48 Hour Notice Use this form to report all contributions of \$1,000 or more					Pg 1 of 1 Amendment Yes V No					
Notice must be filed within 48 ho of the 1st Qrtr-Plus report period report and ends the day of the C	ours of receipt of d and ends the d Seneral Election	f contribution. The lay of the Primary a	and begins the o	ng period tay after	l begi the la	ns the ist da	e day at y of the	iter the la	st day Plus	
All 48 Hour In-Kind Contribution			and attached.							
This notice may be faxed in order. 1. Committee	er to meet the 40	o nour deadime.								
a. Fuli Name					c. ID Number					
Friends of Val Applewhite					STA-18UPFY-C-002					
b. Mailing Address (include City, State and Zip Code)					d. Report Date					
301 Hillsborough St		10/28/2022								
Ste 950 Raleigh, NC 27603-4273		e. Phone Number								
2. Contribution Informa	2. Contril	entribution Information								
a. Full Name, Mailing Address & Phone (include city, state and zip)			a. Full Name, Mailing Address & Phone (include city, state and zip)							
Karla Jurvetson 350 2nd St Ste 4 Los Altos, CA 94022-3602			NCDP - Se 220 Hillsbo Raleigh, NO	rough St						
b. Type of Contributor	b. Type of Contributor									
Political Party Other Political Committee	d, must specify (if checked, mu ecked, must sp	st specify b1)	☐ Individu ☐ Political ☐ Other P ☐ Not-for- ☐ Other S	Party olitical C Profit	omm	ittee ((if checi		t specify b1)	
b1. Type of Committee	b1. Type of Committee									
Federal County:			Federal State	al County:						
b2. Job Title/Profession	b3. Employer's Name			e/Profes	/Profession			b3. Employer's Name		
physician	self		<u></u>							
b4. Federal ID Number	c. Form of P	ayment	b4. Federa	4. Federal ID Number			c. Form of Payment			
	Credit Card					Wire Transfer				
d. Date (mm/dd/yyyy)	f. Amount		d. Date (mr	(mm/dd/yyyy) f. Amount						
10/27/2022		\$5,600.00	10/27/2022				\$280,000.00			
e. Account Code	g. Election Sum to Date		e. Account	e. Account Code			g. Election Sum to Date			
1		\$5,600.00	1				\$355,000.00			
3. Total Contributions THIS page (sum all the 2f entries on this page) 4. Total Contributions ALL Pages (if multi-page, only list on page 1)							\$285,600.00			
	ALL Pages	(if multi-page	, only list or	n page	1)			\$28	35,600.00	
CERTIFICATION I certify that the Committee or NC General Statutes and that report is complete, true, correct received no more than 48 hou this notice must also be report	no funds are co ct and that I have rs prior to this ne ed on the next s	mmingled with proi e been trained by to tice being filed. I u	hibited or other he NC State Bo understand that	non-discl ard of Ele all contri port.	osed ection bution	fund: ns. Th ns inc	s. I furth se contri sluding t	ner certify ibutions w	that this vere	
Printed Name of Signer	Sigr	lature of Appointe	d Treasurer	<u> </u>	Dat	e - 2	022			