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.

1. Committee In									
1. Committee in	formation								
a. Full Name							c. ID Number		
FRIENDS OF S	SHELIA HUG	GINS							
b. Mailing Addre	ess (include Cit	ty, State and Zip	Code)				d. Date Filed		
2408 TAMPA	AVENUE						09/05/2017		
DURHAM, NO	27705					-	e. Phone Number		
2. Report Year	3. Period Star	t Date (mm/dd/y	y)	4. Period	End Date (mm/dd/yy)	5. Treasure	er Full Name		
2017	0	7/01/2017			08/29/2017	SHELIA A	NN HUGGINS		
6. Type of Committee (Check One)			9. Type of Report (check only one type of			type of repo	report from one category)		
X Candidate Can			Munic		State/County		Referendum		
Joint Fundrais	The second secon	C		Organizatio	nal Organizatio	nal	Organizational		
Referendum	_	gal Expense Fund	X	Thirty-five			Pre-referendum		
				Pre-primary			Final		
7. Type of Fund (if applicable, check one)				Pre-election			Supplemental Final		
			믐		Third		Annual		
☐ Building Fund				Pre-runoff			_		
Presidential Election Year Candidates Fund			_	Semi-annua	_	.	☐ Special		
■ NC Public Car	npaign Financing	g Fund		Mid Ye		· .			
				Year E	nd	ar	10. Special Report Name		
Other:				Final	Year E	nd			
8. Number of Fu	undraisers this	Report		Special	☐ Final				
	2				☐ Special				
3. Account Info	rmation				3. Account Informat	ion			
a. Financial Institution Full Name				a. Financial Institution Full Name					
FIRST CITIZE									
b. Purpose		c. Account Cod	e		b. Purpose		c. Account Code		
RECEIVE			A1						
CONTRIBUTI	ONS AND		711						
MAKE EXPEN		d. Period Begin	Balan	ce			d. Period Begin Balance		
MAKE EXPEN		d. Period Begin	n Balan	186.83			d. Period Begin Balance		
			n Balan						
RELATED TO	ON	\$		186.83	applicable provisions	of Article 2	S		
RELATED TO CERTIFICATION I certify that the second control of th	ON the Committee	\$ or Fund is in co	mplian	186.83			\$ 2A, 22B & 22D-22M of		
RELATED TO CERTIFICATIO I certify that to Chapter 163 of	ON the Committee of the NC Gene	\$ or Fund is in co	mplian	186.83	commingled with pro	hibited or o	\$ 2A, 22B & 22D-22M of		
RELATED TO CERTIFICATIO I certify that to Chapter 163 of	ON the Committee of the NC Gene	s or Fund is in co	mplian	186.83	commingled with pro	hibited or o	\$ 2A, 22B & 22D-22M of ther non-disclosed aby the NC State Board		
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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 IN PERSON

☐ Yes
☑ No

2. Type of Re 2017 Thirty-	five-da			DU
	1	Total this	_	
	Total this Reporting Period		Total this Election Cycle	
	\$	186.79	\$	0.00
(CRO-1205)	\$	1,710.00	\$	1,710.00
(CRO-1210)	\$	3,985.00	\$	4,185.00
(CRO-1220)	5	0.00	\$	0.00
(CRO-1230)	\$	0.00	\$	0.00
(CRO-1410)	\$	0.00	\$	0.00
(CRO-1240)	\$	0.00	\$	0.00
(CRO-1250)	\$	0.00	\$	0.00
(CRO-1250)	\$	0.00	\$	0.00
(CRO-1250)	\$	0.00	\$	0.00
(CRO-1270)	\$	0.00	\$	0.00
(CRO-1265)	\$	0.00	\$	0.00
ild and ile)	\$	5,695.00	\$	5,895.00
(CRO-1310)	\$	2,655.92	\$	2,655.92
(CRO-1310)	\$	0.00	8	0.00
(CRO-1310)	\$	0.00	\$	0.00
(CRO-1315)	\$	129.25	\$	142.46
(CRO-1420)	\$	0.00	\$	0.00
(CRO-1320)	\$	0.00	\$	0.00
(CRO-1510)	\$	150.00	\$	150.00
16 and 17)	\$	2,935.17	\$	2,948.38
tract line 18)	5	2,946.62	ŝ	2,946.62
	\$	0.00		
(CRO-1430)	\$	0.00		
(CRO-1610)	\$	0.00		
(CRO-1620)	\$	0.00		
(CRO-1620) (CRO-1720)	\$	0.00		
(CRO-1720) (CRO-1710)	\$		\$	0.00
(CRO-1720)	\$ \$	0.00	\$	0.00 0.00 0.00
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28) Contributions to be Refunded

(CRO-1215) S

1,521.17 | \$