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
Committee to elect Alvarys Santana	
b. Mailing Address (include City, State and Zip Code)	**d. Date Filed**
301 S McDowell St 1251726 Charlotte, NC 28204	10/24/2025
	e. Phone Number
	917863-7991

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2020	7/1/2025	9/23/2025	Alvarys Santana

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	
US bank	
b. Purpose	**c. Account Code**
Campaign	AS2027
	d. Period Begin Balance
	$ 774.49

RECEIVED IN-PERSON OCT 24 2025 CABARRUS COUNTY BOARD OF ELECTIONS

11. Account Information

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

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.

Alvarys Santana		10/24/2025
Printed Name of Signer	Signature of Appointed Treasurer	Date

FOR OFFICE USE ONLY

Date Received:	10-24-25	Employee:	WAN	Delivery Method
Date Postmarked:		Employee:		☐ Normal Mail ☐ Registered Mail
Date Scanned:	10-24-25	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
Committee to elect Avarys Surtano 35 Day		

Start of Election Cycle: January 1, 2025		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 777.49	$
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	$ 410.30	$ 605.30
6) Contributions from Individuals	(CRO-1210)	$ 1530	2480
7) Contributions from Political Party Committees	(CRO-1220)	$ 500	$ 2,500
8) Contributions from Other Political Committees	(CRO-1230)	$ 0	$ 0
9) Loan Proceeds	(CRO-1410)	$ 0	$ 0
10) Refunds/Reimbursements to the Committee	(CRO-1240)	$ 0	$ 0
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	$ 0	$ 0
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	$ 0	$ 0
11c) Outside Sources of Income	(CRO-1250)	$ 0	$ 0
11d) Legal Expense Fund - Other Sources	(CRO-1270)	$ 0	$ 0
11e) Exempt Purchase Price Sales	(CRO-1265)	$ 0	$ 0
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		$ 2440.30	$ 5585.30
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	$ 2398.67	$ 2766.18
13b) Contributions to Candidates/Political Committees	(CRO-1310)	$ 0	$ 0
13c) Coordinated Party Expenditures	(CRO-1310)	$ 0	$ 0
14) Aggregated Non-Media Expenditures	(CRO-1315)	$ 0	$ 0
15) Loan Repayments	(CRO-1420)	$ 0	$ 0
16) Refunds/Reimbursements from the Committee	(CRO-1320)	$ 480	$ 480
17) In-Kind Contributions	(CRO-1510)	$ 980	$ 2980
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 3858.67	$ 6226.18
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ -640.88	$ -640.88
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	$ 0	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	$ 0	
22) Debts and Obligations owed by the Committee	(CRO-1610)	$ 0	
23) Debts and Obligations owed to the Committee	(CRO-1620)	$ 0	
24) Account Transfers Within the Committee	(CRO-1720)	$ 0	
25) Administrative Support	(CRO-1710)	$ 0	$ 0
26) Forgiven Loans	(CRO-1440)	$ 0	$ 0
27) 48-Hour Notice Reports Sum	(CRO-2220)	$ 0	$ 0
28) Contributions to be Refunded	(CRO-1215)	$ 0	$ 0

Aggregated Contributions from Individuals

Amendment ☐ Yes ☒ 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
COMMITTEE TO ELECT ALVARYS SANTANA	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☒ Add ☐ Remove		ACT BLUE DONATION		07/06/2025	$ 25
☒ Add ☐ Remove		ACT BLUE DONATION		07/08/2025	$ 10
☒ Add ☐ Remove		ACT BLUE DONATION		07/08/2025	$ 50
☒ Add ☐ Remove		ACT BLUE DONATION		07/11/2025	$ 10
☒ Add ☐ Remove		ACT BLUE DONATION		07/17/2025	$ 10
☒ Add ☐ Remove		ACT BLUE DONATION		07/20/2025	$ 10
☒ Add ☐ Remove		ACT BLUE DONATION		07/24/2025	$ 25
☒ Add ☐ Remove		ACT BLUE DONATION		07/29/2025	$ 4.3
☒ Add ☐ Remove		ACT BLUE DONATION		07/30/25	$ 1
☒ Add ☐ Remove		ACT BLUE DONATION		08/01/2025	$ 10
☒ Add ☐ Remove		ACT BLUE DONATION		08/01/2025	$ 50
☒ Add ☐ Remove		ACT BLUE DONATION		08/07/2025	$ 50
☒ Add ☐ Remove		ACT BLUE DONATION		08/17/2025	$ 10
☒ Add ☐ Remove		ACT BLUE DONATION		09/17/2025	$ 10
☒ Add ☐ Remove		ACT BLUE DONATION		09/17/2025	$ 25
☒ Add ☐ Remove		ACT BLUE DONATION		09/17/2025	$ 20
☒ Add ☐ Remove		ACT BLUE DONATION		09/26/2025	$ 50
☒ Add ☐ Remove		ACT BLUE DONATION		09/26/2025	$ 40
☒ Add ☐ Remove					$
☒ Add ☐ Remove					$
☒ Add ☐ Remove					$
☒ Add ☐ Remove					$
☒ Add ☐ Remove					$

