Disclosure Report Co	over		Amendment Ves No	
Use this form for general report	Yes No			
Do not use this form to update	information.			
1. Committee Information				
a. Full Name	1		c. ID Number	
Battany Bailey	WILL for Bailey		TCQ 122	
b. Mailing Address include City, Sta	ite and Zip Code)		d. Date Filed	
1100 Ketty I MU	May Luce		1.22.2024	
Lewistille, NC	d'1025		e. Phone Number 336-909-8072	
2. Report Year 3. Period Star	t Date (mm/dd/yy) 4. Period	End Date (mm/dd/yy) 5. Treas	urer Full Name	
2023 11/25	1/2023 121	31/2023	And Lavery	
6. Type of Committee (Check)		port (check only one type of re	eport from one category)	
Candidate Campaign Par	rty Municipal	State/County	Referendum	
	ferendum Organization		Organizational	
	int Fundraiser	· · · · · · · · · · · · · · · ·	Pre-referendum	
Legal Expense Fund	Pre-primary	First	Final CO	
	Pre-election	Second	Supplemental Final	
7. Type of Fund (if applicable	·	Third	Annual	
Booster Fund	Semi-annual	Fourth	Special 3	
Building Fund	Mid Ye		N ==	
.	Year En		10. Special Report Name	
Other:	Final	Year End	a p mc	
8. Number of Fundraisers this	S Report Special	Final		
		Special Special	2 23	
11. Account Information 11. Account Information				
a. Financial Institution Full Name	a .	a. Financial Institution Full Name		
a. Financial Institution Full Name	Sank	a. Financial Institution Full Name		
a. Financial Institution Full Name b. Purpose	300/C Ic. Account Code		a Account Code	
first Honzon b	C. Account Code	a. Financial Institution Full Name b. Purpose	c. Account Code	
first Honzon b	Sank c. Account Code BB12		c. Account Code	
first Honzon b	c. Account Code BB12 d. Period Begin Balance			
first Honzon b	BB12		d. Period Begin Balance	
first Honzon b	BB12 d. Period Begin Balance			
b. Purpose Compaign CERTIFICATION	d. Period Begin Balance	b. Purpose	d. Period Begin Balance	
b. Purpose Compaign CERTIFICATION I certify that the Committee or Fun	d. Period Begin Balance \$ and is in compliance with all apple	b. Purpose icable provisions of Article 22A. 2	d. Period Begin Balance \$ 22B & 22D-22M of Chapter 163	
b. Purpose Compaign CERTIFICATION I certify that the Committee or Fur of the NC General Statutes and the	d. Period Begin Balance s and is in compliance with all appleat no funds are commingled with	b. Purpose icable provisions of Article 22A, 2 prohibited or other non-disclosed	d. Period Begin Balance \$ 22B & 22D-22M of Chapter 163	
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b. Purpose Compaign CERTIFICATION I certify that the Committee or Furof the NC General Statutes and the report is complete, true and correct the statute of the NC Baile	d. Period Begin Balance \$ and is in compliance with all appliant no funds are commingled with and that I have been trained by	b. Purpose icable provisions of Article 22A, 2 prohibited or other non-disclosed	d. Period Begin Balance \$ 22B & 22D-22M of Chapter 163	
b. Purpose CERTIFICATION I certify that the Committee or Fur of the NC General Statutes and the report is complete, true and correct particular Name of Sign FOR OFFICE USE ONLY	d. Period Begin Balance \$ and is in compliance with all applicat no funds are commingled with all and that I have been trained by Sig	icable provisions of Article 22A, 2 prohibited or other non-disclosed the NC State Board of Elections.	d. Period Begin Balance \$ 22B & 22D-22M of Chapter 163 funds. I further certify that this 122	
b. Purpose CERTIFICATION I certify that the Committee or Furof the NC General Statutes and the report is complete, true and correct the Printel Name of Sign	d. Period Begin Balance \$ and is in compliance with all appliant no funds are commingled with and that I have been trained by	icable provisions of Article 22A, 2 prohibited or other non-disclosed the NC State Board of Elections.	d. Period Begin Balance \$ 22B & 22D-22M of Chapter 163 funds. I further certify that this 1422-2024 Date elivery Method	
b. Purpose CERTIFICATION I certify that the Committee or Fur of the NC General Statutes and the report is complete, true and correct Printed Name of Sign FOR OFFICE USE ONLY Date Received:	d. Period Begin Balance \$ and is in compliance with all apple at no funds are commingled with ct and that I have been trained by the sign of the sign	b. Purpose icable provisions of Article 22A, 2 in prohibited or other non-disclosed of the NC State Board of Elections. Appointed Treasure yee:	d. Period Begin Balance \$ 22B & 22D-22M of Chapter 163 funds. I further certify that this 132-2024 Date elivery Method Normal Mail	
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b. Purpose CERTIFICATION I certify that the Committee or Fur of the NC General Statutes and the report is complete, true and correct Printed Name of Sign FOR OFFICE USE ONLY Date Received:	d. Period Begin Balance \$ and is in compliance with all applicat no funds are commingled with all that I have been trained by Signer Employ Employ	icable provisions of Article 22A, 2 prohibited or other non-disclosed of the NC State Board of Elections. Appointed Treasure of Appointed Treasure of Elections.	d. Period Begin Balance \$ 22B & 22D-22M of Chapter 163 funds. I further certify that this 123-3034 Date elivery Method Normal Mail	
b. Purpose CERTIFICATION I certify that the Committee or Fund of the NC General Statutes and the report is complete, true and correct Printed Name of Sign FOR OFFICE USE ONLY Date Received: Date Postmarked:	d. Period Begin Balance \$ and is in compliance with all apple at no funds are commingled with ct and that I have been trained by the sign of the sign	icable provisions of Article 22A, 2 prohibited or other non-disclosed the NC State Board of Elections. Appointed Treasure process Appointed	d. Period Begin Balance \$ 22B & 22D-22M of Chapter 163 funds. I further certify that this Li 22-2024 Date elivery Method Normal Mail Registered Mail Hand Delivered Electronically Filed Signer has not received	
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b. Purpose CERTIFICATION I certify that the Committee or Fur of the NC General Statutes and the report is complete, true and correct Printed Name of Sign FOR OFFICE USE ONLY Date Received: Date Postmarked: Date Scanned: Date Data Entered: Please Note: This form ca	d. Period Begin Balance \$ and is in compliance with all applicat no funds are commingled with at and that I have been trained by Employ Employ Employ Employ Employ Employ Employ	icable provisions of Article 22A, 2 prohibited or other non-disclosed the NC State Board of Elections. Appointed Treasure yee: yee: yee: yee: yee: yee:	d. Period Begin Balance \$ 22B & 22D-22M of Chapter 163 funds. I further certify that this 12D-2024 Date elivery Method Normal Mail Registered Mail Hand Delivered Electronically Filed Signer has not received mandatory training mmittee address, treasurer,	
b. Purpose CERTIFICATION I certify that the Committee or Fur of the NC General Statutes and the report is complete, true and correct Printel Name of Sign FOR OFFICE USE ONLY Date Received: Date Postmarked: Date Scanned: Date Data Entered: Please Note: This form can assistant	d. Period Begin Balance \$ and is in compliance with all appliant no funds are commingled with at and that I have been trained by Employ Emplo	b. Purpose icable provisions of Article 22A, 2 in prohibited or other non-disclosed of the NC State Board of Elections. In the NC State Board of Elections. Provided Treasure In the NC State Board of Elections. In the NC State Board of Elections. It is the NC State Board of Elections.	d. Period Begin Balance \$ 22B & 22D-22M of Chapter 163 funds. I further certify that this 1/22-2024 Date Dat	

