	port Cover neral report and committee to update information	information	, must be signed	d and sub		Amendment  Yes  No ner detailed forms.				
1. Committee Inform										
a. Full Name		_				c. ID Number				
Committee to Elect .	Ja'Nell Henry		RECE	VEL	)					
b. Mailing Address (inch	ide City, State and Zip Code)			VLL		d. Date Filed				
4830 Meadow Drive Suite 102	3		OCT 30	2024		10/30/24				
Durham, NC 27713		ii.	CEATE BOARD	A = 201 = 201		e. Phone Number				
			STATE BOARD (		ONS	9842083112				
2. Report Year	3. Period Start Date (mm/e		. Period End D nm/dd/yy)	ate	5. Treasurer Full	Name				
2024	07/01/2024		10/19/2024	4	Ricky L. Hart					
6. Type of Committe	ee (Check One)	9. Type o	f Report (	check onl	y one type of report	from one category)				
Candidate Campai	gn Party	Municipal		State/Co		Referendum				
PAC	Referendum	Or	ganizational		Organizational	Organizational				
Independent Expenditure Legal Expense Fu	Joint Fundraiser	Th	irty-five day		Quarterly	Pre-referendum				
7. Type of Fund	(if applicable, check one)	Pre	e-primary		First	Final				
Booster Fund"		Pre	e-election		Second	Supplemental Final				
Building Fund			runoff		Third	Annual				
		Sei	mi-annual Mid Year		Fourth	Special				
Other:		l H	Mid Year Semi-annual Year End Mid Year			10. Special Report Name				
		Fin	al		Year End	A OF CHAIR CONTENTION				
8. Number of Fundr	aisers this Report	Spe	ecial	F	inal					
	0		☐ Special							
11. Account Informa	ation		11. A	ccount I	nformation					
a. Financial Institution F					tution Full Name					
State Employees Cre	dit Union		PayI							
b. Purpose	c. Account Code		b. Pur			c. Account Code				
To receive contribution	00	1		eceive itions		002				
and make	d. Period Begin Balance	<del></del>	GORA	шонѕ		d. Period Begin Balance				
expenditures	\$ 0					\$ 376.29				
CEPTIFICATION										
I certify that the Com the NC General Status is complete, true and	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.  Ricky L. Hart  Printed Name of Signer  Printed Name of Signer  Printed Name of Signer									
FOR OFFICE USE OF	NLY									
Date Received:	10/30/24	En	nployee:	MA	<u>R</u> [	Delivery Method Normal Mail				
Date Postmarked	<del></del>	En	ployee.			Registered Mail Hand Delivered				
Date Scanned:	11/4/24	NEV	nployed?4	A		Electronically Filed Signer has not received				
Date Data Entere	d:	DUE	ployee:	_/_		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.

