Disclosure	Report Cover
Disclosure	report Cover

Ame	ndment	/	
	Yes		No
hone	latailad fam	1	

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

THE PROPERTY OF THE PARTY OF TH	to apaate information						
1. Committee Infor	mation						
a. Full Name							c. ID Number
RE-El	ect MAYOR	D,	ARREL	_			
b. Mailing Address (include City, State and Zip Code)							d. Date Filed
11069	1106 SUNSET DR						2(5/25
TANN	rpolis, NC 28	081					e. Phone Number
							704-244-0342
2. Report Year	3. Period Start Date (mm/c	dd/yy)	4. Period (mm/dd/yy)	End Da	te	5. Treasurer Full	
2025	1/28/25		2/9/	25		MIGONDA	ARRECUHIAMANT
6. Type of Commit	tee (Check One)	9. Typ	e of Report	(ci	heck o	nly one type of repor	t from one category)
Candidate Campa	aign Party	Munici	pal		State/	County	Referendum
PAC	Referendum	A	Organizational			Organizational	Organizational
Independent Expenditure Legal Expense Fo	Joint Fundraiser		Thirty-five day	′		Quarterly	Pre-referendum
7. Type of Fund	(if applicable, check one)	1 -	Pre-primary			First	Final
"Booster Fund"	(y applicable, check one)	1 =	Pre-election		H	Second	Supplemental Final
Building Fund		lΗ	Pre-runoff		H	Third	Annual
Bunding Fund		-	Semi-annual		H	Fourth	Special
		Ιп	Mid Year	.		Semi-annual	Бреелы
Other:		lΗ	Year End			Mid Year	10. Special Report Name
		lΗ	Final		H	Year End	To special report rume
8. Number of Fund	raisers this Report	17	Special		Ħ	Final	
(	O					Special	
11. Account Inform	ation			11. Ac	count	Information	
a. Financial Institution I	Full Name			a. Finar	cial In	stitution Full Name	
FIRS	BANK KANNAPER	415,1	40				
b. Purpose	c. Account Code	•		b. Purp	ose	RÉCEIVED	c. Account Code
Christate	MDH25					IN-PERSON FEB 0 5 2025	
	d. Period Begin Balance	e				LED A 7 7072	d. Period Begin Balance
Compage	s 0				C/ BO	ABARRUS COUNTY ARD OF ELECTIONS	\$
CERTIFICATION							
I certify that the Con the NC General Statu is complete, true and		mmingl	ed with proh by the NC S	ibited of state Bos	r other	non-disclosed funds	, & 22D-22M of Chapter 163 of . I further certify that this report
FOR OFFICE USE O	NLY						
Date Received:	215125		Employee:		VA.	N	Delivery Method Normal Mail
Date Postmarked			Employee:				Registered Mail Hand Delivered
Date Scanned:	8/6/25		Employee:		WA	<u>N</u>	Electronically Filed Signer has not received
Date Data Enter	ed:		Employee:				mandatory training
Please Note: Thi	s form cannot be used to am	nend con	nmittee infor	mation	such a	s the committee addr	ess, 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.

1. Committee Full Name (and Fund if applicable) 2. Ty	e of Report			3. ID Number	
RE-ELECT MAYOR DARREL Organization  Start of Election Cycle: January 1, 2025 Total this Proposition Provided Florida Cycle					
Start of Election Cycle: January 1,	25	]	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start		\$	0	\$	
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$		\$	
6) Contributions from Individuals	(CRO-1210)	\$		\$	
7) Contributions from Political Party Committees	(CRO-1220)	\$		\$	
8) Contributions from Other Political Committees	(CRO-1230)	\$		\$	
9) Loan Proceeds	(CRO-1410)	\$	2000.0	0 \$ 2000,00	
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, 11d and	nd 11e)	\$	2000.0	0\$ 2000:00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$		\$	
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, 16 and	117)	\$	0	\$	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line	2 18)	\$	2000,00	\$ 2000,00	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$			
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	2000.00		
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)	\$		\$	

