Disclosure Report	Cover
-------------------	-------

Ame	ndment	
	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 Infor	rmatio	n								
a. Full Name								c. ID Number		
Committeeto El	ect E	BILL BAGGS CLE	RK OF	COURT						
b. Mailing Address (inc	clude Ci	ty, State and Zip Code)						d. Date Filed		
3845 Be	ent C	reek Dr. Su	Ú							
Concord N	Concord, NC a8027									
G119010,11	980-521-3117									
2. Report Year	3. Per	iod Start Date (mm/c	ld/yy)	4. Period (mm/dd/yy)	End Da	te	5. Treasurer Full 1	Name		
2023	01/1	12023		06/30	1/202	3	Wanda H.	Arthur		
6. Type of Committ	tee (Ch	eck One)	9. Typ	e of Report	(c	heck o	nly one type of report	from one category)		
Candidate Camp	oaign [Party	Munici			State	/County	Referendum		
PAC	[Referendum		Organizationa	ıl		Organizational	☐ Organizational		
Independent Expenditure Legal Expense F	Fund	Joint Fundraiser		Thirty-five da	ay		Quarterly	Pre-referendum		
7. Type of Fund	Contraction to	plicable, check one)		Pre-primary			First	☐ Final		
Booster Fund"				Pre-election			Second	Supplemental Final		
■ Building Fund				Pre-runoff			Third	Annual		
			_	Semi-annual			Fourth	☐ Special		
				Mid Yea		4	Semi-annual			
Other:			Year En		d	X	Mid Year	10. Special Report Name		
				Final			Year End			
8. Number of Fund	raisers	this Report		Special			Final			
							Special			
11. Account Inform	ation				11. Ac	count	Information			
a. Financial Institution					a. Fina	ncial In	stitution Full Name			
State Employe	es C	redit Union								
b. Purpose ' /		c. Account Code			b. Pur	ose		c. Account Code		
Campaign Receipts & Expenditure		1								
heceip 1		d. Period Begin Balanc	:				d. Period Begin Balance			
Expenditure	وع	s 1,398	.47					\$		
CERTIFICATION										
the NC General State	utes an	d that no funds are c	omming	gled with pro	hibited	or othe	er non-disclosed funds.	& 22D-22M of Chapter 163 of I further certify that this report		
Wanda	H.	and that I have bee	n traine	$\mathcal{U}_{\mathcal{A}}$	axa	te:	# CUTTHUR_	7/14/2023		
FOR OFFICE USE O		d Name of Signer		Sig	nature of	Appoi	nted Treasurer	Date		
Date Received:	INLY	6-14-23		Employee:		_	te !	Delivery Method Normal Mail		
Date Postmarke	d:			Employee:			<u> </u>	Registered Mail Hand Delivered		
Date Scanned:				Employee:			[Electronically Filed Signer has not received		
Date Data Enter	red:			Employee:				mandatory training		
Please Note: This	form o						s the committee address tinformation.	ess, treasurer, assistant treasurer,		

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes. 240291st 2008

Amendment M No

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

1. Committee Full Name (and Fund if applicable) 2. Ty	pe of Report		3. ID Number
Committee to Elect BILL BAGGS CLERK OF COURT MI	o Year Sem	i Annual	
Start of Election Cycle: January 1,	2023	Total this	Total this
4) Cash on Hand at Start		Reporting Period \$ 1,398.47	Election Cycle \$ 1,456.76
RECEIPTS		1,510.11	1 11136,16
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$	\$ 40000
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$ 7,000,00
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$.35	\$ 27.57
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c,	11d and 11e)	\$ 1398.8	2 \$ 8883.73
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 6.0	° \$ 7490.91
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, 15, 1	6 and 17)	\$ 6,00	o s
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract	ct line 18)	\$ 1392.8	2 \$ 1392.82
ADDITIONAL INFORMATION		. 5 10 .00	
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 24,000,00	
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)	\$	s
20) Conditionals to be retained	(CRU-1213)	φ	9