Detailed Summary

Amendment

Yes No

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

1. Committee Full Name (and Fund if applicable)	2. Type of Report		3. ID Number		
Britany Bailey (Vote for Bailey)	YESA		TCQ722		
Start of Election Cycle: January 1,	2023	Total this Reporting Period	Total this Election Cycle		
4) Cash on Hand at Start		\$	\$ ()		
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$		
6) Contributions from Individuals	(CRO-1210)	\$ 893.00	\$ 893.00		
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$		
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$		
9) Loan Proceeds	(CRO-1410)	\$	\$		
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$		
11) Other Receipt Sources		5 01 3 1 - 3 5	THE PROPERTY OF THE PARTY OF TH		
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$		
11b) Contributions from Not-for-Profit Organizati	ons <i>(CRO-1250)</i>	\$	\$		
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, 11	c, 11d and 11e)	\$ 893.00	\$ 893.00		
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	\$		
13b) Contributions to Candidates/Political Commit	tees (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)	\$ 893.00	\$ 893.00		
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1.	5, 16 and 17)	\$ 893.00	\$ 893.00		
19) Cash on Hand at End (Add lines 4 and 12 together, then sub-	tract line 18)	\$ 0	\$ 0		
ADDITIONAL INFORMATION	SECTION SECTION				
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$			
21) Outstanding Loans (incl. ones from other campaign	(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)	\$	\$		

