

# 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

Alyce K. Williams

c. ID Number

b. Mailing Address (include City, State and Zip Code)

8611 Concord Blvd. #154  
Concord, NC 28027

d. Date Filed

7/28/2025

e. Phone Number

(704)443-8824

2. Report Year

2025

3. Period Start Date (mm/dd/yy)

07/18/2025

4. Period End Date  
(mm/dd/yy)

07/28/2025

5. Treasurer Full Name

Alyce K. Williams

6. Type of Committee (Check One)

- ☒ Candidate Campaign  
☐ PAC  
☐ Independent  
☐ Expenditure  
☐ Legal Expense Fund
- ☐ Party  
☐ Referendum  
☐ Joint Fundraiser

7. Type of Fund (if applicable, check one)

- ☐ "Booster Fund"  
☐ Building Fund

☐ Other:

8. Number of Fundraisers this Report

11. Account Information

a. Financial Institution Full Name

Truist Bank

b. Purpose

CAMPAIGN  
ACCOUNT FOR  
RECEIPTS AND  
EXPENDITURES

c. Account Code

d. Period Begin Balance

\$ 5.00

11. Account Information

a. Financial Institution Full Name

b. Purpose

c. Account Code

d. Period Begin Balance

\$

## 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.

Alyce K. Williams

Printed Name of Signer

Signature of Appointed Treasurer

7/28/2025

Date

## FOR OFFICE USE ONLY

Date Received:

7-28-25

Employee:

TC

Date Postmarked:

Employee:

Date Scanned:

7-30-25

Employee:

WAN

Date Data Entered:

Employee:

Delivery Method

- ☐ Normal Mail  
☐ Registered Mail  
☒ Hand Delivered  
☐ Electronically Filed  
☐ Signer has not received mandatory training

**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.

RECEIVED  
IN-PERSON

JUL 28 2025

CABARRUS COUNTY  
BOARD OF ELECTIONS

# Detailed Summary

Amendment

☐ Yes ☐ No

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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. Type of Report</b>		<b>3. ID Number</b>	
Moving Forward with Alyce		Truist Bank			
<b>Start of Election Cycle:</b> January 1, _____		<b>Total this Reporting Period</b>		<b>Total this Election Cycle</b>	
4) Cash on Hand at Start		\$ 5.00 <i>mg</i>		\$ 5.00 <i>mg</i>	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$	
6) Contributions from Individuals (CRO-1210)		\$ 194.00		\$ 194.00	
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, 11d and 11e)		\$ 194.00		\$ 194.00	
<b>EXPENDITURES</b>					
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)		\$ 189.00		\$ 189.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 189.00		\$ 189.00	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 5.00		\$ 5.00	
<b>ADDITIONAL INFORMATION</b>					
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)		\$		\$	



# 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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Moving Forward with Alyce						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Alyce K. Williams 8611 Concord Blvd. #154 Concord, NC 2802			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
			Self Consultant			
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
				\$ 194.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
				\$		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>		Cash		7/18/2025	\$ 5.00	
<input type="checkbox"/>		Money Orde	Filing Fee	07/18/2025	\$ 188.00	
<input type="checkbox"/>		Money Orde	Money Order Fee	7/18/2025	\$ 1.00	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
				\$		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 194.00	
<b>5. Total of ALL CRO-1210 Pages</b>					\$ 194.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

# In-Kind Contributions

Amendment

Pg

of

☐

Yes

☐

No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Moving Forward with Alyce			
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	
Alyce K. Williams 8611 Concord Mill Blvd. #154 Concord, NC 28027		<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b>	
		\$ 189.00	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	
<del>Cash</del>		07/18/2025	
		<b>g. Fair Market Amount</b>	
Filing Fee		\$ 188.00	
Money Order Fee		\$ 1.00	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	
		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b>	
		\$	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	
		<b>g. Fair Market Amount</b>	
		\$	
		\$	
		\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	
		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b>	
		\$	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	
		<b>g. Fair Market Amount</b>	
		\$	
		\$	
		\$	
<b>4. Total only this Page</b>			
\$			
<b>5. Total of ALL CRO-1510 Pages</b>			
\$			
(This line must be on line 17 of Detailed Summary Page CRO-1100)			