	neral report and committee	information, must be	signed and sub	omitted along with	Amendment Yes Other detailed forms.	
	to update information					
1. Committee Information	mation				L. ID.V. L	
a. Full Name Committee to Elect	Kenny Wortman				c. ID Number	
b. Mailing Address (incl	ude City, State and Zip Code)				d. Date Filed	
5681 Mountaineer L	0/00/20					
Concord, NC 28025	08/28/25					
					e. Phone Number 704-239-7891	
2. Report Year 3. Period Start Date (mm/dd/yy)		dd/yy) 4. Period (mm/dd/yy)	4. Period End Date (mm/dd/yy) 5. Treasurer I		ıll Name	
2023	01/01/2023		30/2023	Kenny Wortma	n	
6. Type of Committ	ee (Check One)	9. Type of Report	(check or	nly one type of repo	ort from one category)	
Candidate Campa	ign Party	Municipal	State/C	County	Referendum	
PAC	Referendum	Organizationa	1 🗆	Organizational	Organizational	
Independent Expenditure Legal Expense Fu	Joint Fundraiser	Thirty-five day	y	Quarterly	Pre-referendum	
7. Type of Fund	(if applicable, check one)	Pre-primary		First	Final	
Booster Fund"		Pre-election		Second	Supplemental Final	
Building Fund		Pre-runoff		Third	Annual	
		Semi-annual		Fourth	Special	
Other:		Mid Yea Year End		Semi-annual Mid Year	10. Special Report Name	
U Other.		Final		Year End	10. Special Report Name	
8. Number of Funda	raisers this Report	Special	IH	Final		
o. Ivamoet of Fund	Special Special		Special			
11. Account Inform	ation		11. Account	Information		
a. Financial Institution F			a. Financial Institution Full Name			
Fifth Third Bank						
b. Purpose	c. Account Code		b. Purpose		c. Account Code	
For all campaign	00	1		RÉCEIVED IN-PERSON		
expenses	d. Period Begin Balanc	e	Al	G 2 8 2025	d. Period Begin Balance	
\$ 2,129.75			CABARRUS COUNTY BOARD OF ELECTIONS		\$	
CERTIFICATION			DOAR	DOI LECTIONS		
the NC General Statu	ites and that no funds are co	ommingled with prob n trained by the NC S	nibited or other	non-disclosed fund Elections.	B, & 22D-22M of Chapter 163 of ds. I further certify that this report	
Reiniy Wort	Printed Name of Signer		ignature of Appoin	THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	Date	
FOR OFFICE USE O	NLY					
Date Received:	8-28-25	Employee:	Employee:		Delivery Method Normal Mail	
Date Postmarked		Employee:			Registered Mail Hand Delivered	
Date Scanned:	8-23-25	Employee:	₩.	, v	☐ Electronically Filed ☐ Signer has not received	
Date Data Entere	Date Data Entered: Employee:				mandatory training	
DI N					• 100000 - 10000000000000000000000000000	

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.

Detailed Summary

Amendment

Yes No

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

1. Committee Full Name (and Fund if applicable) 2.	Type of Report		3. ID Number	
	nnual			
Start of Election Cycle: January 1,	023 2022	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start		\$ 2,129.75	\$	
RECEIPTS				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$ 501.00	
6) Contributions from Individuals	(CRO-1210)	\$	\$ 9,318.25	
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$	
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$ 200.00	
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 Organization	s (CRO-1250)	\$	\$	
11c) Outside Sources of Income	(CRO-1250)	\$	\$	
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$	
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c,	11d and 11e)	\$ 0	\$ 10,019.25	
EXPENDITURES				
13) Disbursements				
13a) Operating Expenditures	(CRO-1310)	\$ 2,129.75	\$ 9,390.35	
13b) Contributions to Candidates/Political Committe	es (CRO-1310)	\$	\$	
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$	
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$ 120.65	
15) Loan Repayments	(CRO-1420)	\$	\$	
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$	
17) In-Kind Contributions	(CRO-1510)	\$	\$ 508.25	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,	16 and 17)	\$ 2,129.75	\$ 10,019.25	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtra	ct line 18)	\$ 0	\$ 0	
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)	\$ 0		
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	ents		Pg	1 of	
Use this form to	report expenditures	from the committ	ee for; operating expenses	-	_
committees and	coordinated party ex	cpenditures.			
1. Committee F	Full Name (and Fun	2. ID Number			
	Elect Kenny Wortman	n			
3. Type of Disb			RO-1310 forms for each		
Operating I		Contributions to Car	ndidates/Political Committees		pordinated Party Expenditures
4. Payee Inform			Add	Remove	
	ing Address & Phone		b. Coordinated Committee	Name	d. Comments
(include city, state,					
Cabarrus Partne	ersnip		a Lauri Desistent (Specific	,	-
for Children			c. Level Registered (Specify	County:	4
1307 S. Cannon Blvd.			State	Municipality:	e. Election Sum to Date
Kannapolis, NC 28083			State	ivium cipanty.	
					\$ 2,129.75
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	0	01/03/2023	\$10.00	Donation
001	Check	0	01/03/2023	\$2,119.75	Donation
4. Payee Inform	nation		Add	Remove	
	ing Address & Phone		b. Coordinated Committee Name		d. Comments
(include city, state,					
			c. Level Registered (Specify)	
			Federal County:		
			State	Municipality:	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
I. recount code	g. I of m of I ayment		in Date (initial day)		III Attiquited attinuation
				\$	
				\$	
4. Payee Inform	nation		Add	Remove	
a. Full Name, Maili	ing Address & Phone		b. Coordinated Committee	Name	d. Comments
(include city, state,	& zip)				
					_
			c. Level Registered (Specify		
			Federal	County:	Floriday Comp to Date
			State	Municipality:	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
				\$	
				\$	
5. Total only th	is Page				\$ 2,129.75
	CRO-1310 Pages				-,

(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) 7. Purpose Codes (List detailed expenditure code in (h.) above)

J - Penalties

(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)

A* - Media B* - Printing
E - Salaries F* - Equipment

C* - Fundraising G - Political Party D - To Another Candidate

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

\$

2,129.75

O* - Other

* Codes require detailed explanation in required remarks field (k)

K* - Office Expenses

I - Postage