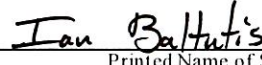
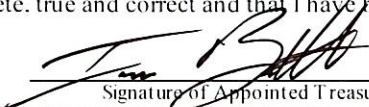




# Disclosure Report Cover

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.

<b>1. Committee Information</b>			
a. Full Name BALTUTIS FOR BURLINGTON			c. ID Number
b. Mailing Address (include City, State and Zip Code) 702 W DAVIS ST BURLINGTON, NC 27215			d. Date Filed 09/30/2025
			e. Phone Number (763) 218-0266
2. Report Year 2025	3. Period Start Date (mm/dd/yy) 07/07/2025	4. Period End Date (mm/dd/yy) 07/17/2025	5. Treasurer Full Name 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 <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		Municipal    State/County    Referendum <input checked="" type="checkbox"/> Organizational <input type="checkbox"/> Organizational <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Quarterly <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Pre-primary <input type="checkbox"/> First <input type="checkbox"/> Final <input type="checkbox"/> Pre-election <input type="checkbox"/> Second <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Third <input type="checkbox"/> Annual <input type="checkbox"/> Semi-annual <input type="checkbox"/> Fourth <input type="checkbox"/> Special <input type="checkbox"/> Mid Year <input type="checkbox"/> Semi-annual <input type="checkbox"/> Year End <input type="checkbox"/> Mid Year <input type="checkbox"/> Final <input type="checkbox"/> Year End <input type="checkbox"/> Special <input type="checkbox"/> Final <input type="checkbox"/> <input type="checkbox"/> Special	
7. Type of Fund (if applicable, check one)		10. Special Report Name	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:			
8. Number of Fundraisers this Report 0			
<b>3. Account Information</b>		<b>3. Account Information</b>	
a. Financial Institution Full Name WELLS FARGO		a. Financial Institution Full Name	
b. Purpose FOR RECEIPTS AND EXPENSES	c. Account Code 1	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 0.00		d. Period Begin Balance \$
<b>CERTIFICATION</b> 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			
 Printed Name of Signer		 Signature of Appointed Treasurer	
		09/30/2025 Date	
<b>FOR OFFICE USE ONLY</b>			
Date Received: 10/8/25	Employee: 	Delivery Method <input checked="" type="checkbox"/> Normal Mail	
Date Postmarked:	Employee:	<input type="checkbox"/> Registered Mail	
Date Scanned: 10/8/25	Employee: 	<input type="checkbox"/> Hand Delivered	
Date Data Entered:	Employee:	<input type="checkbox"/> Electronically Filed	
<input type="checkbox"/> Signer has not received mandatory training			
<b>Please Note:</b> 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