4. Total only this Page	$ 410.30
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 410.30

Contributions from Individuals

Pg 1 of 4 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
COMMITTEE TO ELECT ALVARYS SANTANA	

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
ALVABEL SANTANA 4017 South Woodbine St Harvey,LA 70058	SAFETY MANAGER	GOODWILL		$ 75

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	A42025	ACT BLUE DONATION		07/03/2025	$ 75
☐					$
☐					$

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
MARIO MARTINEZ 1134 Michael St New Orleans,LA 70114	NOT EMPLOYED	N/A		$ 100

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	A42025	ACT BLUE DONATION		05/16/2025	$ 100
☐					$
☐					$

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
STEVEN MEDRANO 3065 Roberts Ave 1f Bronx, NY 10461	MEMBERSHIP SR PROJECT CONTROL	MTA		$ 60

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	A42025	ACT BLUE DONATION		7/11/2025	$ 60
☐					$
☐					$

4. Total only this Page	$ 235
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 1530

Contributions from Individuals

Pg 2 of 4 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
COMMITTEE TO ELECT ALVARYS SANTANA	

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
STANLEY MARTINEZ 40 William St Methuen MA 1844	CEO/ PRESIDENT	NEW ENGLAND CLEANING		$ 100

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	A42025	ACT BLUE DONATION			$ 100
☐					$
☐					$

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
Reggie Mitchell 320 23rd St S Unit 319 Arlington VA 22202	SMALL BUSINESS LIASON	ENVIROMENTAL PROTECTION AGENCY		$ 100

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	A42025	ACT BLUE DONATION		08/02/2025	$ 100
☐					$
☐					$

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
Janet Martinez 1424 Quebrada Del Sur Harvey, LA 70058	SAFETY PROFESSIONAL	Hubka Safety Consulting		$ 250

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	A42025	ACT BLUE DONATION		08/13/2025	$ 250
☐					$
☐					$

4. Total only this Page	$ 450
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 1530

Contributions from Individuals

Pg 3 of 4 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
COMMITTEE TO ELECT ALVARYS SANTANA	

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
Cayetana Reyes 1424 Quebrada del Sur Harvey, LA 70058	N/A	N/A		$ 100

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		ACT BLUE DONATION		08/13/2025	$ 100
☐					$
☐					$

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
Asha Lewis 19215 Chandlers Landing Drive #304 Cornelius NC 28031	N/A	N/A		$ 65

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		ACT BLUE DONATION		08/16/2025	$ 65
☐					$
☐					$

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
Jamilah Espinosa 1401 Moonstone Dr Matthews NC 28105	IMMIGRATION ATTORNEY	ESPINOSA LAW FIRM		$ 100

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	A42025	ACT BLUE DONATION		09/17/2025	$ 100
☐					$
☐					$

4. Total only this Page	$ 265
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 1530

Contributions from Individuals

Pg 4 of 4

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
COMMITTEE TO ELECT ALVARYS SANTANA	

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
Yensi Martinez 1309 Tanglewood Dr Westwego, LA 70094	ELECTRICAL STAFF	HII		$ 100

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	A42025	ACT BLUE DONATION		09/23/2025	$ 100
☐					$
☐					$

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
Alvarys Santana 301 S McDowell St 1251726 Charlotte, NC 28204	Principal	AS Strategy		$ 480

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	AS2025	Debit	Stamps	8/19/2025	$ 340
☐	AS2025	Debit	Signs	8/29/2025	$ 140
☐					$

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
				$

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

4. Total only this Page	$ 586
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 1530

Contributions from Political Party Committees

Pg 1 of 1

Amendment ☒ Yes ☐ No

Use this form to report contributions from a political party

1. Committee Full Name (and Fund if applicable)	2. ID Number
Committee to elect Ivory-Kaye Santanen	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Comments
NC Democrats 220 Hillsborough Street Raleigh, NC 27603 PO Box 1926 919 821-2777	votebuilder
	c. Election Sum to Date: $2500

d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount
AS2025	in kind	votebuilder	07/23/2025	$ 500
				$
				$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Comments
	c. Election Sum to Date: $

d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount
				$
				$
				$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Comments
	c. Election Sum to Date: $

d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount
				$
				$
				$

4. Total only this Page	$ 500
5. Total of ALL CRO-1220 Pages *(This line must be on line 7 of Detailed Summary Page CRO-1100)*	$ 500

