M				Amendment
Disclosure Report Cover	· · · · · · · · · · · · · · · · · · ·	he signed and su	hmitted alon	Yes No
Use this form for general report and committed to not use this form to update information.	ice miormanon, i	nust be signed and so	DHHUCU arong	g with other detailed
1. Committee Information			en de la companya de Companya de la companya de la compa	
a. Full Name				c. ID Number
Committee to Elect	Janet	Rose		ICFHSK
b. Mailing Address (include City, State and Zip Cod	le)			d. Date Filed
212 Poliners Rd				10 129 24
MoyockNC 27958			ŀ	e. Phone Number
				252-202-292
2. Report Year 3. Period Start Date (mm/d			5. Treasure	
2024 07/01/24	10/19	124		Williams Rose
6. Type of Committee (Check One)		oort (check only one		rt from one category) Referendum
Candidate Campaign Party	Municipal Organizationa	State/County al Organizati	1	Construction of the control of the c
PAC Referendum Independent Expenditure Joint Fundraiser	Organizationa Thirty-five da	, -	(mai	Pre-referendum
Legal Expense Fund	Pre-primary	First	1	☐ Final
	Pre-election	Secon		Supplemental Final
7. Type of Fund (if applicable, check one)	Pre-runoff	Third	i i	Annual
Booster Fund	Semi-annual	☐ Fourt		Special
Building Fund	☐ Mid Yea	- I 	L.	Nome
	Year Bno) <u></u>	F	10. Special Report Name
Other:	Final Special	Year Final	End	
8. Number of Fundraisers this Report	Special	Final]	
T = 1	1	Special Special		
	4			
11. Account Information		11. Account Inform		
11. Account Information a. Financial Institution Full Name	117 2			
	Lit Vaica	11. Account Inform	Full Name	:, Account Code
a, Financial Institution Full Name State Eruployees (c. Account Co.)	Lit Unican	11. Account Inform a. Financial Institution I	Full Name	:, Account Code
a. Financial Institution Full Name State Employees God b. Purpose c. Account Co	5	11. Account Inform a. Financial Institution I	Full Name	:. Account Code
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OCT 2 9 2024

NC State Board of Elections

August 2008

Detailed Summary
Use this form to summarize a

Amendment

Yes

No

1. Committee Full Name (and Fund if applicable)	2. Type of	Report	3. ID Number
Committee to Elect Janet Rose	Thir	d Quarter	ICFHSK
Start of Election Cycle: January 1, 202		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	7	\$ 5797.18	\$
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0	\$
6) Contributions from Individuals	(CRO-1210)	s O	\$
7) Contributions from Political Party Committees	(CRO-1220)		\$
8) Contributions from Other Political Committees	(CRO-1230)		\$
and the second of the second o	(CRO-1410)		\$
9) Loan Proceeds	(CRO-1240)		\$
10) Refunds/Reimbursements to the Committee	(CRO-1240)	3	3
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)		\$
11b) Contributions from Not-For-Profit Organizations	A .		\$
11c) Outside Sources of Income Salary, refirem	(CRO-1250)	\$ 12,184,17	\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0_	\$
11e) Exempt Purchase Price Sales	(CRO-1265)	s <u>O</u>	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c.	11d and 11e)	\$ 12,185,03	S S
<u>EXPENDITURES</u>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 938,86	\$
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$ O	\$
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0	\$
17) In-Kind Contributions	(CRO-1510)	s ()	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)	\$ 938,86	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$ 1568,73	\$
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ <u>O</u>	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$ 0	
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$ O	
24) Account Transfers Within the Committee	(CRO-1720)	\$	
25) Administrative Support	(CRO-1710)	\$ 0	\$
26) Forgiven Loans	(CRO-1440)	\$ O	\$
and the self-region of the self-	(CRO-2220)	\$ 0	\$
	(CRO-1215)	\$ <i>O</i>	\$

Amendment **Disbursements** Yes Yes 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 Fund If applicable) 3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures 4. Payee Information 🔀 Add 🔲 Remove b. Coordinated Committee Name a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) MMT Printers 605 E Fearing St. Elizabeth City NC 27909 c. Level Registered (Specify) County: Federal Municipality: e. Election Sum to Date State 457.78 h. Purpose Code k. Required Remarks g. Form of Payment i. Date (mm/dd/yyyy) j. Amount f. Account Code 1203 B 09/11/24 M Add Remove

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a. Full Name, Mailing Address & Phone		b.	Coordinat	ed Committee Nam	e d. Comments	
(include city, st						<u> </u>
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f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/	/dd/yyyy)	j. Amount	k. Required Remarks
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	PdCK 3561				\$	
4. Payee Inform	mation		. Dr Ad	id 🗖	Remove	
a. Full Name, Mail	ling Address & Phone		b. (Coordinate	ed Committee Name	d. Comments
(include city, sta	te, & zlp)					<u> </u>
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Total of ALL	CRO-1310 Pages	L EXPURE STRUCK				
	line 13a of Detailed Sum	mary Page CRO-110	0 if Operating	g Expenses	;)	\$ 938.84
(This line goes in	line 13b of Detailed Sum	mary Page CRO-110	0 if Contrib to	o Candidat	tes/Political Comm)	1 978.84
(This line goes in	line 13c of Detailed Sum	mary Page CRO-110	0 if Coordina	ted Party E	Expenditures)	
. Purposé Co	des (List detailed)					
* - Media	B* - Printin	•	C* - Fundr	_		nother Candidate
C - Salaries	F* - Equipn		G - Politica	•		ding Public Office Expenses
 Postage 	J - Penaltie	s i	K* - Office	Expense	es Q* • Doi	nation to Legal Expense Fund
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)* Other	detailed explanation		marks field		and the second second	December 2009

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Disburs	ements				Pg 🚣	∠ or	2
			mittee f	or operating	expenses,	ontributi	ons to candidate/political
	and coordinated part						
1. Committe	ee Full Name (and)	fund if applicabl	<u>ē)</u>				2. ID Number
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Operating		Contributions to Can	didates/Po				dinated Party Expenditures
4. Payee Inf				Add	Remov	MARKATON NA STATE	
f	, Mailing Address &	: Phone		b. Coord	nated Commi	ttee Name	d. Comments
(include city, st		· · · · · · · · · · · · · · · · · · ·					
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4. Payee Info	rmation		y wil	Add	Remove		
a, Full Name, M	ailing Address & Phone			b. Coordin	ated Commit	lee Name	d. Comments
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A* - Media

E - Salaries

I - Postage

C* - Fundraising

G - Political Party

K* - Office Expenses

(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)

B* - Printing

J - Penalties

F* - Equipment

D - To Another Candidate

H* - Holding Public Office Expenses

Q* - Donation to Legal Expense Fund