Disclosure Re	port	Cover				Í	Yes No
			nformat	ion, must be	signed and sub	ا ا omitted along with oth	
Do not use this form							
1. Committee Infor	mation	1					
a. Full Name	r 15 v 11				RECE	IVED	c. ID Number
Committee to Elect	Ja'Nell	Henry					
b. Mailing Address (incl		y, State and Zip Code)			OCT 3	0 2024	d. Date Filed
4830 Meadow Driv Suite 102	е			NC S	TATE BOARD	OF ELECTIONS	10/29/24
Durham, NC 27713				1100	IT II DOT II IE	01 2220110110	e. Phone Number
							9842083112
2. Report Year	3. Per	iod Start Date (mm/c	ld/yy)	4. Period 1 (mm/dd/yy)	End Date	5. Treasurer Full 1	Name
2024		07/01/2024			9/2024	Ricky L. Hart	
6. Type of Commit	tee (Ch	eck One)	9. Typ	e of Report	(check on	ily one type of report	from one category)
Candidate Campa	-	Party	Municip		State/C		Referendum
PAC	֓֞֞֞֝֞֞֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡	Referendum		Organizational		Organizational	Organizational
Independent	Ĩ	Joint Fundraiser		Thirty-five day		Quarterly	Pre-referendum
Expenditure  Legal Expense Fr	und		''			Quantorry	re foldidam
7. Type of Fund		olicable, check one)	1	Pre-primary	[	First	Final
"Booster Fund"	(9 чрр	incurre, check one,	H	Pre-election		Second	Supplemental Final
Building Fund			lĦ	Pre-runoff		Third	Annual
			'	Semi-annual		Fourth	Special
			П	Mid Year	.   -	Semi-annual	
Other:				Year End		Mid Year	10. Special Report Name
			Final		Year End		
8. Number of Fund	raisers	this Report		Special	Final		
	0					Special	
11. Account Inform		4			11. Account		
a. Financial Institution 1						titution Full Name	
State Employees Cr	edit Un				PayPal		
b. Purpose To receive		c. Account Code			b. Purpose To receive	· · · · · · · · · · · · · · · · · · ·	c. Account Code
contribution		00	1		donations		002
and make		d. Period Begin Balance	:				d. Period Begin Balance
expenditures		\$ 0					\$ 376.29
CERTIFICATION							
I certify that the Con	nmittee	or Fund is in compli	ance wit	h all applica	ble provisions	of Article 22A, 22B, a	& 22D-22M of Chapter 163 of
the NC General State	utes and	d that no funds are co	mmingle	ed with proh	ibited or other	non-disclosed funds. l	I further certify that this report
is complete, true and	correc	t and that I have been	trained	by the NC S	tate Board of I	Lections.	
Ricky L. Ha				- A	14 2 1		10/29/2024
		ed Name of Signer		/Si	mature of Appoin	ted Treasurer	Date
FOR OFFICE USE O	NLY				R #	A 11	National Mark of
Date Received:				Employee:	<u>IVL</u>	AIL F	Delivery Method  Normal Mail
<del></del>							Registered Mail
Date Postmarke	d:			Employee:	-NOV-	1 9 2024	Hand Delivered
T . C .				T 1	1104		Electronically Filed
Date Scanned:				Employee:	·		Signer has not received
Date Data Enter	ed:			Employee:	DURH	AM BOE	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

☐ Yes

No

 $\times$ 

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

	pe of Report		3. ID Number			
Committee to Elect Ja'Nell Henry  Third	l Quarter					
Start of Election Cycle: January 1,	)24	Total this Reporting Period	Total this Election Cycle			
4) Cash on Hand at Start		\$ 0	\$ 0			
RECEIPTS		PTYPHELE				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$			
6) Contributions from Individuals	(CRO-1210)	\$ 919.25	\$ 919.25			
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0	\$ 0			
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0	\$ 0			
9) Loan Proceeds	(CRO-1410)	\$ 0	\$ 0			
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$ 0	\$ 0			
11) Other Receipt Sources						
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0	\$ 0			
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$ 0	\$ 0			
11c) Outside Sources of Income	(CRO-1250)	\$ 0	\$ 0			
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$ 0	\$ 0			
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0	\$ 0			
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and		\$ 0	\$ 0			
EXPENDITURES		MAN STEEL				
13) Disbursements						
13a) Operating Expenditures	(CRO-1310)	\$ 0	\$ 0			
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			
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$ 0	\$ 0			
17) In-Kind Contributions	(CRO-1510)	\$ 0	\$ 0			
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and	117)	\$ 0	\$ 0			
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line	: 18)	\$ 0	\$ 0			
ADDITIONAL INFORMATION						
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0				
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0				
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$ 0				
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$ 0				
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0				
25) Administrative Support MAIL	(CRO-1710)	\$ 0	\$ 0			
26) Forgiven Loans NOV 1 9 2024	(CRO-1440)	\$ 0	\$ 0			
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0	\$ 0			
7) TO LIGHT HOUSE REPORTS BUILD	1					

