Disclosure Re	eport Cover				Amendment No
	neral report and committee in to update information	nformation, must b	e signed and sub	mitted along with	other detailed forms.
1. Committee Info	AND DESCRIPTION OF THE PARTY AND DESCRIPTION				
a. Full Name	c. ID Number				
Comitte	e to Elect	Antonie	B. 50	nes	
b. Mailing Address (inc	d. Date Filed				
P. O. B Faye	e. Phone Number				
					(910) 224-9896
2. Report Year	3. Period Start Date (mm/c	Id/yy) 4. Period (mm/dd/yy	End Date	5. Treasurer Fu	ıll Name
2021	12/21/21	12/3	1.121	Anta	ip 8. Jones
6. Type of Commit		9. Type of Repor	The second secon		ort from one category)
Candidate Camp	paign Party Referendum	Municipal Organization	al State/C	County Organizational	Referendum Organizational
Independent Expenditure	Joint Fundraiser	Thirty-five d	1/	Quarterly	Pre-referendum
Legal Expense F 7. Type of Fund "Booster Fund" Building Fund Other:	Fund (if applicable, check one)	Pre-primary Pre-election Pre-runoff Semi-annual Mid Ye Year E		First Second Third Fourth Semi-annual Mid Year Year End	Final Supplemental Final Annual Special 10. Special Report Name
8. Number of Fund	Iraisers this Report	Special		Final Special	100
11. Account Inform	nation	有自由表示法律系	11. Account	Information	
a. Financial Institution			a. Financial Ins	titution Full Name	
BBST/A	c, Account Code	Jok Talas fra	b. Purpose	A. R. C. E. B. B. C.	c. Account Code
1 7					
Experient Carpaign	d. Period Begin Balanc	e	-		d. Period Begin Balance
Empli 11	s . D DO				\$
CERTIFICATION	replacement the				
the NC General Sta	mmittee or Fund is in completutes and that no funds are confect and that I have been formed by the Printed Name of Signer	ommingled with pro	hibited or other	non-disclosed fund Elections	BB, & 22D-22M of Chapter 163 of ds. I further certify that this report 29 Pecualist 2021 Date
FOR OFFICE USE	ONLY		VII		Dolivom Withod
Date Received:	DEC 20 2011 2022	Employee	: V.P.		Delivery Method Normal Mail
Date Postmark	ed: <u>JAN 2 7 2022</u>	Employee	: <u>//</u> /	UT .	Registered Mail Hand Delivered
Date Scanned:		Employee			Electronically Filed Signer has not received mandatory training
Date Data Ente	red:	Employee			mandatory traming
Please Note: Th		ian of books inform	ation, or accoun	t information.	dress, treasurer, assistant treasurer,

Detailed Summary

Amendment

Yes No

Use this form to summarize all disclosure reporting forms and	GGTGGT PSGGGGGGGGGGGGGGGGGGGGGGGGGGGGGGG	CONTROL PROGRAMMENT AND PROGRAMMENT AND PROGRAMMENT OF THE PROGRAMMENT	
1. Committee Full Name (and Fund if applicable)	2. Type of		3. ID Number
Comittee to Freet Antinia B. I ares	Dramia	ational	
Start of Election Cycle: January 1, 202/	=	Total this Reporting Perio	Total this d Election Cycle
4) Cash on Hand at Start		\$	\$
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$	\$
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$ 0,00	\$ 2000
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,	11d and 11e)	\$ 1940	- \$ 000
<u>EXPENDITURES</u>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$	\$
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)	\$	\$ 0
19) Cash on Hand at End (Add lines 4 and 12 together, then sul	otract line 18)	\$ 00	\$ 600
<u>ADDITIONAL INFORMATION</u>		I	F4947761533778777747878785
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	9. 7. 800 P. W. 45. W. 73.1
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)	\$	\$

Debts and Oblig Use this form to report d		and obligations owed to the C	ommittee.	Yes No			
1. Committee Full Nam				2. ID Number			
3. Debtor Information			Add 🔲 Remove				
a. Full Name, Mailing Address & Phone			Notes All novments received	toward dahts should be listed on the			
(include city, state, & zip)		- ,	Note: All payments received toward debts should be listed on the appropriate receipt form with the contributor listed as this debtor.				
Antuir EVINO	<u> </u>	nes					
Antwir BUTWO POBOY 8097 Fayettevilly N	とっつ	0211	b. Description of Debtor				
Payerfevilly IV	6	116	Loan C	personl)			
c. Beginning Balance	ď	I. Total Amount Paid	e. Total Amount Incurred	f. Remaining Balance			
\$ 10000		\$ 10000	\$ 10000	\$ 10000			
g. Incurred Debts (what the			·				
g1. Date (mm/dd/yyyy)	g2. Ar	mount	g3. Item Description				
	\$		·				
	\$		-A				
	\$						
	\$						
	\$						
3. Debtor Information	<u>L</u>		☐ Add ☐ Remove				
		New College State (1995) in the contract of th	and the first of the control of the second supposed to the second supposed to the second supposed to the second	elmele yeletet erlede yerret platet et derples applijde per er verstjoeg aperate, werkett an ep ekkengang i k			
a. Full Name, Mailing Addre	ess & P	hone	N1-4 431	The state of the s			
Charles and the factor to the Wheel Market Market and the contract of the	ess & P	hone		l toward debts should be listed on the h the contributor listed as this debtor.			
a. Full Name, Mailing Addre	ess & P	hone		1			
a. Full Name, Mailing Addre	ess & P	hone .	appropriate receipt form wit	1			
a. Full Name, Mailing Addre (include city, state, & zip)			appropriate receipt form wit	h the contributor listed as this debtor.			
a. Full Name, Mailing Addre (include city, state, & zip) c. Beginning Balance		i. Total Amount Paid	appropriate receipt form wit b. Description of Debtor e. Total Amount Incurred	h the contributor listed as this debtor. f. Remaining Balance			
a. Full Name, Mailing Addre (include city, state, & zip) c. Beginning Balance	ď	i. Total Amount Paid \$	appropriate receipt form wit	h the contributor listed as this debtor.			
a. Full Name, Mailing Addre (include city, state, & zip) c. Beginning Balance \$ g. Incurred Debts (what the	Comm	I. Total Amount Paid \$ ittee gave)	appropriate receipt form wit b. Description of Debtor e. Total Amount Incurred	h the contributor listed as this debtor. f. Remaining Balance			
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Amendment