Disclosure Report Cover

☐ Yes No 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 la	a formati	OB			TRO A DO	YOU !	CORIOR			
a. Full Name					DUAS				I. ID W	
JOINES FOR I	MAVOD	,			0000 11	1 173	21111 00		e. ID Number	
			2. 04.4			14	All 1 29		000-000000-0-000	
b. Mailing Addre		ide Ci	ity, State and Zi	p Code)	F-10	-	ACT (1/40)		d. Date Filed	
PO BOX 2039 WINSTON-SA		IC 27	102						07/11/2022	
1									e. Phone Number	
									336 407 3147	
2. Report Year	3. Perio	dSta	rt Date (mm/dd/	уу)	4. Period	End Da	te (mm/dd/yy)	5. Treas	arer Full Name	
2022		0	1/01/2022			06/30/2	2022	WILLIA	M ROSE	
6. Type of Com		heck	One)	9. Typ	e of Repor	t (c.	heck only on	e type of re	port from one category)	
Candidate Can] Pa	rty	Manie	ipai		State/County	1	Referendum	
Joint Fundrais	er [PA	AC .		Organizatio	onal	Organizati	ional	Organizational	
Referendum	(_ Le	gal Expense Fund		Thirty-five	day	Quarterly		Pre-referendum	
7. Type of Fund	(if ap	plicab	le, check one)	10	Pre-primar	y	☐ First		Final	
Booster Fund	Г			10	Pre-electio	n	☐ Secon	d	Supplemental Final	
Building Fund				la .	Pre-runoff		Third	_	Annual	
Presidential El	lection Ye	аг Сап	didates Fund		Semi-annua	0	☐ Fourtl		Special	
NC Public Can				<u> 7</u> 2	Mid Ye	_)	Semi-annu	_	Special	
_			3		Year E		Mid Y		10.0	
Other:				居	Final	щ	Year I		10. Special Report Name	
8. Number of Fu	ndroico	no dhi	Damout	H	Special			zna	1 1	
O. I (dimeter of I.f.	mui aisci	3 tames	report	[special	1	Final		1 1	
	0						Special		1	
3. Account Infor	mation					3 Ann	ount Informa	(*		
a. Financial Insti		ell Na	me				ncial Instituti			
FNB						a. Fina	MCIAL IMSULUL	OR PUH Nai	me .	
b. Purpose		-	c. Account Cod	e		b. Perp	nse		c. Account Code	
TO PAY COM	MITTEE								C Account Code	
EXPENSES	*****	*	JFI	M001					1 1	
LOS DIVOLO			d. Period Begin	Relen						
			d. I chiod Degil	DEIER	e e				d. Period Begin Balance	
			\$	2:	2,089.41				s	
CERTIFICATIO										
I certify that th	ie Comm	ittee (or Fund is in co	mplianc	e with all a	pplicah	le provisions	of Article	22A, 22B & 22D-22M of	
Chapter 163 of	the NC	Gener	al Statutes and	that no	funds are	commin	gled with no	hibited or	other non-disclosed	
funds. I furthe	r certify	that t	his report is cor	nolete	true and co	Imert a	nd that I have	haan tenin	ed by the NC State Board	
NI ST				-p,	3 4	A TOOL (I)		Dech Harr	ed by the NC state board	
Will	16.m	01	2056		11/2/1	Willa	. (14	re	07/11/2022	
Pri	inted Nam	e of S	igner	: e#	Sion	ature of	Appointed Trea	emper	Date	
FOR OFFICE US	EONLY	Z					appointed 1 fee		Date	
Date Receive	d:	_		_	Employ	ree:			livery Method Normal Mail	
Date Postmarked:			_	Employ	/ee: _		_ 🚊	Registered Mail		
								닏	Hand Delivered	
Date Scanned	i :	-			Employ	/ee: _		- "	Electronically Filed	
Date Data Ent	tered:	-		-	Employ	ree: _		_ 0	Signer has not received mandatory training	
Please Note	: This fo	orm ca	annot be used to	amene	d committe	e inform	nation such a	s the comm	ittee address, treasurer,	
	ass	sistan	t treasurer, cust	todian d	of books in	formati	on, or accoun	t informati	on.	