		m Individuals	van \$51	Pg ) or contributions und	1 of	5 0.1205 is n	Yes	☐ No
		and Fund if applical	_	or contributions und	er \$50 ii form CR	2. ID Nun		
	ee to Elect Ja'Nell		лсу			2. 10 140	upei	
3. Contri	butor Informatio	n		Add  Rer	nove			
	me, Mailing Address	& Phone		b. Job Title/Profession	1	d. Commer	ıts	
	city, state, & zip)			Unemployed				
Beverly S 1220 Ten				c. Employer's Name/S	necific Field	1		
	ugh, NC 27278			er minproyer a rumero	pecific Field			
	3,					e. Election	Sum to Date	
						\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Gind Description	j. Date (mm/dd/y	ууу)	k. Amount	
		debit			7/20/2	!4	\$	50.00
							\$	
							\$	
3. Contri	butor Informatio	n		Add 🔲 Ren	nove			
a. Full Nar	ne, Mailing Address	& Phone		b. Job Title/Profession		d. Commen	its	
	city, state, & zip)			Self Employed				
Mark Pay				Farmer				
480 Satte	ills, NC 27541			c. Employer's Name/S				
Traidic ivi	.ms, 140 27541				e. Election Sum to Date			
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
		debit			7/23/20	124	\$	100.00
							\$	
							\$	
3. Contril	butor Informatio	n		Add  Ren	nove			
	ne, Mailing Address	& Phone		b. Job Title/Profession	l	d. Commen	its	
Eliza Gar	city, state, & zip)			Grants Manager				
	oute Center Apt 43	9		c. Employer's Name/Sp	pecific Field			
	NC 27612			ASI				
						e. Election	Sum to Date	
						\$	52.45	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
		debit			7/26/20	24	\$	52.45
							\$	
							\$	
	only this Page					\$		202.45
	of ALL CRO must be on line 6 of	-1210 Pages  Detailed Summary Page	cRO-1	(100) M	AIL	\$		

CRO-1210

NC State Board of Elections
NOV 1 9 2024

April 2007

Amendment

Cont	ributions fro	m Individuals			Pg	2	of	5	Amendme	
Use this	form to report ind	ividual contributions	over \$50	or contrib		er \$50 if fo		O 1205 is r	ot used	
		(and Fund if applica		= 1117				2. ID Nu		
Commit	tee to Elect Ja'Nell	Henry								
3. Cont	ributor Informati	on		Add [	Ren	nove				
a. Full Na	me, Mailing Address	& Phone		b. Job Title	e/Profession			d. Comme	nts	
_ `	e city, state, & zip)			Retired						
	olyn Avant									
	d Oxford Avenue			c. Employe	r's Name/Sp	ecific Field				
Las veg	gas, NV 89108							a Flastian	Sum to Date	
									Sum to Date	
								\$	25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Descript	ion	j. Date (m	m/dd/yy	уу)	k. Amoun	t
		debit					7/26/20	24	\$	25.00
									\$	
									\$	
3. Conti	ributor Informati	on		Add [	Ren	nove				
a. Full Na	me, Mailing Address	& Phone		b. Job Title	/Profession			d. Commer	ıts	
	e city, state, & zip)			Self Emp	oloyed					
Sharon '					e Provider					
	tteridge Court			c. Employe	r's Name/Sp	ecific Field				

