Disclosure R	eport Cover			Ame	en dm en t	
					Yes No X	
Use this form for g	eneral report and committee inf	ormation, must be	signed and submitted along	with other d	latailed forms	Ĵ.
Do not use this for	n to update information		C	with other c	icialicu Iolilis.	
1. Committee Info					FOD	VTI COMPTY
a. Full Name					c. ID Number	
D.D. ADAMS FO	R WINSTON-SALEM					
					2022 MA	10 PH 6: 27
	clude City, State and Zip Code)				d. Date Filed	1.0 111 4.21
3663 MARLOWE	AVE.				05/10/2022	
WINSTON-SALE	M, NC 27106				16 L.	T. for
					e. Phone Number	
					336-345-2153	1
						1
2. Report Year	3. Period Start Date (mm/dd/	4. Period End	Date			
		(mm/ad/yy)		5. Treast	arer Full Name	
2022	07/01/2021	04/30/2	022	DENISE	DARCEL ADAMS	
6. Type of Commit		9. Type of Repor	t (check only one type of re	port from or	ne category)	
Candidate Campaig	/	Municipal	State/County		Referendum	
Independent	Referendum	Organizational	Organizationa	1	Organizational	
Expenditure	Joint Fundraiser	Thirty-five day	Quarterly		Pre-referendum	
Legal Expense Fund	1					
7. Type of Fund	(if applicable, check one)	Pre-primary	/	First	Final	
"Booster Fund"		Pre-election		Second	1	
Building Fund		Pre-runoff		Third	Supplemental Final	
		Semi-annual	1		Annual	
		' Mid Year		Fourth	Special	
Other:			Semi-annual			
ould.		Year End		Mid Year	10. Special Report Name	
0.37. 1. 077. 1		Final		Year End		
8. Number of Fund	raisers this Report	Special	Final			
			Special			
11. Account Inform			11. Account Information			
a. Financial Institution I TRUIST	full Name		a. Financial Institution Full Na	me		
b. Purpose	c. Account Code					
CAMPAIGN	TRUIST		b. Parpose		c. Account Code	
COMMITTEE	IROISI		4			
	d. Period Begin Balance		-			
	\$ 83.78		-		d. Period Begin Balance	
	0 05.70		-		\$	
CERTIFICATION						
	with a Table 1 to 1					
VC General Statutes	mittee or Fund is in compliance and that no funds are comming	with all applicable	provisions of Article 22A,	22B, & 22I	D-22M of Chapter 163 of the	
complete, true and co	rrect and that I have been traine	d by the NC State	or other non-disclosed fund Board of Elections	s. I further c	certify that this report is	
			Doard of Elections.			
	-			-		
Dealer	50 Adure	\subset	XIDA	$\neg Q$		
	Printed Name of Signer		and 1/2	During	10,2022	
OR OFFICE USE OF			Signature of Appointed Treasurer		Date	
Date Received:	4.1	Deenterree				
		Employee:			ry Method	
Date Postmarked		Enc.1.			Normal Mail	
& obaliar RCU.		Employee:			Registered Mail	
Date Scanned:		Frend			Hand Delivered	
Low Deamicu:		Employee:]	Electronically Filed	
Data Data D	1 .				Signer has not received	
Date Data Entered	d:	Employee:		1	mandatory training	
Please Note: Thi	s form cannot be used to amend	committee inform	ation such as the committee	address, tre	easurer, assistant treasurer	
	custodian o	f books information	n, or account information.		.,	
20.000	You must amend the Statemen	t of Organization (CRO-2100A-E) to make con	nmittee cha	nges.	
RO-1000		State Board of Election			August 2008	

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Detailed Summary

Deg Z of G Yes M

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1. Committee Full Nam	e (and Fund if applicable)	2. Type of Rep	ort	3. ID Number
D.D. ADAMS FOR WI	NSTON-SALEM	FIRST QTR P		
Start of Election Cycle:	January 1,	2022	Total this	Total this
			Reporting Period	Election Cy
4)	Cash on Hand at Start		\$ 83.78	\$ 9,428.20
RECEIPTS				
5)	Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6)	Contributions from Individuals	(CRO-1210)	\$	\$
7)	Contributions from Political Party Committees	(CRO-1220)	\$	\$ 9,148.90
8)	Contributions from Other Political Committees	(CRO-1230)	\$	\$
9)	Loan Proceeds	(CRO-1410)	\$	\$
10)	Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$ 406.66
11)	Other Receipt Sources			
11a)	Interest on Bank Accounts	(CRO-1250)	\$	\$ 47.49
11b)	Contributions from Not-for-Profit Organizations	(CRO-1250)	\$	\$
11c)	Outside Sources of Income	(CRO-1250)	\$	\$
11d)	Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$
11 e)	Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12)	TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c,		\$	\$ 9,603.05
XPENDITURES			1+	\$,005.05
13)	Disbursements		I LEAR AND	C.
13a)	Operating Expenditures	(CRO-1310)	\$ 83.78	\$ 16,479.4
13b)	Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$ 1,800.00
13c)	Coordinated Party Expenditures	(CRO-1310)	\$	\$
14)				
Constant and a constant of the	Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15)	Loan Repayments	(CRO-1420)	\$	\$
16)	Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$ 751.83
17)	In-Kind Contributions	(CRO-1510)	\$	\$
18)	TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,		\$ 83.78	\$ 19,031.2
19)	Cash on Hand at End (Add lines 4 and 12 together, then subtr	ract line 18)	\$ 0.00	\$ 0.00
ADDITIONAL INFO				
20)	Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	1322 A
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)	\$	\$

Disbursements

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Pg	2	of	4	Amendment	
	0		1	Yes No	-

