Disclosure Report Cover

Amendment ☐ Yes ☒ No

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
Jayne with a Y Williams	
b. Mailing Address (include City, State and Zip Code)	**d. Date Filed**
330 Center St Kannapolis, NC 28083	
	e. Phone Number
	(704) 441-7055

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2025		09/23/2025	Rachel Phipps

6. Type of Committee (Check One)

- ☒ Candidate Campaign
- ☐ Party
- ☐ PAC
- ☐ Referendum
- ☐ Independent Expenditure
- ☐ Joint Fundraiser
- ☐ Legal Expense Fund

7. Type of Fund *(if applicable, check one)*

- ☐ Booster Fund
- ☐ Building Fund
- ☐ Other:

8. Number of Fundraisers this Report

/

9. Type of Report *(check only one type of report from one category)*

Municipal	State/County	Referendum
☒ Organizational	☐ Organizational	☐ Organizational
☐ Thirty-five day	Quarterly	☐ Pre-referendum
☐ Pre-primary	☐ First	☐ Final
☐ Pre-election	☐ Second	☐ Supplemental Final
☐ Pre-runoff	☐ Third	☐ Annual
Semi-annual	☐ Fourth	☐ Special
☐ Mid Year	Semi-annual	
☐ Year End	☐ Mid Year	**10. Special Report Name**
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

11. Account Information

a. Financial Institution Full Name	
Uwharrie Bank	
b. Purpose	**c. Account Code**
campaign account for receipts and expenditures	2025
	d. Period Begin Balance
	$ 100.00

11. Account Information

a. Financial Institution Full Name	
b. Purpose	**c. Account Code**
	d. Period Begin Balance
	$

RECEIVED IN-PERSON
SEP 29 2025
CABARRUS COUNTY BOARD OF ELECTIONS

CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

Rachel Phipps	Rachel Phipps	9-29-2025
Printed Name of Signer	Signature of Appointed Treasurer	Date

FOR OFFICE USE ONLY

Date Received:	9-29-25	Employee:	WAN	Delivery Method
Date Postmarked:		Employee:		☐ Normal Mail ☐ Registered Mail
Date Scanned:	9-29-25	Employee:	WAN	☒ Hand Delivered ☐ Electronically Filed
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.

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
Jayne with a Y Williams	Quarterly	

Start of Election Cycle: January 1, 2025		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 100.00	$ 100.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	$ —	$ —
6) Contributions from Individuals	(CRO-1210)	$ 1499.00	$ 1499.00
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)		$ 1499.00	$ 1499.00
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	$ 1306.87	$ 1306.87
13b) Contributions to Candidates/Political Committees	(CRO-1310)	$ 25.00	$ 25.00
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)	$ 72.87	$ 72.87
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 1404.74	$ 1404.74
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 194.26	$ 194.26
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)	$ —	$ —

Contributions from Individuals

Pg 1 of 6 | Amendment ☐ Yes ☒ No

Use this form to report individual contributions over $50 or contributions under $50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)	2. ID Number
Jayne with a Y Williams	

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Jayne Williams 320 Center St Kannapolis, NC 28083 (704) 441-7058	nurse	self-employed hospice nurse	candidate	$304.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2025	debit	—	07/29/2025	$ 5.00
☐	2025	debit	—	08/23/2025	$ 100.00
☐	2025	debit	—	08/25/2025	$ 25.00

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Jayne Williams 320 Center St Kannapolis, NC 28083 (704) 441-7058	nurse	self-employed hospice nurse	candidate	$304.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2025	debit	—	08/27/2025	$ 100.00
☐	2025	debit	—	08/28/2025	$ 49.00
☐	2025	debit	—	09/09/2025	$ 25.00

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Rachel Phipps 347 Parkview Ave SW Concord, NC 28025 (704) 886-8397	campaign manager campaign treasurer	Jayne Williams and Isaac Davis		$300.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2025	debit	—	08/28/2025	$ 100.00
☐	2025	debit	—	09/03/2025	$ 150.00
☐	2025	debit	—	09/08/2025	$ 50.00

4. Total only this Page	$ 604.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 1499.00

Contributions from Individuals

Amendment ☐ Yes ☒ No

Use this form to report individual contributions over $50 or contributions under $50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)	2. ID Number
Jayne with a Y Williams	

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Vicente Cortez 305 E Trinity Ave Durham, NC 27701 (334) 723-6862	not employed	N/A		$ 50.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2025	debit	—	08/02/2025	$ 50.00
☐					$
☐					$

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Samuel A. Harris Jr. 318 Center St Kannapolis, NC 28083 (704) 891-2010	Car Salesman	sales		$ 75.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2025	debit	—	08/06/2025	$ 75.00
☐					$
☐					$

