Amendn	ient	
Yes		No

Disclosure Report Cover

Do not use this form to update information.							
1. Committee Information	THE REPORT			1.1			
a. Full Name			c. ID Number				
Theresa E. Mraze	K Vote	E Terri Mrc	rzek 62QU	INC			
h. Mailing Address (include City, State and Zip Code	the second se		d. Date Filed				
6647 Kernersville			12-0	6-2021			
10	27009		e. Phone Num	0-2636			
2. Report Year 3. Period Start Date (mm/dd	/yy) 4. Period I	End Date (mm/dd/yy)	5. Treasurer Full Name				
2022 05-01-2022	063	30.2022	Terri Mr	nek			
6. Type of Committee (Check One)	9. Type of Rep	ort (check only one	type of report from one c	ategory)			
Candidate Campaign Party	Municipal	State/County	Referendum	· · · · · · · · · · · · · · · · · · ·			
PAC Referendum	Organizationa		onal 🚺 Organizati	onal			
Independent Expenditure 🔲 Joint Fundraiser	Thirty-five da	y Quarterly	Pre-referen	ndum			
Legal Expense Fund	Pre-primary	First	Final				
	Pre-election	Second Second	nd Supplement	ntal Final 🔆 🖂 📩			
7. Type of Fund (if applicable, check one)	Pre-runoff	Third	Annual	12-33			
Booster Fund	Semi-annual	Fourt	h Decial				
Building Fund	Mid Year	r Semi-annu	al				
	Year End	I Mid `	lear 10. Special I	Report Name			
Other:	Final	Year Year	End				
8. Number of Fundraisers this Report	Special	<b>Final</b>	29 -	and the second s			
-0-		Special					
11. Account Information	mile et al eve	11. Account Inform	ation	485			
a. Financial Institution Full Name		a. Financial Institution					
First National Par 1	)	Frank 1	lational Ba	.12			
FIRST National Bank			attonal 19a	NR .			
b. Purpose c. Account Cod	le	b. Purpose	c. Account Cod	e			
Campaign 0419 Eums	154	Camparge Funds	641	954			
d. Period Begin	n Balance	· ·	d. Period Begin	Balance			
TUNUS \$ 34M	1.41	tunas	\$ 347	141			
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.							
Therest E Mrazet	x The	on sach	wand of	11-2022			
Printed Name of Signer	Sign	ature of Appointed Treasu	rer	Date			
FOR OFFICE USE ONLY							
Date Received:	Employ	ee:	Delivery Method Normal Mail				
Date Postmarked:	Employ	ee:	Registered M				
Date Scanned:	Employ	ee:	Electronically	Filed			
Date Data Entered:	Employ		Signer has no mandatory tra	ining			
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.				
assistant treasurer, cus	todian of books	information, or accou	int information.				
assistant treasurer, cus	todian of books	information, or accou	int information.				
assistant treasurer, cus You must amend the Statement CRO-1000	todian of books	information, or accord (CRO-2100A-E) to a	int information. nake committee changes.	August 2008			

Detailed Summary		
Use this form to summarize all disclosure reporting forms and to total me <b>1. Committee Full Name (and Fund if applicable)</b> 2. Type of		Amendment
The sector of the Name (and Fund if applicable)	netary information	Yes No
COULD I INDIAL VOIE	Report	3. ID Number
Start of Election Cycle: January 1 2000	econd Quart	over / a
4) Cash on Hand at Start	Total this	6 GUUNC
RECEIPTS	Reporting Period	Total this Election Cycle
5) Aggregated Contributions from Individuals (CRO 1205)	\$ 347.41	\$ 347.41
6) Contributions from Individuals (CRO-1205)	\$	SILI- II
7) Contributions from Political Data (CR0-1210)		\$
7) Contributions from Political Party Committees       (CR0-1210)         8) Contributions from Other Political Party Committees       (CR0-1220)	\$ 200.00	\$ 200.00
9) Loan Proceed	•	\$
(		\$
10) Refunds/Reimbursements to the Committee       (CR0-1410)         11) Other Receipt State       (CR0-1240)		\$
(on (or		\$
11a) Interest on Bank Accounts	And States and	φ
11b) Contributions from Not-For-Profit Organizations (CRO-1250)\$11c) Outside Sources of Income\$		ф.
11c) Outside Sources of Income	-	\$
11d) Legal Expense Fund (CRO-1250) \$		\$
(CAU-1///)) ¢		
(CRO-1265)	\$	
EXPENDITURES (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e) \$	20000 \$	
(15) Dispursements	200 00 \$	20000
13a) Operating Expenditures	A CONTRACTOR OF THE	
13b) Contributions to Candidate main (CRO-1310) \$	7.90 \$	
13c) Coordinated Party Expenditures (CRO-1310) \$	- 1. 70 \$	1.90
14) Aggregated Non-Media E- (CRO-1310) \$	\$	
15) Loan Repayments (CRO-1315) \$	\$	
16) Refunds/Reimbursements from the Committee       (CR0-1420)         17) In-Kind Contribution       (CR0-1320)	\$	
17) In-Kind Contributions       (CR0-1320)	\$	
18) TOTAL EXPENDENT	\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)       \$         19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)       \$         ADDITIONAL INFORMATION       \$	\$	
TUDITIONAL, INFORMATION AND 12 together, then subtract 12	7.90 \$	7'90
y - ton-wouldtary Gifts Cines to a	53951 \$ A	539 61
		<u></u>
<ul> <li>22) Debts and Obligations owed by the Committee (CR0-1430) \$</li> <li>23) Debts and Obligations owed by the Committee (CR0-1610) \$</li> </ul>		and the second
		and the second second
24) Account Tran a	124 Ma	
25) Administrative Support       (CR0-1720)		
20) Forgiver I (One -		
27) 48-Hour Martin -	\$	
Coultributions to 1 D	\$	
(CPO total	\$	
NC Sec. 7 (CR0-1215) \$		

