Amendment Disclosure Report Cover 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 undate information.

So not use tins		c madimadon.							
1. Committee In	ıformation				As in				
a. Full Name								c. ID Number	
COMMITTEE T	O ELECT ANT	ONIO B. JONES	S						
b. Mailing Addre	ess (include Ci	ty, State and Zi	p Code)					d. Date Filed	
PO BOX 8092								04/13/2022	
FAYETTEVILL	E, NC 28311								
								e. Phone Number	
								(910) 224-9896	
2. Report Year	3. Period Star	rt Date (mm/dd/	'yy)	4. Period	End Dat	te (mm/dd/yy)	5. Treasu	rer Full Name	
2022	C	01/01/2022			04/05/20	ANTONIC	ONIO JONES		
6. Type of Comm	nittee (Check (One)	9. Tvp	e of Repor	t (cl	neck only one	type of rei	port from one category)	
X Candidate Can			Munic			State/County		Referendum	
☐ Joint Fundrais	er 🔲 PA	.c		Organizatio	**************	Organizatio	nal	Organizational	
Referendum	☐ Le	gal Expense Fund		Thirty-five		Quarterly		☐ Pre-referendum	
7. Type of Fund		le, check one)		Pre-primar	-	☐ First		T Final	
☐ "Booster Fund			18	Pre-electio	1	☐ Second	(Supplemental Final	
Building Fund				Pre-runoff		☐ Third	<u></u>	Annual	
Presidential El	lection Year Can	didates Fund		Semi-annua	,	Fourth		Special	
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Other:			冒	Final E	110	Year E	To get	10. Special Report Name	
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o.manoer orra	***************************************	s repui i	111	opeciai		F			
	0					□ Special			
3. Account Infor			1000		3. Acco	ount Informati	ion		
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b. Purpose		e. Account Cou	le	THE STATE OF	b. Purp	ose		c. Account Code	
CAMPAIGN			01		• • • • • • • • • • • • • • • • • • • •		***************************************	,	
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FUNDS		d. Period Begi	n Balan	ce				d. Period Begin Balance	
		S		100.00				S	
CTDTITIC LTIO	NT.			100.00	*				
CERTIFICATIO									
I certify that th	ne Committee o	or Fund is in co	mpliane	e with all a	pplicab	le provisions	of Article 2	22A, 22B & 22D-22M of	
Chapter 163 of	the NC Gener	al Statutes and	that no	funds are	commin	igled with prof	hibited or o	other non-disclosed	
funds. I further	er certify that	his report is co	mplete,	true and c	øfrect at	nd that I have	been train	ed by the NC State Board	
	14mh.	1		11	//)_		324	
11	11412	my		10		10		04/13/2022	
	inted Name of S	igner /		Sign	atuse of A	Appointed/Trea	surer	Date	
FOR OFFICE US	SE ONLY				1	1 1 1			
Date Receive	ed: AP	R 1 4 2022	_	Emplo	yee 1	Joshul	Qu De	<u>livery Method</u> Normal Mail	
Date Postma	rked:	via sality		Employ	yee _			Registered Mail	
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Date Scanne	d:			Employ	yee _		. 🗆	Electronically Filed	
Date Data En	itered:			Employ	yee _		. 🗆	Signer has not received mandatory training	
Please Note	e: This form c	annot be used	to amen	d committe	e infom	nation such as	the comm	ittee address, treasurer,	
		it treasurer, cu							
v									
1	ou must amen	d the Statemen	t of Org	aruzation (UKU-ZII	OUA-E) to mak	e committe	e cnanges.	

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

Amendment

Yes X No

2. Type of Re	port 3	. D I	Number	
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(CRO-1210)	\$ 725.0	0 5	725.00	
(CRO-1220)	\$ 0.0	0 S	0.00	
(CRO-1230)	\$ 0.0	0 \$	0.00	
(CRO-1410)	\$ 5,250.0	0 5	5,250.00	
(CRO-1240)	\$ 0.0	0 5	0.00	
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(CRO-3330)	\$ 0.0	0 5	0.00	
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Amendment Contributions from Individuals 1 of Yes X No Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 1. Committee Full Name (and Fund if applicable) 2. ID Number COMMITTEE TO ELECT ANTONIO B. JONES 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title Profession d. Comments (include city, state, & zip) BROKER JOHN BANTSOLAS c. Employer's Name/Specific Field 6304 WHITEHALL DRIVE FAYETTEVILLE, NC 28303 JNB COMM. PROPERTIES e. Election Sum to Date 50.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check 02/24/2022 S 50.00 Ś S 3. Contributor Information ☐ Add ☐ Remove b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) COUNSELOR AMICHIA JONES c. Employer's Name/Specific Field PO BOX 8092 FAYETTEVILLE, NC 28311 COUNTY OF CUMBERLAND e. Election Sum to Date 525.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount In-Kind CAMPAIGN ANN, VIDEO 01 02/25/2022 S 275.00 & EDITING In-Kind 01 CAMPAIGN GRAPHIC П S 03/05/2022 250.00 DESIGN S 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) REAL ESTATE BROKER ANTONIO JONES c. Employer's Name/Specific Field PO BOX 8092 FAYETTEVILLE, NC 28311 SELF-EMPLOYED e. Election Sum to Date (910) 224-9896 5,500,00 j. Date (mm/dd/yyyy) f. Prior g. Account Code h. Form of Payment i. In-Kind Description k. Amount In-Kind 01 CANDIDATE CAMPAIGN 03/24/2022 S 150.00 **PICTURES** S 4. Total only this Page 725.00 S 5. Total of ALL CRO-1210 Pages S 725.00

