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.

. Committee Information					
. Full Name			and the same of	C.	. ID Number
COMMITTEE to Ele	ect Rob	combo)		
o. Mailing Address (include City, Sta				d	. Date Filed
9884 Flower			'EN		10100124
		-	10129124		
Concorn NC 2	28027			e	. Phone Number
. Report Year 3. Period Start					
2024 7/1/2	4	10/1	9/24	Rober	1 Teffrey Car
. Type of Committee (Check (One)	9. Type of Rep	ort (check only on	e type of report	from one category)
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Legal Expense Fund	- 13	Pre-primary	Firs		Final
		Pre-election		1 -	Supplemental Final 202
Type of Fund (if applicable,	check one)	Pre-runoff	Thi	15	Annual
Booster Fund	I.	Semi-annual	Fou	-	Special RECEIVED
Building Fund		Mid Yea		_	
1	- [!	Year End		100	0. Special Report Name
Other:		Final		ar End	2024 3nd
	Report	Special	Final		
Number of Fundraisers this			l learning		
Number of Fundraisers this			☐ Special	-	Quarter Repor
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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 3.1	ID Number					
Committee to Elect Rob Cerula Quarterly (3rd)							
Start of Election Cycle: January 1, ZUZ	_[Total this Reporting Period	Total this Election Cycle				
4) Cash on Hand at Start		\$ 645.68	\$ 471.45				
RECEIPTS							
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 200.00	\$ 400.00				
6) Contributions from Individuals	(CRO-1210)	\$ 1,000.00	\$ 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)	\$	\$				
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)	\$ 2,00.00	\$ 3,450,00				
<u>EXPENDITURES</u>		,					
13) Disbursements			100 mm 1				
13a) Operating Expenditures	(CRO-1310)	\$ 2,224.23	\$ 2,928.55				
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	\$ 50.00				
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1.	5, 16 and 17)	\$ 2,274.23	\$ 2,978,55				
19) Cash on Hand at End (Add lines 4 and 12 together, then sub-	otract line 18)	\$ 471.45	\$ 471.45				
ADDITIONAL INFORMATION							
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$					
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	14 14 14 14				
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)	\$	\$				

		butions from I	Individuals Page ns From Individuals of S		Amendment No No
		and Fund if applicab		A STREET AND ADDRESS OF THE PARTY OF THE PAR	D Number
			CH ROB C	erulo	
3. Contribu	utor Information	n			
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
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Add Remove	10	Act8 luc/CC	DUNATION	08/01/2124	\$ 25.00
Add Remove	10		Donation	08/18/2024	
Add Remove	10	tcB uc/cc	Donation	09/01/2024	\$ 50.00
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CRO-1205

4. Total only this Page

5. Total of ALL CRO-1205 Pages

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(includ	de city, state, & zip)	Cuanto		Busin	ess / when	r l		
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5. Tot	al of ALL CR	O-1210 Pages				\$ 1,000,00		
(This li	ine must be on line 6	of Detailed Summary Pag	ge CRO-1100)			11400,00		

Contributions from Individuals Use this form to report individual contributions over \$50 or contributions.	Pg of	Amendment Yes No					
1. Committee Full Name (and Fund if applicable)	ontributions under \$50 ii form	2. ID Number					
Committee to Elect R	ob Cerca la						
3. Contributor Information a. Full Name, Mailing Address & Phone	Add Remove b. Job Title/Profession	d. Comments					
(include city, state, & zip)							
(include city, state, & zip) Lot Employed c. Employer's Name/Specific Field							
16443 Andreas Dr.	Retired	e. Election Sum to Date					
Chesterfield, Mo 63005		s (00, C0					
f. Prior g. Account Code h. Form of Payment i. In-Kind Descri	j. Date (mm/dd/	/yyyy) k. Amount					
- (C) CC/ACIBLUE Donat	100 08/26	1748 (00.CO					
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		\$					
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a. Full Name, Mailing Address & Phone	b. Job Title/Profession	d. Comments					
(include city, state, & zip)	Auto Dealer						
Paul Huffenberg	c. Employer's Name/Specific Field	1					
Paul Aluffenberg 422 Bailey Ave?							
	Century	e. Election Sum to Date					
Pittsburgh, PA 15211	K.Pa	\$ 250,00					
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3. Contributor Information	Add Remove						
a. Full Name, Mailing Address & Phone	b. Job Title/Profession	d. Comments					
(include city, state, & zip) Mr. Chael Cemlo	Not Employe						
c. Employer's Name/Specific Field							
5363 10300	Retired	e. Election Sum to Date					
Michael Cemio S303 Jason Pr. Ence, PA (6506	K	\$ 100,90					
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4. Total only this Page		\$ 450,00					
T T . I GIFT CDC 1410 D							
(This line must be on line 6 of Detailed Summary Page CRO-1100)		\$ 1,900.00					

		rom Individual		Pg	of	Amendment Yes No		
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		rom Individual		Pg	of er \$50 if form CB	_ 0	Yes No		
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	butor Informa				nove				
	ne, Mailing Addres	ss & Phone		b. Job Title/Profes	ssion	d. Comm	nents		
		100d		c. Employer's Nan	aplone9				
71	7 (1116	rocal	,	_		e. Electio	on Sum to Date		
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f. Prior g.	. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	(y) k. A	mount		
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4. Total	only this Pa	ige				\$	550,00		

