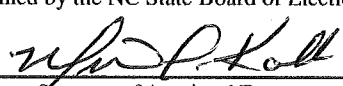


Disclosure Report Cover

Amendment
 Yes 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.

1. Committee Information				
a. Full Name			c. ID Number	
ELECT JOHN ANERALLA			None	
b. Mailing Address (include City, State and Zip Code)			d. Date Filed	
PO Box 1551 HUNTERSVILLE, NC 28070			5-10-19	
			e. Phone Number	
			704-895-0866	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name	
2018	07/01/18	12/31/18	Michael A. Kolb	
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input checked="" type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
7. Type of Fund (if applicable, check one)		State/County		
<input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		<input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
8. Number of Fundraisers this Report		10. Special Report Name		
0				
11. Account Information		11. Account Information		
a. Financial Institution Full Name		a. Financial Institution Full Name		
WELLS FARGO				
b. Purpose	c. Account Code	b. Purpose	c. Account Code	
Campaign	1			
	d. Period Begin Balance		d. Period Begin Balance	
	\$ 3649.55			
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 of Elections.				
Michael A Kolb Printed Name of Signer		 Signature of Appointed Treasurer		5-9-19 Date
FOR OFFICE USE ONLY				
Date Received:	MECKLENBURG COUNTY	Employee:	Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed	
Date Postmarked:	MAY 10 2019	Employee:		
Date Scanned:		Employee:		
Date Data Entered:	BOARD OF ELECTIONS	Employee:	<input type="checkbox"/> 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 (CRO-2100A-E) 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
Elect JOHN ANERALLA	YEAR END	None
Start of Election Cycle: January 1, 2018.	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 3649.55	\$ 4219.91
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 1	\$ 125
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)	\$	\$
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)	\$ 15	\$ 125
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 10	\$ 19536
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 550.00	\$ 1050
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, 15, 16 and 17)	\$ 550.00	\$ 1245.36
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 3099.55	\$ 3099.55
ADDITIONAL INFORMATION		
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ 7000.00	
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)	\$	\$

Disbursements

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)						2. ID Number
ELECT JOHN ANERALLA						NONE
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input checked="" type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>				b. Coordinated Committee Name		d. Comments
Comm - TO ELECT GEORGE BELL FOR JUDGE 200 S. Old Statesville Rd. Huntersville, NC 28078 704-992-1590				c. Level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	CK	D	09/09/2018	\$ 100. ⁰⁰		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>				b. Coordinated Committee Name		d. Comments
ELECT AWAY DULIN VOTE 3200 Wickersham Rd. Charlotte, NC 28211 704-968-8776				c. Level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	CK	D	09/09/2018	\$ 200. ⁰⁰		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>				b. Coordinated Committee Name		d. Comments
ELECT DAN FOREST Comm. to elect PO Box 471845 Charlotte, NC 28247 828-776-2774				c. Level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	CK	D	09/09/2018	\$ 250.		
				\$		
5. Total only this Page						\$ 550. ⁰⁰
6. Total of ALL CRO-1310 Pages						\$ 550. ⁰⁰
<small>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</small>						
<small>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</small>						
<small>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</small>						
7. Purpose Codes (List detailed expenditure code in (h.) above)						
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 required remarks field (k)						

Outstanding Loans

Amendment
Pg 1 of 1 Yes No

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

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Elect John Aneralla		None	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
John Aneralla 15705 Framingham Ln. Huntersville, NC 28078 (704) 895-0866		Financed Adviser	e. Start Date (mm/dd/yyyy)
		c. Employer's Name/Specific Field	01/29/2016
		Self/financed adviser	f. End Date (mm/dd/yyyy)
	N/A		
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
0%	None	\$ 17,000	\$ 7,000
k. Full Name of Lending Institution		l. Loan Number	
Candidate			
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
			e. Start Date (mm/dd/yyyy)
		c. Employer's Name/Specific Field	
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$	\$
k. Full Name of Lending Institution		l. Loan Number	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
			e. Start Date (mm/dd/yyyy)
		c. Employer's Name/Specific Field	
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$	\$
k. Full Name of Lending Institution		l. Loan Number	
4. Total only this Page		\$ 7,000	
5. Total of ALL CRO-1430 Pages		\$ 7,000.00	
<i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>			