D' I D C	Amendment	t
Disclosure Report Cover	☐ Yes	□ No
Use this form for general report and committee information, must be signed and submitted along v	vith other de	tailed forms
Do not use this form to update information.		

Do not use this form to update if	mormation.	-		-		
1. Committee Information						
a. Full Name	c. ID Number					
Melanie Freel	man for	Schoo	I B	oard		
b. Mailing Address (include City, Sta	d. Date Filed					
8776 Lower Concord N	5/16/2024 e. Phone Number					
Concord N	IC 2802	.5				e. Phone Number 704-455-9545
2. Report Year 3. Period Start	t Date (mm/dd/vv)	4. Period I	End Dat	e (mm/dd/vv)	5. Treasur	er Full Name
2024 01/01/2			17/		- 1	arah Bam Brd
6. Type of Committee (Check (The comment of the co	and all the second seco	ort (ch	- contraction of the contraction	e type of rep	ort from one category)
Candidate Campaign Par		nicipal		State/County		Referendum
	ferendum	Organizationa		Organiza		Organizational
Independent Expenditure I Join	nt Fundraiser	Thirty-five da	y	Quarterly		Pre-referendum Final
Legal Expense Fund	片	Pre-primary Pre-election		Firs		Supplemental Final
7. Type of Fund (if applicable,	check one)	Section 1991		This		Annual
Booster Fund	, check one)	Semi-annual		Fou		Special
Building Fund	lo	Mid Yea	ır	Semi-anr		- system
_	15	Year En	d	☐ Mic	l Year	10. Special Report Name
Other:		Final		Yea	r End	•
8. Number of Fundraisers this	Report	Special		Final		
				☐ Special		
11. Account Information			11. Ac	count Infor	mation	
a. Financial Institution Full Name				cial Institution		
Discover Ban	K					
b. Purpose	c. Account Code		b. Purpo	se RECEIV IN-PERS	ED ON	c. Account Code
Campaign Account	GOP		F (T)	MAY 16		
Account	d. Period Begin Ba	alance		2024	d. Period Begin Balance	
1(0000111	s 0		CABARRUS COUNTY			\$
CERTIFICATION	1 0		В	OARD OF EL	ECTIONS	
						ND 6 22D 22M 6.5H
I certify that the Committee or Fu of the NC General Statutes and th report is complete, true and correct	at no funds are con	nmingled with	n prohibit	ed or other n	on-disclosed	_
Debarah Ba	mford	Webs	orah	Bony	ford	5/16/2024
Printed Name of Sign	ner	Sig	gnature of	Appointed T	asurer	Date
FOR OFFICE USE ONLY	F 1/ 20			1		
Date Received:	5-16-24	Emplo	yee: _	WAN	- <u>D</u>	livery Method Normal Mail
Date Postmarked:		Emplo	yee: _		- E	Registered Mail Hand Delivered
Date Scanned:		Emplo	yee: _		_	Electronically Filed
Date Data Entered:		Emplo	yee: _			Signer has not received mandatory training
	annot be used to a t treasurer, custoo the Statement of	dian of book	s inform	ation, or acc	count inform	ation.

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

Amendment ☐ Yes ☐ No

	2. Type of	Repo	rt 3	. ID Nu	ımber
Melanie Freeman for School Board	Q١	20	124		
Start of Election Cycle: January 1, 2023		R	Total this eporting Period		Total this Election Cycle
4) Cash on Hand at Start		\$	0	\$	
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	20.00	\$	20.00
6) Contributions from Individuals	(CRO-1210)	\$	250.00	\$	300,00
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)	\$		\$	NO 1200 1 10 10 10 10 10 10 10 10 10 10 10 10
11e) Exempt Purchase Price Sales	(CRO-1265)	\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,1	1d and 11e)	\$	270,00	\$	320.00
<u>EXPENDITURES</u>					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	32.08	\$	32.08
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)	\$		\$	50.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15.	, 16 and 17)	\$	32,08	\$	82.08
19) Cash on Hand at End (Add lines 4 and 12 together, then subt	tract line 18)	\$	237,92	\$	237,92
ADDITIONAL INFORMATION					
	(CRO-1330)	\$			
	(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)	\$		\$	
	CRO-2220)	\$		\$	
28) Contributions to be Refunded (CRO-1100) NC State Board	CRO-1215)	\$		\$	August 2008

Δ	ggreg:	ated Contri	hutions from	Individuals Page	of	Amendment Yes No			
						LI Yes LI 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								
				School Board		. (
3.		itor Information		one said					
a	Amend		c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount			
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(This line must be on line 5 of Detailed Summary Page CRO-1100)

