

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

| | |
|--|---------------------------------|
| 1. Committee Information | |
| a. Full Name <u>Committee to Elect Rob Cerulo</u> | c. ID Number |
| b. Mailing Address (include City, State and Zip Code) <u>9884 Flower Bonnet Ave. NW Concord, NC 28027</u> | d. Date Filed <u>7/10/24</u> |
| | e. Phone Number |

| | | | |
|--------------------------------------|---|---|---|
| 2. Report Year <u>2024</u> | 3. Period Start Date (mm/dd/yy) <u>02/17/24</u> | 4. Period End Date (mm/dd/yy) <u>06/30/24</u> | 5. Treasurer Full Name <u>Robert Jeffrey Cerulo</u> |
|--------------------------------------|---|---|---|

| | | | | |
|--|---|--|--|---|
| 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 | Municipal | State/County | Referendum |
| <input type="checkbox"/> PAC | <input type="checkbox"/> Referendum | <input type="checkbox"/> Organizational | <input type="checkbox"/> Organizational | <input type="checkbox"/> Organizational |
| <input type="checkbox"/> Independent Expenditure | <input type="checkbox"/> Joint Fundraiser | <input type="checkbox"/> Thirty-five day | <input type="checkbox"/> Quarterly | <input type="checkbox"/> Pre-referendum |
| <input type="checkbox"/> Legal Expense Fund | | <input type="checkbox"/> Pre-primary | <input type="checkbox"/> First | <input type="checkbox"/> Final |
| 7. Type of Fund (if applicable, check one) | | <input type="checkbox"/> Pre-election | <input checked="" type="checkbox"/> Second | <input type="checkbox"/> Supplemental Final |
| <input type="checkbox"/> "Booster Fund" | | <input type="checkbox"/> Pre-runoff | <input type="checkbox"/> Third | <input type="checkbox"/> Annual |
| <input type="checkbox"/> Building Fund | | <input type="checkbox"/> Semi-annual | <input type="checkbox"/> Fourth | <input type="checkbox"/> Special |
| <input type="checkbox"/> Other: | | <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"/> Special | |
| 8. Number of Fundraisers this Report <u>10</u> | | | | 10. Special Report Name <u>2024 Second Quarter Report</u> |

RECEIVED IN-PERSON
JUL 10 2024
CABARRUS COUNTY BOARD OF ELECTIONS

| | | | |
|--|--|--|--|
| 11. Account Information | | 11. Account Information | |
| a. Financial Institution Full Name <u>UWharric Bank</u> | a. Financial Institution Full Name <u>UWharric Bank</u> | a. Financial Institution Full Name <u>UWharric Bank</u> | a. Financial Institution Full Name <u>UWharric Bank</u> |
| b. Purpose <u>Campaign Finance</u> | c. Account Code <u>10</u> | b. Purpose <u>Campaign Finance</u> | c. Account Code <u>10</u> |
| | d. Period Begin Balance <u>\$ 500</u> | | d. Period Begin Balance <u>\$ 500</u> |

CERTIFICATION
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.

Rob Cerulo Printed Name of Signer Rob Cerulo Signature of Appointed Treasurer 07/10/24 Date

FOR OFFICE USE ONLY

| | | | | |
|--------------------|----------------|-----------|------------|--|
| Date Received: | <u>7/10/24</u> | Employee: | <u>JLL</u> | Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training |
| Date Postmarked: | _____ | Employee: | _____ | |
| Date Scanned: | <u>7/11/24</u> | Employee: | <u>WAN</u> | |
| Date Data Entered: | _____ | Employee: | _____ | |

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

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. Type of Report | 3. ID Number | |
|--|-------------------------------|---------------------------|--|
| Committee to Elect Rob Corley | Quarterly (2nd) | | |
| Start of Election Cycle: January 1, 2024 | / Total this Reporting Period | Total this Election Cycle | |
| 4) Cash on Hand at Start | \$ 500.00 | \$ 645.68 | |
| RECEIPTS | | | |
| 5) Aggregated Contributions from Individuals (CRO-1205) | \$ 200.00 | \$ 200.00 | |
| 6) Contributions from Individuals (CRO-1210) | \$ 600.00 | \$ 1,150 | |
| 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) | \$ — | \$ — | |
| 11e) Exempt Purchase Price Sales (CRO-1265) | \$ — | \$ — | |
| 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) | \$ 800.00 | \$ 1,350.00 | |
| EXPENDITURES | | | |
| 13) Disbursements | | | |
| 13a) Operating Expenditures (CRO-1310) | \$ 654.32 | \$ 654.32 | |
| 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) | \$ — | \$ 50 | |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) | \$ 654.32 | \$ — | |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) | \$ 645.68 | \$ 645.68 | |
| ADDITIONAL INFORMATION | | | |
| 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) | \$ — | \$ — | |

