## **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 ED PRIOLA FOR NC RECEIVED b. Mailing Address (include City, State and Zip Code) d. Date Filed 747 S EIGHTH STREET JAN 10 2025 01/10/2025 MEBANE, NC 27302 e. Phone Number (919) 568-9022 2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasurer Full Name EDWARD J PRIOLA 2024 10/20/2024 12/31/2024 6. Type of Committee (Check One) 9. Type of Report (check only one type of report from one category) X Candidate Campaign Party State/County Municipal Referendum Joint Fundraiser □ PAC Organizational Organizational ☐ Organizational Referendum ☐ Pre-referendum Legal Expense Fund Thirty-five day Quarterly 7. Type of Fund (if applicable, check one) Pre-primary ☐ Final First "Booster Fund" Pre-election Second ☐ Supplemental Final Building Fund Pre-runoff Third Annual Presidential Election Year Candidates Fund Semi-annual Fourth ☐ Special ■ NC Public Campaign Financing Fund Mid Year Semi-annual Year End Mid Year 10. Special Report Name Other: Final Year End 8. Number of Fundraisers this Report Special Final Special 3. Account Information 3. Account Information a. Financial Institution Full Name a. Financial Institution Full Name BANK OF AMERICA b. Purpose c. Account Code b. Purpose c. Account Code PROCESS CAMPAIGN RECEIPTS AND d. Period Begin Balance **EXPENDITURES** d. Period Begin Balance 2.596.34 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 01/10/2025 Signature of Appointed Treasurer Date FOR OFFICE USE ONLY Delivery Method Date Received: Employee: ☐ Normal Mail ☐ Registered Mail Date Postmarked: Employee: Hand Delivered Electronically Filed Date Scanned: Employee: ☐ Signer has not received Date Data Entered: Employee: 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.

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

1. Committee Full Name (and Fund if applicable) 2. Type of Re		port	3. ID	3. ID Number	
ED PRIOLA FOR NC	2024 Fourth	Quarter			
Start of Election Cycle: January 1, 2023		Total this Reporting Peri	od	Total this Election Cycle	
4) Cash on Hand at Start	\$ 2,596	34 5	0.00		
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0.	00 5	1,055.00	
6) Contributions from Individuals	(CRO-1210)	\$ 0.	00 5	30,296.40	
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.	00 5	0.00	
8) Contributions from Other Political Committees	(CRO-1230)	\$ 100.	00 \$	3 1,105.00	
9) Loan Proceeds	(CRO-1410)	\$ 0.	00 \$	0.00	
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.	00 \$	6 49.74	
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	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	IId and IIe)	\$ 100.	00 \$	32,506.14	
EXPENDITURES					
(3) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$ 1,401.	52 \$	29,677.56	
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0.	00 \$	100.00	
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.	00 \$	0.00	
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 207.	50 \$	1,344.86	
15) Loan Repayments	(CRO-1420)	\$ 0.	00 \$	0.00	
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0.0	00 \$	0.00	
17) In-Kind Contributions	(CRO-1510)	\$ 0.0	00 \$	296.40	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15	, 16 and 17)	\$ 1,609.	)2 \$	31,418.82	
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	otract line 18)	\$ 1,087	32 \$	1,087.32	
ADDITIONAL INFORMATION				· · · · · · · · · · · · · · · · · · ·	
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.0	-88		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0.0		Hash I i sa ka i i sa g	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$ 0.0			
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$ 0.0			
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0.0	00		
25) Administrative Support	(CRO-1710)	\$ 0.0	00 \$	0.00	
26) Forgiven Loans	(CRO-1440)	\$ 0.0	00 \$	0.00	
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0.0	00 \$	0.00	
28) Contributions to be Refunded  NC State Board	(CRO-1215)	\$ 0.0	00 \$	0.00 August 2008	

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Contributi	<u> </u>	☐ Yes	X No					
	report contributions t		e, referendum or PA	C committees	(A =			
	ull Name (and Fund if	applicable)	· · · · · · · · · · · · · · · · · · ·		2.1	D Number	·	
ED PRIOLA F	OR NC							
3. Contributor 1	information	** · · · ·	Add 🔲 Re	move				
a. Full Name, Ma	ailing Address & Phone	2	b. Type of Committ		d. C	omments		
(include city,	state, & zip)		Candidate	X PAC				
ARWNC			Referendum					
2966 S CHURO	CH ST. #179		c. Level Registered					
BURLINGTON	N, NC 27215		Federal X County:					
		☐ State	Municipality:	Municipality: e. Dection S				
			Alamance		\$		100.00	
f. Account Code	g. Form of Payment	h. In-Kind Descrip	otion	i. Date (mm/dd/y	ууу)	j. Amount	······································	
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CRO-1230 NC State Board of Elections April 2007

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Use this form to	report expenditures	from the committ	ee for o	perating expen	nses	, contributi	ons to	candidate	/political	
	coordinated party e					100		2. ID Nun	-ton	
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3. Type of Disbu		use separate CRO								
X Operating Exp		ributions to Candida			-		ordinat	ed Party Ex	penditures	
. Payee Inform			· <u> </u>	Add 🔲		move	<u> </u>			
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META PLATF( I META WAY	ORMS, INC.			c. Level Registered (Specify)						
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META PLATFO										
META WAY	J11, 1			c. Level Registered (Specify)						
MENLO PARK	, CA 94025			☐ Federal		County:				
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021 L ST NW				c. Level Regist	te re	d (Specify)				
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	line 13c of Detailed Si				ty E	cpenditures)				_
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C\* - Fundraising

G - Political Party

A\* - Media

E - Salaries

B\* - Printing

F\* - Equipment

D - To Another Candidate

H\* - Holding Public Office Expenses

Aggregated	Non-Media	<b>Expenditures</b>
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Page 1 of 1 Yes X No

Optional form used to report NC Non-Media Expenditures of \$50 c	r less

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Ad Re:	ld move	1	Debit Card	С	10/25/2024	\$ 26.50	EMAIL SOFTWARE SUBSCRIPTION
Ad Rei	d move	1	Debit Card	С	10/25/2024	\$ 26.50	EMAIL NEWSLETTEI SUBSCRIPTION
Ad Rei	d move	I	Debit Card	С	11/24/2024	\$ 26.50	EMAIL NEWSLETTE
Ad Rei	d move	1	Debit Card	0	10/30/2024	\$ 19.00	GOTV TEXT MESSAGES
Add Rer	d move	1	Debit Card	0	11/04/2024	\$ 20.00	GOTV TEXT MESSAGES
Add Rer	d nove	1	Debit Card	0	11/04/2024	\$ 20.00	GOTV TEXT MESSAGES
	nove	Ī	Debit Card	0	11/04/2024	\$ 50.00	GOTV TEXT MESSAGES
Add Ren	d nove	1	Debit Card	0	11/30/2024	\$ 19.00	GOTV TEXT MESSAGING
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RO-1				te Board of Election			D 1 200

CRO-1315

NC State Board of Elections

December 2009