Disclosure Report Cover

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				
Committee to e	lect Sa	rah S	abanis		9CQ 8	KA			
b. Mailing Address (include City, State and Zip Code) d. Date Filed									
104 McCoy Rd. 9/1/25									
104 McCoy Rd. Kernersville, NC Z7284 864-650-77									
						0-7773			
2. Report Year 3. Period Start			End Date (mm/dd/yy)						
2025 07/301			6/2025		Shawn				
6. Type of Committee (Check Committee Candidate Campaign ☐ Part			ort (check only one	type of repo		tegory)			
	erendum	unicipal Organizationa	State/County Organizat	ional	Referendum	1			
	t Fundraiser	Thirty-five da	- -	IUHAI	Organizatio Pre-reference				
Legal Expense Fund			First		Final	lum			
	۱ñ	Pre-election	Seco	nd	Supplement	al Final			
7. Type of Fund (if applicable,	check one)	Pre-runoff	Third		Annual	ai i iiiai			
Booster Fund		Semi-annual	Four		Special				
Building Fund		Mid Yea	r Semi-annı	ıal	_ `				
_		Year End	d Mid	Year	10. Special R	epert Name			
Other:		Final	☐ Year		NASAN BY	S Po			
8. Number of Fundraisers this	Report	Special	Final			(S)			
0			Special		6 6 1	E			
11. Account Information			11. Account Inform	ation	277	N2			
a. Financial Institution Full Name			a. Financial Institution	Full Name		145			
Allegacy FCU									
b. Purpose	c. Account Code		b. Purpose		c. Account Code	**			
	YES								
Campaign	d. Period Begin B]		d. Period Begin	Balance			
	\$ 69. 7	0			\$				
CERTIFICATION									
I certify that the Committee or Fur	d is in complianc	e with all appli	icable provisions of Art	icle 22A, 22B	& 22D-22M of	Chapter 163			
of the NC General Statutes and that	it no funds are con	mmingledwith	prohibited or other nor	n-disclosed fur	nds. I further ce	ertify that this			
report is complete, true and correc	t and that I have b	een trained by	the NC State Board of	Elections.		·			
I D_{I-1} S_{I-2}	\bigcirc 1	11/4/		1/2	91	7426			
Tatrick Thawn (1776	V class	Dhawn U	W	/-/-,	2025			
Printed Name of Sign	er	Sign	nature of Appointed Trea	urer	Da	ate			
FOR OFFICE USE ONLY									
Date Received:		Employ	/ee: ,		very Method Normal Mail				
Date Postmarked: Employee: Registered Mail Hand Delivered									
Date Scanned:		Employ	ree:		Electronically				
Date Data Entered:		Employ	ree:		Signer has not mandatory trai				
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer,									
assistant	assistant treasurer, custodian of books information, or account information.								
You must amend t	You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.								

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

Amendment

Yes No

1. Committee Full Name (and Fund if applicable) 2. Type of		. ID Number
Committee to elect Sarah Sabanis Pre-		d
	Total this	9CQ 8KA
Start of Election Cycle: January 1, Zozs	Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 69.70	\$ 0,00
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 55.00	\$ 75.00
6) Contributions from Individuals (CRO-1210)	\$ 100.00	\$ 170.44
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00
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	\$ 155.00	\$ 245.44
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 7.10	\$ 7.40
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures (CRO-1315)	\$ 25.00	\$ 75.00
15) Loan Repayments (CRO-1420)		\$
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$	\$
17) In-Kind Contributions (CRO-1510)	\$	\$ 20.44
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 32,10	\$ 52.84
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18		\$ 192.60
ADDITIONAL INFORMATION		A-URIGE W
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$	T. R. S. L. S. R.
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) CRO-1100 NC State Board of Elections	\$	\$

