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. Do not use this form to update information.

| terreservices was a resident of the | Managara da Nasalakan da Vallan | | 10 T S 7 T T | | | |
|--|--|--|-----------------|--------------|---------------|---------------------------|
| 1. Committee Information | v zb. Sv. sa neby do o sebu | | 1051 1021 101 | | | |
| a. Full Name | | | | | | c. ID Number |
| COMMITTEE TO ELECT | LAURA BLACKWEI | LL LINDSEY | Y | | | |
| b. Mailing Address (include (| City, State and Zip Cod | e) | | | | d. Date Filed |
| PO BOX 8133 CONCORD, NC 28027 | | | | | | 02/23/2024 |
| CONCORD, NC 26027 | | e. Phone Number | | | | |
| | | | | | 1 | |
| 2. Report Year 3. Period St | art Date (mm/dd/yy) | 4. Period | End Date (| mm/dd/yy) | 5. Treasur | er Full Name |
| | 01/01/2024 | | 02/17/2024 | | | LACKWELL LINDSEY |
| 1000000 | | | 82000 | | | |
| 6. Type of Committee (Check | | ype of Report | | | type of repo | ort from one category) |
| | | icipal | | ate/County | | Referendum |
| | AC 🔲 | Organizatio | | Organizatio | nal | ☐ Organizational |
| | egal Expense Fund | Thirty-five | | Quarterly | | ☐ Pre-referendum |
| CONTROL OF THE STATE OF THE STA | able, check one) | Pre-primary | y 🗵 | First | | ☐ Final |
| □ "Booster Fund" | | Pre-election | 1 🗆 | Second | × | ☐ Supplemental Final |
| ■ Building Fund | | Pre-runoff | | Third | | Annual Annual |
| Presidential Election Year C | andidates Fund | Semi-annua | 1 🗆 | Fourth | | ☐ Special |
| ■ NC Public Campaign Finance | ing Fund | Mid Ye | ar | Semi-annua | 1 | |
| | | Year E | nd 🔲 | Mid Ye | ar | 10. Special Report Name |
| Other: | | Final | | Year E | nd | |
| 8. Number of Fundraisers th | nis Report 🔲 | Special | | Final | | |
| 2 | | | | Special | | |
| 3. Account Information | | | 3. Accour | it Informati | on | |
| a. Financial Institution Full N | Name | | | | on Full Nam | e |
| PINNACLE BANK | | | | | | |
| b. Purpose | c. Account Code | | b. Purpose | RECEI | | . Account Code |
| CAMPAIGN FUND | The state of the s | | | IN-PER | SON | |
| CAMI AIGIVI OND | Ll | | | FEB 2 | 2024 | 4 |
| ************************************** | d. Period Begin Bala | ance | 120 2 0 2024 | | 2024 | d. Period Begin Balance |
| | | 7 THE STATE OF THE | CABARRUS COUNTY | | | |
| | \$ | | В | OARD OF E | LECTIONS | \$ |
| CERTIFICATION | | * | 24 | | | |
| I certify that the Committee | e or Fund is in complia | nce with all a | applicable | provisions | of Article 2 | 2A, 22B & 22D-22M of |
| Chapter 163 of the NC Gen | eral Statutes and that | no funds are | commingle | ed with pro | hibited or o | ther non-disclosed |
| funds. I further certify tha | | | 200 | 100 | | |
| | | D | | | 0 | o ≠ . |
| Lava Black | vell hindsay | 1 AGUST | e (b)a | kevels | Linda | 02/23/2024 |
| Printed Name o | f Signer | Sign | ature of Ap | pointed Trea | surer | Date |
| FOR OFFICE USE ONLY | 2-23-24 | | | | | |
| | 2-24-" | | | WAN | Del | ivery Method |
| Date Received: | | Emplo | yee: | 1.406.2 | | Normal Mail |
| | | | | | Ē | Registered Mail |
| Date Postmarked: | | Emplo | yee: | | - 🗖 | Hand Delivered |
| | 2-23-24 | | | WAN | | Electronically Filed |
| Date Scanned: | d-40 dy | Emplo | yee: | MULA | _ = | Licentoffically Filed |
| | | | | | | Signer has not received |
| Date Data Entered: | | Emplo | yee: | | | |
| | | | | | | mandatory training |
| Please Note: This form | cannot be used to am | nend committ | ee in forma | tion such a | s the comm | ittee address, treasurer, |
| assis | tant treasurer, custodia | an of books i | nformation | n, or accour | nt informatio | on. |
| | and the Statement of C | | | | | |