CRO-1205

NC State Board of Elections

April 2007

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4. Total only this Page

5. Total of ALL CRO-1205 Pages

		rom Individua individual contribution		Pg contributions und		- Access	Yes No
AND DESCRIPTION OF THE PERSON	THE RESIDENCE OF THE PARTY OF T	ne (and Fund if app		Olitibutions unc	ler \$50 II form Cr	AND DESCRIPTION OF THE PARTY.	Number
n	Melante Freeman for School Board						
3. Cont	tributor Inform	ation		Add Re	emove		
						d. Cor	mments
(includ	le city, state, & zip)	0 1	D: D.	Refire	² d		
4	3776 20	war Rocky NC 280 Freeman	1 KNer Mood	c. Employer's Na	me/Specific Field	1	
	imand	NC 28%	125				
	Malanta	5000		Musi	cian	e. Elec	ction Sum to Date
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f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	ption	j. Date (mm/dd/yyy		k. Amount
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	ributor Informa			Add 🔲 Re	emove		
	ame, Mailing Addre			b. Job Title/Profe	ession	d. Cor	mments
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						e. Elec	ction Sum to Date
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(includ	le city, state, & zip)						No.
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		RO-1210 Pages					250.00
5. TOU	at of ALL CN		Page CPO 1100)			\$	250.00

Contributions from Individuals

Amendment

D' I			Amendment		herene
Disbursements	Pg	of	Yes	☐ No	
Use this form to report expenditures from the committee for operating	expenses, co	ontributions to	to candidate/politi	ical	
committees and coordinated party expenditures					
1. Committee Full Name (and Fund if applicable)			2. ID Number		

	coordinated party ex					IA ID S	
	Full Name (and Fun		1	1 D		2. ID N	lumber
	nse Freema						
3. Type of Disl		e use separate Cl	Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, where the Owner, where the Owner, which is the Owner, which				
Operating Exp		ntributions to Candid				rdinated Party I	Expenditures
4. Payee Inform					Remove		
	Mailing Address & Ph	none		b. Coordinate	ed Committee Name	d. Comn	nents
(include city, state				-			
Shee:	f Labels			a I amil Dool	-t		
214 1	lating Dine			Federal	stered (Specify) County:	2000	
27 1	intreprive			State	Municipa	lity e Election	on Sum to Date
STE	1	1 12004		State	титегра		
	lative Drive nobury Ny				-	\$	32.08
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)		k. Required I	
GOP	Debit	1 13	02/	12/2024	\$ 32.08	51	tickers
			T .	· · · · · · · · · · · · · · · · · · ·	\$		
4. Payee Inform	mation			Add \square	Remove		
Management of the second secon	ling Address & Phone				ed Committee Name	d. Comn	nents
(include city, sta				D. Coordinate	ed Committee Fund	u com	Kitti
				c. Level Regi	stered (Specify)		
				☐ Federal	County:	de seus de la decembra de	
				☐ State	Municipa	lity: e. Election	on Sum to Date
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f. Account Code	g. Form of Payment	h. Purpose Code	: Data	mm/dd/yyyy)	j. Amount	k. Required I	Domorke
i. Account Code	g. Form of Fayment	n. r ur pose coue	I. Date (mm/awyyyy)		k. Required i	Celliai KS
					\$		
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4. Payee Inform	mation			Add \square	Remove		
	ling Address & Phone			b. Coordinate	ed Committee Name	d. Comn	nents
(include city, sta	ite, & zip)				MC19,500 HAR. BEST 110 130 150 150 150 150 150 150 150 150 150 15		Description of the second seco
				c. Level Regi	stered (Specify)		
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1. Account Code	g. Form of Layment	in rurpose code	i. Date (mmuda/yyyy)		in required i	Kemar KS
		1			\$		
		and the second s			\$		
5. Total only th	nis Page					\$	32.08 32.08
6. Total of AL	L CRO-1310 Pages						
(This line goes in	n line 13a of Detailed Su	mmary Page CRO-1	100 if Ope	erating Expense	es)	\$	22 00
	n line 13b of Detailed Su) \$	32.00
(This line goes in	n line 13c of Detailed Sur	mmary Page CRO-11	100 if Coo	ordinated Party	Expenditures)		
7. Purpose C	odes (List detailed	d expenditure cod	le in (h.)	above)			
A* - Media	B* - Print			undraising	D - To	Another Car	ndidate
Delay 10 cold graphing properties and the cold of the				litical Party	H* - H	olding Publ	ic Office Expenses
I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund							
O* Other							
* Codes requi	re detailed explanat	ion in required	remark	s field (k)			