Amendment

Disclosure Report Cover

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					c. ID Number		
Committee to							
b. Mailing Address (include City, State	d. Date Filed						
9884 Flowe	1/10/25						
Concord, NO	e. Phone Number						
2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasurer Full Name							
		4. Period E	and Date (mm/dd/yy)	5. Treasure	r Full Name		
2024 10/2012			12024		+ Teffrey Cerulo		
6. Type of Committee (Check O	A STATE OF THE PARTY OF THE PAR		CARLES AND DESCRIPTION OF THE PROPERTY OF THE	type of repo	rt from one category)		
Candidate Campaign Party		icipal	State/County	:I	Referendum		
= =		Organizationa Thirty-five day			Organizational Pre-referendum		
Legal Expense Fund		Pre-primary	First		Final		
Legal Expense Fund		Pre-election	Seco	Supplemental Final			
7. Type of Fund (if applicable,	=	Pre-runoff	H Third		Annual		
Booster Fund	A MANAGEMENT AND A SECURE	Semi-annual	Four	****	Special		
Building Fund	lo i	Mid Year			— эреели		
Dunding Fund	IH	Year End		Year	10. Special Report Name		
Other:	lii i	Final		End			
8. Number of Fundraisers this		Special	Final		2024 4th		
			☐ Special		Quarter Report		
11. Account Information			11. Account Inform	DEPARTMENT DOOR STREET			
a. Financial Institution Full Name			a. Financial Institution	Full Name			
Uwharrie Ba	nk		Uwharr	ie Ba			
b. Purpose	c. Account Code		b. Purpose		c. Account Code		
Campaign Finance	10		Campaig	\sim	(0		
	d. Period Begin Bala				d. Period Begin Balance		
tinance \$471.		t5 Finance			\$		
CERTIFICATION							
I certify that the Committee or Fun	nd is in compliance	with all appli	icable provisions of Ar	ticle 22A, 22I	3 & 22D-22M of Chapter 163		
of the NC General Statutes and tha	it no funds are comi	ningled with	prohibited or other no	n-disclosed fu	ands. I further certify that this		
report is complete, true and correct	t and that I have bee	en trained by	the NC State Board of	Elections.			
Rob Cerula	>	1Ro	1 Cembr	_	1110125		
Printed Name of Signo	er	Sign	nature of Appointed Treas	surer	Date		
FOR OFFICE USE ONLY			0				
Date Received:	11312025	Employ	vee:	— Del	<u>ivery Method</u> Normal Mail		
Date Postmarked:		Employ	/ee:	_ 📙	Registered Mail		
Hand Delivered							
Date Scanned:	41145	Employ	/ee: [617]0	- 二	Electronically Filed		
Date Data Entered:		Employ	/ee:		Signer has not received mandatory training		
Please Note: This form ca	nnot be used to ar	mend comm	ittee information suc	ch as the com	nmittee 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.							

CRO-1000

RECEIVED IN-PERSON

NC State Board of Elections

August 2008

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)	2. Type of		D Number
Committee to Elect Rob Cerulo	4th	Quarter 2014	
Start of Election Cycle: January 1, 2024	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start		\$ 521.45	\$ 0
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0	\$ 400.00
6) Contributions from Individuals	(CRO-1210)	\$ 0	\$3,050,00
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)	\$ RECEIVED	\$
11) Other Receipt Sources	norman must be at the or office and one	IN-PERSON	是是表现的
11a) Interest on Bank Accounts	(CRO-1250)	\$ 101. 2 5 2024	\$
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ magaraus COUNTY	\$
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)	\$ O	\$ 3,450.00
<u>EXPENDITURES</u>			
13) Disbursements			计数据 英语规则
13a) Operating Expenditures	(CRO-1310)	\$ 331.72	\$3,210.27
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, 1	5, 16 and 17)		\$
19) Cash on Hand at End (Add lines 4 and 12 together, then sul	otract line 18)	\$ 189.73	\$ 189.73
ADDITIONAL INFORMATION		[
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	an and an half-dank and
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)	\$	\$

		ated Contri					of	Yes	No.
		orm used to rep				viduals of \$50	Change Marchard Way 1850	4 TD 11	
		ee Full Name (a						2. ID Number	
	-on	mittee	to	Elect	Rob Ce	rulo			
3. Co	ntribu	tor Information							
a. Am	end	b. Account Code	c. Form o	f Payment	d. In-Kind Descr	ription	e. Date (mm/dd/yyy	y) f. Amount	
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		nly this Page	205 7					\$ C	/
5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)						\$	Ò		