Amendment Yes No

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

	2. Type of Re			3. ID N		
JOINES FOR MAYOR	2022 Mid Yo	ear Semi	-Annual	000-000000-0-000		
Start of Election Cycle: January 1, 2021		Total this Reporting Perio		Total thi		
4) Cash on Hand at Start		\$ 22,089.			24,327.	
RECEIPTS						
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	0.0	0 \$	0.	
6) Contributions from Individuals	(CRO-1210)	\$	0.0	0 \$	0.	
7) Contributions from Political Party Committees	(CRO-1220)	\$	0.0	0 \$	0.	
8) Contributions from Other Political Committees	(CRO-1230)	\$	0.0	0 \$	0.	
9) Loan Proceeds	(CRO-1410)	\$	0.0	0 \$	0.	
0) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	0.0	0 \$	0.	
1) Other Receipt Sources						
11a) Interest on Bank Accounts	(CRO-1250)	s	0.0	0 \$	0.	
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	s	0.0	_	0.	
11c) Outside Sources of Income	(CRO-1250)	s	0.0	+	0.	
11d) Legal Expense Fund - Other Sources	(CRO-1270)	s	0.0	_	0.	
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	0.0	-		
2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,		\$	0.00		0.	
EXPENDITURES		•	0.00	, , ,	U.	
3) Disbursements				T		
13a) Operating Expenditures	(CRO-1310)	\$	457.00	\$	2,645.	
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	100.00	+	100.0	
13c) Coordinated Party Expenditures	(CRO-1310)	\$	0.00	-		
4) Aggregated Non-Media Expenditures	(CRO-1315)	S	17.75	+-	0.0	
5) Loan Repayments	(CRO-1420)	\$	0.00	-	67.	
6) Refunds/Reimbursements from the Committee	. /	\$		+	0.0	
7) In-Kind Contributions	1	\$	0.00	+-	0.0	
8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,		\$	0.00	+	0.0	
O) Cash on Hand at End (Add lines 4 and 12 together, then sub		\$	574.75 21,514.66	+	2,813.0	
ADDITIONAL INFORMATION			21,314.00	-	21,514.6	
Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00			
Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	0.00			
2) Debts and Obligations owed by the Committee	(CRO-1610)	\$	0.00			
B) Debts and Obligations owed to the Committee	(CRO-1620)	\$	0.00			
1) Account Transfers Within the Committee	(CRO-1720)	\$	0.00			
5) Administrative Support	-	\$	0.00	-	0.0	
b) Forgiven Loans	-	\$	0.00	+	0.0	
7) 48-Hour Notice Reports Sum	` ' -	<u> </u>	0.00	-	0.0	
B) Contributions to be Refunded		\$	0.00	\$	0.0	

committees and	report expenditures coordinated party e	xpenditures	ee for (operating expe		<u>l</u> of		1_ 1 Ye		
	ull Name (and Fund	if applicable)						2. ID Nun		
JOINES FOR	MAYOR							000-00	0000-0-000	
3. Type of Disb		use separate CR								
Operating Ex		ributions to Candida				☐ Co	ordinat	ted Party Exp	penditures	
4. Payee Inform				Add 🔲	Rem	0.10				
a. Full Name, M (include city, sta	ailing Address & Ph	one		b. Coordinate	d Con	nmittee N	amc	d. Comme	nts	
RIVER RUN FILM FESTIVAL 305 W 4TH STREET WINSTON SALEM, NC 27101						(Specify) County Municip		e. Election Sum to Date \$ 275.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Am	arks				
JFM001	Check	0	0.	3/08/2022	\$	275.00	CON	IMUNITY	SUPPORT	
					\$					
4. Payee Inform				Add 🔲	Rem	ove	THE STATE OF THE S			
a. Full Name, Ma	ailing Address & Pho	one		b. Coordinate	d Com	mittee Na	tme	d Comme	ı ts	
(include city, sta	te, & zip)									
US POSTMAS								1		
200 TOWN RU				c. Level Regist	_	-1/				
WINSTON-SA	LEM, NC 27101		i	Federal State	L	County:	- 63			
				T 2rate		_ Municip	алпу:	e. Election	Sum to Date	
* 4				1				\$	357.00	
	g. Form of Payment		i. Date	(mm/dd/yyyy)	j. Am	ount	k. Re	quired Rem	arks	
JFM001	Check	K	04	1/19/2022	\$	182.00	POS	TAGE BOX	X RENTAL	
					\$					