Disbursements

Pg 1 of 6

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
Committee to elect Alvarys Santana	

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
USPS 66 McCachern Blvd SE Concord, NC 28025		☐ Federal ☐ County: ☐ State ☐ Municipality:		$112.35

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AS20251	Debit	O	7/7/2025	$112.35	Cashiers Check
				$	

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
Signs on the Cheap 11525 B Stonehollow Dr 220 Austin, TX 78758		☐ Federal ☐ County: ☐ State ☐ Municipality:	Signs	$125.44

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A20251	Debit	B	7/28/2025	$125.44	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
Stickers Mule 336 Forest Ave Amsterdam, NY 12010		☐ Federal ☐ County: ☐ State ☐ Municipality:	Pins	$42.80

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AS20251	Debit	B	7/28/2025	$42.80	Pins
				$	

5. Total only this Page	$280.59
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)*	$2398.67

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 6

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
Committe to elect Alvarys Santana	

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
Scale to Win 13742 Harper St Santa Ana, CA 92703		☐ Federal ☐ County: ☐ State ☐ Municipality:	SMS	$ 274.14

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AS2025I	Debit	C	8/4/2025	$214.99	SMS
AS2025I	Debit	C	9/4/2025	$59.15	SMS

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
Got Print 7651 N San Fernando RD Burbank CA 91505		☐ Federal ☐ County: ☐ State ☐ Municipality:	Mailers Printed	$ 191.87

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AS2025I	Debit	B	8/14/2025	$191.87	mailers
				$	

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
Ebay 2025 Hamilton Ave San Jose, CA 95125		☐ Federal ☐ County: ☐ State ☐ Municipality:	custm t shirts	$ 267.50

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AS2025I	Debit	B	8/20/2025	$267.50	tshirts
				$	

5. Total only this Page	$ 733.51
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)*	$ 2398.67

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 3 of 6 | 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
Committe to elect Aivarys Santana	

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
Adobe 345 Park Ave San Jose CA 95110	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	Digital Signature e. Election Sum to Date $ 32.09

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AS2025	Debit	O	8/20/2025	$ 32.09	Digital Signature
				$	

4. Payee Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
UPS 8611 Concord Mills Blvd Concord NC 28027	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	Printing flyers e. Election Sum to Date $ 20.46

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AS2025A	Debit	B	8/22/2025	$ 20.46	Printing flyers
				$	

4. Payee Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Ebay 2055 Hamilton Ave San Jose, CA 95125	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	Bulk Stamps 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
AS2025	Debit	E	8/25/2025	$ 144.45	Stamps
AS2025	Debit	E	9/22/2025	$ 213.99	Stamps

5. Total only this Page	$ 410.99
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)*	$ 2398.67

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 6

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
Committee to elect Alvaro Santana	

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
Stamps.com 1990 E Grand Ave El Segundo California		☐ Federal ☐ County: ☐ State ☐ Municipality:	Stamps Paper	$22.51

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AS2025	Debit	I	9/8/2025	$22.51	Stamps Paper
				$	

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
Ninja Transfer 2727 Commerce Way ST100 Philadelpia PA		☐ Federal ☐ County: ☐ State ☐ Municipality:	transfers for shirts	$87.33

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AS2025	Debit	B	9/10/2025	$87.33	transfers for shirts
				$	

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
Got Print 7651 N San Fernando RD Burbank CA 91505		☐ Federal ☐ County: ☐ State ☐ Municipality:	Mailers Printed	$400.45

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AS2025	Debit	B	9/11/2025	$123.65	Mailers printed
AS2025	Debit	B	9/23/2025	$84.93	Mailers printed

5. Total only this Page	$570.29
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)*	$2398.67

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 5 of 6

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
Committee to elect Avaky's Santana	

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
Dorwtha A		☐ Federal ☐ County: ☐ State ☐ Municipality:	Volunteer Drinks	$ 12.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AS2025	Debit	O	9/15/2025	$ 12.00	
				$	

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
Yard Signs Plus 10511 Kipp Way St 430 Houston TX 77099		☐ Federal ☐ County: ☐ State ☐ Municipality:	Yard signs	$ 292.95

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AS2025	Debit	B	9/17/2025	$ 181.80	
AS2025	Debit	B	9/22/2025	$ 111.15	

