Disclosure	Report	Cover
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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 Informati	on				
a. Full Name					c. ID Number
(VAMIL)	Committe to 2	but la	us V. chards	ion	
b. Mailing Address (include (City, State and Zip Code)	4-7 O/(V	the Etophys		d. Date Filed
1500 L	ight house la	rne			
Kann	apolis NC	28081			e. Phone Number
2. Report Year 3. Perio	d Start Data (mm/dd/m	1 Doried F	nd Data (/14/)	5 Treesur	ear Full Name
2025 07			3/25	/	e Richardson
6. Type of Committee (Check One) 9.	Type of Repo	ort (check only one	_	ort from one category)
Candidate Campaign		unicipal	State/County		Referendum
PAC	= 15	Organizational	☐ Organiza		Organizational
Independent Expenditure		Thirty-five day			Pre-referendum
Legal Expense Fund	l <u>k</u>	Pre-primary	First		Final
7 T CF 1 (:6	<i>"</i> 11 1 1 1 1	Pre-election	Seco		Supplemental Final
The state of the s	plicable, check one)	Pre-runoff	Thir		Annual
Booster Fund	l ₋	Semi-annual	Four		☐ Special
■ Building Fund	l:	Mid Year	Semi-ann		10 C 11D 1N
Other:	ll-	Year End		Year	10. Special Report Name
8. Number of Fundraise	ns this Donout	Final Special		End	
o. Number of Fundraise	is this Keport	Special	Final		
			☐ Special		
11. Account Information		AND DESCRIPTION OF A STREET OF BUILDING	11. Account Inform	- Life of Automotive Control of the Control	1869年1月1日 · 中国国际 1860年7月1日 · 中国国际公司公司
a. Financial Institution Full N			a. Financial Institution	Full Name	
FIRST BAN	*	#3: 	RÉCEIN IN-PERS		
b. Purpose	c. Account Code		o. Purpose		c. Account Code
CAMPHIGN	JAMie 4K	town	SEP 3 0	2025	=
,	d. Period Begin I	Balance	CABARRUS COUNT		d. Period Begin Balance
	\$ 50	BOARD OF ELECTIONS		ECTIONS	\$
CERTIFICATION					
AND DESCRIPTION OF STATE OF ST	e or Fund is in complian	ce with all applie	cable provisions of A	ticle 22 A 22	2B & 22D-22M of Chapter 163
					funds. I further certify that this
report is complete, true an					unds. Truttier certify that this
a complete, and an	a correct and that I have		ine ive state board of	Licetions.	
James Ric	chardson	(\	mu D.	chald	50 9/20/25
Printed Nam		Sign	ature of Appointed Trea		Date
FOR OFFICE USE ON		ALL PROPERTY OF A SECTION			
			. ()	Do	livery Method
Date Received:	09/30/2025	Employe	ee:	_ =	Normal Mail
				F	Registered Mail
Date Postmarked:		Employ	ee:	- 🖂	Hand Delivered
D . C .	10-1-2025		WAN	Ë	Electronically Filed
Date Scanned:		Employe	ee:		
Date Data Entered:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Employe	ee:		Signer has not received mandatory training
Please Note: This	form cannot be used to	amend commi	ttee information sug	ch as the cor	nmittee address, treasurer,
	ssistant treasurer, custo				
	amend the Statement o				
I ou must	Statement 0	5	(==== == ==) tt	com	

Detailed SummaryUse this form to summarize all disclosure reporting forms and to total monetary information

Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	Report 3.	3. ID Number	
Committee to Elect Jamie Richardson	S		
Start of Election Cycle: January 1, 2025	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start		\$ 50	\$
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ //	\$
6) Contributions from Individuals	(CRO-1210)	\$ 1050	\$ \$ //00000
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)	\$ 10500	\$ 11000
<u>EXPENDITURES</u>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 30500	\$ 30500
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, 13	5, 16 and 17)	\$ 30500	\$ 30500
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$ 77500	\$ 79500
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)	\$	MESSESSES BURES
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)	\$	\$ August 2005

		rom Individua		Pg		Yes No
		individual contributio		ontributions und	er \$50 if form Cl	RO 1205 is not used
I. Cor	/	me (and Fund if app	, 1			2011 Dimira de la la companya de la companya del companya del companya de la comp
	Commi		ect Jan	nie Richo	ardsun	
	tributor Inform	The state of the s		Add Re	2C_10223606CEPARMACCERMONE & PARM	
**CXB*\$400524_CX	Name, Mailing Addr ide city, state, & zip)		t windsom and the first	b. Job Title/Profe	ssion	d. Comments
1	IMRY SWI			Real Esta	te Investor	2
	•			c. Employer's Nat	Walter Committee	
	2118 Con	iston Place	P	Swinder	& Visalli,	e. Election Sum to Date
	Charlotta	NC 287	207	PP	,	\$ 500
f. Prior	g. Account Code	b. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yy)	yy) k. Amount
	Jamie 4Ktow	r check			07/25/202	5 \$ 500°
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TO STATE OF STATE OF	Name, Mailing Addr de city, state, & zip)		White the same of	b. Job Title/Profes	ssion	d. Comments
-	3			Retired		
NI	106 Sunset	- D		c. Employer's Nan	ne/Specific Field	
				011	1.	e. Election Sum to Date
K	Connapolis	NI 19081		N	H	\$ 20000
f. Prior	g. Account Code	In Form of Bouncard	I I VI I D			
		h. Form of Payment	i. In-Kind Descrip	non	j. Date (mm/dd/yyy	**
_	Jamie Ythown	Check			01/29/20	25 \$ 200°
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-	tributor Informa	AND THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.			nove	计图像中国 对自己的
	iame, Mailing Addre de city, state, & zip)			b. Job Title/Profes		d. Comments
				Del Del	rolopment	
Joh	in Coti	17 ET. Port 32128		c. Employer's Nan	ne/Specific Field	
671	TO MAP FL	32128		City o	f Peltona Florida	e. Election Sum to Date
	ייייייי			-	-101109	s (A)
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descript	Hon	j. Date (mm/dd/yyy	100
			h mahan bana.	UVII		
	James Ktown	SFT			08/12/202	100
						\$
						\$
Marie Control of the	al only this Pa	The residence of the last section of the section of	determination	April William		\$ 80000
		O-1210 Pages of Detailed Summary Pa	ge CRO-1100)		44. 100	\$ \$1050

Amendment

Con	tributions f	rom Individua	als		Pg of		Yes No
		individual contribution		contributions	under \$50 if for		
1. Con		ne (and Fund if app				2.	ID Number
	Committe	e to Elect	Jame 1	Richards	on		
Charles College	tributor Inform	ation			Remove		T. 产业的数据,如此为数据。
MEN SOME STATE AND A STATE OF	Name, Mailing Addr			b. Job Title/P	rofession	d. (Comments
	de city, state, & zip)			Reala	ton		
ı	Diane Ho	oneycott		c. Employer's	Name/Specific Fie	ld	
ı	2635 1	DANBURY CT ,	NW	Allera	TATE		
1	Concord	DANHOWY CT, NC 28027		/ (lice)	1.7.1		lection Sum to Date
	Covo					\$	25000
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	ription	j. Date (mm/d		k. Amount
	Javie 4 Ktour	check			08/18/	2025	\$ 25000
							\$
							\$
3. Con	tributor Inform	ation		Add	Remove		11.0.4节和AFTEETAGOES
MANAGER AND	lame, Mailing Addr			b. Job Title/P	rofession	d. (Comments
(inclu	de city, state, & zip)						
				c. Employer's	Name/Specific Fie	ld	
l						e. E	lection Sum to Date
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	ription	j. Date (mm/d	d/yyyy)	k. Amount
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V 12-20 19-55	lame, Mailing Addr			b. Job Title/P	rofession	d. (Comments
(inclu	de city, state, & zip)						
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					V.	0000	\$
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							\$
4. To	tal only this P	Page				\$	25000
5. To	tal of ALL CI	RO-1210 Pages				\$	165000
(This	line must be on line	6 of Detailed Summary P	Page CRO-1100)				1070