| Detailed Summary | | | | mendment Yes 🛛 No |
|--|--------------------------------|-------------------------------|-------|------------------------------|
| Use this form to summarize all disclosure reporting forms an | | | | |
| | 2. Type of Rep 2024 First Q | | 3. ID | Number |
| COMMITTEE TO ELECT LAURA BLACKWELL LINDSEY | 2024 First Q | uarter | | |
| Start of Election Cycle: January 1, | | Total this Reporting Perio | d | Total this Election Cycle |
| 4) Cash on Hand at Start | | \$ 1,068. | 30 \$ | 0.00 |
| RECEIPTS | | | | |
| 5) Aggregated Contributions from Individuals | (CRO-1205) | \$ 1,401. | 70 \$ | 1,501.70 |
| 6) Contributions from Individuals | (CRO-1210) | \$ 9,066. | 70 \$ | 11,141.70 |
| 7) Contributions from Political Party Committees | (CRO-1220) | \$ 0. | 00 \$ | 0.00 |
| 8) Contributions from Other Political Committees | (CRO-1230) | \$ 0. | 00 \$ | 0.00 |
| 9) Loan Proceeds | (CRO-1410) | \$ 0. | 00 \$ | 0.00 |
| 10) Refunds/Reimbursements to the Committee | (CRO-1240) | \$ 0. | 00 \$ | 0.00 |
| 11) Other Receipt Sources | | | | |
| 11a) Interest on Bank Accounts | (CRO-1250) | \$ 0. | 00 \$ | 0.00 |
| 11b) Contributions from Not-For-Profit Organizations | (CRO-1250) | \$ 0. | 00 \$ | 0.00 |
| 11c) Outside Sources of Income | (CRO-1250) | - // | 00 \$ | 0.00 |
| 11d) Legal Expense Fund - Other Sources | (CRO-1270) | | 00 \$ | |
| 11e) Exempt Purchase Price Sales | (CRO-1265) | | 00 \$ | 0.00 |
| (2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c, | | \$ 10,468. | | |
| EXPENDITURES | | | | , |
| 13) Disbursements | | | | |
| 13a) Operating Expenditures | (CRO-1310) | \$ 8,078. | 46 \$ | 8,285.16 |
| 13b) Contributions to Candidates/Political Committees | (CRO-1310) | \$ 0. | 00 \$ | 0.00 |
| 13c) Coordinated Party Expenditures | (CRO-1310) | \$ 0. | 00 \$ | 0.00 |
| 14) Aggregated Non-Media Expenditures | (CRO-1315) | \$ 27. | 80 \$ | 77.80 |
| 15) Loan Repayments | (CRO-1420) | \$ 0. | 00 \$ | 0.00 |
| 16) Refunds/Reimbursements from the Committee | (CRO-1320) | \$ 0. | 00 \$ | 0.00 |
| 17) In-Kind Contributions | (CRO-1510) | \$ 650. | 00 \$ | 1,500.00 |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15 | , 16 and 17) | \$ 8,756. | 26 \$ | 9,862.96 |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then sub | otract line 18) | \$ 2,780. | 20 | |
| ADDITIONAL INFORMATION | | | | |
| 20) Non-Monetary Gifts Given to Other Committees | (CRO-1330) | \$ 0. | 00 | |
| 21) Outstanding Loans (incl. ones from other campaigns) | (CRO-1430) | \$ 0. | 00 | |
| 22) Debts and Obligations owed by the Committee | (CRO-1610) | \$ 0. | 00 | |
| 23) Debts and Obligations owed to the Committee | (CRO-1620) | \$ 0. | 00 | |
| 24) Account Transfers Within the Committee | (CRO-1720) | \$ 0. | 00 | |
| 25) Administrative Support | (CRO-1710) | \$ 0. | 00 5 | 0.00 |
| 26) Forgiven Loans | (CRO-1440) | \$ 0. | 00 5 | 0.00 |
| 27) 48-Hour Notice Reports Sum | (CRO-2220) | \$ 0. | 00 5 | 0.00 |
| 28) Contributions to be Refunded | (CRO-1215) | \$ 0. | 00 5 | \$ 0.00 |