Dichuncom	anta					Amendment
Disbursem		from the commit	taa fan c	naratina av	Pg of .	Yes No
	coordinated party ex		iee for c	perating exp	penses, contribution	s to candidate/political
	ull Name (and Fund					2. ID Number
Commi	thee to f	=leat R	Cob	Cerv	10	
3. Type of Disb					each type of Disbur	rsement.)
Operating Exp	enses Con	tributions to Candida	ates/Politi	cal Committees	s Coordi	nated Party Expenditures
4. Payee Inform				Add	Remove	
	ailing Address & Pho	one		b. Coordinat	ed Committee Name	d. Comments
(include city, state,		A 14 A				
Lead	No Tr	d (wing		Federal	stered (Specify) County:	
PG BUY				State	Municipality	e. Election Sum to Date
Raleig	LINC 2	7602				\$50.00
	William Committee of the Committee of th	h. Purpose Code		mm/dd/yyyy)		Required Remarks
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					\$	
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(0	Debit	B	08	108/2024	\$ 171,60	Fluers
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	ing Address & Phone		TC 48.22		ted Committee Name	d. Comments
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10.5.	com an	press				
MILLY	ceman	-	04	c. Level Reg	istered (Specify) County:	47.00
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11	11- 111	1617	C			\$ 242.33
Hunter	Sherrill Suiller No	2 2001	•			
1. Account Code	g. Form of Payment	ii. I ui pose Coue	I. Date	minual yyyy)	J. Alliount	. Required Remarks
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					S	
5. Total only th	is Page					\$ 463.93
6. Total of ALL	CRO-1310 Pages					2,224.23
	line 13a of Detailed Sun	mary Page CRO-11	00 if Ope	erating Expens	ses)	1
. , .	line 13b of Detailed Sun			-		
(This line goes in	line 13c of Detailed Sum	mary Page CRO-11	00 if Cod	ordinated Party	y Expenditures)	
7. Purpose Co	odes (List detailed					
A* - Media	B* - Printi		Ch T		PERSONAL PROPERTY AND ADDRESS OF THE PERSON ASSESSMENT ASSES	anthon Condidate
E - Salaries				undraising		nother Candidate
The state of the s	F* - Equip	ment	G - Po	litical Party	H* - Hol	ding Public Office Expenses
I - Postage O* Other		ment	G - Po	DESCRIPTION SERVICES AND ADDRESS OF THE PROPERTY OF THE PROPER	H* - Hol	

Disbursem	ents				Do of	Amendment Yes No	
		from the commit	tee for o	perating exp	Pg of enses, contribution	ions to candidate/political	
	coordinated party ex			perung emp	enses, controus	to tandamor position	
1. Committee F	Full Name (and Fund	d if applicable)				2. ID Number	
Commi	tee to	Elect &	ob C	iernlo			
3. Type of Disb		use separate Ck	20-1310	forms for e	ach type of Disb	pursement.)	
Operating Exp	THE RESIDENCE IN COLUMN 2	tributions to Candida	ates/Politic			ordinated Party Expenditures	
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a. Full Name, M (include city, state,	failing Address & Pho & zip)	one		b. Coordinate	ed Committee Name	e d. Comments	
Minus	eman Pres	5			stered (Specify)		
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Hime	coill.	11 290	270	State	Municipa	ality: e. Election Sum to Date	
MUNTE	1301112	AC Co.	(0			\$ 37.54	
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•					\$	1	
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	ing Address & Phone		Children .		ed Committee Name	e d. Comments	
(include city, sta	te, & zip)						
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51000	4. 1.	20251		State	Municipa		
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	g. Form of Payment			mm/dd/yyyy)	j. Amount	k. Required Remarks	
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(include city, stat				b. Coordinate	ed Committee Name	d. Comments	
	olidared	20055					
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	1 1.0	2870	6	State	Municipa		
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	(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						
	odes (List detailed						
A* - Media	B* - Printir			undraising		Another Candidate	
E - Salaries	F* - Equip			litical Party ffice Expen		olding Public Office Expenses onation to Legal Expense Fund	
I - Postage O* Other	J - Penaltie	73	W O	nice Expen	ses (v De	onation to Legal Expense runo	
	e detailed explanati	on in required r	emarks	field (k)	10 A 10 TO 1		

Disbursen				_	Pg of		transmitter of the state of the
	report expenditures		tee for o	perating exp	enses, contribut	tions to c	andidate/political
	coordinated party ex Full Name (and Fun			es es la estada		12	ID Number
CONTRACTOR OF THE PROPERTY OF		The second secon		b L	C		TO realistics
THE RESERVE AND DESCRIPTION OF THE PERSON NAMED IN COLUMN	nottee .	THE PERSON NAMED IN COLUMN 2 I	SHEET OF RESIDEN				
3. Type of Dish		use separate Cl				Water China and Australia Street	
Operating Exp 4. Payee Inform	Million and the second section of the second	tributions to Candid	ates/Politic		Remove	ordinated F	Party Expenditures
The same of the sa	failing Address & Ph	one			ed Committee Nan	ne ld (Comments
(include city, state		Olic		b. Coordinate	ed Committee Nam	u. (Comments
	man Pres. Sherril	5 I Fam	. Rd	c. Level Regis	stered (Specify) County:		
9 60 6	3/2/1/1	45000	70	State	☐ Municip		Election Sum to Date
	ersulle N						202.48
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	ing Address & Phone	1		Company of the last of the las	ed Committee Nan	ne d. (Comments
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	odes (List detailed						
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* Codes requir	e detailed explanati	on in required	remarks	field (k)			

Amendment