Disclosure Rep							F	
Use this form for gen	neral report and committee	informat	tion, must be	signe	d and sub	mitted along with	othe	r detailed forms.
Do not use this form to 1. Committee Inform	to update information							
a. Full Name	nation	Edwar in	Water a 15 F			<u> </u>		TO Name to a
Assess (Control of the Control of th	ELECT JENNIFER TALLE	E <b>Y</b>					+	c. ID Number
							1	
	ude City, State and Zip Code)						1	d. Date Filed
PO BOX 872 GRAHAM, NC 2725	50							
UKAHAWI, NC 2723	33						-	e. Phone Number
							F	
Alabama sa			<del></del>			-		336-229-4225
2. Report Year 3	3. Period Start Date (mm/d		4. Period F (mm/dd/yy)	End D	ate	5. Treasurer Ful	18 11	ame - August
2035	9/24/202	h5_	10/2	0/	25	NIKKI LEA ELI	LIS	
6. Type of Committe		7 1000000000000000000000000000000000000	pe of Report	- 1	(check onl	ly one type of repor	rt fre	om one category)
Candidate Campaig		Municip	pal		State/Co	ounty		Referendum
PAC Independent	Referendum		Organizational			Organizational	Organizational	
Expenditure Legal Expense Fun	Joint Fundraiser		Thirty-five day	Quarterly		Quarterly	L	Pre-referendum
AP THE RESIDENCE OF THE PARTY O	(if applicable, check one)		Pre-primary			First		Final
Booster Fund"		<b>→</b>	Pre-election			Second	[	Supplemental Final
Building Fund	,	V	Pre-runoff			Third	[	Annual
	1		Semi-annual			Fourth	1	Special
Other:	1	님	Mid Year Year End			Semi-annual Mid Year	1	10 Carriel Donout Name
	1		Final			Mid Year Year End		10. Special Report Name
8. Number of Fundra	aisers this Report	1 = -	Special		F	Final		
(	O		Section	<u></u>	□ s	Special		
11. Account Informat						nformation		
a. Financial Institution Fu	ıll Name	13		a. Fin	ancial Instit	tution Full Name		
TRUIST b. Purpose	c. Account Code			b. Pur			$\neg$	10-1-
CAMPAIGN						A STATE OF THE STA	+	c. Account Code
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	s 357a.	.85			001	27 2025		\$
CERTIFICATION				B	Y:			
I certify that the Comr	mittee or Fund is in compli	ance with	h all applicat	ole pro	ovisions of	f Article 22A, 22B	3, & 1	22D-22M of Chapter 163 of
the NC General Statute	tes and that no funds are cor	mmingle	ed with prohil	bited o	or other no	on-disclosed funds.	s. I fi	urther certify that this report
is complete, true and c	correct and that I have been	trained						11712005
NULL	Printed Name of Signer				of Appointed	_	10	21/2025 Date
FOR OFFICE USE ON				Man -	Jiripr	u medale.		Duit
Date Received:	10/27/25	1	Employee:		9	<u> </u>	Deli	livery Method Normal Mail
Date Postmarked:		1	Employee:					Registered Mail  Hand Delivered
Date Scanned:	10/30/25	1	Employee:		A			Electronically Filed Signer has not received
Date Data Entered	J:	J	Employee:					mandatory training
					100 100 100			

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 Amendment ☐ Yes

1. Committee Full Name (and Fund if applicable)	2. Type of	Report 3.	ID Number				
Committee to Elect Jennifer Taller Pre-Election							
Start of Election Cycle: January 1, <u>入りる</u> り	15	Total this Reporting Period	Total this Election Cycle				
4) Cash on Hand at Start		\$ 35.72.85	\$ 990.78				
<u>RECEIPTS</u>							
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$				
6) Contributions from Individuals	(CRO-1210)	\$ 250	\$ 3 250				
7) Contributions from Political Party Committees	(CRO-1220)	\$ 160.45	\$ 160.45				
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$				
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)	\$ 410.45	\$ 3410.45				
EXPENDITURES							
13) Disbursements	S Me						
13a) Operating Expenditures	(CRO-1310)	\$ 953.44	\$1371.37				
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)	\$ 160.45	\$ 160.45				
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 13	5, 16 and 17)	\$ 1113,89	1531.82				
19) Cash on Hand at End (Add lines 4 and 12 together, then sub ADDITIONAL INFORMATION	otract line 18)	\$ 2869.41	\$ 2869.41				
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	And the following				
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	Water Company Malifer Company Company	and a second of the second of				
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-1710) (CRO-1440)						
	(CRO-2220)	\$	\$				
	(CRO-1215)	\$	\$				
		0.772	•				