| Amendmo | ent |
|---------|------|
| □ Ves | X No |

Optional form used to report NC Contributions From Individuals of \$50 or less

| CONTRACTOR OF THE PROPERTY OF THE PARTY | | to a year consequent to the second | From Individuals of \$ | | | T | |
|---|---|------------------------------------|------------------------|--------------------|----------|---------|------------|
| | | Fund if applicable) | | | и. ID N | lumber | |
| | | AURA BLACKWEL | L LINDSEY | | | | |
| 3. Contribut a. Amend | tor Information | c. Form of Payment | d. In-Kind Description | a Data (m m /d-1/- | (NININA) | f. Amou | |
| a. Amend | b. Account Code | | a. in-Kina Description | e. Date (mm/dd/y | уууу) | I. Amou | п |
| Remove | L1 | Cash | | 01/03/2024 | 1 | \$ | 50.00 |
| ☐ Add ☐ Remove | L1 | Electric Funds Tran | | 01/31/2024 | 1 | \$ | 47.70 |
| Add Remove | Ll | Electric Funds Tran | | 02/05/2024 | 1 | \$ | 47.70 |
| Add Remove | Ll | Cash | | 01/27/2024 | 1 | \$ | 50.00 |
| Add Remove | Ll | Electric Funds Tran | | 01/31/2024 | 1 | \$ | 47.70 |
| Add Remove | L1 | Electric Funds Tran | | 01/15/2024 | 1 | \$ | 47.70 |
| Add Remove | Ll | Electric Funds Tran | | 01/31/2024 | 1 | \$ | 47.70 |
| Add Remove | L1 | Check | | 01/20/2024 | 4 | \$ | 50.00 |
| Add Remove | L1 | Electric Funds Tran | | 01/21/2024 | 4 | \$ | 47.70 |
| Add Remove | L1 | Electric Funds Tran | | 01/31/2024 | 4 | \$ | 47.70 |
| Add | L1 | Cash | | 02/02/2024 | 4 | \$ | 50.00 |
| Remove Add | L1 | Electric Funds Tran | | 01/31/2024 | 4 | \$ | 47.70 |
| Remove Add Remove | Ll | Electric Funds Tran | | 01/13/2024 | 4 | \$ | 47.70 |
| Add Remove | L1 | Cash | | 01/27/2024 | 4 | \$ | 50.00 |
| Add Remove | Ll | Electric Funds Tran | | 01/12/2024 | 4 | \$ | 47.70 |
| Add Remove | Ll | Electric Funds Tran | | 01/14/2024 | 4 | \$ | 47.70 |
| Add Remove | L1 | Electric Funds Tran | | 01/16/2024 | 4 | \$ | 47.70 |
| Add Remove | L1 | Cash | | 01/27/2024 | 4 | \$ | 50.00 |
| Add Remove | L1 | Electric Funds Tran | | 01/18/2024 | 4 | \$ | 47.70 |
| Add Remove | Ll | Electric Funds Tran | | 01/16/2024 | 4 | \$ | 47.70 |
| Add Remove | L1 | Cash | | 01/30/2024 | 4 | \$ | 50.00 |
| Add Remove | L1 | Cash | | 01/27/2024 | 4 | \$ | 50.00 |
| Add Remove | LI | Electric Funds Tran | | 01/27/2024 | 4 | \$ | 48.60 |
| 4. Total o | 4. Total only this Page | | | | | | \$1,116.40 |
| | f ALL CRO-12 | | CRO-1100) | | \$ | | \$1,401.70 |
| | (This line must be on line 5 of Detailed Summary Page CRO-1100) RO-1205 NC State Board of Elections | | | | | | April 2007 |

| | | | | | Amendm | |
|--|-------------|--------|----|---|--------|------|
| Aggregated Contributions from Individuals | Page | 2 | of | 2 | ☐ Yes | X No |
| Optional form used to report NC Contributions From Individua | als of \$50 | or les | SS | | | |

