Amendment	:
Yes	No 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 Infor	mation							
a. Full Name						c. ID Number		
Committee to Elect	Aaron Kohrs							
			E I W I					
	ude City, State and Zip Code)		Nr. o	15 11 19 E	3	d. Date Filed		
121 20 <sup>th</sup> Ave NW Hickory, NC 2860		AUG 07 2019			08/07/2019			
,,					e. Phone Number			
		By			828-578-2732			
		626-376-2732						
2. Report Year	3. Period Start Date (mm/d	d/yy) 4. Period (mm/dd/yy)	4. Period End Date (mm/dd/yy) 5. Treasurer Fu		surer Full N	lame		
2019	07/31/2019	08/0	David Baldwin					
6. Type of Committee (Check One)		9. Type of Report	(check	only one ty	e of report f	rom one category)		
Candidate Camp		Municipal	State/County		J	Referendum		
PAC	Referendum	Organizationa		Organizatio	nal	Organizational		
Independent	Joint Fundraiser	Thirty-five day	-	Quarterly		Pre-referendum		
Expenditure	_		'	~~~~,				
Legal Expense F		Pre-primary		First Second Third		Final		
7. Type of Fund  "Booster Fund"	(if applicable, check one)	Pre-election				Supplemental Final		
Building Fund		Pre-runoff				Annual		
Building rund		Semi-annual	H	Fourt		Special		
		Mid Yea	r "	Semi-annua				
Other:		Year End	Year End Mid Year Final Year End		Year	10. Special Report Name		
		Final			End			
8. Number of Fund	raisers this Report	Special		Final				
				Special				
11. Account Inform	None		11 Accou	nt Informat	ion			
a. Financial Institution		a. Financial Institution Full Name						
PNC Bank	Y un i tame							
b. Purpose	c. Account Code		b. Purpose			c. Account Code		
Campaign	Al	ζ.	•					
Acct	d. Period Begin Balanc					d. Period Begin Balance		
	\$ 0.00					\$		
CERTIFICATION								
the NC General Stat	mmittee or Fund is in compl tutes and that no funds are co d correct and that I have bee	ommingled with prol	nibited pr otl	her non-disc	losed funds.	& 22D-22M of Chapter 163 of I further certify that this report		
David P. B			1 our	# you		08/07/2019		
	Printed Name of Signer	S	signature of Ap	pointed Treasur	ег	Date		
FOR OFFICE USE	ONLY					N.12		
Date Received: Employee:			_		1	Delivery Method Normal Mail		
Date Postmarke	ed:	Employee:				Registered Mail Hand Delivered		
Date Scanned: Employee:						Electronically Filed Signer has not received		
Date Data Ente	red:	Employee:				mandatory training		
Please Note: Th		nend committee info				ss, treasurer, assistant treasurer,		

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Amendment Yes

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

	Type of Report		3. ID Number		
Committee to Elect Aaron Kohrs	rganizational				
Start of Election Cycle: January 1,	2019	Total this Reporting Period	Total this Election Cycle		
4) Cash on Hand at Start		\$ 0.00	\$		
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$		
6) Contributions from Individuals	(CRO-1210)	\$ 100.00	\$ 100.00		
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	- vano V 49				
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$		
11b) Contributions from Not-for-Profit Organization	s (CRO-1250)	\$	\$		
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, 11c,	11d and 11e)	\$ 100.00	\$ 100.00		
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	\$		
13b) Contributions to Candidates/Political Committee	es (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, 15,	16 and 17)	\$ 0.00	\$ 0.00		
19) Cash on Hand at End (Add lines 4 and 12 together, then subtre	act line 18)	\$ 100.00	\$ 100.00		
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$			
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)	\$	\$		
	(CRO-1215)	\$	\$		
28) Contributions to be Refunded	(CAU-1213)	Ÿ	Ψ		

Contri	butions from	n Individuals	¢50	) au aantu			of <u>1</u>	Yes	No No	
Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1. Committee Full Name (and Fund if applicable)						2. ID Nu	2. ID Number			
			ole)			THE SECTION AND ADDRESS OF THE PARTY OF THE	3.10			
Committe	e to Elect Aaron l	Kohrs ————————							OTHER EVER SO	
3. Contributor Information				Add		Remove	Wallo E Track I will be also			
a. Full Name, Mailing Address & Phone			b. Job T	b. Job Title/Profession			d. Comments			
(include city, state, & zip)  Delaine Walker				Retire	u					
	337 7th St NE Hickory, NC 28601					/Specific Field				
Hickory,				Educa	Educator			Sum to Date		
							\$	100.00		
f. Prior	g. Account Code	h. Form of Payment	i, In-I	Kind Descr	ription	j. Date (mm/dd/	yyyy) k. Amount			
	AK	Check				07/31	/2019	\$	100.00	
								\$		
								\$		
3 Contri	butor Information	on Section 1		Add	П	Remove		And the same	PITE SE	
CHARLEST TO STREET	ne, Mailing Address			-	Title/Professi	ion	d. Comme	ents		
	city, state, & zip)									
				- Town	Investo Nome	e/Specific Field	_			
				c. Empi	oyer s ivanic	Aspecine Field				
ļ							e. Election	Sum to Date		
							\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Desc	ription	j. Date (mm/dd	/уууу)	k. Amount		
								\$		
								\$		
								\$		
3. Contr	ibutor Informati	on		Add		Remove	fle alsi			
a. Full Nat	me, Mailing Address	& Phone		b. Job Title/Profession		d. Comments				
(include	city, state, & zip)									
				c. Emp	loyer's Nam	e/Specific Field				
						e. Election Sum to Date				
							\$	I Sum to Date		
f. Prior	g. Account Code	h. Form of Payment	j In.	-Kind Description j. Dat		j. Date (mm/do				
1. 110	g. Account Code	n. Form of Layment	I. All	TRING DUSC	rphon	J. Z (	0 0 0 0 7	\$		
								\$		
								\$		
4. Tota	l only this Pag	ge de la	Ag See	21.4¥7.8			\$		100.00	
	of ALL CRO						\$		100.00	

Amendment

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