

# Disclosure Report Cover

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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.

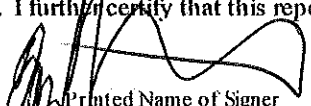
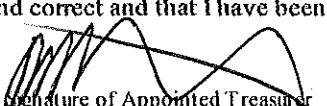
<b>1. Committee Information</b>	
a. Full Name DANTE ANDERSON FOR CHARLOTTE	c. ID Number
b. Mailing Address (include City, State and Zip Code) PO BOX 11194 CHARLOTTE, NC 28220	d. Date Filed 07/25/2022
	e. Phone Number (980) 355 9584

<b>2. Report Year</b> 2022	<b>3. Period Start Date (mm/dd/yy)</b> 05/03/2022	<b>4. Period End Date (mm/dd/yy)</b> 07/11/2022	<b>5. Treasurer Full Name</b> DANTE ANDERSON
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<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Municipal	<input type="checkbox"/> State/County	<input type="checkbox"/> Referendum
<input type="checkbox"/> Joint Fundraising	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum	<input type="checkbox"/> Legal Expense Fund	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<b>7. Type of Fund (if applicable, check one)</b>		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Other:		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	<b>10. Special Report Name</b>
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	2022 SPECIAL - PRE ELECTION REPORT
<b>8. Number of Fundraisers this Report</b>		<input type="checkbox"/> Special		
23				

<b>3. Account Information</b>		<b>3. Account Information</b>	
a. Financial Institution Full Name BANK OF AMERICA		a. Financial Institution Full Name	
<b>b. Purpose</b> FOR CAMPAIGN RELATED ACTIVITY	<b>c. Account Code</b> 1	<b>b. Purpose</b>	<b>c. Account Code</b>
	<b>d. Period Begin Balance</b> \$ 9732.24		<b>d. Period Begin Balance</b>

**CERTIFICATION**  
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board

 Printed Name of Signer  
 Signature of Appointed Treasurer  
 Date: 07/25/2022

**FOR OFFICE USE ONLY**

Date Received: \_\_\_\_\_ Employee: CCB Delivery Method  Normal Mail

Date Postmarked: MECKLENBURG COUNTY Employee: \_\_\_\_\_  Registered Mail

Date Scanned: JUL 25 2022 Employee: \_\_\_\_\_  Hand Delivered

Date Data Entered: BOARD OF ELECTIONS Employee: \_\_\_\_\_  Electronically Filed

Signer has not received mandatory training

**Please Note:** This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.  
You must amend the Statement of Organization (CCE-2100A-F) to make committee changes.

# 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	
DANTE ANDERSON FOR CHARLOTTE	2022 Special		
Start of Election Cycle: January 1, 2022		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 9,732.24	\$ 30.90
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 180.00	\$ 280.00
6) Contributions from Individuals (CRO-1210)		\$ 5,624.75	\$ 9,179.75
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00	\$ 0.00
9) Loan Proceeds (CRO-1410)		\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00	\$ 0.00
<b>11) Other Receipt Sources</b>			
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00	\$ 0.00
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00	\$ 0.00
11c) Outside Sources of Income (CRO-1250)		\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00	\$ 0.00
<b>12) TOTAL RECEIPTS</b> (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 5,804.75	\$ 9,459.75
<b>EXPENDITURES</b>			
<b>13) Disbursements</b>			
13a) Operating Expenditures (CRO-1310)		\$ 1,083.01	\$ 13,576.15
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 109.69	\$ 109.69
15) Loan Repayments (CRO-1420)		\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00	\$ 0.00
17) In-Kind Contributions (CRO-1510)		\$ 2,224.75	\$ 3,149.75
<b>18) TOTAL EXPENDITURES</b> (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 3,417.45	\$ 16,835.59
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 7,344.94	\$ 7,344.94
<b>ADDITIONAL INFORMATION</b>			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0.00	
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 0.00	
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0.00	
24) Account Transfers Within the Committee (CRO-1720)		\$ 0.00	
25) Administrative Support (CRO-1710)		\$ 0.00	\$ 0.00
26) Forgiven Loans (CRO-1440)		\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0.00	\$ 0.00
28) Contributions to be Refunded (CRO-1215)		\$ 0.00	\$ 0.00

# Aggregated Contributions from Individuals

Page 1 of 1

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Optional form used to report NC Contributions From Individuals of \$50 or less