Amendment

Loan Proceeds		~		1	Amendment Yes No
Use this form to report proceeds from a loan and loan proceeds statement must accompany each l					/
1. Committee Full Name (and Fund if applicable		Hom.	TVIGGO.	2.	ID Number
RE-ELECT MAYOR	The state of the s	RELL			
3. Lender Information			Remove		
a. Full Name, Mailing Address & Phone		b. Job Title/	Profession	d.	Comments
(include city, state, & zip)		4	A 02(35)		
DARRELL HINNENT		M	AYOR	e. (	Start Date (mm/dd/yyyy)
1106 SUNSET Dr		c. Employer	r's Name/Specific Fiel		1(28/25
KANNAPOLIS, NC 78081		city	CHARADICS	<b>f. I</b>	End Date (mm/dd/yyyy)
g. Rate h. Security Pledged	i. Accou	unt Code	j. Form of Paymen	ıt	k. Amount
%	MI	)H 25	Check		\$ 2000,00
l. Full Name of Lending Institution				m.	Loan Number
PENSONAL					
4. Endorsers/Makers (The people who guarantee the	loan.)				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/	Profession	c. Empl	loyer's Name/Specific Field
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Percentag	%	e. Amou	unt loyer's Name/Specific Field
		d. Percentag	ge %	e. Amou	int
a. Full Name, Mailing Address & Phone		b. Job Title/	Profession	c. Empl	oyer's Name/Specific Field
(include city, state, & zip)		d. Percentag		e. Amou	ant .
			%	\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/	Profession	c. Emple	loyer's Name/Specific Field
		d. Percentag	je	e. Amou	ınt
			%	\$	
5. Total of ALL CRO-1410 Pages (This line must be on line 9 of Detailed Summary Page CR	20-1100)			\$	2000.00

On	tetar	ding	Loans
Ou	istai	iuing	Luans

			Amendment	3.6	
Pg	(	of	 ☐ Yes	No 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
RE-ELECT MAYOR	DE	ERRE	ic.	
3. Lender Information		Add	Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job	Title/Profession	d. Comments
DARrell Himment			LAY02	e. Start Date (mm/dd/yyyy)
1106 SUNSET DA			oyer's Name/Specific Field	1/28/25
KANNAPOLIS, NC 28081		t	ty of	f. End Date (mm/dd/yyyy)
g. Rate h. Security Pledged	A Late	i. (	Original Loan Amount	j. Remaining Loan Balance
%		\$	200,00	\$ 2000,00
k. Full Name of Lending Institution				l. Loan Number
TetsoNAL				
3. Lender Information		Add	Remove	
a. Full Name, Mailing Address & Phone	3, 30	b. Job T	Title/Profession	d. Comments
(include city, state, & zip)				
				e. Start Date (mm/dd/yyyy)
		c. Empl	oyer's Name/Specific Field	
				f. End Date (mm/dd/yyyy)
g. Rate h. Security Pledged		i. C	Original Loan Amount	j. Remaining Loan Balance
%		\$		\$
k. Full Name of Lending Institution				l. Loan Number
3. Lender Information		Add	Remove	
a. Full Name, Mailing Address & Phone			itle/Profession	d. Comments
(include city, state, & zip)			ti	
				e. Start Date (mm/dd/yyyy)
		c. Emple	oyer's Name/Specific Field	e. Start Date (Illinaudjyy)
		March Consultations		
				f. End Date (mm/dd/yyyy)
. Rate h. Security Pledged		i. O	Priginal Loan Amount	j. Remaining Loan Balance
%		\$		\$
c. Full Name of Lending Institution	l. Loan Number			
4. Total only this Page				\$ 2000,00
5. Total of ALL CRO-1430 Pages				\$ 2000.00
(This line must be on line 21 of Detailed Summary Page CRO-1	100)			\$ 2000.00



## **Loan Proceeds Statement**

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

Name of committee to receive loan: RE-ELECT	MAYOR DARRELL
Person or committee to make loan:	- HINNANT
1 1	(
Name of lending institution (source):	
• Amount of loan: 2000, 00	2 91
Description (if in-kind loan):	
Names of all parties responsible for payment of lo	oan (guarantors):
Personal	
Period of loan:	
Rate of interest of loan:	
Security pledged for loan:	
I, DARREU HINNAND , acknow (Person lending money to committee)	ledge that all of the information
provided is complete, true, and accurate. I further under	erstand I may not forgive a loan
that has an outstanding balance to any source.	1 0
Signature of Lender	Date Signed
Milton D. Hrogani	1/28/25
Signature of Treasurer of Committee	Date Signed