Pg 1 of 1 Amendment No

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

1. Committee F	ull Name (and Fund if	applicable)		2.	ID Number
Committee	to Elect BILL BA	1665 CLEPIK OF COURT			
3. Type of Rece	ipt Source	(Please use separate CRO-12	50 forms	for each type of Ro	eceipt Source.)
Interest		Contributions from Not-fo	r-Profit Or		Outside Sources of Income
4. Contributor		☐ Add		☐ Remove	
	ling Address & Phone		b. Not-fe	or-Profit Federal ID #	d. Comments
(include city, sta		1			
State Em	PLOYEES Credit Un	ion	c. Outsid	de Source Explanation	
60 Raifo	vd Drive NW				
Concord,	NC 28027				e. Election Sum to Date
704-788	- 3444				\$ 27.35
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yyy	j. Amount
1	Draft Draft	Interest on Check		1/12/2023	\$. 07
1	Dragt	Interest on Checki	nq	2/13/2023	\$.06
4. Contributor	Information	☐ Add		☐ 'Remove	
a. Full Name, Mai	ling Address & Phone		b. Not-fe	or-Profit Federal ID #	d. Comments
(include city, sta		1 1 1			
State E	MPLOYERS CREDI-	tunion	c. Outsid	de Source Explanation	
60 1017	ord Dr NW 1, NC 28027				
					e. Election Sum to Date
	38-3444				\$ 27.46
f. Account Code	g. Form of Payment	h. In-Kind Description	. 1	i. Date (mm/dd/yyyy	j. Amount
/	Draft Draft	Interest on Check	ling	03/13/202	3 \$.05
1	Draft	Interest on Check	sing	04/13/202	3 \$.06
4. Contributor		☐ Add		☐ Remove	
	ling Address & Phone		b. Not-fe	or-Profit Federal ID #	d. Comments
(include city, sta		11:1-0			
State Em	PLOYERS CREDIT	White.	c. Outsid	le Source Explanation	
60 Mais	, NC 28027				
Concord	38-3444				s 27.51
f. Account Code	g. Form of Payment	h. In-Kind Description	()	i. Date (mm/dd/yyyy	
I	Draft Draft	Interest on Check Intereston Chec	2119	05/10/2023	\$ 205
l		Intereston Chee	King	06/13/202	3 \$.06
5. Total only					\$
6. Total of Al	LL CRO-1250 Page	S			
		ary Page CRO-1100 if Interest)			\$. 35
		ary Page CRO-1100 if Not-for-Prof			
(This line goes in	une 11c of Detailed Summa	ary Page CRO-1100 if Outside Sour	ces of Inco	me)	

70.1		1		1	Ame	ndment
Disbursements	Pg		of			Yes

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

1. Committee F	full Name (and Fun	d if applicable)			2. ID Number
Committee to	Flect BILL BA	GGS CLERK OF	COURT		
3. Type of Disb	ursement (Plea	ise use separate C	CRO-1310 forms for each t	ype of Disburseme	ent.)
Operating l		Contributions to C	Candidates/Political Committees	☐ Co	ordinated Party Expenditures
4. Payee Inforn			Add	Remove	
a. Full Name, Mai	ling Address & Phone		b. Coordinated Committee	Name	d. Comments
(include city, state	e, & zip)	s 1	4		
StateEmp	loyces Credit 1 Dr NW NC 28027	Knion	c. Level Registered (Specify)	
60 Ralfor	4 Dr NW		Federal	County:	
Concord	NC 28027		State	Municipality:	e. Election Sum to Date
104-788	2 - 2.144		Since D	минефину.	1 11 50
104-180	- 34+1				s 146°
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Draft	0	01/12/2023	\$ 1.00	
1	Draft	0	02/13/2023	\$ 1.00	
4. Payee Inform	nation		Add 🗆	Remove	
	ling Address & Phone		b. Coordinated Committee		d. Comments
(include city, state	, & zip)				
State Emi	ployees Cred LD+ NW NC 28027	it Union			
1000	10- NW		c. Level Registered (Specify)	
60 Kaifova	DY		Federal U	County:	
Concord,	NC 28021		State	Municipality:	e. Election Sum to Date
204-788	3 = 34 44				s 14800
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Draft	0	03/13/2023	\$ 1.00	
1	Draft	0	04/13/2023	\$ 1.00	
4. Payee Inform	DELICENCE OF THE PARTY OF THE P		Add 🔲	Remove	
a. Full Name, Mai	ling Address & Phone		b. Coordinated Committee	Name	d. Comments
(include city, state					
State EMPL	OYEES CREDIT	Union			
10 Daise	WY DY NW		c. Level Registered (Specify		
60 Marto	NO 20022	,	Federal	County:	
Concord	, NC doud		L State L	Municipality:	e. Election Sum to Date
704-78	NC 28027 NC 28027				\$ 15000
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Dragt	6	05/10/2023	\$ 1.00	
1	Dragt	U	05/10/2023	\$ 1.00	
5. Total only thi					\$
NACE AND TO SECURE AND ADDRESS OF THE PROPERTY	CRO-1310 Pages				
			1100 if Operating Expenses)		\$ 6.00
			1100 if Contrib to Candidates/		0,
THE RESERVE AND PERSONS ASSESSED.	THE RESIDENCE OF THE PARTY OF T	THE RESIDENCE OF THE PARTY OF T	1100 if Coordinated Party Exp	enditures)	
7. Purpose Code A* - Media	B* - Printing	C* - Fund		D - To Anothe	er Candidate
E - Salaries	F* - Equipment				Public Office Expenses
I - Postage	J - Penalties		ce Expenses	U	n to Legal Expense Fund
O* - Other					
* Codes require	e detailed explanati	on in required re	emarks field (k)		