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
DANTE ANDERSON FOR CHARLOTTE						
<b>3. Contributor Information</b>						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add	1	Electric Funds Tran		05/23/2022	\$	50.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Credit Card		05/11/2022	\$	50.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Electric Funds Tran		05/28/2022	\$	25.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Electric Funds Tran		05/13/2022	\$	5.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Credit Card		05/11/2022	\$	50.00
<input type="checkbox"/> Remove						
<b>4. Total only this Page</b>					\$	\$180.00
<b>5. Total of ALL CRO-1205 Pages</b>					\$	\$180.00
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> DANTE ANDERSON FOR CHARLOTTE						<b>2. ID Number</b>
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (Include city, state, & zip) JAIME AGUIRRE 2037 ANTONE ST AUSTIN, TX 78723			<b>b. Job Title/Profession</b> INVESTOR		<b>d. Comments</b>	
			<b>c. Employer's Name/Specific Field</b> RICE UNIVERSITY		<b>e. Election Sum to Date</b> \$ 1,000.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Credit Card		05/10/2022	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (Include city, state, & zip) SARAH AMICO 82 Lewellen Drive MARIETTA, GA 30064			<b>b. Job Title/Profession</b> EXECUTIVE CHAIRPERSON		<b>d. Comments</b>	
			<b>c. Employer's Name/Specific Field</b> JACK COOPER		<b>e. Election Sum to Date</b> \$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Electric Funds Tran		05/28/2022	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (Include city, state, & zip) CANDACE ANDERSON 232 QUEENS RD #38 CHARLOTTE, NC 28204			<b>b. Job Title/Profession</b> ESG PROFESSIONAL		<b>d. Comments</b>	
			<b>c. Employer's Name/Specific Field</b> BANK OF AMERICA		<b>e. Election Sum to Date</b> \$ 400.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Electric Funds Tran		06/24/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 1,350.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,624.75	

# Contributions from Individuals

Amendment  
 Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
DANTE ANDERSON FOR CHARLOTTE						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
DANTE ANDERSON PO BOX 11194 CHARLOTTE, NC 28220 (980) 355-9684			TREASURER			
			<b>c. Employer's Name/Specific Field</b> ANDERSON CONSULTING			
					<b>e. Election Sum to Date</b> \$ 2,049.75	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	In-Kind	RADIO AD	05/06/2022	\$ 1,124.75	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
DANTE ANDERSON 3015 PARK RD CHARLOTTE, NC 28209			NOT EMPLOYED			
			<b>c. Employer's Name/Specific Field</b> NOT EMPLOYED			
					<b>e. Election Sum to Date</b> \$ 1,100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	In-Kind	PAYMENT FOR RADIO MARKETING	05/22/2022	\$ 1,100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
HALEY BLASKA 2014 ROZZELLES FERRY RD CHARLOTTE, NC 28208			PROJECT MANAGER			
			<b>c. Employer's Name/Specific Field</b> BANK OF AMERICA			
					<b>e. Election Sum to Date</b> \$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Electric Funds Tran		05/14/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 2,324.75	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,624.75	

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
DANTE ANDERSON FOR CHARLOTTE						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
PATRICK BRANNELLY 12 ECHO LANE PIEDMONT, CA 94618			DIR OF BIZ DEV			
			<b>c. Employer's Name/Specific Field</b> GATES VENTURES			
					<b>e. Election Sum to Date</b>	
					\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Credit Card		05/11/2022	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
PATRICIA COTHAM 1920 KILMONACK LANE CHARLOTTE, NC 28270			COUNTY COMMISSIONER			
			<b>c. Employer's Name/Specific Field</b> MECKLENBURG COUNTY			
					<b>e. Election Sum to Date</b>	
					\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Credit Card		05/05/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
PATRICIA COTHAM 1920 Kilmonack Lane CHARLOTTE, NC 28270			COMMISIONER			
			<b>c. Employer's Name/Specific Field</b> MECKLENBURG COUNTY			
					<b>e. Election Sum to Date</b>	
					\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Electric Funds Tran		05/15/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 400.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,624.75	

# Contributions from Individuals

Amendment  
 Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>
DANTE ANDERSON FOR CHARLOTTE						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
CRYSTAL DAVIS 4842 BENHILL DR HARRISBURG, NC 28075			NOT EMPLOYED			
			<b>c. Employer's Name/Specific Field</b> NOT EMPLOYED			
					<b>e. Election Sum to Date</b> \$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Credit Card		05/11/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ANNE ESSAYE 1024 IDEAL WAY CHARLOTTE, NC 28203			ATTORNEY			
			<b>c. Employer's Name/Specific Field</b> ESSEX RICHARDS			
					<b>e. Election Sum to Date</b> \$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Credit Card		05/12/2022	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ANNE ESSAYE 1024 IDEAL WAY CHARLOTTE, NC 28203			ATTORNEY			
			<b>c. Employer's Name/Specific Field</b> ESSEX RICHARDS			
					<b>e. Election Sum to Date</b> \$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Electric Funds Tran		05/12/2022	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 600.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,624.75	

