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: HOLDEN FOR KANNAPOLIS

c. ID Number:

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

803 SPRUCEWOOD ST
KANNAPOLIS, NC 28081

d. Date Filed: 10/21/25

e. Phone Number: 704-699-2092

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2025	09/23/25	10/20/25	HOLDEN SIDES

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

0

9. Type of Report *(check only one type of report from one category)*

Municipal

- ☐ Organizational
- ☐ Thirty-five day
- ☐ Pre-primary
- ☒ Pre-election
- ☐ Pre-runoff
- Semi-annual
  - ☐ Mid Year
  - ☐ Year End
- ☐ Final
- ☐ Special

State/County

- ☐ Organizational
- Quarterly
  - ☐ First
  - ☐ Second
  - ☐ Third
  - ☐ Fourth
- Semi-annual
  - ☐ Mid Year
  - ☐ Year End
- ☐ Final
- ☐ Special

Referendum

- ☐ Organizational
- ☐ Pre-referendum
- ☐ Final
- ☐ Supplemental Final
- ☐ Annual
- ☐ Special

10. Special Report Name

11. Account Information

a. Financial Institution Full Name: FIRST BANK

b. Purpose: CAMPAIGN

c. Account Code: 2

d. Period Begin Balance: $ 572.13

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.

Holden Sides
Printed Name of Signer

Signature of Appointed Treasurer

10/21/25
Date

FOR OFFICE USE ONLY

Date Received: 10/21/2025 Employee:

Date Postmarked: Employee:

Date Scanned: 10/22/25 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. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

RECEIVED
IN PERSON
OCT 21 2025
CABARRUS COUNTY
BOARD OF ELECTIONS

CRO-1000 NC State Board of Elections August 2008

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
HOLDEN FOR KANNAPOLIS	PRE-ELECTION	

Start of Election Cycle: January 1, 2025		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 572.13	$ 572.13
RECEIPTS			
5) Aggregated Contributions from Individuals	*(CRO-1205)*	$ 70.00	$ 446.00
6) Contributions from Individuals	*(CRO-1210)*	$ 45.00	$ 745.00
7) Contributions from Political Party Committees	*(CRO-1220)*	$	$ 300.00
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)		$ 115.00	$ 1491.00
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	*(CRO-1310)*	$	$ 458.80
13b) Contributions to Candidates/Political Committees	*(CRO-1310)*	$	$
13c) Coordinated Party Expenditures	*(CRO-1310)*	$	$
14) Aggregated Non-Media Expenditures	*(CRO-1315)*	$ 3.05	$ 339.90
15) Loan Repayments	*(CRO-1420)*	$	$
16) Refunds/Reimbursements from the Committee	*(CRO-1320)*	$	$
17) In-Kind Contributions	*(CRO-1510)*	$ 45.00	$ 350.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 48.05	$ 1148.70
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 639.08	$ 639.08
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 1 of 1

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
HOLDEN FOR KANNAPOLIS	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	2	ELECTRONIC FUNDS TRANSFER		09/30/25	$ 20.00
☐ Add ☐ Remove	2	ELECTRONIC FUNDS TRANSFER		10/09/25	$ 50.00
☐ Add ☐ Remove					$
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☐ Add ☐ Remove					$

4. Total only this Page	$ 70.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 70.00

Contributions from Individuals

Pg 1 of 1

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)
HOLDEN FOR KANNAPOLIS

2. ID Number

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
DEBORAH VAVRA
1560 OAKWOOD AVE
KANNAPOLIS, NC 28081

b. Job Title/Profession RETIRED

c. Employer's Name/Specific Field RETIRED

d. Comments

e. Election Sum to Date $ 120.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2	IN-KIND	CARDS & POSTAGE	09/25/2025	$ 20.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
VIRGINIA KRAUS
1501 DEBBIE ST
KANNAPOLIS, NC 28083

b. Job Title/Profession RETIRED

c. Employer's Name/Specific Field RETIRED

d. Comments

e. Election Sum to Date $ 25.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2	IN-KIND	CARDS & POSTAGE	09/25/2025	$ 25.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)

b. Job Title/Profession

c. Employer's Name/Specific Field

d. Comments

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
☐					$
☐					$
☐					$

4. Total only this Page $ 45.00

5. Total of ALL CRO-1210 Pages $ 45.00
(This line must be on line 6 of Detailed Summary Page CRO-1100)

Aggregated Non-Media Expenditures

Optional form used to report NC Non-Media Expenditures of $50 or less.

Page 1 of 1

Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	**2. ID Number**
HOLDEN FOR KANNAPOLIS	

3. Payee Information

a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
☐ Add ☐ Remove	2	ELECTRONIC	C	10/02/25	$ .97	ONLINE FUNDRAISING
☐ Add ☐ Remove	2	ELECTRONIC	C	10/14/25	$ 2.08	ONLINE FUNDRAISING
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
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☐ Add ☐ Remove					$	

4. Total only this Page	$3.05
5. Total of ALL CRO-1315 Pages *(This line must be on line 14 of Detailed Summary Page CRO-1100)*	$3.05

6. Purpose Codes (List detailed expenditure code in (d) above)

	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* - Donations to Legal Expense Fund**
O* - Other			

*** Codes require detailed explanation in required remarks field (g)**

In-Kind Contributions

Pg 1 of 1

Amendment ☐ 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.

1. Committee Full Name (and Fund if applicable)	2. ID Number
HOLDEN FOR KANNAPOLIS	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
DEBORAH VAVRA 1560 OAKWOOD AVE KANNAPOLIS, NC 28081	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date $ 20.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
CARDS & POSTAGE	09/25/2025	$ 20.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
VIRGINIA KRAUS 1501 DEBBIE ST KANNAPOLIS, NC 28083	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date $ 25.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
CARDS & POSTAGE	09/25/2025	$ 25.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
	☐ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date $

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		$
		$
		$

4. Total only this Page	$ 45.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 45.00