Amendment	
☐ Yes	□ No

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		n table Grap and a second		
a. Full Name			c. ID Number	
Committee To Every Dr. Holsey Hyman for Dahm,				
b. Mailing Address (include City, State and Zip Code)			d. Date Filed	
6514 Loganbury Land			11-22-2022	
Durham, NC 27713			e. Phone Number 718-414-5987	
2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasurer Full Name				
		12022 Crai6	E. Hyman	
6. Type of Committee (Check C	and the same of th	port (check only one type of repo		
Candidate Campaign Part		al Organizational	Referendum Organizational	
	erendum or Fundraiser Thirty-five da	·	Pre-referendum	
	nt Fundraiser	First	Final	
Legal Expense Fund	Pre-election	Second	Supplemental Final	
7. Type of Fund (if applicable,		Third	Annual	
7. Type of Fund (if applicable, check one) Pre-runoff Booster Fund Semi-annual		Fourth	Special	
Building Fund	Mid Ye			
	Year En	d Mid Year	10. Special Report Name	
Other:	Final	Year End		
8. Number of Fundraisers this	Report Special	Final		
\wedge		☐ Special		
11. Account Information		11. Account Information	SATURES DE LEGIS LA CONTRACTOR	
a. Financial Institution Full Name		a. Financial Institution Full Name		
Ti				
ruist				
b. Purpose	c. Account Code	b. Purpose	c. Account Code	
Campaign 1908				
. , 9	d. Period Begin Balance		d. Period Begin Balance	
	\$ 100	·	\$	
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.				
Craic Human	7 '	1, 16 . 1	11/22/2	
	1 .			
		IN MILL	11/2/2022	
Printed Name of Sign	er Sig	gnature of Appointed Treasurer	Date	
	ner Si _l		THE PERSON	
Printed Name of Sign	ner Sig	De	livery Method Normal Mail	
Printed Name of Sign FOR OFFICE USE ONLY		yee:	livery Method Normal Mail Registered Mail	
Printed Name of Sign FOR OFFICE USE ONLY Date Received: Date Postmarked:	Emplo	yee:De	livery Method Normal Mail	
Printed Name of Sign FOR OFFICE USE ONLY Date Received: Date Postmarked: Date Scanned:	Emplo Emplo Emplo	yee:	livery Method Normal Mail Registered Mail Hand Delivered Electronically Filed Signer has not received	
Printed Name of Sign FOR OFFICE USE ONLY Date Received: Date Postmarked: Date Scanned: Date Data Entered:	Emplo Emplo Emplo Emplo	byee:De byee:	livery Method Normal Mail Registered Mail Hand Delivered Electronically Filed Signer has not received mandatory training	
Printed Name of Sign FOR OFFICE USE ONLY Date Received: Date Postmarked: Date Scanned: Date Data Entered: Please Note: This form ca	Emplo Emplo Emplo Emplo Emplo	byee:	livery Method Normal Mail Registered Mail Hand Delivered Electronically Filed Signer has not received mandatory training	
Printed Name of Signate Post ONLY Date Postmarked: Date Scanned: Date Data Entered: Please Note: This form cat assistant	Emplo Emplo Emplo Emplo Emplo trunnot be used to amend comment treasurer, custodian of book	byee:	livery Method Normal Mail Registered Mail Hand Delivered Electronically Filed Signer has not received mandatory training mmittee address, treasurer, ation.	
Printed Name of Signate Post ONLY Date Postmarked: Date Scanned: Date Data Entered: Please Note: This form cat assistant	Emplo Emplo Emplo Emplo annot be used to amend comment treasurer, custodian of book the Statement of Organization	byee:	livery Method Normal Mail Registered Mail Hand Delivered Electronically Filed Signer has not received mandatory training mmittee address, treasurer, ation.	

NOV 2 2 2022

Detailed Summary

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 Committee to Elect Dr. Monique Holsey-Hyman 908 Total this Total this **Start of Election Cycle:** January 1, 2023 Reporting Period **Election Cycle** Cash on Hand at Start 100 100 RECEIPTS \$ 5) Aggregated Contributions from Individuals (CRO-1205) 100-00 \$ (CRO-1210) 100.00 **Contributions from Individuals** \$ 7) Contributions from Political Party Committees (CRO-1220) \$ 8) Contributions from Other Political Committees (CRO-1230) 0 0 \$ 9) Loan Proceeds 0 (CRO-1410) 0 \$ 0 Refunds/Reimbursements To the Committee (CRO-1240) 10) 11) Other Receipt Sources 11a) Interest on Bank Accounts (CRO-1250) \$ 11b) Contributions from Not-for-Profit Organizations (CRO-1250) \$ 0 0 \$ 11c) Outside Sources of Income (CRO-1250) 0 0 \$ 0 11d) Legal Expense Fund – Other Sources (CRO-1270) 0 0 (CRO-1265) 0 \$ 11 e) Exempt Purchase Price Sales 100.00 00.00 **12) TOTAL RECEIPTS** (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) EXPENDITURES 13) Disbursements 0 \$ 0 13a) Operating Expenditures (CRO-1310) \$ 13b) Contributions to Candidates/Political Committees (CRO-1310) 0 \$ 0 \$ 13c) Coordinated Party Expenditures (CRO-1310) \$ 0 0 \$ 14) Aggregated Non-Media Expenditures (CRO-1315) 0 0 15) Loan Repayments (CRO-1420) \$ 0 \$ 0 0 \$ 0 16) Refunds/Reimbursements From the Committee (CRO-1320) \$ (CRO-1510) \$ 0 0 17) In-Kind Contributions \$ 0 \$ 0 TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) 18) 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) 100 \$ 100 ADDITIONAL INFORMATION 20) Non-Monetary Gifts Given to Other Committees (CRO-1330) \$ 0 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) \$ 0 0 Debts and Obligations owed By the Committee (CRO-1610) \$ 22) Debts and Obligations owed To the Committee (CRO-1620) \$ 0 23) **Account Transfers Within the Committee** 0 24) (CRO-1720) \$ 0 \$ 0 (CRO-1710) \$ 25) Administrative Support IN PERSON (CRO-1440) \$ 0 \$ 26) Forgiven Loans NOV 2 2 2022 27) 48-Hour Notice Reports Sum (CRO-2220) \$ 0 \$ 0 Contributions to be Refunded 0 \$ 0 28) (CRO-1215)

Amendment

Yes

X

No