| 1. Committe | Committee Full Name (and Fund if applicable) | | | | | | 2. ID Number | | |
|--|--|---------------------|------------------------|----------------|--------|---------|--------------|--|--|
| COMMITT | EE TO ELECT L | AURA BLACKWEL | LL LINDSEY | | | | | | |
| 3. Contribut | tor Information | | | | | | | | |
| a. Amend | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd | /уууу) | f. Amou | nt | | |
| Add Remove | L1 | Electric Funds Tran | | 01/27/2024 | | \$ | 48.60 | | |
| ☐ Add ☐ Remove | L1 | Cash | | 01/03/202 | 24 | \$ | 20.00 | | |
| Add Remove | L1 | Check | | 01/03/2024 | | \$ | 25.00 | | |
| ☐ Add ☐ Remove | L1 | Electric Funds Tran | | 01/19/202 | 24 | \$ | 47.70 | | |
| ☐ Add ☐ Remove | L1 | Electric Funds Tran | | 02/02/202 | 24 | \$ | 48.60 | | |
| ☐ Add ☐ Remove | LI | Electric Funds Tran | | 01/20/202 | 24 | \$ | 47.70 | | |
| ☐ Add ☐ Remove | LI | Electric Funds Tran | | 01/26/2024 | | \$ | 47.70 | | |
| 4. Total only this Page | | | | | \$ | | \$285.30 | | |
| 5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100) | | | | | \$ | | \$1,401.70 | | |

CRO-1205

NC State Board of Elections

April 2007

| | | | | ent | |
|----|-----|----|----|-------|------|
| Pg | _1_ | of | 13 | ☐ Yes | X No |

| | | (and Fund if applicabl | | | | 2.1 | D Numbe | | |
|---|--|--|-----------------------------------|--|----------------------|-------------------------|-------------|------------|--|
| COMM | IITTEE TO ELE | CT LAURA BLACK | WELL LINDS | EY | | | | | |
| 3. Cont | ributor Informati | on | | Add 🔲 R | emove | | | | |
| THE SECTION AND THE | ame, Mailing Ad | Ministration of the property of the party of | raje i i susini i | b. Job Title/Profession | | | d. Comments | | |
| | de city, state, & z | ip) | | SELF EMPLOYEED | | | | | |
| | IE ARSTARK AHN SCOTT RI | D | | c. Employer's | Name/Specific Field | | | | |
| | T PLEASANT, 1 | | | REALTOR | | L | | n e | |
| | | | | Desired Court States | | | dection Su | m to Date | |
| | = | | | | | \$ | | 150.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Des | j. Date (mm/dd/yyyy | | | k. Amour | ıt | |
| | Ll | Check | | | 01/03/2024 | | \$ | 150.00 | |
| | | | | | | | \$ | | |
| | | | | | | | \$ | | |
| 3. Conti | ributor Informati | on | | Add 🔲 R | emove | | | | |
| | lame, Mailing Add | | | b. Job Title/P | rofession | d. (| Comments | | |
| - 25 | de city, state, & z | ip) | | RETIRED | | | | | |
| | BABB | | c. Employer's Name/Specific Field | | | | | | |
| 590 WESTWOOD DR KANNAPOLIS, NC 28081 | | | | RETIRED | | | | | |
| | the second secon | | | | | e. Election Sum to Date | | | |
| | | | | | | \$ | | 250.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Des | cription | j. Date (mm/dd/yyyy) | | k. Amour | ıt | |
| | Ll | In-Kind | EVENT FOOI | D | 01/03/2024 | | \$ | 250.00 | |
| | | | | | | | \$ | | |
| | | | | | | | \$ | | |
| STATIS SOCIETIES OF | ributor Informati | Books, and the first state of the state of t | | The state of the s | emove | | | | |
| | ame, Mailing Add de city, state, & z | | | b. Job Title/P | | d. (| Comments | | |
| | AM BAMFORD | ı <i>p)</i> | | MANAGER | | | | | |
| | IRCHFIELD LN | | | c. Employer's | Name/Specific Field | | | | |
| CONC | ORD, NC 28027 | | | MEDCOST | | 2 1 | Testion C. | ım to Date | |
| | | | | | | | gection St | | |
| | | | | | | \$ | | 170.70 | |
| f. Prior | | h. Form of Payment | i. In-Kind Des | cription | j. Date (mm/dd/yyyy) | V | k. Amour | ıt | |
| | LI | Electric Funds Tran | | | 01/28/2024 | | \$ | 95.70 | |
| | | | | × 8 | | | \$ | | |
| | | | | | | | \$ | | |
| 4. Tota | al only this Pa | ge | | | | \$ | | 495.70 | |
| | al of ALL CR | O-1210 Pages 6 of Detailed Summary F | Page CRO-1100) | | | \$ | | 9,066.70 | |