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Loan I	Proceeds		Pg1 _ a	of 2	Amendm U Yes	ent X No
	orm to report proceeds from a loan and	llogo andorrade i		or <u> </u>	_ LI Yes	ы 140
	oceeds statement must accompany eac			.1		
	ttee Full Name (and Fund if applicable				2. ID Numbe	ľ
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COMMIT	TEE TO ELECT ANTONIO B. JONES					
3. Lender	Information	□ Add □	Remove			9-70-70-70-70-70-70-70-70-70-70-70-70-70-
a. Full Nar	ue, Mailing Address & Phone	b. Job Titl	/Profession	manaaniin moodaa deelaa da	d. Comments	**************************************
(include	city, state, & zip)	REAL EST	TATE BROKE	R		
ANTONIC	OJONES	16312 23	iii banone			
РО ВОХ 8	092				e. Start Date	(mni/dd/yyyy)
FAYETTE	VILLE, NC 28311	c. Employe	r's Name/Spe	cific Field	02/17/2022	
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				f. End Date (mm/dd/yyyy)		
g. Rate	h. Security Pledged	i. Account Code	j. Form of Pa		k. Amour	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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		***************************************	***************************************			
4. Endorse	ers/Makers (The people who guwantes t	le loan.)				
a. Full Nan	ue, Mailing Address & Phone	b. Job Title	/Profession	c. Employ	er's Name/Spa	ecific Field
(include	city, state, & zip)		***************************************	***************************************		
		d. Percent	1ge	e. Amoun	i t	
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CRO-1416	y N	C State Board of Elec	tions			April 2007

Loon	lua acodo		2		Amenda		
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	orm to report proceeds from a loan and oceeds statement must accompany eac			1			
	ttee Full Name (and Fund if applicable		ii arrandaydd	181	2. ID Numbe	1'	
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~	city, state, & zip)	REAL ES	ΓATE BROK				
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stranger talest strategical de la constanta de			Page 11 and to be approximately an about	a continuo mantatana ma			
dyanaczna a morackie cznac	rs/Makers (The people who guarantee th	he loan.)					
	ae, Mailing Address & Phone	b. Job Titl	e/Profession	c. Empl	loyer's Name/Spe	cific Field	
(include	city, state, & zip)						
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CRO-1416) NO	C State Board of Elec	etions			April 2007	

	report expenditures		ee for operating expe	Pg <u>l</u> of			X No
1. Committee F	coordinated party e ull Name (and Fund O ELECT ANTONIO	if applicable)				2, ID Number	
3. Type of Disbu S Operating Expenses	9066533G623T144533454T142727537577665T1147445374172374T2		D-1310 forms for each			<i>IL) d</i> Party Expendi	hires
4. Payee Inform			□ Add □	Remove		yp	
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			☐ State	☐ Municig	zality: 6	e, Election Sun	u to Date
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	n line 13b of Detailed S				omm)	S	4,317.23
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7. Purpose Co	odes (List detailed	expenditure code	in (h.) above)				
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3274 ROSEHILL	, ROAD			c. Level Regis			5 [5		
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` _	•	Page CRO-1100 if Contrib to Candida: Page CRO-1100 if Coordinated Party I	´	, · · · -
7. Purpose	Codes (List detailed expendi	ture code in (h.) above)		
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candid	ate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Of	fice Expenses
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal	Expense Fund
O* Other		-	_	
* Codes requ	ire detailed explanation in req	uired remarks field (k)	AUSOVIČENJO PRED 1847. ESE 1840. REMINOVAROVSKI S	a se se se se se se su poix
CDO 1010		NC State Board of Florings		D-cambas 2000