7. Purpose Codes (List detailed expenditure code in (h.) above) B* - Printing A* - Media C* - Fundraising E - Salaries F[±] - Equipment

(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)

5. Total only this Page

I - Postage

O* Other

6. Total of ALL CRO-1310 Pages

G-Political Party

K* - Office Expenses

D - To Another Candidate H* - Holding Public Office Expenses

\$

Q* - Donation to Legal Expense Fund

* Codes require detailed explanation in required remarks field (k) CRO-1310

J - Penalties

NC State Board of Elections

December 2009

457.00

457.00

Disbursen	nents				_	1 .		Amend		
Use this form to	o report expenditures I coordinated party e	from the committ	tee for a	operating expe		1_ of contributi				
	full Name (and Fund				_			In HD N		
	JOINES FOR MAYOR								2. ID Number	
3. Type of Disb Operating Ex		use separate CR(ributions to Candida						ent.) ted Party Exp	an Etama	
4. Payee Inform		industria to Canada		Add	Rem		orcenai	en Party Exp	enoutures	
	ailing Address & Ph	one		b. Coordinate			ame	d. Commen	its .	
TED KAPLAN 201 NORTH C	FOR COUNTY CO HESTNUT STREET LEM, NC 27101			c. Level Regis		County:				
1				State Municipality:				c. Election Sum to Date		
				Forsyth				s	100.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(m m/dd/yyyy)	y) j. Amount k. R			quired Rem:	arks	
JFM001	Check	D	0:	5/15/2022	\$	100.00				
					\$					
5. Total only thi	s Page							\$	100.00	
(This line goes i (This line goes i	CRO-1310 Pages in line 13a of Detailed S in line 13b of Detailed S in line 13c of Detailed S	Summary Page CRO	-1100 if	Contrib to Cand	idates		omm)	\$	100.00	
	odes (List detailed									
A* - Media E - Salaries	B* - Printing F* - Equipme	0		undraising litical Party		D - To Another Candidate H* - Holding Public Office Expenses				

K* - Office Expenses

Q* - Donation to Legal Expense Fund

December 2009

I - Postage

O* Other

J - Penalties

* Codes require detailed explanation in required remarks field (k)

CRO-1310

NC State Board of Elections

Aggregated	Non-Media	Expenditures
-55 *5*****	TIOTE TITEMENT	TOTAL STRUCTURE OF

	Amendme		
Page 1 of 1	☐ Yes	X	No

Optional form used to report NC Non-Media Expenditures of \$50 or less.

1. Committe	ee Full Name (an	d Fund if applicable)				2. D	Number	
JOINES FO	OR MAYOR						000	-000000-0-000
3. Payee Inf	ormation						- 2000	
. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (m m/dd/y	ууу)	f. Am	unt	g. Required Remarks
Add Remove	JFM001	Draft	K	05/18/2022 \$		s	17.75	CHECKS
4. Total o	nly this Page					s		17.75
	f ALL CRO-1 nust be on line 14 o	315 Pages [Detailed Summary Page 19 Page 2 Page 2	ge CRO-1100)			\$		17.75
6. Purpos	e Codes (List	detailed expenditu	re code in (d) a	bove)				
	B*	- Printing	C* - Fundr	aising	D - T	lo An	other Car	ndidate
E - Salar	ies F*	- Equipment	G - Political	Party	H* -	Hold	ing Publ	ic Office Expenses
I - Posta	ge J.	Penalties	K* - Office	Expenses	Q* -	Dons	tions to	Legal Expense Fund
O* - Otl	her			•	_			
* Codes	require detai	led explanation i	n required ren	narks field (g)				

CRO-1315

NC State Board of Elections

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