	tributions to Candid	ates/Politic	cal Committees		Coordina	ated Party Expenditures	
4. Payee Inform				Add 🔲	Remove		T -	
Market 1110 1000 1110	ailing Address & Ph	one		b. Coordinat	ed Committee	Name	d. Comments	
(include city, state,								
	stickers, c			c. Level Regi	stered (Specify	·)		
18621	81st Ave	2.		Federal County: State Municipality:			e. Election Sum to Date	
Tinley	Park IL	60981		- Ollico		norpunty.		
1-800	-347-27			<u> </u>			\$ 94.57	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (	mm/dd/yyyy)	_	k, I	Required Remarks	
\	debit cord	B	10/	14/24	\$ 94.	S'/	stickers	
					\$			
4. Payee Inforn	nation			Add	Remove			
a. Full Name, Maili	ing Address & Phone			b. Coordinate	ed Committee	Name	d. Comments	
(include city, stat			112					
Craho	m Cinem	C-		c. Level Regis	stered (Specify	)	1	
0 ( 0 )	maia St			Federal	Cou			
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Grano	main St minc 27	233					\$ 10/05	
(33	6) 226-1	h. Purpose Code	l. D. c.	(13/)		h. 10	Required Remarks	
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	dobit card	H	16/1	6/24	\$ 18.65	>	Advertising	
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the same of the same of the same of	ing Address & Phone			b. Coordinate	ed Committee	Name	d. Comments	
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5. Total only th	is Page						\$ 113.22	
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A contraction of the second se		mary Page CRO-11	00 if One	ratine Expense	eg)		2701 94	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)							1 3 2 / 8 6 · 1 1	
(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)								
A* - Media	B* - Printir	_		ındraising			ther Candidate	
E - Salaries	F* - Equip			itical Party			ng Public Office Expenses	
I - Postage	J - Penaltic	es	K* - O	ffice Expen	ses Q*	- Donat	tion to Legal Expense Fund	
O* Other  * Codes requir	e detailed evalanati	on in required :	emerke	field (k)				
* Codes requir	e detailed explanati	on in required 1	emarks	field (k)	经产品的			