NC State Board of Elections

August 2008

\$

Contributions from Individuals       Pit       of       Image: Sol of form CR0 1205 is no         Use this form to report individual contributions over \$50 or contributions under \$50 of form CR0 1205 is no       2. UD Number         1. Contributor Information       2. UD Number       2. UD Number       2. UD Number         3. Contributor Information       Add       Connerous       2. UD Number         4. Pull Name, Kailing Address & Phone       b. Job Title/Profession       d. Connerous         1. Prior is Account Code       b. Porm of Payment       i.to-Kind Description       d. Dott (mm/dd/gyyy)       k. Annount         2. Contributor Information       2. dott improve 's NamoSpecific Field       i.e. Election Som to       s         1. Prior is Account Code       b. Porm of Payment       i.to-Kind Description       j. Data (mm/dd/gyyy)       k. Annount         2. Contributor Information       c. Employer's NamoSpecific Field       i.e. Election Som to       s       d. Comments         1. Prior is Account Code       b. Porm of Payment       i.to-Kind Description       j. Data (mm/dd/gyyy)       k. Annount         2. Contributor Information       c. Employer 's NamoSpecific Field       i.e. Election Som to Data         3. Contributor Information       c. Employer 's NamoSpecific Field       i.e. Election Som to Data         3. Contributor Information       j	
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b. Job Title/Profession     Job Title/Pro	INC
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Add       Remove         Add       Remove         (include city, state, & zip)       b. Job Title/Profession       d. Comments         c. Employer's Name/Specific Field       e. Election Sum to Date         Prior       g. Account Code       h. Form of Payment       i. In-Kind Description       j. Date (mm/dd/yyyy)       k. Amount         Image: Specific State       Specific State       Specific State       Specific State       Specific State	
Add       Remove         (include city, state, & zip)       b. Job Title/Profession       d. Comments         c. Employer's Name/Specific Field       e. Election Sum to Date         Prior       g. Account Code       h. Form of Payment       i. In-Kind Description       j. Date (mm/dd/yyyy)       k. Amount         Image: Second Code       h. Form of Payment       i. In-Kind Description       j. Date (mm/dd/yyyy)       k. Amount	
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his line must be on line 6 of Detailed Summary Page CRO-1100) \$ 200 00	1.00
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NC State Boost and \$ 2000 00	-
NC State Board of Elections	1

April 2007

## **Disbursements**

1

Pg of

Amendment No No

**Y**es 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 Fu	nd if applicable)					2. ID Number
	ESA E Mina	1	1	Erri M	hazek		6CQ MAIC
3. Type of Dis	and the state of the	e use separate C				shured	ment
Operating Ex		ntributions to Candie			Manufacture 1		ted Party Expenditures
4. Payee Infor				Add	Remove		and any experiences
	Mailing Address & Pl	hone		b. Coordina	ted Committee Na	me	d. Comments
(include city, state	e, & zip)		1				
First	- Nationa 1019 tain & Prsville M	2/ Ban	K	"printing"	istered (Specify)		
1	100117an (	5/ •		Federal State		9	
Kerne	ersuille il	L 2720	94	Jolaic	Munici	ранту:	e. Election Sum to Date \$ 7.90
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4. Payee Inform	Unati	0	05-0	24-2022	\$ 3.95	1	Bark Fee
and the second se	ling Address & Phone			Add	Remove		
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4. Payee Information       Add       Remove         a. Full Name, Mailing Address & Phone       b. Coordinated Committee Name       d. Comments							
(include city, sta				D. COOPUINAL	a Committee Nam	e (	I. Comments
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			. Date (ii			K. Rec	uired Remarks
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					\$		
5. Total only th	is Page						\$ 7.90
6. Total of ALL CRO-1310 Pages							
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(instance goes in the 150 of Delatea 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							
- 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)							
PRO-1310 NO Serve D. L. CELLA							
				- or meetions			December 2009