## **Disclosure Report Cover**

Amendment

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.

L Constitute this	THE RESERVE THE PERSON NAMED IN	information.							
1. Committee In	iormation							T- 10 3	
a. Full Name		Y Williams						c. ID Num	ber
SCIPPIO FOR	EAST WARD								
b. Mailing Addre	ss (include Cit	y, State and Zi	p Code)			Amend	led	d. Date Fit	ed
3335 NEW WA	LKERTOWN	RD						001	20/2021
WINSTON SA								08/	20/2021
								e. Phone N	lumber
								(336)	529-1749
2. Report Year	3. Period Star	t Date (mm/dd/	yy)	4. Period	End Date	e (mm/dd/yy)	5. Treast	irer Full Na	me
2020	07	7/01/2020			10/19/20	)20	JULIA W	VALL	
6. Type of Comn	nittee (Check C	One)	9. Typ	e of Report	t (che	eck only one	type of re	port from on	e category)
X Candidate Can		the state of the s	Munic			State/County		Referendu	The state of the s
☐ Joint Fundraise	er PA	C		Organizatio	nal [	Organizati	onal	Organiz	zational
☐ Referendum		al Expense Fund		Thirty-five	day	Quarterly		☐ Pre-ref	erendum
7. Type of Fund	(if applicabl	le, check one)		Pre-primary	/ [	First		☐ Final	
☐ "Booster Fund	"		X	Pre-election	1	Secon	d	☐ Suppler	mental Final
■ Building Fund				Pre-runoff	1	Third		☐ Annual	
	lection Year Can			Semi-annua	1 [	Fourth	1	☐ Special	
■ NC Public Can	npaign Financing	Fund		Mid Ye	ar	Semi-annu	al		
				Year Er	nd	Mid Y	ear	10. Specia	al Report Name
Other:				Final	1	Year I	End		
8. Number of Fu	indraisers this	Report		Special	1	Final			
	0				1	Special			
3. Account Infor					3 4	unt Informa	tion		
a. Financial Insti		me				cial Instituti		me	
		in C	-			Ciai institut	on rail ita		
SCIPPIO FOR I	LASI WARD								
b. Purpose		c. Account Coo	de		b. Purpo	ose		c. Account	Code
RECEIPTS AN	D		5824					-	
DISBURSEME	NTS		COST					-	
		d. Period Begi	n Balar	ice	]			d. Period I	Begin Balance
		\$	1,179.76				s 1 3		
CERTIFICATIO	N	-							
I certify that the Chapter 163 of funds. I furth	he Committee of f the NC Gener er certify that the full of S rinted Name of S	A. Wa	i that n	o funds are true and c	commin orrect ar	gled with pr	ohibited or e been train	other non-coned by the N	22D-22M of disclosed NC State Board /20/2021 Date
FOR OFFICE U	SEONLY								
Date Receiv	ed:	7.77	_	Emplo	yee: _		- <u>_</u>	Normal M	ail
Date Postma	arked:		_	Emplo	yee: _			Registered Hand Deli	ivered
Date Scanne	ed:			Emplo	yee: _		_	Electronic	
Date Data E	ntered:		_	Emplo	yee: _			Signer ha	s not received y training
	assista	cannot be used nt treasurer, cu d the Statemer	istodiai	n of books i	informat	ion, or accou	int informa	tion.	

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

Amendment Yes X No

1. Committee Full Name (and Fund if applicable)	2. Type of Re	port	3. ID Number
SCIPPIO FOR EAST WARD	2020 Pre-Ele	ection	
Start of Election Cycle: January 1, 2020		Total this Reporting Period	Total this  Election Cycle
4) Cash on Hand at Start		\$ 1,179.7	6 \$ 1,656.60
RECEIPTS	لل ديال بسال ا	Andrew Marine Courts	
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 40.7	4 \$ 90.74
6) Contributions from Individuals	(CRO-1210)	\$ 100.0	0 \$ 2,900.73
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.0	0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.0	0.00
9) Loan Proceeds	(CRO-1410)	\$ 0.0	0.00
0) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.0	0 \$ 0.41
1) Other Receipt Sources		ti Na	n
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.0	0 \$ 0.00
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ 0.0	0 \$ 0.00
11c) Outside Sources of Income	(CRO-1250)	\$ 0.0	0 \$ 0.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0.0	0 \$ 0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0.0	0 \$ 0.00
(2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	IId and IIe)	\$ 140.7	4 \$ 2,991.88
EXPENDITURES			Water Branch and Branc
l3) Disbursements		7 2	
13a) Operating Expenditures	(CRO-1310)	\$ 145.7	7 \$ 1,367.25
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 250.0	0 \$ 250.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.0	0.00
l 4) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 45.4	9 \$ 422.16
I5) Loan Repayments	(CRO-1420)	\$ 0.0	0 \$ 0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 40.7	4 \$ 1,644.84
17) In-Kind Contributions	(CRO-1510)	\$ 40.7	4 \$ 166.47
8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15	, 16 and 17)	\$ 522.7	4 \$ 3,850.72
19) Cash on Hand at End (Add lines 4 and 12 together, then sub		\$ 79 <b>7.7</b>	
<u>ADDITIONAL INFORMATION</u>			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.0	0
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0.0	0
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$ 0.0	0
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$ 0.0	0 .
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0.0	0 2 3
25) Administrative Support	(CRO-1710)	\$ 0.0	0.00
26) Forgiven Loans	(CRO-1440)	\$ 0.0	0 \$ 0.00
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0.0	
8) Contributions to be Refunded	(CRO-1215)	\$ 0.0	0.00