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Isra Allison 2930 Wesley Avenue Charlotte, NC 28205 (980) 989-9832	Deputy Political Director	nonprofit		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2025	debit	—	08/06/2025	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 225.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 1499.00

Contributions from Individuals

Amendment ☐ Yes ☐ No

Use this form to report individual contributions over $50 or contributions under $50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)	2. ID Number
Jayne with a Y Williams	

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Bobbi Hague 2709 Kendall Drive Charlotte, NC 28216	not employed	N/A		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2025	debit	—	08/06/2025	$ 100.00
☐					$
☐					$

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Betty Gunz 1409 Maryland Ave Charlotte, NC 28209 (980) 218-9565	not employed	N/A		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2025	debit	—	08/06/2025	$ 100.00
☐					$
☐					$

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Armando Santacruz 305 Patrick Ave SW Concord NC 28025 (704) 707-4019	not employed	N/A		$ 25.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2025	debit	—	08/08/2025	$ 25.00
☐					$
☐					$

4. Total only this Page	$ 225.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 1499.00

Contributions from Individuals

Pg 4 of 6 | Amendment ☐ Yes ☒ No

Use this form to report individual contributions over $50 or contributions under $50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)	2. ID Number
Jaynewtth a Y Williams	

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Jerome Jennings 2433 Spur Ln Concord, NC 28027 (704) 604-2977	Quality Control	DNP		$ 50.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2025	debit	—	08/13/2025	$ 50.00
☐					$
☐					$

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Jerry Cannon 2329 Carved Tree Lane Charlotte, NC 28262 (704) 807-8344	Pastor	Charlotte Presbyterian		$ 40.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2025	debit	—	08/14/2025	$ 40.00
☐					$
☐					$

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Justin Elkin 153 Westmoreland Rd Mooresville, NC 28115 (252) 267-1439	Handyman	self-employed		$ 10.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2025	debit	—	08/17/2025	$ 10.00
☐					$
☐					$

4. Total only this Page	$ 100.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 1499.00

Contributions from Individuals

Pg 5 of 6 | Amendment ☐ Yes ☒ No

Use this form to report individual contributions over $50 or contributions under $50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)	2. ID Number
Jayne with a Y Williams	

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Andrea Strasser 11111 Jim Sossoman Rd Midland, NC 28107 (704) 793-6638	not employed	N/A		$ 20.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2025	debit	—	08/22/2025	$ 20.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Abiezer Morales 320 Center St Kannapolis, NC 28083 (704) 441-7058	City Worker	city worker sewer/water		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2025	debit	—	09/02/2025	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Michael Hernandez 1653 N 17th Avenue Melrose Park, IL 60160 (773) 951-2497	Cashier	retail		$ 25.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2025	debit	—	09/04/2025	$ 25.00
☐					$
☐					$

4. Total only this Page	$ 145.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 1499.00

Contributions from Individuals

Pg 6 of 6

Amendment ☐ Yes ☒ No

Use this form to report individual contributions over $50 or contributions under $50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)	2. ID Number
Jayne with a Y Williams	

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Jasmine Lewter 1832 Mary Wynn Ct Kannapolis, NC 28083 (980) 213-8396	Organizer	nonprofit		$ 75.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2025	debit	—	09/12/2025	$ 75.00
☐					$
☐					$

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Mark Giocondo 8725 Hayden Way Concord, NC 28025 (704) 791-4958	CMT	City of Kannapolis		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2025	debit	—	09/15/2025	$ 100.00
☐					$
☐					$

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Lynne Golie 11017 Heron Cove Ct NW Charlotte, NC 28269	Nurse	Cabarrus Health Alliance		$ 25.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2025	debit	—	09/21/2025	$ 25.00
☐					$
☐					$

4. Total only this Page	$ 200.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 1499.00

Disbursements

Pg 1 of 4 — Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Jaynewitha Y Williams	

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Staples 1480 Concord Pkwy N #350 Concord, NC 28025 (704) 262-3503		☐ Federal ☐ County: ☐ State ☒ Municipality:	Campaign materials (no debit card yet on this date)	$272.38

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
2025	cash	B	08/11/2025	$35.99	business cards
2025	cash	B	08/11/2025	$48.73	flyers

4. Payee Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Staples 1480 Concord Pkwy N #350 Concord, NC 28025 (704) 262-3503		☐ Federal ☐ County: ☐ State ☒ Municipality:	Office Expense (no debit card on this date yet)	$272.38

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
2025	cash	K	08/11/2025	$21.53	document printing
				$	

4. Payee Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Walmart 2420 Supercenter DR NE Kannapolis, NC 28083 (704) 792-9800		☐ Federal ☐ County: ☐ State ☒ Municipality:	Launch party materials (no debit card on this date yet)	$45.84