nation		Add 🗌 R	lemove			
a. Full Name, Mailing Address & Phone			b. Job Title/Profession			
p)		Self Employed				
		Day Care Provid	er			
	c. Employer's Name	Specific Field				
				e. Election	n Sum to Date	
				\$	20.00	
de h. Form of Payment	i. In-	Kind Description	j. Date (mm/dd/	уууу)	k. Amount	
debit			7/27/	2024	\$	20.00
					\$	
					\$	
nation		Add 🗌 R	temove			
a. Full Name, Mailing Address & Phone			b. Job Title/Profession			
p)		Self Employed				
		Photographer				
r		c. Employer's Name	Specific Field	_		
				Y20 41		
				e. Election	Sum to Date	
				\$	30.00	
de h. Form of Payment	i. In-	Kind Description	j. Date (mm/dd/	уууу)	k. Amount	
debit			7/ 27/	2024	\$	30.00
					\$	
					\$	
Page			MAIL	\$		75.00
RO-1210 Pages				•		
e 6 of Detailed Summary Page	CRO-110	o) N	IOV 1 9 2024	Ф		
		NC State Board of Elec	tions			April 2007
d in the contract of the contr	dress & Phone ip)  t  dode h. Form of Payment debit  mation dress & Phone ip)  ode h. Form of Payment debit  Page CRO-1210 Pages	dress & Phone ip)  t  debit  mation dress & Phone ip)  ode h. Form of Payment i. Indebit  debit  Page  CRO-1210 Pages	dress & Phone ip)  Self Employed Day Care Provid c. Employer's Name.  Tode  h. Form of Payment debit  Mation  dress & Phone ip)  Self Employed Day Care Provid c. Employer's Name.  Self Employed Photographer c. Employed Photographer c. Employer's Name.  Tode  h. Form of Payment debit  Page  CRO-1210 Pages The formula of Payment Research Self Employed Photographer C. Employer's Name.  The formula of Payment Self Employed Photographer C. Employer's Name.  The formula of Payment Research	dress & Phone ip)  b. Job Title/Profession Self Employed Day Care Provider c. Employer's Name/Specific Field  code b. Form of Payment debit  Add Remove dress & Phone p) Self Employed Photographer c. Employer's Name/Specific Field  c. Employer's Name/Specific Field  Add Remove dress & Phone p) Self Employed Photographer c. Employer's Name/Specific Field  c. Employer's Name/Specific Field  Page CRO-1210 Pages	dress & Phone ip)  Self Employed Day Care Provider c. Employer's Name/Specific Field  c. Election \$  ode h. Form of Payment debit  Day Care Provider c. Employer's Name/Specific Field  c. Election for Self Employed Day Care Provider c. Employer's Name/Specific Field  c. Election for Self Employed Photographer c. Employed Photographer c. Employer's Name/Specific Field  e. Election for Self Employed Photographer for C. Employer's Name/Specific Field  e. Election for Self Employed Photographer for C. Employer's Name/Specific Field  e. Election for Self Employed Photographer for C. Employer's Name/Specific Field  e. Election for Self Employed Photographer for C. Employer's Name/Specific Field  e. Election for Self Employed Photographer for C. Employer's Name/Specific Field  e. Election for Self Employed Photographer for C. Employer's Name/Specific Field  e. Election for Self Employed Photographer for C. Employer's Name/Specific Field  e. Election for Self Employed Photographer for C. Employer's Name/Specific Field  e. Election for Self Employed Photographer for C. Employer's Name/Specific Field  e. Election for Self Employed Photographer for C. Employer's Name/Specific Field  e. Election for Self Employed Photographer for C. Employed For Self Employed For S	D. Job Title/Profession   D. Job Title/Profession   Self Employed

Contr	ibutions fro	m Individuals		P	g 3	of 5	Amendment Yes	No
Use this	form to report ind	ividual contributions	over \$5	0 or contributions un	der \$50 if form C	CRO 1205 is r	not used	
1. Com	nittee Full Name	(and Fund if applica	ble)			2. ID Nu	mber	
Committ	tee to Elect Ja'Nell	Henry						
3. Contr	ibutor Informati	on		Add R	emove			
a. Full Na	me, Mailing Address	& Phone		b. Job Title/Professio	n	d. Comme	nts	
(include	city, state, & zip)			Petroleum Transp	ort Driver			
	& Sherry Perry							
	yard Farm Way			c. Employer's Name/	Specific Field			
Durham,	NC 27703			CLI Transport				
						e. Election	Sum to Date	
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/	/yyyy)	k. Amount	
		debit			7/29/	2024	\$ 100	.00
							\$	
							\$	
3. Contr	ibutor Informatio	on		Add R	emove			
a. Full Nai	me, Mailing Address	& Phone		b. Job Title/Professio	n	d. Comme	ıts	
(include	city, state, & zip)			Unemployed				
Terry Ca	pers					_ 1		
	ennbrook Dr			c. Employer's Name/S	Specific Field			
Durham,	NC 27704							
						e. Election	Sum to Date	
						\$	10.90	
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Description	j. Date (mm/dd/	'уууу)	k. Amount	
		debit			7/31/	2024	\$ 10.	.90
							\$	
							\$	
3. Contr	ibutor Informatio	on		Add Re	emove			
a. Full Nar	ne, Mailing Address d	& Phone		b. Job Title/Profession	П	d. Commer	its	
	city, state, & zip)			Medical Service	Assistant			
Quashun								
	nnbrook Dr			c. Employer's Name/S				
Durham,	NC 27704			VA Medical Cent	er			
						e. Election	Sum to Date	
						\$	10.90	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/dd/	уууу)	k. Amount	
		debit			7/31/	2024	\$ 10.	.90
							\$	
							\$	

