Do not use this form	eneral report and committee n to update information	informat	ion, must be signed	and subi		Amendment Yes 🛛 No ner detailed forms.
1. Committee Info	rmation					
a. Full Name CABARRUS APP	I E CADT					c. ID Number
CADARRUS AFF	LE CARI					
b. Mailing Address (in	clude City, State and Zip Code)					d. Date Filed
P.O. BOX 1385						01/26/2024
MT PLEASANT NC 28124						
						e. Phone Number
						704-280-3624
2. Report Year	3. Period Start Date (mm/c	ld/yy)	4. Period End Da (mm/dd/yy)	ite	5. Treasurer Full N	Name
2023	07/01/2023		12/31/2023		KIMBERLYA. HE	RRICK
6. Type of Commi	ttee (Check One)	9. Typ	e of Report (c	heck onl	ly one type of report j	from one category)
Candidate Camp	paign Party	Munici	pal	State/Co	ounty	Referendum
PAC	Referendum		Organizational		Organizational	Organizational
Independent Expenditure	Joint Fundraiser		Thirty-five day	(Quarterly	Pre-referendum
Legal Expense I	Fund					
7. Type of Fund	(if applicable, check one)		Pre-primary		First	Final
"Booster Fund"		ΙIJ	Pre-election		Second	Supplemental Final
Building Fund			Pre-runoff		Third	Annual
		П	Semi-annual Mid Year	ΙШ ,	Fourth Semi-annual	Special Special
Other:		lĦ	Year End	lп °	Mid Year	10. Special Report Name
50000 40000 400		lĦ	Final		Year End	Total pecial responsitioning
8. Number of Fund	Iraisers this Report	10	Special		inal	

CERTIFICATION

Date Data Entered:

11. Account Information

FIRST BANK
b. Purpose

CHECKING

a. Financial Institution Full Name

c. Account Code

14.00

d. Period Begin Balance

KIDS 1

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 of Elections.

KIMBERLY A. HERRICK Printed Name of Signer Signature of Appointed Treasurer Date FOR OFFICE USE ONLY Delivery Method Date Received: Employee: Normal Mail Registered Mail Date Postmarked: Employee: Hand Delivered JAN Electronically Filed Date Scanned: Employee: Signer has not received

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.

CABARRUS COUNTY

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes. SOARD OF ELECTIONS

Special

c. Account Code

\$

d. Period Begin Balance

mandator &

11. Account Information

b. Purpose

a. Financial Institution Full Name

Employee:

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 Report

Amen	dment		
	Yes	\boxtimes	No

	Type of Report		3. ID Number
CABARRUS APPLE CART 2n	d Semi Annual		
	2023	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 14.00	\$
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	\$	\$	
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
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)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11	d and 11e)	\$	\$ 0.00
<u>EXPENDITURES</u>			
13) Disbursements	_		
13a) Operating Expenditures	(CRO-1310)	\$	\$ 00
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
4) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$
6) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$
7) In-Kind Contributions	(CRO-1510)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16	and 17)	\$	\$.00
9) Cash on Hand at End (Add lines 4 and 12 together, then subtract	line 18)	\$ 14.00	\$ 14.00
ADDITIONAL INFORMATION			
Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
1) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	
2) Debts and Obligations owed By the Committee	(CRO-1610)	\$	
3) Debts and Obligations owed To the Committee	(CRO-1620)	\$	
4) Account Transfers Within the Committee	(CRO-1720)	\$	
5) Administrative Support	(CRO-1710)	\$	\$
26) Forgiven Loans	(CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$
CRO-1100 NC State Board of Election		(M)	August 2