5. Total only this Page

420.08

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) COMMITTEE TO ELECT ANTONIO B. JONES 3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) \[\begin{array}{c ccccccccccccccccccccccccccccccccccc	HAVE
Committees and coordinated party expenditures	***************************************
Committee Full Name (and Fund if applicable) COMMITTEE TO ELECT ANTONIO B. JONES	***************************************
COMMITTEE TO ELECT ANTONIO B. JONES 3. Type of Disbursement Please use separate CRO-1310 forms for each type of Disbursement.) Disbursement Please use separate CRO-1310 forms for each type of Disbursement.)	***************************************
3. Type of Disbursement Please use separate CRO-1310 forms for each type of Disbursement.) Operating Expenses	***************************************
Coordinated Party Expenditures Coordinated Party Expenditures Coordinated Party Expenditures	***************************************
4. Payee Information a. Full Name, Mailing Address & Phone (include city, state, & zip) LOGANS ROADHOUSE 1490 SKIBO ROAD FAYETTEVILLE, NC 28303 c. Level Registered (Specify) Federal County: State Municipality: e. Election Sum to D S f. Account Code g. Form of Payment h. Purpose Code i. Date (mmidd/yyyy) j. Amount k. Required Remarks	***************************************
a. Full Name, Mailing Address & Phone (include city, state, & zip) LOGANS ROADHOUSE 1490 SKIBO ROAD FAYETTEVILLE, NC 28303 G. Level Registered (Specify) State Municipality: G. Level Registered (Specify) G. State Federal G. County: G. State G. Municipality: G. Flection Sum to D S f. Account Code G. Form of Payment G. Level Registered (Specify) G. State G.	***************************************
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S DIRECT	
4. Payee Information	400,000
a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments	9 E 1933
(include city, state, & zip)	
MCKOY PRINTING	
1087 ESSEX PLACE c. Level Registered (Specify) FAVETTEVILLE NC 28301 Federal	
FAYETTEVILLE, NC 28301	ato

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(include city, state, & zip)	
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SHORT STOP #45 3408 MURCHISON ROAD c. Level Registered (Specify)	
SHORT STOP #45 3408 MURCHISON ROAD c. Level Registered (Specify) FAYETTEVILLE, NC 28311 Federal County:	ıte
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	n line 13a of Detailed S	ummary Paga CBA	_1100 (/	Oparatina Expa	ncae)			_	
-	n line 13b of Detailed S		_			Political Co	onsm)	S	4,317.23

CRO-1310

A* - Media

E - Salaries

I - Postage

O* Other

* Codes require detailed explanation in required remarks field (k) NC State Board of Elections

C* - Fundraising

K* - Office Expenses

G - Political Party

(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

F* - Equipment

J - Penalties

December 2009

D - To Another Candidate

H* - Holding Public Office Expenses

Q* - Donation to Legal Expense Fund

In-Kind Contributions	n_	<u>.</u>	1	- C	1	Amenda Yes	uent 🛛 No	
Use this form to report non-monetary contributions, donation	4	,						
Use CRO-1215 if In-Kind Contributions were or will be				1000 10		minico oi		
1. Committee Full Name (and Fund if applicable)					2. ID ?	Sumber		
COMMITTEE TO ELECT ANTONIO B. JONES								
3. Contributor Information	Add 🔲 Re	mov	e 💮	. 7. 1	(6) (5) (6)			
a. Full Name, Mailing Address & Phone	b. Type of Cor	ntrib	utor	17413	c. Con	ments		
(include city, state, & zip)	X Individual							
AMICHIA JONES	Candidate							
PO BOX 8092	☐ Party							
FAYETTEVILLE, NC 28311	☐ PAC					d. Election Sum to Date		
	Referendun				d. Elec	tion Sum	to Date	
	Other Rece	eipt Se			S		525.00	
e. Description		f. D	ate (mm/dd	ľуууу)	g. Fair M	farket Amount	
CAMPAIGN ANN. VIDEO & EDITING			02.	/25/202	22	s	275.00	
CAMPAIGN GRAPHIC DESIGN			03/05/202		22 S		250.00	
						s		
3. Contributor Information	Add 🔲 Re	No.stoopis Johan	AntiX,ragsivi	007788 (SS)				
a. Full Name, Mailing Address & Phone	b. Type of Cor	atribı	utor	1770	c. Com	ments		
(include city, state, & zip)	X Individual							
ANTONIO JONES	Canádate							
PO BOX 8092	D Party							
FAYETTEVILLE, NC 28311	PAC							
(910) 224-9896	Referendun				d. Llec	tion Sum	to Date	
	Other Rece	ирт ж	овгс≥		S		5,500.00	
e. Description		f, D	ate (mm/dd	Vyyyy)	g. Fair X	larket Amount	
CANDIDATE CAMPAIGN PICTURES			03	24/202	22	s	150.00	
						s		
						s		
4. Total only this Page					S		675.00	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CR	0-1100)				S		675.00	