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
2025	cash	F	08/14/2025	$18.33	launch party supplies
2025	cash	F	08/16/2025	$27.51	launch party supplies

5. Total only this Page	$152.09
6. Total of ALL CRO-1310 Pages *(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)*	$1306.87

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

A* - Media	**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)**

Disbursements

Pg 2 of 4 Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Jayne with a Y Williams	

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Staples 1480 Concord Pkwy N #330 Concord, NC 28025 (704) 262-3503	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☒ Municipality:	campaign materials (no debit card yet)
		e. Election Sum to Date $272.38

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
2025	Cash	B	08/16/2025	$38.51	business cards
2025	Cash	B	08/16/2025	$49.23	document printing

4. Payee Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Staples 1480 Concord Pkwy N #330 Concord, NC 28025 (704) 262-3503	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☒ Municipality:	campaign materials (no debit card yet)
		e. Election Sum to Date $272.38

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
2025	Cash	B	08/29/2025	$37.12	flyers (canvas)
2025	Cash	F	08/29/2025	$41.27	canvas supplies

4. Payee Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Walgreens 735 Cabarrus Ave W Concord, NC 28027 (704) 723-9463	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☒ Municipality:	campaign materials (no debit card yet)
		e. Election Sum to Date $272.38

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
2025	Cash	B	08/17/2025	$46.24	launch party printing
2025	Cash	B	08/17/2025	$39.54	document printing

5. Total only this Page	$251.91
6. Total of ALL CRO-1310 Pages *(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)*	$1306.87

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

A* - Media	**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)**

Disbursements

Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Jayne with a Y Williams	

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Joel Rodriguez Kannapolis, NC 28081 (980) 330-0130		☐ Federal ☐ County: ☐ State ☒ Municipality:	Tables and chairs (launch party)	$ 107.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
2025	Check	F	08/17/2025	$ 107.00	tables + chairs
				$	

4. Payee Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
PC Signs 2534 Commerce Rd Cincinatti, OH 45241 (513) 772-8844		☐ Federal ☐ County: ☐ State ☒ Municipality:	Partial yard sign payment	$ 550.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
2025	debit	B	09/04/2025	$ 550.00	yard signs
				$	

4. Payee Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Rachel Phipps 347 Parkview Ave SW Concord, NC 28025 (704) 886-8397		☐ Federal ☐ County: ☐ State ☒ Municipality:	Salary $75.00 treasurer $75.00 campaign manager	$ 150.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
2025	Check	E	09/05/2025	$ 150.00	salary payment
				$	

5. Total only this Page	$ 807.00
6. Total of ALL CRO-1310 Pages *(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)*	$ 1306.87

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

A* - Media	**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)**

Disbursements

Pg 4 of 4 | Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Jayne with a Y Williams	

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name / c. Level Registered (Specify)	d. Comments / e. Election Sum to Date
Justin 4 Mayor (Zeffy) Kannapolis, NC (704) 491-3049	☐ Federal ☐ County: ☒ State ☒ Municipality:	Campaign donation launch party $ 25.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
2025	debit	D	09/08/2025	$ 25.00	donation
				$	

4. Payee Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name / c. Level Registered (Specify)	d. Comments / e. Election Sum to Date
Soul Food with a Twist 1701 S Main St Kannapolis, NC 28081 (704) 932-8351	☐ Federal ☐ County: ☐ State ☒ Municipality:	Campaign meeting lunch $ 28.87

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
2025	debit	O	09/18/2025	$ 28.87	meeting expenses
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name / c. Level Registered (Specify)	d. Comments / e. Election Sum to Date
Cracker Barrel 1175 Copperfield Blvd NE Concord, NC 28025 (704) 792-0277	☐ Federal ☐ County: ☐ State ☐ Municipality:	campaign meeting lunch $ 42.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
2025	debit	O	09/19/2025	$ 42.00	meeting expenses
				$	

5. Total only this Page	$
6. Total of ALL CRO-1310 Pages *(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)*	$

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

A* - Media	**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)**

In-Kind Contributions

Pg 1 of 1 | Amendment ☐ Yes ☒ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)	2. ID Number
Jayne with a Y Williams	

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Rachel Phipps 347 Parkview Ave SW Concord, NC 28025	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	website fees **d. Election Sum to Date** $ 72.87

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Website Fees (domain name)	07/17/2025	$ 22.87
Website Subscription	07/17/2025	$ 50.00
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
	☐ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	**d. Election Sum to Date** $

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		$
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
	☐ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	**d. Election Sum to Date** $

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		$
		$
		$

4. Total only this Page	$ 72.87
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 72.87