Aggrega	ited Contrib	outions from I	ndividuals Page	1 of	1	Amendu Ves	ient No
Optional for	rm used to repor	rt NC Contributions	From Individuals of \$	50 or less			
1. Committe	e Full Name (and	Fund if applicable)			2. ID I	Number -	sta bir
SCIPPIO FO	OR EAST WARD	1					
3. Contribut	or Information		1				The William Control
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/de	l/yyyy)	f. Amou	nt ".
Add Remove	5824	In-Kind	FOOD FOR VOLUNTEERS	10/02/202	20	\$	40.74
4. Total or	nly this Page	हैं। अभी खार्च - अ		# 1 # 2	\$		\$40.74
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CRO-1205		N	C State Board of Elections				April 2007

Contribu	utions fr	om Individual	S		Pe	1	of	1		Amendme		<b>N</b> Y
		idividual contribution		ontributions			or if form	TPO 1	1205		<u> </u>	No
1. Committee	e Full Name	(and Fund if applicab	le)	onenous	unde	τ Φυ	II IOIIII					
SCIPPIO FO	R EAST W	ARD		<del>na Sakan I. jin</del>	·		and the state of	<u> </u>	4. !	D Number	er e	<u> </u>
3. Contribute	or Informati	on .		Add	Remo	ve	g., 4	r <sub>u</sub>	, ,	t to the training	e' .	
		dress & Phone		b. Job Title	/Profe	ssion	A	<del></del>	đ, C	omments	4	<del></del>
	y, state, & z	ip)		ENTERTA	NM	ENT	-					
DARRICK Y				<u></u>					1			
245 HIGHLAND AVE				c. Employer's Name/Specific Field								
SUITE 230-368 ATLANTA, GA 30307				SELF EMPLOYED					e. Rection Sum to Date			
(314) 435-90				ŀ					e. E	lection Sur	n to 1	Jate
(311) 133-70	700								\$		10	00.00
f. Prior g. Ac	count Code	h. Form of Payment	i. In-Kind Des	cription	j.	Date	(mm/dd/	уууу)	<u>'</u>	k. Amount		-
	5824	Money Order				0	9/01/20	20		\$	10	00.00
					$\top$				7	\$		
		<u> </u>			_				_	\$		
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CRO-1210			NC State Bo	ard of Electic	ns						Apr	1 2007

