Use this form for general report and committ	as information must	ha signed and submitted	along with other detailed forms
Do not use this form to update information.	ee information, must	be signed and submitted	aiong with other detailed forms.
1. Committee Information			
a. Full Name			c. ID Number
- 11 11 1	11:11:000		
Jaynewith a y V	Villiams		
b. Mailing Address (include City, State and Zip Cod	e)		d. Date Filed
390 Center st			
	hance		e. Phone Number
Kunnapolis, NC	X8085		(704) 441-7058
2. Report Year 3. Period Start Date (mm/de	d/vv) 4 Period End	Date (mm/dd/yy) 5. Trea	surer Full Name
2. Report Teal 3. Teriou Start Date (minute)	ayy) 4. I ci lou Ellu	Date (minutary)	
2095			
6. Type of Committee (Check One)			report from one category)
Candidate Campaign Party	Municipal	State/County	Referendum
PAC Referendum	Organizational	Organizational	Organizational Pre-referendum
Independent Expenditure I Joint Fundraiser	☐ Thirty-five day ☐ Pre-primary	Quarterly First	Final
Legal Expense Fund	Pre-election	Second	Supplemental Final
7. Type of Fund (if applicable, check one)	Pre-runoff	Third	Annual
Booster Fund	Semi-annual	Fourth	☐ Special
☐ Building Fund	Mid Year	Semi-annual	
_	Year End	Mid Year	10. Special Report Name
Other:	Final	Year End	
8. Number of Fundraisers this Report	☐ Special	Final	
2		Special	
11. Account Information		Account Information	
a. Financial Institution Full Name	a. F	inancial Institution Full Nan	ne
() wharrie Bank			*
b. Purpose c. Account C	ode b. F	Purpose	c. Account Code
domitions 20	25		
donations and dependents \$ 290	90		
account & d. Period Be	gin Balance		d. Period Begin Balance
expenditives \$ 290	7.13		\$
CERTIFICATION			
I certify that the Committee or Fund is in comp	liance with all applicab	ole provisions of Article 22A	A, 22B & 22D-22M of Chapter 163
of the NC General Statutes and that no funds a	re commingled with pro	phibited or other non-disclo	sed funds. I further certify that this
report is complete, true and correct and that I h	ave been trained by the	NC State Board of Election	ns.
Root of D. Dision	11	266	10-27 222
Kachel D. Thipps			10-27-2025
Printed Name of Signer	Signatu	re of Appointed Treasurer	Date
FOR OFFICE USE ONLY		WAN	Dalinami Mathad
Date Received: 10 - 27 - 25	Employee:		Delivery Method ☐ Normal Mail
			Registered Mail
Date Postmarked:	Employee		✓ Hand Delivered
Data Scannad: (0-28-25	Employee	. WAN	☐ Electronically Filed
Date Scanned:	Employee	-	C Simulation of the state of th
Date Data Entered:	Employee		☐ 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.

Amendment

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

Amendment

Yes

No

1. Committee Full Name (and Fund if applicable)	2. Type of I	Report	3. ID Number
Jayne with a Y Williams	PRE-E	THE RESERVE OF THE PARTY OF THE	-
Start of Election Cycle: January 1, 2025	5	Total this Reporting Period	Total this d Election Cycle
4) Cash on Hand at Start		\$	\$
<u>RECEIPTS</u>			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$ —
6) Contributions from Individuals	(CRO-1210)	\$ 25,00	\$ 1524,00
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)	\$	\$
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ ~	\$ —
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	,11d and 11e)	\$ 25,00	\$ 1524,00
<u>EXPENDITURES</u>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 237,16	9 \$
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	s —	\$
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)	\$ 53.87	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)	\$ 317,13	\$1721.87
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18	\$ 26.10	\$ 318.23
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)	\$	\$

					,	Amendment			
Disbursem			N. W.	1772	Pg of	Teach and the contract of the			
			ee for o	perating exp	enses, contributi	ons to candidate/politi¢al			
	coordinated party ex full Name (and Fund					2. ID Number			
1. Committee 1	'/ o	\ / /	1.//-			2. ID Ivaliber			
Jayn	e with a	, & U	11/1/	ams					
3. Type of Disb		use separate CR	0-1310	forms for e	each type of Disb	ursement.)			
Operating Exp	DESCRIPTION OF THE PROPERTY OF THE PERSON NAMED IN	tributions to Candida	tes/Politic	Name of the Owner, which was a second		rdinated Party Expenditures			
4. Payee Inform				Add	Remove				
	Iailing Address & Ph	one		b. Coordinate	ed Committee Name	d. Comments			
(include city, state,	, & zip)		742 (197) (197)			transaction			
Act E	31ue			c. Level Regis	stered (Specify)	- fee			
DOF	ROX 44/146			Federal	County:				
Sampl	Ville, MA	02144		State	☐ Municipa	lity: e. Election Sum to Date			
(617	517-76	00				s 22.53			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
2025	bank draft	0	09/	21/2025	\$1.16	fees			
			/		\$	70.00			
4. Payee Inform	nation			Add \square	Remove				
a. Full Name, Mail	ing Address & Phone			b. Coordinate	ed Committee Name	d. Comments			
(include city, sta	te, & zip)					campaign			
C. Racko	P Rappe	/		c I aval Pagi	stored (Specify)	Campaign Junch			
1750	R BARRE Dale Earn	rood+ Bl	d	Federal					
#appa	Dd15 NX Q	5057		State	☐ Municipa	dity: e. Election Sum to Date			
Marinag	000	203				\$ 44,00			
(104)	192-021	/				/ /			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
2025	Cebit	0	09/	22/2005	\$44,00	campaign lunch			
			/	/	\$	V 0			
4. Payee Inform	nation			Add \Box	Remove				
	ling Address & Phone			b. Coordinate	ed Committee Name	d. Comments			
(include city, sta	THE RESERVE OF THE PARTY OF THE				•	bank			
Uwhack	cie Bank			c Level Regi	stered (Specify)	- maintenance			
25 Pala	side DRIV	CNE	Federal	County:	- See				
Concon	eje Bank oside Driv v, NC 280	25		☐ State	☐ Municipa	ality: e. Election Sum to Date			
(704)	262-385	3				\$24.00			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
2025	debit	0	09/3	2012025	\$ 12.00	bankfees			
			1	,	\$				
5. Total only th	nis Page					\$ 57.16			