☐ No

		rom Individu:		Pg		Ì	Amendment  Yes No	
Use th	is form to report	individual contributi	ons over \$50 or o	contributions unc	ler \$50 if form C	RO	1205 is not used	
^		me (and Fund if app	olicable)	STINGER AND STREET		2.	ID Number	
	mmittee		Jennifer	Talley				
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Pol	14 J Rida	dell		State of		-		
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	tributor Inform	THE REPORT OF THE PROPERTY OF		Add Rei	nove			
V000 1000 C	ame, Mailing Addr			b. Job Title/Profes	ssion	d. C	Comments	
(includ	le city, state, & zip)							
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		O-1210 Fages of Detailed Summary Pa	as CBO 1100		2,000	\$	250	

Less this form to report contributions from a political party   Less this form to report contributions from a political party   Less this form to report contributor information   Add   Remove	Contribu	tions from Politic	eal Party Committees P	g j of j	Amendment  Yes No	
3. Contributor Information  3. Full Name, Mailing Address & Phone (include city, state, & zip)  D. Comments    D. Comments   D. Comments	Use this form	n to report contribution	s from a political party	5 — 01 —	Li ies Li No	
3. Contributor Information   Add   Remove    a. Full Name, Mailing Address & Phone (include city, state, & zip)    b. Comments    b. Comments    c. Election Sum to Date    s. Luco. 45    d. Account Code   C. Form of Payment   C. In-Kind Description    p. Date (mm/dd/yyyy)    h. Amount    s.	1. Committee	Full Name (and Fund if	applicable)		2. ID Number	
a Reul Name, Mailing Address & Phone (include city, state, & zip)    Account Code   C. Form of Payment   C. In-Kind Description   C. Election Sum to Date	Comm	uttee to Ele	ct Jennifer Tall	ALL		
C. Election Sum to Date   S.   Loc. 45			☐ Add ☐ Re	emove		
C. Election Sum to Date   S.   L. L. Account Code   C. Form of Payment   C. C. Account Code   C. Form of Payment					b. Comments	
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Disbursem	ents				Pg of	ĺ	Amendment  Yes No
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Committee F	full Name (and Fund	1 ii applicable)				1344.	. ID Number
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and the same of th	iverbend				stered (Specify)		r >
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The second state - Market Control Control Control Control	ing Address & Phone		-	b. Coordinate	ed Committee Name	e d	. Comments
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	line 13a of Detailed Sum						953.44
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7. Purpose Co A* - Media	odes (List detailed B* - Printin			ndraising	р т-	Angth	v Condidata
E - Salaries	F* - Equip			indraising			er Candidate Public Office Expenses
I - Postage	J - Penaltie			ffice Expens			n to Legal Expense Fund
O* Other							
* Codes requir	e detailed explanation	on in required r	emarks	field (k)			

<b>In-Kind Contributions</b>	Pg	of	1	Amendment  Yes No
Use this form to report non-monetary contributions, donations, good	ds or services prov	vided to the commi	ittee o	
Use CRO-1215 if In-Kind Contributions were or will be refunded. Committee Full Name (and Fund if applicable)	nded within 7 da	ys.	12 T	D Number
Comment in the Latter Local	(~-T~1)	A A	2	D Number
3. Contributor Information	Add Re	move	47299	
a. Full Name, Mailing Address & Phone	b. Type of Contri		Ic. C	omments
(include city, state, & zip)	Individual	Dutor	1	Onuncuis
Vote for Pets	Candidate Party			
1213 Maple Ave	PAC Referendum			
Burlington, NC 27215	Referendum Other Receipt	Source	<b>d. E</b> l	lection Sum to Date 160.45
e. Description	18	f. Date (mm/dd/yyy	yy)	g. Fair Market Amount
Newspaper Ads		10/16/20	025	\$160.45.
•				\$
				\$
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a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contrib	outor	c. Co	omments
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	Candidate Party			
	PAC			
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(include city, state, & zip)	Individual Candidate			
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	PAC			
	Referendum		d. Ele	ection Sum to Date
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4. Total only this Page			\$	1100.45
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