Amendment

							Amendment
Disbursem	ients				Pg	of _	Yes No
Use this form to	report expenditures	from the commit	tee for c	perating exp	penses, contr	ributions	to candidate/political
Andrew Street,	coordinated party ex	THE RESERVE AND ADDRESS OF THE PERSON OF THE					
1. Committee F	Full Name (and Fund	d if applicable)					2. ID Number
Commi	STATISTICS OF THE PARTY OF THE	Company of the last of the las	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN	Lichara			
3. Type of Disb	CONTROL CONTROL OF THE PROPERTY OF THE PROPERT	use separate CR					
Operating Exp		ntributions to Candida	ates/Politi			Coordina	ated Party Expenditures
4. Payee Inform			L	Add \square	Remove		
	failing Address & Ph	one		b. Coordinat	ed Committee	Name	d. Comments
(include city, state,		- (
CABAN	enus County 69 Church St	BOE		c. Level Regi	istered (Specify	v)	
34	69 Church St	- N		☐ Federal	AND THE PERSON NAMED IN COLUMN	unty:	
,	cord NL	28025		☐ State	☐ Mu	nicipality:	e. Election Sum to Date
Con	con NC						\$ 3000
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. I	Required Remarks
Jamie 4 Ktown	Check	0	07/	10/202	\$ 30		Filing Fep
					\$		
4. Payee Inforn	nation	7/07/19/14/5/19		Add	Remove		PUNETRAL PROPERTY.
a. Full Name, Mail	ling Address & Phone			b. Coordinat	ed Committee	Name	d. Comments
(include city, stat	THE ART IN THE STATE OF THE STA	50000000000000000000000000000000000000					
2 mea	esv Market	11/2		Y 10-2	1 (0		
11 01	esv Market U BARKley Re lutte NC 28	. J		c. Level Regi	istered (Specify	y) inty:	<u> </u>
((BARCETT	2		State	_	nicipality:	e. Election Sum to Date
Char	10H4 NC 28	3209				,	
							\$ 275
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	7 5		Required Remarks
JAMIE 4 Hown	Check	A	09/	17/2025	\$ 275	- 5	Sign Graphics
4/113.2					\$		•
4. Payee Inforn	nation			Add	Remove		

			1			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Red	quired Remarks
Jamie 4 Hown	Check	A	09/17/2025	\$ 275	Si	an Graphics
				\$		
4. Payee Inform	nation		Add	Remove		
a. Full Name, Mai (include city, sta	ling Address & Phone ite, & zip)		b. Coordinat	ed Committee Nam	ne c	d. Comments
			State and the Control of the Control	stered (Specify)		
			Federal State	County:	-	e. Election Sum to Date
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Re	quired Remarks
				\$		
				\$		
5. Total only th	nis Page			Tackin I per 1/2 million		\$ 30500
6. Total of ALl	L CRO-1310 Pages					
(This line goes in	n line 13a of Detailed Su n line 13b of Detailed Su n line 13c of Detailed Su	mmary Page CRO-1	100 if Contrib to Candid	ates/Political Comm	n)	\$ 30500
7. Purpose C	odes (List detailed	d expenditure cod	e in (h.) above)			
A* - Media	B* - Print		C* - Fundraising			ner Candidate
E - Salaries I - Postage	F* - Equip J - Penalt		G - Political Party K* - Office Exper		BUSINESS STATES	g Public Office Expenses on to Legal Expense Fund

O* Other