Disbursen	nante							Ame	ndment
					Pg				Yes 🛛 No
Use this form to	report expenditures	from the committ	ee for c	perating expe	enses,	contribut	ions t	o candida	te/political
	coordinated party e		7						
	ull Name (and Fund	it applicable)	. W	eries in the second		200 Sec. 200	Agr. 10	2. ID Nu	mber
SCIPPIO FOR	EAST WARD								
3. Type of Disb	waamant' (Dlagga	CD.	0 1214			- Am	- 54 .		
Operating Ex	nenses Y Cont	use separate CRC ributions to Candida	<u> </u>	jorms for ea	ch typ				F A 8
		rioutions to Candida					ordina	ted Party E	xpenditures
4. Payee Inform	ailing Address & Ph			Add 🔲	Rem				
(include city, sta		оде		b. Coordinat	ed Cor	nmittee N	ame	d. Comm	ents -
		710010		-					
1128 BURKE S	UNTY DEMOCRA	TIC PARTY		c. Level Regi	etarad	(Spanter)	24	4	
	LEM, NC 27101			Federal		County	·	1	
(336) 724-5941				State		☐ Munici		e. Electio	n Sum to Date
(330) 121 3341					•		<i>-</i>		2 outs to Date,
								\$	250.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy	) J. An	nount	k. Re	quired Re	marks.
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5. Total only thi	s Page				17		. 2. ° §	\$	250.00
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(This line goes i	n line 13b of Detailed S	Summary Page CRO	-1100 if	Contrib to Can	didates	/Political C	Comm)	\$	250.00
(This line goes is	n line 13c of Detailed S	ummary Page CRO-	1100 if	Coordinated P	arty Ex	penditures)		]	
7. Purpose Co	des (List detailed	expenditure code	in (h:)	above)	r.	F. E. P	ું ક		
A* - Media	B* - Printin	g	C* - F	undraising	<del></del>	D - To		her Candi	late
E - Salaries	F* - Equipm	· · · · · · · · · · · · · · · · · · ·		litical Party	* P	and the same of the same of the same of			ffice Expenses
I - Postage		and the second	K* - C	ffice Expense	es	The state of the same of the same of	and in the second	The same and the same is a	l Expense Fund
O* Other				4 14- m-		·			•
	e detailed explanatio	n in required rem	arks f	ield (k)	,		C A P 100-2-1	3	
CRO-1310		NC S	tate Boa	rd of Elections					December 2009

Disbursen	nante					_		Amend	
		form the economist	<b>C</b>		Pg			1	s X No
committees and	o report expenditures I coordinated party ex	mom me commu xoenditures	ee ior c	operating expe	nses	, contributi	ons to	candidate/	political
	ull Name (and Fund)		1 of 2	18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		to I have been a second		2. ID Num	here
	EAST WARD					<u> </u>			
3. Type of Disb		use separate CRC	)-131 <i>0</i>	forms for eac	h tyi	e of Disbu	rseme	ent.)	
Operating Ex		ributions to Candidat						ed Party Exp	enditures
4. Payee Inform				Add	Rei	move			, b
	ailing Address & Pho	one	-	b. Coordinate	d Co	mmittee N	ame	d. Commer	its
(include city, sta	· · · · · · · · · · · · · · · · · · ·	4							
POST OFFICE							<u> </u>		
3320 SILAS CREEK PKWY				c. Level Regis	tere				
STE 500		State		County:		· Floation	Sum to Date		
(800) 275-8777	LEM, NC 27103-30	25				- Manch	ranty.		Sum in Date
								\$	42.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	J. A	mount	k. Re	quired Rem	arks
5824	Check	I	11	0/17/2020	\$	42.00			
		<del></del>	$\vdash$		S		$\vdash$		
4. Pavée Inform	ation	was see the fact of the see	. П	Add □	Rer	nove			
	ailing Address & Pho		*** a \$	b. Coordinate	d Co	mmittee No	ame:	d. Commen	ifg **
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SAM'S CLUB				1					
HANES MALL	BLVD			c. Level Regis	terec				
NC				Federal		County:			<del></del>
(336) 765-3590				☐ State		Municip	ality:	e. Bection-	Sum to Date
				<u> </u>				\$	103.77
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Re	quired Rem	arks /
5824	Check	K	10	0/18/2020	\$	103.77	PRIN	ITER INK	
					\$				
5. Total only thi	s Page	· ·	<del></del>		<u> </u>	<del></del>		\$	145.77
6. Total of ALL	CRO-1310 Pages	4		<del></del>		7 540	1 2 16		

CRO-1310

O\* Other

A\* - Media

E - Salaries

I - Postage

\* Codes require detailed explanation in required remarks field (k) NC State Board of Elections

C\* - Fundraising

G - Political Party

K\* - Office Expenses

(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)

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

B\* - Printing

J - Penalties

F\* - Equipment

(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)

