

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

a. Full Name Tim Andrew for School Board		ID Number
b. Mailing Address (include City, State and Zip Code) 3719 Village Springs Dr High Point NC 27265		d. Date Filed 7/1/2022
		e. Phone Number 336 880 8308

2022	05/01/2022	06/30/22	Timothy P Andrew
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		Municipal	State/County	Referendum
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-election	<input checked="" type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Other:		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

a. Financial Institution Full Name Troliant Federal Credit Union		a. Financial Institution Full Name	
b. Purpose Committee Funds	c. Account Code 1	b. Purpose	c. Account Code
d. Period Begin Balance \$ 1726.59		d. Period Begin Balance	\$

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.

Timothy P Andrew Printed Name of Signer Timothy P Andrew Signature of Appointed Treasurer 7/1/2022 Date

FOR OFFICE USE ONLY

Date Received: **RECEIVED** Employee: _____

Date Postmarked: **JUL 12 2022** Employee: _____

Date Scanned: _____ Employee: _____

Date Data Entered: **GUILFORD COUNTY BOARD OF ELECTIONS** Employee: _____

Delivery Method:
 Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed
 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	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

<i>Tim Andrew for School Board</i>		<i>2nd Quarter</i>	
Start of Election Cycle:	January 1,	<u>2022</u>	Total this Reporting Period
			Total this Election Cycle
4) Cash on Hand at Start		\$ 1101.34	\$
5) Aggregated Contributions from Individuals	<i>(CRO-1205)</i>	\$	\$
6) Contributions from Individuals	<i>(CRO-1210)</i>	\$ 625.25	\$
7) Contributions from Political Party Committees	<i>(CRO-1220)</i>	\$	\$
8) Contributions from Other Political Committees	<i>(CRO-1230)</i>	\$	\$
9) Loan Proceeds	<i>(CRO-1410)</i>	\$	\$
10) Refunds/Reimbursements To the Committee	<i>(CRO-1240)</i>	\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	<i>(CRO-1250)</i>	\$	\$
11b) Contributions from Not-for-Profit Organizations	<i>(CRO-1250)</i>	\$	\$
11c) Outside Sources of Income	<i>(CRO-1250)</i>	\$	\$
11d) Legal Expense Fund - Other Sources	<i>(CRO-1270)</i>	\$	\$
11 e) Exempt Purchase Price Sales	<i>(CRO-1265)</i>	\$	\$
12) TOTAL RECEIPTS	<i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)</i>	\$	\$
13) Disbursements			
13a) Operating Expenditures	<i>(CRO-1310)</i>	\$ 0	\$
13b) Contributions to Candidates/Political Committees	<i>(CRO-1310)</i>	\$	\$
13c) Coordinated Party Expenditures	<i>(CRO-1310)</i>	\$	\$
14) Aggregated Non-Media Expenditures	<i>(CRO-1315)</i>	\$	\$
15) Loan Repayments	<i>(CRO-1420)</i>	\$	\$
16) Refunds/Reimbursements From the Committee	<i>(CRO-1320)</i>	\$	\$
17) In-Kind Contributions	<i>(CRO-1510)</i>	\$	\$
18) TOTAL EXPENDITURES	<i>(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</i>	\$	\$
19) Cash on Hand at End	<i>(Add lines 4 and 12 together, then subtract line 18)</i>	\$ 1726.59	\$
20) Non-Monetary Gifts Given to Other Committees	<i>(CRO-1330)</i>	\$	
21) Outstanding Loans (incl. ones from other campaigns)	<i>(CRO-1430)</i>	\$	
22) Debts and Obligations owed By the Committee	<i>(CRO-1610)</i>	\$	
23) Debts and Obligations owed To the Committee	<i>(CRO-1620)</i>	\$	
24) Account Transfers Within the Committee	<i>(CRO-1720)</i>	\$	
25) Administrative Support	<i>(CRO-1710)</i>	\$	\$
26) Forgiven Loans	<i>(CRO-1440)</i>	\$	\$
27) 48-Hour Notice Reports Sum	<i>(CRO-2220)</i>	\$	\$
28) Contributions to be Refunded	<i>(CRO-1215)</i>	\$	\$

Disbursements

Amendment
 Yes No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

<u>Tim Andrew for School Board</u>					
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify)		e. Election Sum to Date \$	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input 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
				\$	
				\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify)		e. Election Sum to Date \$	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input 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
				\$	
				\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify)		e. Election Sum to Date \$	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input 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
				\$	
				\$	
					\$ ϕ
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$ ϕ
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					

Contributions from Individuals

Amendment
 Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<p><i>Tim Andrew for School Board</i></p>					
<p>a. Full Name, Mailing Address & Phone (include city, state, & zip)</p> <p><i>William E Price Jr P.O. Box 5881 High Point NC 27262</i></p>		<p>b. Job Title/Profession</p> <p><i>Real Estate</i></p>		<p>d. Comments</p>	
		<p>c. Employer's Name/Specific Field</p> <p><i>SCP employer</i></p>			
				<p>e. Election Sum to Date</p> <p><i>\$ 150.00</i></p>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		<i>Check</i>		<i>05/04/2022</i>	<i>\$ 150.00</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<p><i>Kern Kopf</i></p>					
<p>a. Full Name, Mailing Address & Phone (include city, state, & zip)</p> <p><i>Kern Kopf 1 Chatham Rd Greensboro NC 27407</i></p>		<p>b. Job Title/Profession</p> <p><i>Retired</i></p>		<p>d. Comments</p>	
		<p>c. Employer's Name/Specific Field</p> <p><i>Retired</i></p>			
				<p>e. Election Sum to Date</p> <p><i>\$ 475.25</i></p>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		<i>Credit card</i>		<i>05/02/2022</i>	<i>\$ 475.25</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<p><i>Blank</i></p>					
<p>a. Full Name, Mailing Address & Phone (include city, state, & zip)</p>		<p>b. Job Title/Profession</p>		<p>d. Comments</p>	
		<p>c. Employer's Name/Specific Field</p>			
				<p>e. Election Sum to Date</p> <p><i>\$</i></p>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<p>4. Total on this page</p>					<p><i>\$ 625.25</i></p>
<p>5. Total of ALL CRO 1210s</p>					<p><i>\$ 625.25</i></p>