OCT 08 2025

ALAMANCE COUNTY  
BOARD OF ELECTIONS

# Detailed Summary

Amendment

☒ Yes ☐ No

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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. Type of Report</b>		<b>3. ID Number</b>	
BALTUTIS FOR BURLINGTON		2025 Organizational			
<b>Start of Election Cycle: January 1, 2025</b>			<b>Total this Reporting Period</b>		<b>Total this Election Cycle</b>
<b>4) Cash on Hand at Start</b>			\$ 0.00		\$ 0.00
<b>RECEIPTS</b>					
<b>5) Aggregated Contributions from Individuals</b>		(CRO-1205)		\$ 220.00 \$ 220.00	
<b>6) Contributions from Individuals</b>		(CRO-1210)		\$ 1,800.00 \$ 1,800.00	
<b>7) Contributions from Political Party Committees</b>		(CRO-1220)		\$ 0.00 \$ 0.00	
<b>8) Contributions from Other Political Committees</b>		(CRO-1230)		\$ 0.00 \$ 0.00	
<b>9) Loan Proceeds</b>		(CRO-1410)		\$ 0.00 \$ 0.00	
<b>10) Refunds/Reimbursements to the Committee</b>		(CRO-1240)		\$ 0.00 \$ 0.00	
<b>11) Other Receipt Sources</b>					
<b>11a) Interest on Bank Accounts</b>		(CRO-1250)		\$ 0.00 \$ 0.00	
<b>11b) Contributions from Not-For-Profit Organizations</b>		(CRO-1250)		\$ 0.00 \$ 0.00	
<b>11c) Outside Sources of Income</b>		(CRO-1250)		\$ 0.00 \$ 0.00	
<b>11d) Legal Expense Fund - Other Sources</b>		(CRO-1270)		\$ 0.00 \$ 0.00	
<b>11e) Exempt Purchase Price Sales</b>		(CRO-1265)		\$ 0.00 \$ 0.00	
<b>12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)</b>			\$ 2,020.00		\$ 2,020.00
<b>EXPENDITURES</b>					
<b>13) Disbursements</b>					
<b>13a) Operating Expenditures</b>		(CRO-1310)		\$ 0.00 \$ 0.00	
<b>13b) Contributions to Candidates/Political Committees</b>		(CRO-1310)		\$ 0.00 \$ 0.00	
<b>13c) Coordinated Party Expenditures</b>		(CRO-1310)		\$ 0.00 \$ 0.00	
<b>14) Aggregated Non-Media Expenditures</b>		(CRO-1315)		\$ 0.00 \$ 0.00	
<b>15) Loan Repayments</b>		(CRO-1420)		\$ 0.00 \$ 0.00	
<b>16) Refunds/Reimbursements from the Committee</b>		(CRO-1320)		\$ 20.00 \$ 20.00	
<b>17) In-Kind Contributions</b>		(CRO-1510)		\$ 20.00 \$ 20.00	
<b>18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</b>			\$ 40.00		\$ 40.00
<b>19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)</b>			\$ 1,980.00		\$ 1,980.00
<b>ADDITIONAL INFORMATION</b>					
<b>20) Non-Monetary Gifts Given to Other Committees</b>		(CRO-1330)		\$ 0.00	
<b>21) Outstanding Loans (incl. ones from other campaigns)</b>		(CRO-1430)		\$ 0.00	
<b>22) Debts and Obligations owed by the Committee</b>		(CRO-1610)		\$ 0.00	
<b>23) Debts and Obligations owed to the Committee</b>		(CRO-1620)		\$ 0.00	
<b>24) Account Transfers Within the Committee</b>		(CRO-1720)		\$ 0.00	
<b>25) Administrative Support</b>		(CRO-1710)		\$ 0.00 \$ 0.00	
<b>26) Forgiven Loans</b>		(CRO-1440)		\$ 0.00 \$ 0.00	
<b>27) 48-Hour Notice Reports Sum</b>		(CRO-2220)		\$ 0.00 \$ 0.00	
<b>28) Contributions to be Refunded</b>		(CRO-1215)		\$ 0.00 \$ 0.00	

**Aggregated Contributions from Individuals**Page 1 of 1

Amendment

☒ Yes ☐ No

Optional form used to report NC Contributions From Individuals of \$50 or less

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
BALTUTIS FOR BURLINGTON						
<b>3. Contributor Information</b>						
<b>a. Amend</b>	<b>b. Account Code</b>	<b>c. Form of Payment</b>	<b>d. In-Kind Description</b>	<b>e. Date (mm/dd/yyyy)</b>	<b>f. Amount</b>	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	In-Kind	FILING FEE	07/07/2025	\$ 20.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		07/08/2025	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		07/08/2025	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		07/08/2025	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		07/17/2025	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		07/08/2025	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Credit Card		07/08/2025	\$ 25.00	
<b>4. Total only this Page</b>					\$ \$220.00	
<b>5. Total of ALL CRO-1205 Pages</b> <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ \$220.00	

CRO-1205

NC State Board of Elections

April 2007



# Contributions from Individuals

Pg 1 of 3

Amendment  
☒ Yes ☐ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> BALTUTIS FOR BURLINGTON					<b>2. ID Number</b>	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  MARVIN BLACKBURN 429 EDINBURGH DR BURLINGTON, NC 27215 (336) 380-5909				<b>b. Job Title/Profession</b> no job title or profession		<b>d. Comments</b>  
				<b>c. Employer's Name/Specific Field</b> Not Employed		
				<b>e. Election Sum to Date</b> \$ 150.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Credit Card		07/08/2025	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  ELLEN BLACKWELL 2734 Blanche Drive BURLINGTON, NC 27215 (336) 266-7880				<b>b. Job Title/Profession</b> Scheduling Manager		<b>d. Comments</b>  
				<b>c. Employer's Name/Specific Field</b> CRC Salomon Court Reporting		
				<b>e. Election Sum to Date</b> \$ 100.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Credit Card		07/08/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  DON CHAPLIN 2602 EDGEWOOD AVE BURLINGTON, NC 27215 (336) 584-4007				<b>b. Job Title/Profession</b> no job title or profession		<b>d. Comments</b>  
				<b>c. Employer's Name/Specific Field</b> Not Employed		
				<b>e. Election Sum to Date</b> \$ 100.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Credit Card		07/08/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 350.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1,800.00	