| | | | | Amendment | | | |
|------|---|----|----|-----------|------|--|--|
| Pg _ | 2 | of | 13 | ☐ Yes | X No | | |

| 1. Com | mittee Full Name | (and Fund if applicabl | e) | | | 2.1 | D Numbe | r |
|--|---|------------------------|----------------|--|------------------------|------|------------|------------|
| COMM | NITTEE TO ELE | CT LAURA BLACK | WELL LINDS | EY | | | | |
| 3. Cont | ributor Informati | on | | Add 🔲 I | Remove | | | |
| | Name, Mailing Ado | | 11-11 | b. Job Title/ | Profession | d. C | Comments | |
| | ide city, state, & z | ip) | | POSTAL C | ARRIER | | | |
| AJ BRO PO BO | | | | c. Employer | 's Name/Specific Field | 1 | | |
| | ORD, NC 28026 | į. | | USPS | | | | |
| | | | | | | e. E | lection Su | ım to Date |
| V. | | | | | | \$ | | 500.00 |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Des | cription | j. Date (mm/dd/yyyy) | | k. Amoui | nt |
| | L1 | Check | | | 01/07/2024 | | \$ | 250.00 |
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| | ributor Informati | | | TOTAL STATE OF THE | Remove | | | |
| | lame, Mailing Add | | | b. Job Title/ | Profession | d. (| Comments | |
| | de city, state, & z | ip) | | DOCTOR | | | | |
| GRANT CAMPBELL 4647 OWL CREEK LN CONCORD, NC 28027 | | | | c. Employer's Name/Specific Field | | | | |
| | | | | AUTIUM | • | | | |
| | | | | | | e. I | dection Su | ım to Date |
| | | | | | | \$ | | 200.00 |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Des | cription | j. Date (mm/dd/yyyy) |) | k. Amou | ıt |
| | L1 | Check | | | 01/03/2024 | | \$ | 200.00 |
| | | | 3 | | | | \$ | |
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| | lame, Mailing Add | | | b. Job Title/ | | d. (| Comment | 1 |
| | de city, state, & z | 1р) | | _PRODUCT | ION MANAGER | | | |
| | ER CARROLL RSHDALE AVE | SW | | c. Employer | 's Name/Specific Field | 1 | | |
| | ORD, NC 28025 | | | COMPLET | TE DESIGN AND | _ | | |
| | | | | PACKAGI | NG | e. I | dection S | um to Date |
| | | | | | | \$ | | 95.70 |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Des | eription | j. Date (mm/dd/yyyy) |) | k. Amou | nt |
| | Ll | Electric Funds Tran | | | 01/31/2024 | | \$ | 95.70 |
| | | | | | | | \$ | |
| | | | | | | | \$ | |
| 4. Tota | al only this Pa | ge | | | | \$ | | 545.70 |
| 1-4-31 February 24 10-31 | 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | | | 9,066.70 |

| | | | Amendment | | | | | |
|----|---|----|-----------|-------|------|--|--|--|
| Pg | 3 | of | 13 | ☐ Yes | X No | | | |