Outstanding Loans	0	uts	tan	din	g L	oans
-------------------	---	-----	-----	-----	-----	------

			~	Amen	dment		
Pg	1	of	3		Yes	V	No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Na	2. ID Number			
Committee to	elect BILLBAGOS C	LERK O	F COURT Remove	
3. Lender Information				
a. Full Name, Mailing Add		b. Job Tit	de/Profession	d. Comments
(include city, state, & zip		01	ERK OF COURT	
	en "BILL" BAGGS		ABARRUS COUNTY	e. Start Date (mm/dd/yyyy)
1639 OID C	HARLOTTE ROAD		yer's Name/Specific Field	1.1
Concord, NO	28027			11/13/2009
			NC ACC	f. End Date (mm/dd/yyyy)
980-52	-3087		// -	N/A
g. Rate	h. Security Pledged		i. Original Loan Amount	j. Remaining Loan Balance
d %	NA		\$ 2,00000	\$ 2,00000
k. Full Name of Lending In			or, our.	I. Loan Number
N/o				
11/11			-	
3. Lender Informatio			Remove	120
a. Full Name, Mailing Add (include city, state, & zi			tle/Profession	d. Comments
	PREN "BILL" BACGS	CL	ERK OF COURT	
,		C	ABARRUS COUNTY	e. Start Date (mm/dd/yyyy)
1634 OIT C	havlotte ROAD	c. Emplo	yer's Name/Specific Field	02/26/2010
Concord, N	C 28027	110 000		
980-521-3 9 87		NC AOC		f. End Date (mm/dd/yyyy)
980-5	21-3481			N/A
g. Rate	h. Security Pledged	i. Original Loan Amount		j. Remaining Loan Balance
9 %	NA	\$ 8,00000		\$ 8,000.00
k. Full Name of Lending I	nstitution			l. Loan Number
NÍA	*			
3. Lender Information	n 🗌 A	ild	Remove	
a. Full Name, Mailing Add	lress & Phone	b. Job T	itle/Profession	d. Comments
(include city, state, & zi	* /	CI	ERK OF COURT	
WILLIAM WAS	RREN "BILL" BAGGS		ABARRUS COUNTY	
	CHARLOTTE ROAD	c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)
Concord, N			7	07/09/2010
			NC AOC	f. End Date (mm/dd/yyyy)
980-521-3987				N/A
g. Rate	h. Security Pledged		i. Original Loan Amount	j. Remaining Loan Balance
¢ %	N/A		\$ 2,00000	\$ 2,00000
k. Full Name of Lending 1	Institution			l. Loan Number
NA				
4. Total only this Pag	ţe.			\$ 12,000.00
5. Total of ALL CRO				\$ 12,000.00
(This line must be on lin	ne 21 of Detailed Summary Page CR	O-1100)		- 200 ·