# Contributions from Individuals

Pg 2 of 3

Amendment

☒ Yes ☐ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
BALTUTIS FOR BURLINGTON						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
CARRIE COOMBS 615 e davis st BURLINGTON, NC 27215 (336) 512-3306			Student			
			<b>c. Employer's Name/Specific Field</b>			
			Alamance Community College		<b>e. Election Sum to Date</b>	
				\$ 100.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Credit Card		07/08/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
DIANE HEATH 3027 Maple Ave. E1 BURLINGTON, NC 27215 (336) 512-3135			no job title or profession			
			<b>c. Employer's Name/Specific Field</b>			
			Not Employed		<b>e. Election Sum to Date</b>	
				\$ 250.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Credit Card		07/10/2025	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
MARK HEIZER po box 162 CARRBORO, NC 27510 (919) 636-2879			REALTOR			
			<b>c. Employer's Name/Specific Field</b>			
			H-Co. Realty.		<b>e. Election Sum to Date</b>	
				\$ 250.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Credit Card		07/08/2025	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 600.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1,800.00	

# Contributions from Individuals

Pg 3 of 3

Amendment

☒ Yes ☐ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
BALTUTIS FOR BURLINGTON						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>
NIDHI SACHDEVA 132 VINTAGE DR CHAPEL HILL, NC 27516				Public Health		
				<b>c. Employer's Name/Specific Field</b> NC Association of County Commissioners		
				<b>e. Election Sum to Date</b>		
				\$ 500.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Credit Card		07/09/2025	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>
PHIL SMITH PO Box 652 ELON, NC 27244				BUSINESS ADMIN		
				<b>c. Employer's Name/Specific Field</b> BUSINESS OWNER		
				<b>e. Election Sum to Date</b>		
				\$ 100.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Credit Card		07/09/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>
AMY TAYLOR NORTH 8480 Lismore St Clemmons, NC 27012				BUSINESS ADMIN		
				<b>c. Employer's Name/Specific Field</b> BUSINESS OWNER		
				<b>e. Election Sum to Date</b>		
				\$ 250.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Credit Card		07/10/2025	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 850.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1,800.00	

# Refunds/Reimbursements From the Committee

Pg 1 of 1

Amendment

☒ Yes ☐ No

Use this form to report refunds/reimbursements, including contributions returned to the contributor

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
BALTUTIS FOR BURLINGTON					
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>d. Type of Committee</b>		<b>g. Comments</b>
IAN BALTUTIS 702 W DAVIS ST BURLINGTON, NC 27215 (763) 218-0266			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			<b>e. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		<b>h. Original Receipt Date</b>
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		07/07/2025
					<b>i. Original Receipt Amount</b>
					\$ 20.00
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>		<b>f. Purpose Code</b>	
BUSINESS ADMINISTRATION		Management of Companies and Enterprises		P	
				<b>j. Election Sum to Date</b>	
				\$ 0.00	
<b>k. Account Code</b>	<b>l. Form of Payment</b>	<b>m. Required Remarks</b>		<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>
1	Electric Funds Tran	FILING FEE		07/17/2025	\$ 20.00
<b>4. Total only this Page</b>					\$ 20.00
<b>5. Total of ALL CRO-1320 Pages</b> (This line must be on line 15 of Detailed Summary Page CRO-1100)					\$ 20.00
<b>6. Purpose Codes</b> (List detailed disbursement code in (f) above)					
L - Returned to Contributor      M - Overpayment for Service      N - Exceeded Contribution Limit					
P* - Reimbursement of In-Kin      O* Other					
* Codes require detailed explanation in required remarks field (m)					

CRO-1320

NC State Board of Elections

July 2007



# In-Kind Contributions

Pg 1 of 1 Amendment  
☒ Yes ☐ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

<b>1. Committee Full Name (and Fund if applicable)</b> BALTUTIS FOR BURLINGTON		<b>2. ID Number</b>	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	
Aggregated Individual Contribution		<input checked="" type="checkbox"/> Individual	
		<input type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		<b>d. Election Sum to Date</b>	
		\$ 0.00	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
FILING FEE		07/07/2025	\$ 20.00
			\$
			\$
<b>4. Total only this Page</b>		\$ 20.00	
<b>5. Total of ALL CRO-1510 Pages</b> (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 20.00	

CRO-1510

NC State Board of Elections

December 2007