Aggregated Contributions from Individuals

Page ____ of ____

Amendment
 Yes No

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

| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number |
|--|-----------------|--------------------|------------------------|----------------------|--------------|
| Committee to Elect Rob Cerulo | | | | | |
| 3. Contributor Information | | | | | |
| a. Amend | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 10 | CC/ActBlue | Donation | 02/29/24 | \$ 50.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 10 | CC/ActBlue | Donation | 04/27/24 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 10 | CC/ActBlue | Donation | 04/27/24 | \$ 50.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 10 | CC/ActBlue | Donation | 05/10/24 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 10 | CC/ActBlue | Donation | 05/27/24 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 10 | CC/ActBlue | Donation | 06/27/24 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
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| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | \$ |
| 4. Total only this Page | | | | | \$ 200.00 |
| 5. Total of ALL CRO-1205 Pages | | | | | \$ 200.00 |
| <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> | | | | | |

Contributions from Individuals

Pg ____ of ____

Amendment
 Yes No

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

| | | | | | | | |
|---|-----------------|--------------------|------------------------|-----------------------------------|-----------|-------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | | | 2. ID Number | |
| Committee to Elect Rob Cerulo | | | | | | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| Elizabeth Shoaf 554 Old Speedway pr. NW Concord, NC 28027 (704) 533-1452 | | | | Retired | | | |
| | | | | c. Employer's Name/Specific Field | | e. Election Sum to Date | |
| | | | | Bookkeeper | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | 10 | CC/ActBlue | donation | 03/01/2024 | \$ 100 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| JOSH SWANK 390 E. High Point Rd. Peoria, IL 61614 jswank@proton.me | | | | Sales | | | |
| | | | | c. Employer's Name/Specific Field | | e. Election Sum to Date | |
| | | | | Philippi - Hagenbuch | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | 10 | CC/ActBlue | donation | 03/02/2024 | \$ 100 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| Erica Cerulo 3a Jefferson Ave Apt#4 Brooklyn, NY 11216 (309) 690.2356 | | | | Co-Founder | | | |
| | | | | c. Employer's Name/Specific Field | | e. Election Sum to Date | |
| | | | | Work wife LLC | | \$ 300 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | 10 | CC/ActBlue | donation | 04/28/2024 | \$ 300 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 4. Total only this Page | | | | | | \$ 500 | |
| 5. Total of ALL CRO-1210 Pages | | | | | | \$ 600 | |
| <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small> | | | | | | | |

Contributions from Individuals

Pg ____ of ____

Amendment
 Yes No

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

| | | | | | | |
|---|------------------------|---------------------------|-------------------------------|--|---------------------|--------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Committee to Elect Rob Cerulo | | | | | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments |
| Johanna Roziewski 824 Juanita Dr. Concord, NC 28027 (770)633.9073 | | | | Not Employed | | |
| | | | | c. Employer's Name/Specific Field | | e. Election Sum to Date |
| | | | | Not Employed | | |
| | | | | | | \$ 100 |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | 10 | CC/ActBlue | donation | 04/29/2024 | \$ 100 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments |
| | | | | | | |
| | | | | c. Employer's Name/Specific Field | | e. Election Sum to Date |
| | | | | | | |
| | | | | | | \$ |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments |
| | | | | | | |
| | | | | c. Employer's Name/Specific Field | | e. Election Sum to Date |
| | | | | | | |
| | | | | | | \$ |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 100 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 600 | |

Disbursements

Amendment
 Yes No

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

| | | | | | | |
|--|---------------------------|------------------------|-----------------------------|---|----------------------------|-------------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | | 2. ID Number |
| Committee to Elect Rob Cerulo | | | | | | |
| 3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> | | | | | | |
| <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures | | | | | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Coordinated Committee Name | | d. Comments |
| Minuteman Press Huntersville 9606 Sherrill Estates Rd. A Huntersville, NC 28078 | | | | | | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date |
| | | | | <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 277.10 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | |
| 10 | check | B | 04/23/2024 | \$ 277.10 | Campaign flyers | |
| | | | | \$ | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Coordinated Committee Name | | d. Comments |
| Minuteman Press Huntersville 9606 Sherrill Estates Rd. A Huntersville, NC 28078 | | | | | | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date |
| | | | | <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 188.61 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | |
| 10 | check | B | 04/29/2024 | \$ 188.61 | Campaign flyers | |
| | | | | \$ | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Coordinated Committee Name | | d. Comments |
| Minuteman Press Huntersville 9606 Sherrill Estates Rd. A Huntersville, NC 28078 | | | | | | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date |
| | | | | <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 188.61 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | |
| 10 | check | B | 05/23/2024 | \$ 188.61 | Campaign flyers | |
| | | | | \$ | | |
| 5. Total only this Page | | | | | | \$ 654.32 |
| 6. Total of ALL CRO-1310 Pages | | | | | | \$ 654.32 |
| <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> | | | | | | |
| <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> | | | | | | |
| <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> | | | | | | |
| 7. Purpose Codes (List detailed expenditure code in (h.) above) | | | | | | |
| A* - Media | | B* - Printing | | C* - Fundraising | | D - To Another Candidate |
| E - Salaries | | F* - Equipment | | G - Political Party | | H* - Holding Public Office Expenses |
| I - Postage | | J - Penalties | | K* - Office Expenses | | Q* - Donation to Legal Expense Fund |
| O* Other | | | | | | |
| * Codes require detailed explanation in required remarks field (k) | | | | | | |