Outstanding Loans

	_		_	Amen	dment		
Pg	2	of	3		Yes	X	No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)				2. ID Number		
Committee to	ELECK BILL BAGGS CL	ERK O	F COURT			
3. Lender Information	n 🗌 Ad	d	Remove			
a. Full Name, Mailing Add	ress & Phone	b. Job Ti	tle/Profession	d. Comments		
(include city, state, & zip)	1	FRK OF COURT			
WILLIAM WAS	REN "BILL" BAGGS	1	ABARRUS COUNTY	e. Start Date (mm/dd/yyyy)		
1639 OLD (CHARLOTTE ROAD	c. Emplo	yer's Name/Specific Field	20/10/201		
Concord, N	·	NO	AOC	08 / 19 / 2010 f. End Date (mm/dd/yyyy)		
2		1110	. 400	N/A		
	21-3087					
g. Rate	h. Security Pledged		i. Original Loan Amount	j. Remaining Loan Balance		
\$ %	N/A		\$ 5,00000	\$ 5,000.00		
k. Full Name of Lending Is				I. Loan Number		
N/A						
3. Lender Informatio	n 🗇 Ad	ld	☐ Remove			
a. Full Name, Mailing Add			itle/Profession	d. Comments		
(include city, state, & zi	p)	1	LERK OF COURT			
WILLIAM WAR						
			ABARRUS COUNTY	e. Start Date (mm/dd/yyyy)		
1639 OLD	CHARLOTTE ROAD	c. Emple	yer's Name/Specific Field	03/08/2012		
CONCORD, NO	2 28027	1.	Na Dog	f. End Date (mm/dd/yyyy)		
980-52	1-3087	NC AOC				
	1			N/A		
g. Rate	h. Security Pledged	•	i. Original Loan Amount	j. Remaining Loan Balance		
Ø %	MA		\$ 1,00000	\$ 1,000		
k. Full Name of Lending I	nstitution			I. Loan Number		
Á	1/A					
3. Lender Information		dd	Remove			
a. Full Name, Mailing Add			itle/Profession	d. Comments		
(include city, state, & zi		-	LERK OF COURT			
Musiam War	REN "BILL" BAGGS	7 %	ABARRUS COUNTY			
1639 OLD CHARLOTTE ROAD Concord, NC 28027				e. Start Date (mm/dd/yyyy)		
			oyer's Name/Specific Field	01/09/2014		
	f. End Date (mm/dd/yyyy)					
980-521-3087			1 C AOC	N/A		
g. Rate	h. Security Pledged	1	i. Original Loan Amount	j. Remaining Loan Balance		
d %	N/A		\$ 2,000 00	\$ 2,00000		
k. Full Name of Lending Institution				l. Loan Number		
a\N			-			
4. Total only this Pag	Jê			\$ 8,00000		
5. Total of ALL CRO						
	ne 21 of Detailed Summary Page CR	O-1100)		\$		

-		700	700	oans
Ph.—	diameter .	and offeren	armer EE	A-000
3 465000	STREET STREET		ASS 46 /	医骨骨髓 根据规定
a. srussa	医29年氏试验	DESCRIPTION OF THE PERSON		
~~				

	1			Amer		
Pg	3	ø£	3		Yes	No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

Committee Full Name (and Fund if applicable)			2. ID Number	
Committee to BLECT BILL BAGGS CLERK OF COURT				
Lender Information	Add		Remove	
Full Name, Mailing Addres	d. Comments			
(include city, state, & zip)		11	1	
M WARR	EN "BILL" BAGGS	CLEKK	OF COURT	
WILLIAMO ITIMO	An or Roll		RRUS COUNTY	e. Start Baie (um/dd/yyyy)
1639 OLD CHI	TRADITA 1100	c. Employer's	NameSpecific Field	01/31/2018
CLASTORP, NC	28021	***************************************		f. End Date (mus/dd/yyyy)
CONCORD, NC 28027 980-521-3987		^	IC AOC	2/10
980-521	240/			NIA
Rate	. Security Fledged	io	riginal Lean Amount	j. Remaining Loan Balance
4 %	1 1/10 000			\$ 2,00000
Full Name of Lending Inst	Sintina .			1. Lean Number
1/10				
N / A				
3. Lender Information	☐ Ad	ld	☐ Remove	
. Full Name, Mailing Addr	ess & Phone	b. Job Title!P	rofession	d. Comments
(include city, state, & zip)		1100	PRRUS COUNTY	
WILLIAM WAR	REN "BILL" BAGGS		RK OF COURT	Charles (market)
1639 NIDO	HARLOTTE ROAD .			e. Start Bate (mm/dd/yyyy)
1639 OLD CHARLOTTE ROAD . C. Employer's Name Specific			Transcopediat Facts	12/06/2021
Concord, No	28027	NO. F	Admin Office of	f. End Date (mm/dd/yyyy)
980-52	1-3087	1.0	COURTS	
			OURI	7711
g. Rate	L Security Fledged	- : L(Original Loan Amount	j. Remaining Loan Ralance
9%	N/A		2,00000	\$ 2,00000
k. Full Name of Lending In	stitution			1. Loan Number
. N/	A			
		dd	D Demania	
3. Lender Information		b. Jeb Title/	Remove	d. Comments
a. Full Name, Mailing Add (include city, state, & zig		D. JUD THE	I. S VALCASCIES	d. Committees
-3,,		1		
				e. Start Date (mm/dd/yyyy)
		c. Employer	's Name/Specific Field	
				f. End Date (mm/dd/yyyy)
	*			
g. Rate	h. Security Fledged	i. Original Loan Amount		j. Remaining Loan Belauce
% \$			\$	
k. Full Name of Lending I	1. Loan Number			
			-	
		*	-	1
				5 t-
4. Total only this Parts. Total of ALL CRO				\$ 4,000.0