Amendment

Cont	ributions f	rom Individua	als	Pg	of		Yes No
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1. Com	mittee Full Nar	ne (and Fund if app	olicable)			2. I	D Number
	Ommitte	ree to El	ect Ro	b Cen	10		
	tributor Inform				move		
Sand Comment	ame, Mailing Addr			b. Job Title/Profe	ssion	d. C	comments
(includ	le city, state, & zip)						
				c. Employer's Nar	ne/Specific Field	1	
						- F	lection Sum to Date
							lection Sum to Date
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yy)	yy)	k. Amount
							\$
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COLUMN TO SERVICE AND ADDRESS OF THE	ributor Inform			Add Rei	nove		
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(includ	le city, state, & zip)			-			
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	ributor Inform			Add Rei	nove		
	ame, Mailing Addre			b. Job Title/Profe	ssion	d. C	omments
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4. Tota	al only this P	age				\$	0
5. Tota	al of ALL CE	RO-1210 Pages				\$	Ŏ
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Amendment

						Amendment	
Disbursem	ients				Pg of	Yes No	
Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political							
	coordinated party ex Full Name (and Fun			State Vilate Vilate		12 ID Number	
		- 0	1 /	^ <i>(</i>		2. ID Number	
Commi	ttee to E	: lect Ko	P (Cerul a	0		
3. Type of Dish		e use separate CF	Language Committee Committ	CALL SHALL SHOULD SHALL SHOW			
Operating Exp		ntributions to Candida	ates/Politi			ordinated Party Expenditures	
4. Payee Inform	nation Iailing Address & Ph	one		Add	Remove ed Committee Name	e d. Comments	
(include city, state,		one		b. Coordinat	ed Committee Name	e d. Comments	
		529		c. Level Regi	stered (Specify)		
9606	teman Pr Sherrill E	states R	'd -	Federal State	☐ County: ☐ Municipa	ality: e. Election Sum to Date	
	sville, NC	28078				\$ 331.72	
f. Account Code	g. Form of Payment	h. Purpose Code		mm/dd/yyyy)		k. Required Remarks	
(0	Debit	B	10/3	012024	\$331.72	+ (yers	
				53	\$,	
4. Payee Inform	nation			Add	Remove		
	ling Address & Phone			b. Coordinate	ed Committee Name	e d. Comments	
(include city, sta	te, & zip)			-			
				c. Level Regis	stered (Specify)		
				Federal	County:		
				State	☐ Municipa	lity: e. Election Sum to Date	
						\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
					\$		
					\$		
4. Payee Inforn	nation			Add	Remove		
THE RESIDENCE AREAS TO A COURT OF STREET	ing Address & Phone			CONTRACTOR STATE	ed Committee Name	d. Comments	
(include city, stat						<u> </u>	
				Federal	stered (Specify) County:		
				State	Municipa	dity: e. Election Sum to Date	
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f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (i	mm/dd/yyyy)	j. Amount \$	k. Required Remarks	
25 WHO WILLIAM WAS A STATE OF				2000 CONTRACTOR OF THE	\$	Spirite and a sp	
5. Total only th						\$ 331,72	
FIRE ELIGINAL ERROR EN CHOUSE A TOTAL	CRO-1310 Pages					\$331,72	
(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)							
	line 13c of Detailed Sum)))(, ()	
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media	B* - Printin			undraising	D - To	Another Candidate	

F* - Equipment

J - Penalties

E - Salaries

I - Postage

O* Other

G - Political Party

K* - Office Expenses

H* - Holding Public Office Expenses Q* - Donation to Legal Expense Fund