Disclosure Repor	t Cover		Amendmen	t
Do not use this form to upo	eport and committee infor	mation, must be signed an	d submitted along with other de	No No
1. Committee Informatio	n :	Strategy and the strate		renten 1011
a. Full Name		the property of the	The transfer of the second	
Hools F	~ Ald-~	_	c. ID Number	
b. Mailing Address (include Cit	y State and Zin G. J.	<u>400</u>	TCOC	71
1111 @ 0 1	y, State and Zip Code)		d. Date Filed	
1442 Deat	Creek 1	ail	7/28/	2000
Kernesv	Creek To	284	e. Phone Number	3033
			(336)8	74-45
2021 912	O LOCAL	eriod End Date (mm/dd/y	(336) 8 5. Treasurer Full Name	
	a local	0/18/2021	1 cozit - 1 - 10 A	200
6. Type of Committee (Che Candidate Campaign	Party 9. Type	of Report (check only o	ne type of report from one cata	PAIC
PAC	D.C.	- Dutie Count	Referendum	sury)
☐ Independent Expenditure ☐		U.E	Organizational	
Legal Expense Fund		rimon.	ly Pre-referendum	T
7 170	Pre-el	loction Fill	- rmai	
7. Type of Fund (if applied Booster Fund	able, check one) Pre-ru	1 25	Supplemental F	inal
Building Fund	Semi-	Innual	Annual	
Danding Fund		Mid Year Semi-an	Special Special	
Other:	<u> </u>	Zoon Tim 1		
3. Number of Fundraisers t	Final Final	☐ Yea	Year 10. Special Repo	rt Name
of a didialisers (Special Special	I Final	-4 FS	
1 40000047		Special		2
1. Account Information . Financial Institution Full Name		11. Account Inform		
		O Financial V. A.	Full Name	
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amonia,		b. 1 dr pose	c. Account Code	
Canpaign			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	d. Period Begin Balance		- 4	
	\$ 1350.48	2.	d. Period Begin Balan	ice
ERTIFICATION			\$	
I certify that the Committee or F	and is in compliance with the		icle 22A, 22B & 22D-22M of Chap	
of the NC General Statutes and	that no funds are comminded	applicable provisions of Art	icle 22A, 22B & 22D-22M of Chap- disclosed funds. I further certify	nter 162
report is complete, true and corr	ect and that I have been train	with prohibited or other non	-disclosed funds. I further certify	that this
111/15/ 1	1 - LAW Contains	ed by the NC State Board of 1	Elections.	
MITAL) WI	DE MAN	Indel Vila	1/2 -160	10
Printed Name of Sig	gner	Signature of the	19 01/28	2
OR OFFICE USE ONLY		Signature of Appointed Treasu	rer Date	_
Date Received:	Em	ployee:	Delivery Method	
Date Postmarked:			Normal Mail	
- 310 T OPITITAL VEAL.	Em	ployee:	Registered Mail	
Date Scanned:			Hand Delivered	1
	Em	ployee:	☐ Electronically Filed	
Date Data Entered:	Emp	ployee:	Cl. Signer has not an all	red
Flease Note: This form ca	annot be used to amend con	mmittee information	mandatory training	
assistant	t treasurer, custodian of bo	oks information, or accounting (CRO 2400)	as the committee address, treasu	rer,
You must amend	the Statement of Organiza	tion (CPO 21224 =	it information.	

Detailed Summary			Amendment Yes No
Use this form to summarize all disclosure reporting forms and	to total mo	onetary information	
1. Committee Full Name (and Fund if applicable)	2. Type of		ID Number
Apple To Aldeman	the-	-Election T	CQC7L
Start of Election Cycle: January 1, 202	7	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1850.42	100
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 210.00	\$ 210 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,1			\$ 210.00
EXPENDITURES	Tu und 110)	Ψ a lo.	1 20.
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 815.94	\$ 815,94
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)		\$
(T Y	(CRO-1420)	\$	\$
	(CRO-1320)	\$	\$
IEN T. 171 1 C	(CRO-1510)	\$	\$
8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,		\$815.94	\$ 815.94
9) Cash on Hand at End (Add lines 4 and 12 together, then subt		\$ 744.48	\$ 744.48
ADDITIONAL INFORMATION		7. 10	777. 2
	(CRO-1330)	\$	
1) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	
2) Debts and Obligations owed by the Committee	CRO-1610)	\$	VIEW MEMORIA
3) Debts and Obligations owed to the Committee	CRO-1620)	\$ Amer	
4) Account Transfers Within the Committee	CRO-1720)	\$ Amende	d
5) Administrative Support	CRO-1710)	\$	\$
6) Forgiven Loans	CRO-1440)	\$	\$
	CRO-2220)	\$	\$
8) Contributions to be Refunded (C	CRO-1215)	\$	\$

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April 2007

Use this	s form to report in	om Individuals dividual contribution	s over \$	50 or contributions	Pg Qunder \$50 if form C	of 2	Amendme Ves	
1. Com	mittee Full Name	e (and Fund if applie	cable)	- Controlled	ander \$30 II form C	RO 1205 is i		SOUTH NO. 1
	FOR ALDERMA					A ID NO		10 10 10 10
3. Cont	ributor Informat	ion		Add [7]	D. 10		TCQC7L	
a. Full Na	ame, Mailing Address			b. Job Title/Profe	Remove	Andrew Company of the Company		Vo. sel
(includ	e city, state, & zip)			NO JOB TITL		d. Comme	nts	
470 BEI	I A. STACHERSE NT CREEK TRAI	XI T						
	RSVILLE, NC. 2			c. Employer's Nan	ne/Specific Field			
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<i>PO-1210</i>	- HFILLE			State Board of Election	ns			

April 2007

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/pol committees and coordinated party expenditures. 1. Committee Full Name (and Fund if applicable) APPLE FOR ALDERMAN 3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Fayet Information a. Full Name, Mailing Address & Phone (include city, state, & zip) THE PRESCOTT 126 SOUTH MAIN STREET, STE. G KERNERSVILLE, NC. 27284 E. Account Code R. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required R. CREDIT CD. (09/23/2021 \$815.94 MEET & G. FOR CAMP	TCQC7L Expenditures m to Date 94 cmarks REET
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3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) Operating Expenses Contributions to Candidates/Political Committees Coordinated Party E 4. Payee Information Add Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) THE PRESCOTT 126 SOUTH MAIN STREET, STE. G KERNERSVILLE, NC. 27284 E. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required R CREDIT CD. O9/23/2021 S815.94 MEET & GI	TCQC7L Expenditures In to Date 94 Cunarks REET
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and the tist of Detailed Summary Page CRO-1100 if Coordinated Party Expanditures)	•
- Media B* - Printing C*	The state of the s
- Salaries F* - Equipment G - Political Party	
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Codes require detailed explanation in required remarks field (k)	onses e Fund