CRO-1510

NC State Board of Elections

December 2007

Outstanding Loans

				Amendm	ent	
Pg	1	of	1	☐ Yes	X No	

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

	ttee Full Name (and Fund if applicable) FEE TO ELECT ANTONIO B. JONES	2. ID Number	2, IO Number			
2 Tender	Information [J Ad	dd 🔲 Remove			
	ntormation ne, Mailing Address & Phone	and allowed the control of the contr	Job Title/Profession		d. Comments	
4.4 (4.5)	city, state, & zip)		EAL ESTATE BROKE	£R		
ANTONIO	JONES					
PO BOX 80		<u> </u>	C1	e e e	e. Start Date (mm	***************************************
FAYETTE' (910) 224-9	VILLE, NC 28311		Employer's Name/Spe	C111C L 1610	. 12/29/20)21
(710) 224-2	7690) DL	ELF-EMPLOYED		f. End Date (mm/d	d/yyyy)
g. Rate	h. Security Pledged		i. Original Loan Am	iount	j. Remaining Loa	n Balance
%			s	100.00		100.00
	ne of Lending Institution	13.4.4			l. Loan Number	
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SANGARAMONIA AND	ue, Mailing Address & Phone		Job Title/Profession		d. Comments	
and the state of t	city, state, & zip)		EAL ESTATE BROKE	R		***************************************
ANTONIO	JONES	"]				
PO BOX 80			Employer's Name/Spec	-:6-Field	e. Start Date (mm	
FAYETTEVILLE, NC 28311 (910) 224-9896			ELF-EMPLOYED	filic Flexu	. 02/17/20	122
(910) 224-9896		SE	LF-EMPLOTED	I	f. End Date (mm/d	d/yyyy)
g. Rate	h. Security Pledged	1, 1	i. Original Loan Am	iount	j. Remaining Loai	n Balance
%	N/A	***************************************	s	250.00	S	250.00
k. Full Nan	 ue of Lending Institution	14.5/5/		* * * * * * * * * * * * * * * * * * * *	l. Loan Number	
***************************************		*************		(+1+1+1+1+1+1+1+1+1+1+1+1+1+1+1+1+1+1+1		
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	city, state, & zip)	RF	EAL ESTATE BROKE	R		
ANTONIO					e. Start Date (mm	/dd/cvcc)
PO BOX 80	092 VILLE, NC 28311	e. F	Employer's Name/Spec	cific Field	02/24/20	***************************************
(910) 224-9			LF-EMPLOYED			
				!	f. End Date (mm/d	(Հ ՀՀՀՀ)
g. Rate	h. Security Pledged		i. Original Loan Am	ount	j. Remaining Loai	ı Balance
%	N/A	-	S	5,000.00	S	5,000.00
k, Full Nan	l ue of Lending Institution				l. Loan Number	la de la social
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Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

The otation in to be fined with the Election Board where the committee 3 reports are filed.
Name of committee to receive loan: C.T.E. Antonio Jones
• Person or committee to make loan: <u>Antonia B James</u>
• Date of loan to committee: 2-17-22
Name of lending institution (source):
N/A
• Amount of loan: 250.00
• Description (if in-kind loan): <u>CASH</u>
Names of all parties responsible for payment of loan (guarantors):
N/A
·
Period of loan: N/A
• Rate of interest of loan:
Security pledged for loan:
I, Antonio B Jones , acknowledge that all of the information (Person lending money to committee)
provided is complete, true, and accurate. I further understand I may not forgive a loar that has an outstanding balance to any source.
June B J- 2/17/22
Signature of Lender Date Signed
2/17/2-2
Signature of Treasurer of Committee Date Signed
CRO-6100 Logn Proceeds Statement



Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

inis Statement is to be filed with the Election Board where the committee's reports are filed.
Name of committee to receive loan: C.T.E. Antonio Jones
• Person or committee to make loan: <u>Antoniຈ B Jones</u>
• Date of loan to committee: <u>マースリー </u>
Name of lending institution (source):
N/A
• Amount of loan: 5,000 . [®]
• Description (if in-kind loan): <u>CASh</u>
 Names of all parties responsible for payment of loan (guarantors):
N/A
• Period of Ioan: Ν/Α
• Rate of interest of loan:
• Security pledged for loan: <u> </u>
I, Antonio B Jones , acknowledge that all of the information (Person lending money to committee)
(Person lending money to committee) provided is complete, true, and accurate. I further understand I may not forgive a loar
that has an outstanding balance to any source.
(11 don Bl) 2/24/22
Signature of Lender $2/24/22$ Date Signed $2/24/22$
Signature of Treasurer of Committee Date Signed
CRO-6100 Loan Proceeds Statement