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political

1. Committee Full Name (licable)				2.1	D Number
D.D. ADAMS FOR WINS	TON-SALEM						
. Type of Disbursement	(Please use se	parate C	RO-1310	forms for each type	of Disbursen	ent)	
Operating Expen	ISES	Contril	butions to C	andidates/Political Commi	ttees		ited Party Expend
. Payee Information			Add		Remove		, , ,
Full Name, Mailing Address &	r Phone		b. Coord	dinated Committee Name		d. Com	tents
nclude city, state, & zip)							
TRUIST						1	
815 REYNOLDA RD			c. Level]	Registered (Specify)		1	
WS, NC 27106				Federal	County:	1	
				State	Municipalit	y: e. Electio	n Sum to Date
						\$ 290.	
Account Code	g. Form of Payme	ent h. Purr	ouse Code	i. Date (mm/dd/yyyy)	i. Amount	k Doguta	red Remarks
RUIST	DEBIT	0		07/02/2021	\$12.00	MAINT	the second se
		+		01102021	\$12.00	- WIATINT	FEE
RUIST	DEBIT						
KOIDT	DEBIT	0		08/04/2021	\$12.00	MAINT	FEE
					1		
Payee Information	1.1.1.1.1.1.1.1.1		Add		Remove		
Full Name, Mailing Address &	Phone		b. Coordi	inated Committee Name		d. Comm	ents
clude city, state, & zip)							
RUIST							
			c. Level R	legistered (Specify)		1	
				Federal	County:	1	
				State	Municipality	e. Election	Sum to Date
						\$ 314.5	
			1			¢ 514.5	
account Code	g. Form of Payme	ath. Paro	ose Code	i. Date (mm/dd/yyyy)	j. Amount		122
RUIST	DEBIT	0		09/03/2021	\$12.00	1	d Remarks
	1	+		0310312021	\$12.00	MAINT	FEE
RUIST	DEBIT						
	DEDIT	0		10/01/2021	\$12.00	MAINT	FEE
	1						
Payee Information			Add		Remove		
ull Name, Mailing Address & I	hone		b. Coordin	ated Committee Name		d. Comme	ats
lude city, state, & zip)							
RUIST							
			c. Level Re	egistered (Specify)			
				egistered (Specify) Federal	County:		
					County: Municipality:	e. Election	Sum to Date
				Federal	Municipality:		
				Federal	Municipality:	e. Election \$338.50	
ccount Code	g. Form of Paymen	th. Purpo		Federal State	Municipality:	\$ 338.50	,
	g. Form of Paymen DEBIT	th. Purpo	se Code	Federal State 5. Date (mm/dd/yyyy)	Municipality: j. Amount	\$ 338.50 k. Required	i Remarks
scount Code RUIST		-	se Code	Federal State	Municipality: j. Amount	\$ 338.50	i Remarks
RUIST	DEBIT	0	se Code	Federal State 1. Date (mm/dd/yyyy) 11/04/2021	Municipality: J. Amount \$12.00	\$ 338.50 k. Required	i Remarks
RUIST		-	se Code	Federal State 1. Date (mm/dd/yyyy) 11/04/2021	Municipality: J. Amount \$12.00	\$ 338.50 k. Required) I Remarks TEE
UIST	DEBIT	0	se Code	Federal State 1. Date (mm/dd/yyyy) 11/04/2021	Municipality: J. Amount \$12.00	\$ <u>338.50</u> k. Required MAINT F) I Remarks TEE
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RUIST Cotal only this Page Cotal of ALL CRO-1310 P his line goes in line 13a of Detail his line goes in line 13b of Detail his line goes in line 13c of Detail his line goes in line 13c of Detail Curpose Codes (List detail Media Salaries	DEBIT DEBIT Pages lied Summary Page C lied Summary Page C lied Summary Page C ed expenditure co B* - Printing F* - Equipment	0 RO-1100 iy RO-1100 iy RO-1100 y C* - Fan G - Politi	f Operating . f Contrib to f Coordinate) above) adraising ical Party	Federal State i. Date (mm/dd/yyyy) 11/04/2021 12/03/2021 Expenses) Candidates/Political Commission 2d Party Expenditures)	Municipality: j. Amount \$12.00 \$12.00 \$12.00 D - To Anoth H* - Holding	\$ 338.50 k. Required MAINT F MAINT F \$ 72.00 \$ 83.78 er Candida ; Public O	te file file file file file file file fil
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Disbursements

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Pg	4	or	Amendment
		·	Yes K

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

I. Committee Full Name	(and Fund if appli	icable)			2. ID Number
D.D. ADAMS FOR WINS					a. II Italinei
. Type of Disbursement	(Please use set	warate CRO-	1310 forms for each t	vpe of Disbursen	sent)
Operating Exper	nses		s to Candidates/Political Co		Coordinated Party Expend
. Payee Information		A		Remove	ever united 1 arty Experie
Fall Name, Mailing Address d	Phone	b.	Coordinated Committee N	the second s	d. Comments
nclude city, state, & zip)					
TRUIST					1
2815 REYNOLDA RD		c.]	Level Registered (Specify)		-
WS, NC 27106			Federal	County:	-
			State	Municipalit	y: e. Election Sum to Date
					\$ 362.28
					3 302.28
Account Code	g. Form of Payme	ath Damage	ada la Data a const		
RUIST	DEBIT	O			k. Required Remarks
	10CDT1		01/06/2022	\$12.00	MAINT FEE
RUIST	DEBIT	0	02/03/2022	\$11.78	MAINT FEE
Payee Information		Ad	d	Remove	
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clude city, state, & zip)					d. Contaients
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CRO-1310

NC State Board of Elections