> December 2009

D - To Another Candidate

H\* - Holding Public Office Expenses

Q\* - Donation to Legal Expense Fund

145.77

		Iedia Expendort NC Non-Media		Pag f \$50 or less.	<u> </u>	of <u>1</u>	Amenda Yes		No
1. Committe	ee Full Name (an	d Fund if applicable)	Vilarie carrety via		29II	Number	ierrokrone as	Parting 250	Gidaniyan
	OR EAST WAR		<u> </u>		3.1		12 Mary 11 Control 11	este and Chyc	
3. Payee Inf			794775.84d				13.45.45.45.45.45.45.45.45.45.45.45.45.45.	Na Prog	To a.
a. Amend 🦠	b. Account Code	c. Form of Payment	d. Purpose Code.	e. Date (mm/dd/yyyy	f. An	nount &	g. Require	Remar	ks
☐ Add ☐ Remove	5824	Electric Funds Tran		09/22/2020	\$	45.49	CHECKS		V
4. Total o	nly this Page			The same that the same of the same	s		<u></u>		45.49
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6. Purpos	e Codes (List o	letailed expenditu	re code in (d) al	oove)	graff of	de la Company		13 a w	
		- Printing	C* - Fundr		To A	nother Ca	ndidate	99 2903 17 3900 1 13	1 Valle   1 Mar 1 1 1 2 1
E - Salar	ies F*	- Eqwipment	G - Political	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			lic Office	Expens	ses
≓l⇔Posta	ge J-	Penalties		Expenses Q*	- Don	ations to	Legal Ex	pense	Fund
O* - Otl	her						Sm LA	Ponse	- unu

\* Codes require detailed explanation in required remarks field (g)
CRO-1315

NC State Board of Elections

December 2009

Refund	ls/Reimb	ursements	From the Co	mmittee P	g <u>1</u> of	Ameno		
1. Commit	tee Full Name	Cand Fund if a	sements, including coplicable)	ontributions retu	imed to the contrib	outor		
SCIPPIO I	FOR EAST V	VARD	gaicaine).	m to the man		2.1D Num	ber	
	and was an an ear	or the wife of the same of the same	21 700004.700					
3. Payee in	formation _			Add ↓□ R	emove	a Samuella	Marin Carl	
		dress & Phone		d. Type of Com	mittee , , , , , , , , , , , , ,	g. Commer	ts 💮 💮	
	city, state, & 2	ip)	and the same of the same	Candidate	PAC			
	E SCIPPIO			Referendum	Party			
3335 NEW WALKERTOWN RD				e. Level Registe	red (Specify)	h. Original Receipt Date		
WINSTON SALEM, NC 27105 (336) 529-1749			Federal	County:				
				☑ State	Municipality:	<u></u> _	N	
				1		i. Original	Receipt Amount	
						\$	40.74	
b. Job Title/	Profession 🦪	c. Employer's	Namé/Specific Field	f. Purpose Code		j. Election S	um to Date	
CITY COUN	CIL	CITY OF WINS	TON	P		\$	0.00	
c. Account (	Code 1. Forn	n of Payment	m. Required Rema	ks	n. Date (mm/dd/y	yy) o, Amo	unt	
5824	Check		FOOD FOR VOLUNT	EERS	10/17/2020	\$	40.74	
. Total onl	y this Page			* ## * * * * * * * * * * * * * * * * *		\$	40.74	
Total of A	ALL CRO-13 must be on line	20 Pages 15 of Detailed Su	mmary Page CRO-110	0)	The state of the s	\$	40.74	
6. Purpos	e Codes (List	detailed disbu	rsement code in (f) a	bove)	Care and the second of the sec			
L - Return	ied to Contrib	outor M -	Overpayment for Se	rvice	N - Exceed	ed Contibut	ion Limit	
P* - Rein	abursement o	f In-Kint O*	Other			o the fact assess of an	And the second s	
* Codes t	equire detail	ed explanation	in required remarks		1		1 6 1 6 1 6 1 6 1 6 1 6 1 6 1 6 1 6 1 6	
CRO-1320				rd of Elections			July 2007	

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In-Kind Contributions Use this form to report non-monetary contributions, Use CRO-1215 if In-Kind Contributions were or	, donations, goods or ser will be refunded withi	n 7 days.	the cor		No fund.	
1: Committee Full Name (and Fund if applicable SCIPPIO FOR EAST WARD	Marie Barrier Company of the Company	е <u>де</u> де	2. ID	Number	The state of the s	
3. Contributor Information a. Full Name, Mailing Address & Phone	☐ Add ☐ Re b. Type of Con		c. Con	aments	g to the second	
(include city, state, & zip) Aggregated Individual Contribution	X Individual Candidate Party PAC Referendum Other Recei	=	d. Elec	tion Sum t	m to Date	
e. Description		f. Date (mm/dd	/vvvv)	g. Fair M	arkët Amount	
FOOD FOR VOLUNTEERS		10/02/202		\$	40.74	
			_	\$		
				\$		
4. Total only this Page		- 1 V V V	\$	1	40.74	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary P	age CRO-1100)		\$		40.74	
CRO-1510 NC	State Board of Elections				December 2007	