		m Individuals lividual contributions	over \$5	Pg 0 or contributions und		O 1205 is no	Amendment Yes ot used	□ No
		(and Fund if applica				2. ID Nun		
Bn	ttony Bail	ey (Vote for	Ba	iley)		TCQ	722	
	ributor Informati				move			
	me, Mailing Address	& Phone		b. Job Title/Profession		d. Comment	ts	
(include	e city, state, & zip)	Q)		Rooltor				
Bntt	any Baile	y		c. Employer's Name/Sp	pecific Field			
17/09	5 Kecanin	phorlace		Real Esta	to ByDrac	e. Election S	rum to Data	
TALL	sulle, NC	27023		Table was	w 101000.		um to Date	
70 110	· ·	O				\$ 8	43.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	13612	Check	12	05/2023	7 tiling F	ll	\$ 893	.00
					0		\$	
							\$	
	ibutor Informati				nove			
	me, Mailing Address	& Phone		b. Job Title/Profession		d. Comment	S	
(Include	city, state, & zip)			-				
				c. Employer's Name/Sp	ecific Field			
						e. Election St	um to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/dd/yy	yy)	k. Amount	
							\$	
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3. Contr	ibutor Informatio	n		Add Ren	nove		The same	1
	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Comments		
(include	city, state, & zip)							
				c. Employer's Name/Sp	ecific Field			
						. El-4 0	to Date	
						e. Election Su	im to Date	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	and Description	j. Date (mm/dd/yyy		k. Amount	
							\$	
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							\$	
4. Total	only this Page	e				\$ (702 M	
	of ALL CRO					Ψ	(7).W	
		-1210 1 ages Detailed Summary Page C	RO_1100	18 4 8 7 1 1 1 1	11.11.11	\$ 8	93.00	

In-Kind Contributions	Pg	of		Amendment Yes No	
Use this form to report non-monetary contributions, donations, good	ds or services prov	vided to the commi	ttee	or fund.	
Use CRO-1215 if In-Kind Contributions were or will be refund. Committee Full Name (and Fund if applicable)	nded within 7 da	ys.	12	ID Number	
Dotton Doile 1 (1100 Cana)	1	The second second	4.	ID Number	
ATTUM BUILD WITH TO BUILD]			CQ'122	
3. Contributor Information		move			
a. Full Name, Mailing Address & Phone	b. Type of Contri	butor	c. C	Comments	
(include city, state, & zip)	Individual Candidate				
DITTILLING BLUKEY	Party			1	
17165 Shown harry lave	PAC				
16 3 3 3 4 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6		d. E	Election Sum to Date		
1765 Aboon Many Lave Louisville, NC 27023	Source	\$	893.°0		
e. Description		f. Date (mm/dd/yy	yy)	g. Fair Market Amount	
Filing toe		125/200	23	\$ 89300	
				\$	
				\$	
3. Contributor Information	Add Rer	nove	Į L		
a. Full Name, Mailing Address & Phone	b. Type of Contril		c. C	omments	
(include city, state, & zip)	Individual				
	Candidate				
	Party PAC				
	Referendum		d. Ei	lection Sum to Date	
	Other Receipt	Source			
			\$		
e. Description		f. Date (mm/dd/yyy	y)	g. Fair Market Amount	
				\$	
				\$	
				\$	
	Add Ren	nove			
	b. Type of Contrib	utor	c. Co	omments	
(include city, state, & zip)	Individual				
	Candidate Party				
	PAC			1	
	Referendum		d. El	ection Sum to Date	
Other Receipt		Source \$			
2. Description		f. Date (mm/dd/yyy)	y)	g. Fair Market Amount	
				\$	
				\$	
				\$	
4. Total only this Page			\$	843.00	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO 1100)			\$	\$02.00	

Amendment