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
Olivia Todd 253 Charter Court SE Concord, NC 28025		☐ Federal ☐ County: ☐ State ☐ Municipality:	Gas card Volunteer	$ 30

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AS2025	Debit	O	9/9/2025	$ 30	Gas Card Volunteer
				$	

5. Total only this Page	$ 334.95
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)*	$ 2398.67

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 6 of 6 | 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
Committee to elect Aivarys Santana	

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
Ebay 2025 Hamilton Ave San Jose, CA 95125		☐ Federal ☐ County: ☐ State ☐ Municipality:	Stamps in bulk	$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AS2025	Debit	I	9/22/2025	$41.72	Stamps in bulk
AS2025	Debit	I	9/25/2025	$66.32	Stamps in bulk

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
Amazon 410 Terry Ave N Seattle, WA 98109		☐ Federal ☐ County: ☐ State ☐ Municipality:	label paper	$20.30

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AS2025	Debit	B	9/28/2025	$20.30	label paper
				$	

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
		☐ Federal ☐ County: ☐ State ☐ Municipality:		$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				$	
				$	

5. Total only this Page	$ 128.37
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)*	$ 2398.67

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)**

Refunds/Reimbursements From the Committee

Pg 1 of 1

Amendment ☐ Yes ☐ No

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

1. Committee Full Name (and Fund if applicable): Committee to elect Aivarys Santaner

2. ID Number:

3. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip):
Aivarys Santaner
301 S McDowell St 125726
Charlotte NC 28204

d. Type of Committee: ☐ Candidate ☐ PAC ☐ Referendum ☐ Party

e. Level Registered: ☐ Federal ☐ County: ☐ State ☐ Municipality:

f. Purpose Code: P

h. Original Receipt Date: 8/19/2025

i. Original Receipt Amount: $ 340

j. Election Sum to Date: $

b. Job Title/Profession: Principal

c. Employer's Name/Specific Field: AS Strategy

g. Comments:

k. Account Code: AS2025

l. Form of Payment: EFT

m. Required Remarks: P

n. Date (mm/dd/yyyy): 8/19/2025

o. Amount: $ 340

3. Payee Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip):
Aivarys Santaner
301 S McDowell St 125726
Charlotte, NC 28204

d. Type of Committee: ☐ Candidate ☐ PAC ☐ Referendum ☐ Party

e. Level Registered: ☐ Federal ☐ County: ☐ State ☐ Municipality:

f. Purpose Code: P

h. Original Receipt Date: 8/29/2025

i. Original Receipt Amount: $ 140

j. Election Sum to Date: $

b. Job Title/Profession: Principal

c. Employer's Name/Specific Field: AS Strategy

g. Comments:

k. Account Code: AS2055

l. Form of Payment: EFT

m. Required Remarks:

n. Date (mm/dd/yyyy): 8/29/2025

o. Amount: $ 140

3. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip):

d. Type of Committee: ☐ Candidate ☐ PAC ☐ Referendum ☐ Party

e. Level Registered: ☐ Federal ☐ County: ☐ State ☐ Municipality:

f. Purpose Code:

h. Original Receipt Date:

i. Original Receipt Amount: $

j. Election Sum to Date: $

b. Job Title/Profession:

c. Employer's Name/Specific Field:

g. Comments:

k. Account Code:

l. Form of Payment:

m. Required Remarks:

n. Date (mm/dd/yyyy):

o. Amount: $

4. Total only this Page: $ 480

5. Total of ALL CRO-1320 Pages *(This line must be on line 16 of Detailed Summary Page CRO-1100)*: $ 480

6. Purpose Codes (List detailed disbursement code in (f) above)

L - Returned to Contributor
M - Overpayment for Service
N - Exceeded Contribution Limit
P* - Reimbursement of In-Kind
O* Other
*** Codes require detailed explanation in required remarks field (m)**

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
COMMITTEE TO ELECT ALVARYS SANTANA	

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
NC DEMOCRATS 220 Hillsborough Street Raleigh, NC 27603 I P.O. Box 1926 Raleigh NC 27602VOTER ASSISTANCE HOTLINE: 1-833-VOTE4NC team@ncdp.org Office: 919-821-2777	☐ Individual ☐ Candidate ☒ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	VOTEBUILDER **d. Election Sum to Date** $ 500

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
Alvarys Santana 301 S McDowell St 1251726 Charlotte, NC 28204	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	**d. Election Sum to Date** $ 480.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Stamps	8/19/2025	$ 340.00
Signs	8/29/2025	$ 140.00
		$

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
		$
		$
		$

4. Total only this Page	$ 980.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 980.00