_	neral report and committee into update information	nformation, must b	e signed and sub	omitted along with	other detailed forms.		
1. Committee Infor	CONTROL FOR CONTROL CO						
a. Full Name		· · · · · · · · · · · · · · · · · · ·	SECOND AND AND AND AND AND AND AND AND AND A	等中的研究的 等。 如此,	c. ID Number		
	<u> </u>						
Committee to Elect	Violet Arth ude City, State and Zip Code)				d. Date Filed		
b. Maning Address (inci	uue City, State and Zip Code)						
922 West Sumter St	, Shelby, NC 28150				01/28/2022		
					e. Phone Number		
					704-481-7595		
2. Report Year	3. Period Start Date (mm/d	ld/yy) 4. Period (mm/dd/yy	End Date	5. Treasurer F	ull Name		
2021	10/25/2021	12/	31/2021	Michelle Garey	ey		
6. Type of Committ	tee (Check One)	9. Type of Repor	t (check on	ly one type of rep	ort from one category)		
Candidate Campa	aign Party	Municipal	State/C	County	Referendum		
PAC	Referendum	Organization	al 🔲 '	Organizational	Organizational		
Independent Expenditure Legal Expense Fu	Joint Fundraiser	Thirty-five d	ay (Quarterly	Pre-referendum		
7. Type of Fund	(if applicable, check one)	Pre-primary		First	Final		
Booster Fund"		Pre-election		Second	Supplemental Final		
Building Fund		Pre-runoff		Third	Annual		
		Semi-annual		Fourth	Special		
		Mid Ye	—	Semi-annual			
Other:		Year En	ıd 📙	Mid Year	10. Special Report Name		
		Final		Year End			
8. Number of Fund	raisers this Report	Special Special		Final			
· · · · · · · · · · · · · · · · · · ·		<u> </u>		Special			
11. Account Inform			11. Account l				
a. Financial Institution I	Full Name		a. Financial Inst	titution Full Name			
Wells Fargo	c. Account Code		h Dumassa		c. Assount Code 22		
b. Purpose	e. Account Code		b. Purpose				
					Z8		
	d. Period Begin Balance	2			d. Period Begin Barance		
	\$ 1828.87				s 25 SE		
CEDEUCIATION			<u> </u>				
CERTIFICATION	· · · · · · · · · · · · · · · · · · ·	*.1 11 1*			co ' O		
					2B, & 22D-22M of Chapter 163 of ds. I further certify that this report		
is complete true and	cornect and that I have been	n trained by the XI X	State Board of E	Fightions	ds. I further certify that this report		
V V	ichelle Gaven		Thehla	HANN	1/18/22		
	Printed Name of Signer	— I	Signature of Appoin	ted Treasurer) Date		
FOR OFFICE USE O	NLY ,						
Date Received:	1-28-22	Employee:		<u> </u>	Delivery Method Normal Mail		
Date Postmarke	d:	Employee:		Registered Mail Hand Delivered			
Date Scanned:		Employee:		 (Electronically Filed Signer has not received		
Date Data Enter	ed:	Employee:			mandatory training		
Please Note: Thi	is form cannot be used to an	nend committee info	ormation such as	the committee ad	dress, treasurer, assistant treasurer,		
		an of books informa					
	You must amend the State	ment of Organizatio	n (CRO-2100A-	-E) to make comm	nittee changes.		

Amendment

Disclosure Report Cover

Detailed Summary

Amendment

Yes No

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

1. Committee Full Name (and Fund if applicable) 2.			3. ID Number
Committee to Elect Violet Arth	init()/A strate(initialization) ababatata		
Start of Election Cycle: January 1,	2021	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1828.87	\$ 0
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 740	\$ 6140
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$ 20
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	SE THE
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$20 250
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$	\$ 7 6 6
11c) Outside Sources of Income	(CRO-1250)	\$	
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$ = 78
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 1.	ld and 11e)	\$ 740	\$ 6140
<u>iexoposidimuraes</u>			
13) Disbursements	distribution of the second		
13a) Operating Expenditures	(CRO-1310)	\$ 1970.24	\$ 5541.37
13b) Contributions to Candidates/Political Committee	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, 15, 10	5 and 17)	\$ 1970.24	\$ 5541.37
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract	· .	\$ 598.63	\$ 598.63
ANDIDITHIORIAUL TENTROPRIMIATURORY			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	
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)	\$	\$
20) Contributions to be iteration	(0.10-1213)		<u> </u>

		m Individuals			Pg <u>1</u> of		_ Yes	□ No
		ividual contributions						escontact a circumitat
1. Comn	ittee Full Name	(and Fund if applica	ble)			2. ID Nu	mber	
Committ	ee to Elect Violet	Arth						
3. Contr	ibutor Informati	on .		Add 🗇 R	lemove	100 A		
	ne, Mailing Address	& Phone		b. Job Title/Profession	on	d. Commer	nts	-
(include	city, state, & zip)			retired				
Ron Harrill				c. Employer's Name	1			
2311 Holly Lane								
Shelby, N	NC 28150					e. Election	Sum to Date	
						\$	40	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Date (mm/dd/yy	ууу)	k. Amount	
		check	ŀ		10/21/2	021	\$	40
							\$	
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	ibutor Informations, Mailing Address	and the Me light emerged has not the heart-fact that bear altered from		Add R	Lemove	d. Commeg	<u> </u>	
	city, state, & zip)	& I none		attorney	OII .		3 112	<u> </u>
								7
David Te	•			c. Employer's Name		> > \frac{1}{2}) 1	
4	NC 28150					Sum to Date 1	 1	
							り 356 5700 15700	
f. Prior	g. Account Code	h. Form of Payment	i In L	(ind Description	j. Date (mm/dd/yy	<u></u>	Tk. Amount	
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		check		<u>-</u>	9/23/2	021	\$	200
							\$	
3. Contri	ibutor Informatio	on		Add R	emove		175	
	ne, Mailing Address	& Phone		b. Job Title/Profession		d. Commen	ıts	Topics and the second
(include	city, state, & zip)			security specialis	t			
Robin Sp	angler			c. Employer's Name/	Specific Field			
200 Fairv	vay Dr							
Shelby, N	NC 28150			IBM		e. Election	Sum to Date	
						\$	100	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy	yy)	k. Amount	
		check			10/11/2	021	\$	100
							\$	
							\$	
4. Tota	only this Pag	e				\$		640
5. Total	of ALL CRO	-1210 Pages				¢.		740