7. Purpose Codes (List detailed expenditure code in (h.) above)

(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)

(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

A* - Media

6. Total of ALL CRO-1310 Pages

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)

T								
	TC	h	ITT	·C/	an	ne	nt	C
L)	12		uı	31			ш	

Pg	2	of 2	Amendment Yes	No No	
			Experience of the property of		

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

1. Committee F								2. ID Number	
3. Type of Disb	pe of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)								
Operating Exp			ributions to Candida					dinated Party Expenditures	
4. Payee Inforn	nation				Add	Remove	e		
a. Full Name, M	lailing Addre	ess & Pho	one		b. Coordinate	ed Commi	ittee Name	d. Comments	
(include city, state,	, & zip)			1.00				Serviceter	
Kuplan Strategies 2002 Lounsbury Ct Kissimmee, FL 34746 1-(800) 650-3911					c. Level Registered (Specify) Federal County:			texts	
Kissim	mee,	FZ 391	3474		State	Ш	Municipal	s /80,00	
f. Account Code	g. Form of Pa	vment	h. Purpose Code	i. Date (r	nm/dd/yyyy)	i. Amour	nt 1	k. Required Remarks	
2025	debi		0			\$ /80		campaign texts	
						\$			
4. Payee Inform	nation				Add	Remove	е		
a. Full Name, Mail		Phone			b. Coordinate	ed Commi	ittee Name	d. Comments	
(include city, sta	te, & zip)								
					c. Level Regis	stered (Sr	ecify)	1940	
					c. Level Registered (Specify) Federal County:				
					State		Municipal	lity: e. Election Sum to Date	
								\$	
			h n						
f. Account Code	g. Form of Pa	yment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amour	nt	k. Required Remarks	
						\$			
						\$			
4. Payee Inform	nation				Add \square	Remov	e		
a. Full Name, Mail	ling Address &	Phone		_	b. Coordinate	ed Comm	ittee Name	d. Comments	
(include city, sta	te, & zip)								
					c. Level Regi		County:		
					State	Z	Municipa	lity: e. Election Sum to Date	
l								\$	
f. Account Code	g. Form of Pa	vment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amou	nt	k. Required Remarks	
	8				30007	\$		-	
	-			+		\$			
						1.0		100 10	
5. Total only th								\$ 180.00	
6. Total of ALI									
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							, \$237.16		
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)									
		THE RESERVE OF THE PERSON NAMED IN	expenditure cod	A DESCRIPTION OF THE PERSON NAMED IN		Бирении	es,		
A* - Media		- Printi			undraising		D - To	Another Candidate	
E - Salaries		- Equip			litical Party			olding Public Office Expense	
I - Postage		- Penalti			Office Exper	ises		onation to Legal Expense Fu	
O* Other					_				
* Codes requir	re detailed e	explanati	ion in required	remarks	s field (k)				

In-Kind Contributions	Pg	of		Yes No	
Use this form to report non-monetary contributions, donations, good Use CRO-1215 if In-Kind Contributions were or will be refun			tee or	fund.	
1. Committee Full Name (and Fund if applicable)	ded within 7 da	y 5.	2. II	D Number	
Jayne with a + Williams					
3. Contributor Information	Add Rei	move			
a. Full Name, Mailing Address & Phone	b. Type of Contril		c Co	omments	
(include city, state, & zip)	Individual	outor	c. co	\	
	Candidate		0	Lanes	
Jayne Williams 320 Center St	Party		0	g cop.	
320 Center St	PAC Referendum		d. El	ection Sum to Date	
Jannapolis, NC 28083	Other Receipt	Source	\$	357.87	
e. Description		f. Date (mm/dd/yyy	(y)	g. Fair Market Amount	
Palm Caeds + Flyers		10/02/202	15	\$ 33.87	
		/ /		\$	
				\$	
3. Contributor Information	Add Re	move			
a. Full Name, Mailing Address & Phone	b. Type of Contri	butor	c. Co	omments	
(include city, state, & zip)	Individual				
	Candidate		1		
	Party		1		
No.	PAC		1 77	1 FL 4 C 4 D 4	
	Referendum	. C	d. Election Sum to Date		
	Other Receipt	Source	\$	\$	
e. Description		f. Date (mm/dd/yyy	/y)	g. Fair Market Amount	
				\$	
				\$	
				\$	
3. Contributor Information	Add Re	move			
a. Full Name, Mailing Address & Phone	b. Type of Contri	butor	c. Co	omments	
(include city, state, & zip)	Individual		1		
	Candidate		1		
	Party PAC				
	Referendum		d F	lection Sum to Date	
	Other Receip	t Source		lection Sum to Date	
	Cinci Receip		\$		
e. Description		f. Date (mm/dd/yyy	yy)	g. Fair Market Amount	
				\$	
				\$	
				\$	
4. Total only this Page			\$	53.87	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$	53.87	

Amendment