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> DANTE ANDERSON FOR CHARLOTTE						<b>2. ID Number</b>
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) ELISABETH EVANS 418 K ST NE WASHINGTON, DC 20002			<b>b. Job Title/Profession</b> GOV		<b>d. Comments</b>	
			<b>c. Employer's Name/Specific Field</b> DOJ			
					<b>e. Election Sum to Date</b> \$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Credit Card		05/09/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) JEFF JACKSON 2519 Cranbrook Lane CHARLOTTE, NC 28207			<b>b. Job Title/Profession</b> ASSISTANT DISTRICT ATTORNEY		<b>d. Comments</b>	
			<b>c. Employer's Name/Specific Field</b> GASTON COUNTY			
					<b>e. Election Sum to Date</b> \$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Electric Funds Tran		05/23/2022	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) MARY LAWLER 333 W. TRADE ST UNIT 2204 CHARLOTTE, NC 28202			<b>b. Job Title/Profession</b> NOT EMPLOYED		<b>d. Comments</b>	
			<b>c. Employer's Name/Specific Field</b> NOT EMPLOYED			
					<b>e. Election Sum to Date</b> \$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	1	Credit Card		05/11/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 450.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,624.75	



# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> DANTE ANDERSON FOR CHARLOTTE	<b>2. ID Number</b>
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<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  KAREEM MELIANI 2903 N Davidson St STE 1049 CHARLOTTE, NC 28205	<b>b. Job Title/Profession</b> INNOVATION LEADER	<b>d. Comments</b>			
	<b>c. Employer's Name/Specific Field</b> SEALED AIR				
		<b>e. Election Sum to Date</b> \$ 100.00			
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	1	Electric Funds Tran		05/13/2022	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  GREGORY PHIPPS 2307 Kersey Court CHARLOTTE, NC 28213	<b>b. Job Title/Profession</b> CONSULTANT	<b>d. Comments</b>			
	<b>c. Employer's Name/Specific Field</b> ALVAREZ & MARSAL, LLC				
		<b>e. Election Sum to Date</b> \$ 100.00			
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	1	Electric Funds Tran		06/16/2022	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  JASMINE SHEPARD 291 Roberts st LEXINGTON, SC 29072	<b>b. Job Title/Profession</b> ENGINEER	<b>d. Comments</b>			
	<b>c. Employer's Name/Specific Field</b> ENERGY SOLUTIONS				
		<b>e. Election Sum to Date</b> \$ 300.00			
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	1	Electric Funds Tran		06/01/2022	\$ 50.00
<input type="checkbox"/>	1	Electric Funds Tran		07/01/2022	\$ 50.00
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 300.00
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<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$ 5,624.75
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# Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
DANTE ANDERSON FOR CHARLOTTE							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
NATALIE SMITH 2055 GREENWAY AVE CHARLOTTE, NC 28204				TUTOR			
				<b>c. Employer's Name/Specific Field</b> OURBRIDGE FOR KIDS			
						<b>e. Election Sum to Date</b>	
						\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	1	Credit Card		05/05/2022		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
LAPRONDA SPANN 892 RAMGATE DRIVE SW CONCORD, NC 28025				OWNER			
				<b>c. Employer's Name/Specific Field</b> LAIN CONSULTING LLC			
						<b>e. Election Sum to Date</b>	
						\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	1	Credit Card		05/11/2022		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total on this Page</b>						\$ 200.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 5,624.75	

# Disbursements from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 4206 is not used at

committees and coordinated party expenditures

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
DANTE ANDERSON FOR CHARLOTTE							
<b>3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)</b>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (Include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
LONGLEAF AGENCY 116 S BOUNDARY ST CHAPEL HILL, NC 27514							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 4,304.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
I	Electric Funds Tran	A	05/24/2022	\$ 1,000.00	EMAIL		
				\$			
<b>4. Payer Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (Include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
VANTIV 900 CHELMSFORD ST LOWELL, MA 01851							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 122.63	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
I	Electric Funds Tran	C	06/09/2022	\$ 83.01	ELECTRONIC TRANSFER		
				\$			
<b>5. Total only this Page</b>						\$ 1,083.01	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 1,083.01	
(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)							
<b>7. Purpose Codes (List detailed expenditure code in (h.) above)</b>							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in response to Form CRO 4206							

# Aggregated Non-Media Expenditures

**Amendment**  
 Yes  No

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

1. Committee Full Name (and Fund If applicable)				2. ID Number		
DANTE ANDERSON FOR CHARLOTTE						
<b>3. Payee Information</b>						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electric Funds Tran	C	05/04/2022	\$ 22.96	ELECTRONIC TRANSFER
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electric Funds Tran	C	06/03/2022	\$ 47.71	ELECTRONIC TRANSFER
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Electric Funds Tran	C	06/10/2022	\$ 39.02	ELECTRONIC TRANSFER
<b>4. Total only this Page</b>					\$	109.69
<b>5. Total of ALL CRO-1315 Pages</b> (This line must be on line 14 of Detailed Summary Page CRO-1100)					\$	109.69
<b>6. Purpose Codes (List detailed expenditure code in (f) above)</b>						
A* - Printing		C* - Fundraising		D - To Another Candidate		
E - Salaries		F* - Equipment		H* - Holding Public Office Expenses		
I - Postage		J - Penalties		K* - Office Expenses		
O* - Other				Q* - Donations to Legal Expense Fund		
<b>* Codes require detailed explanation in required remarks field (g)</b>						