(This line must be on line 6 of Detailed Summary Page CRO-1100)

740

\$

Amendment

Contr	ibutions fro	m Individuals		P	g 2 of	,	Amendment Yes No		
Use this f	form to report indi	vidual contributions	over \$50		· —	2O 1205 is no	ot used		
1. Comm	iittee Eull Name (and Fund if applica	ble)			2. ID Nun	nber		
Committe	ee to Elect Violet	Arth							
3. Contri	ibutor Informatio	on a second		Add R	emove ;				
a. Full Nan	ne, Mailing Address &	& Phone		b. Job Title/Profession	n	d. Commen	ts		
(include city, state, & zip)			sales						
Ashley Hounshell 1723 Arbor Way Dr			c. Employer's Name/S	Specific Field					
			C. Employer S Panier	pecinic r teru					
Shelby, N	•			Matilda Jane Clot	hing	e. Election S	Sum to Date		
						\$	\$ 100		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Lind Description	j. Date (mm/dd/y	ууу)	k. Amount		
		Paypal			8/18/2	021	\$ 100		
							\$		
							\$		
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(include	city, state, & zip)						., OØ		
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				c. Employer's Name/S	specific Field	-			
							e. Election Sum to Date 1		
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1.71101	g. Account Code	n. Form of Fayment	1. 111-10	Cind Description	j. Date (mm/dd/y	ууу)	L. Amonus		
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	ie, Mailing Address &	& Phone		b. Job Title/Profession	1	d. Comments			
(include o	city, state, & zip)								
				c. Employer's Name/S	pecific Field	-			
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(This line must be on line 6 of Detailed Summary Page CRO-1100)

740

\$

•									Amend	ment		
Disbursem	ents				Pg	1	of			Yes		N
Use this form to	report expenditures	from the committ	ee f	for; operating expe	_	contributio	ns to ca	ndidate	/politica	al		***************************************
committees and	coordinated party ex	ependitures.							<u> </u>			
1. Committee F	ull Name (and Fun	d if applicable)			1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			2	2. ID Ni	um ber		
committee to El	lect Violet Arth			***************************************								
3. Type of Disb	ursement <i>(Plea</i>	ise use separate C	RO	-1310 forms for e	each ty	pe of Disb	urseme	nt.)		10.413		
Operating E				ates/Political Committ					arty Expe	enditures	3	
4. Payee Inform	ration	\square	A	dd → tota	10 8	Remove		54430				1911
	ng Address & Phone			Coordinated Comm				d. Comr	nents		AND DESCRIPTION OF THE PARTY OF	1000
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(This line goes in	line 13b of Detailed Sun	mary Page CRO-110	0 if (Contrib to Candidates	/Politica	ıl Comm)		\$	1970.2	4		
(This line goes in	line 13c of Detailed Sum	mary Page CRO-110) if (Coordinated Party Exp	enditui	es)						
7. Purpose Code	es (List detailed ex	penditure code in	(h.)	above)				:72 t il				Sign of the same o

D - To Another Candidate

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

C* - Fundraising

G - Political Party

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

K* - Office Expenses

A* - Media

E - Salaries

I - Postage

O* - Other

B* - Printing

J - Penalties

F* - Equipment

•							Amendment		
Disbursem	ents			Pg	<u>2</u> of		Yes	N	
			ee	for; operating expenses	, contributions to c	andidat	e/political		
committees and	coordinated party ex	rpenditures.							
	ull Name (and Fun	d if applicable)	182				2. ID Number		
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				<u>0-1310 forms for each </u>	·····		······································		
Operating B				dates/Political Committees			Party Expenditures	errenou	
	nation		7		Remove	T			
	ing Address & Phone		<u> </u> b	o. Coordinated Committee N	lame	d. Com	ments		
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Wells Fargo			Г	Level Registered (Specify) Federal					
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the second of th	CRO-1310 Pages					Ψ	10.04		
The second secon	line 13a of Detailed Sun	mary Page CRO-1100) if	Operating Expenses)	s one en en en en en en en en en en en en e		1070 04		
(This line goes in	line 13b of Detailed Sun	mary Page CRO-1100) if	Contrib to Candidates/Politic		\$	1970.24		
(This line goes in	line 13c of Detailed Sum	mary Page CRO-1100	if	Coordinated Party Expenditu	ires)				
7. Purpose Codes (List detailed expenditure code in (h.) above)									

B* - Printing

J - Penalties

F* - Equipment

A* - Media

E - Salaries

I - Postage

O* - Other

C* - Fundraising

 ${\bf G}$ - Political Party

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

K* - Office Expenses

D - To Another Candidate

H* - Holding Public Office Expenses

Q* - Donation to Legal Expense Fund