CRO-1210

4. Total only this Page

5. Total of ALL CRO-1210 Pages

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

NC State Board of Elections

April 2007

121.80

\$

\$

		m Individuals ividual contributions	over \$50			of	Yes	□ N
		(and Fund if applica				2. ID N		
Committ	tee to Elect Ja'Nell	Henry						
3. Contr	ibutor Information	on	П	Add	Remove			
	me, Mailing Address		hound	b. Job Title/Professi		d. Comme	ents	
	city, state, & zip)			Unemployed		ui Commit	CRI 645	
	d Grier-Union							
-	et Oak Way			c. Employer's Name	/Specific Field			
	stine, Fl 32095							
						e. Election	Sum to Date	
						\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i, In-k	Kind Description	j. Date (mm/dd/	уууу)	k. Amount	
		debit			8/26/	2024	\$	50.00
							\$	
							\$	
3. Contr	ibutor Informatio	on		Add R	Remove			
a. Full Nar	ne, Mailing Address &	& Phone		b. Job Title/Profession	on	d. Comme	ents	
(include	city, state, & zip)			Accounting Oper	rations Manager			
Serita Jo	nes							
	zart St Apt 416			c. Employer's Name	Specific Field			
Durham,	NC 27704			Curi				
						e. Election	Sum to Date	
	10		17.			\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	and Description	j. Date (mm/dd/	уууу)	k. Amount	
		debit			8/26/2	2024	\$	250.00
							\$	
							\$	
3. Contr	ibutor Informatio	on		Add 🗌 R	lemove			
a. Full Nan	ne, Mailing Address &	& Phone		b. Job Title/Profession	)n	d. Comme	nts	
	city, state, & zip)			PSA				
Sherry Pe								
	yard Farm Way			c. Employer's Name/	Specific Field			
Durham,	NC 27703			Duke		771 .4		
						e. Election	Sum to Date	
						\$	20.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/	уууу)	k. Amount	
		debit	1		9/14/2	0004	\$	20.00

4. Total only this Page \$ 320.00

5. Total of ALL CRO-1210 Pages
(This line must be on line 6 of Detailed Summary Page CRO-1100)

CRO-1210

NC State Board VI Jetin 2024

\$

		m Individuals	over \$5			of <u>5</u> RO 1205 is r	Amendment  Yes not used	No
		(and Fund if applica				2. ID Nu		
Committ	tee to Elect Ja'Nell	l Henry						
3. Contr	ibutor Informati	on		Add 🔲 R	emove			
	me, Mailing Address	& Phone		b. Job Title/Profession	n	d. Comme	nts	
	city, state, & zip)			CEO				
Jeremy (	Collins thBroad St			- Employed Nove	C	-		
	ston, NC 27892			c. Employer's Name/ Blackacre	specific rieig	-		
	, 110 27072			2 identition of		e. Election	Sum to Date	
						\$	200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/	уууу)	k. Amount	
		debit			10/2/2	2024	\$	200.00
							\$	
							\$	
3. Contr	ibutor Informati	on		Add R	emove			
	me, Mailing Address	& Phone		b. Job Title/Professio	n	d. Commer	nts	
(include	city, state, & zip)							
				c. Employer's Name/S	Specific Field			
						e. Election	Sum to Date	
	10					\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
							\$	
							\$	
							\$	
3. Contr	ibutor Informatio	on		Add R	emove			
	ne, Mailing Address	& Phone		b. Job Title/Professio	n	d. Commer	its	
(include	city, state, & zip)							
				c. Employer's Name/S	Specific Field			
						e. Election	Sum to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-F	(ind Description	j. Date (mm/dd/y		k. Amount	
				•			\$	
							\$	
							\$	
4. Tota	l only this Pag	e		M	A 11	\$		200.00

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5. Total of ALL CRO-1210 Pages

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

NC State Board of Elections

April 2007

919.25

\$