Aggregated Contributions from Individuals

Page

of Amendment Yes No

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

	1. Committee Full Name (and Fund if applicable) 2. ID Number								
Committee to elect Sarah Sabanis 9CQ8KA									
3. Contributor Information									
a. Aı	nend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyy	y)	f. Amount		
	Add Remove	YES	Credit Card		07/30	1075	s 50.00		
H	Add Remove	YES	Credit card		08/17/	7026	\$ 50,00 \$ 5,00		
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	Remove						\$		
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		m Individuals ividual contributions o	over \$5	0 or contrit	Pg outions unde	of \$50 if form CR	O 1205 is no	Amendment Yes No	
		(and Fund if applical					2. ID Nun		
COW	mittee to	elect San	ah S	baban	15		960	8 K A	
	ibutor Informatio			Add		nove			
	me, Mailing Address & city, state, & zip)	& Phone		b. Job Titi	le/Profession		d. Comment	ts	
				Dire	ctor				
lara	Searight	1		c. Employ	er's Name/Spe	ecific Field			
1611	Searight N Lexingto Igton, VA	n Ave.			. 1				
Action	rator VA	ZZZ05		Laerdal Lebs DC			e. Election Sum to Date		
יין ודיק	19 1011, 1						\$ 1	00.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-H	Lind Descrip	tion	j. Date (mm/dd/yy		k. Amount	
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								\$	
								\$	
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(include	city, state, & zip)								
				c Employe	er's Name/Spe	cific Field			
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f. Prior	g. Account Code	h. Form of Payment	i. In-k	and Descript	ion	j. Date (mm/dd/yy	yy)	k. Amount	
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(include	city, state, & zip)		_						
				c. Employe	er's Name/Spe	cific Field			
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4. Total	only this Page						\$	100,00	
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(This line must be on line 6 of Detailed Summary Page CRO-1100)						\$	100,00		

Disbursen	nents				Pg _	L of	- 1	Amendment Yes No
	report expenditures		tee for o	operating exp	penses,	contributi	ons to c	
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3. Type of Dist		e use separate Cl			onels tun	a of Dieb	1	1090101
Operating Exp	A CONTRACTOR OF THE PARTY OF TH	ntributions to Candid				head		Party Expenditures
4. Payee Inform				Add 🗆	Remov		TOTAL DO	arty Expenditures
a. Full Name, M	failing Address & Pl	ione		b. Coordinat	ed Comm	dttee Name	d. (Comments
(include city, state								*
Act Blu	e			c. Level Regi	stered (S	necify)		ΛP
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YES_	EFT		081	7/2025	\$ 4.	35	cro	dit card fees
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(include city, stat	ing Address & Phone			b. Coordinate	d Commi	ttee Name	d. C	omments
	and an amply						1	1
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6. Total of ALL	CRO-1310 Pages		TO 2 1					7.10
(This line goes in	line 13a of Detailed Sum	mary Page CRO-110	00 if Oper	ating Expenses	1)			711
	line 13b of Detailed Sum						4	1.10
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)								
7. Purpose Codes (List detailed expenditure code in (h.) above)								
A* - Media	B* - Printir			ndraising		B 44 1		Candidate
E - Salaries I - Postage	F* - Equipr J - Penaltie			tical Party fice Expens				ublic Office Expenses
O* Other	J - renatte	<i>,</i> 20	- V	une expens	E3	à n0I	muon t	o Legal Expense Fund
	e detailed explanati	on in required re	marks	field (k)				

Page ____ of ____

Amendment

Yes No

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

1. Commit	tee Full Name (a	nd Fund if applical	2. ID Number							
Comm	ittee to	elect Sara	90Q8KA							
3. Payee Information										
a. Amend b. Account Code c. Form of Payment d. Purpose Code e. Date (mm/dd/yyyy) f. Amount g. Required Remarks										
Add Remove	YES	debitand	K	08/21/2025	\$ Z 5.00	Maps of area				
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4. Total only this Page \$ \(\frac{7}{5.00} \)										
5. Total of ALL CRO-1315 Pages \$ 75.00										
(This time must be on time 14 of Detained Summary Luge CRO-1100)										
6. Purpose Codes (List detailed expenditure code in (d) above) B* - Printing C* - Fundraising D - To Another Candidate										
E - Salar	ies F*-	Equipment	G - Political	Party H*-1	Holding Public O	ffice Expenses				
I - Posta		enalties	K* - Office	Expenses Q* - 1	Donations to Lega	ıl Expense Fund				
O* - Other										
* Codes require detailed explanation in required remarks field (g)										