| 1. Com | mittee Full Name | (and Fund if applicab | le) | | | 2, 1 | D Number | |
|--------------------------------|-------------------------------|------------------------------------|-----------------|---|----------------------|------|-------------|-----------------|
| COMM | IITTEE TO ELE | CT LAURA BLACK | WELL LINDS | EY | | | | |
| 3. Cont | ributor Informati | on | | Add R | emove | | | |
| a. Full N | lame, Mailing Ad | dress & Phone | | b. Job Title/Profession | | | d. Comments | |
| | de city, state, & z | ip) | | RETIRED | | | | |
| | CHANDLER ILTON LAKE R | OAD | | c. Employer's | Name/Specific Field | ł | | |
| | APOLIS, NC 28 | | | RETIRED | | | | |
| 121111 | 111 0215, 110 20 | 003 | | TETHES | | e. F | lection Su | m to Date |
| | | | | | | \$ | | 200.00 |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Des | Description j. Date (mm/dd/yyyy | | | k. Amoun | t |
| П | Ll | Check | | | 01/03/2024 | | \$ | 200.00 |
| | | | × | | | | \$ | |
| | | | | | | | \$ | |
| | ributor Informati | | | Add 🗆 R | emove | Y. | | |
| | ame, Mailing Ad | | | b. Job Title/P | rofession | d. (| Comments | |
| (inclu | de city, state, & z | ip) | | APPLICATI | ON ENGINER | | | |
| CHRIS COLTON 5409 BOXCAR LN | | | | P 1 | N (0 ! C . T: .1.1 | | | |
| | | | | | Name/Specific Field | 1 | | |
| CONC | ORD, NC 28027 | | | RACING O | PTICS | e. I | dection Su | m to Date |
| | | | | | | | | Circonoctolinos |
| | | | | | | \$ | | 150.00 |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Des | eription | j. Date (mm/dd/yyyy) |) | k. Amoun | t |
| | LI | Check | | | 01/30/2024 | | \$ | 150.00 |
| | | | | | | | \$ | |
| П | | | | | | | \$ | |
| 3. Conti | ibutor Informati | on | | Lighter William III - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 | emove | | | |
| | lame, Mailing Add | | | b. Job Title/P | rofession | d. (| Comments | |
| | de city, state, & z | ip) | | WELDER | | | | |
| | DUNLAP | A CIE | | c Employer's | Name/Specific Field | ┨ | | V |
| | ATERBURY PLA GON, NC 27292 | | | | R MACHINE | ١. | | |
| LEAIN | GON, NC 27292 | 2 | | FLETCHER | WIACHINE | e. I | dection Su | m to Date |
| | | | | | | \$ | | 100.00 |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Des | cription | j. Date (mm/dd/yyyy) |) | k. Amour | t |
| | L1 | Credit Card | | | 01/27/2024 | | \$ | 100.00 |
| | | | | | | | \$ | |
| | | | | | | | \$ | |
| 4. Tota | al only this Pa | ge | | | | \$ | | 450.00 |
| 5. Tota | al of ALL CR | O-1210 Pages 6 of Detailed Summary | Paga CRA 1100 | | | \$ | | 9,066.70 |
| I mis t | me musi de un ime | o of Detuned Summary | " uge ChO-1100) | | | 8 | | |

| | | | | Amendme | ent |
|------|---|----|-----|---------|------|
| Pg . | 4 | of | 13_ | ☐ Yes | X No |

| 1. Com | nittee Full Name | (and Fund if applicabl | e) | | | 2. I | D Number | |
|------------------------------|---|---|----------------|-------------------------|------------------------|----------|-------------|-----------|
| COMM | IITTEE TO ELE | CT LAURA BLACK | WELL LINDS | EY | | | | |
| 3. Cont | ributor Informati | on | | Add 🔲 R | Remove | | | |
| Denes and the | lame, Mailing Ado | | | b. Job Title/l | Profession | d. C | comments | |
| | de city, state, & z | | | Financial Advisor | | | | |
| | I ECHEVARRIA wy 49 south | | | c. Employer' | s Name/Specific Field | İ | | |
| | ISBURG, NC 28 | 075 | | СР | | | | |
| | | | | | | e. E | lection Su | m to Date |
| | | | | | | \$ | | 95.70 |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Des | cription | j. Date (mm/dd/yyyy) | • | k. Amount | t . |
| | L1 | Electric Funds Tran | | | 01/12/2024 | | \$ | 95.70 |
| | | | | N. State Con- | | | \$ | |
| | | | | | | | \$ | |
| 3. Conti | ributor Informati | on | | Add 🗆 F | Remove | | | |
| | lame, Mailing Ado | | | b. Job Title/ | Profession | d. C | Comments | |
| (include city, state, & zip) | | | | SELF EML | OYEED | | | |
| | / EDWARDS ATBREAK RID | CE | | c. Employer' | s Name/Specific Field | 1 | | |
| | APOLIS, NC 28 | | | TAX PREF | | L | | |
| | | | | | | e. E | lection Su | m to Date |
| | | | | | | \$ | | 400.00 |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Des | cription | j. Date (mm/dd/yyyy) | | k. Amoun | t |
| | Li | Check | | | 01/30/2024 | | \$ | 200.00 |
| | LI | Check | | | 02/06/2024 | | \$ | 200.00 |
| | | | | | | | \$ | |
| | ributor Informati | | | Devotores III E | Remove | 1. | | |
| | lame, Mailing Add de city, state, & zi | | | b. Job Title/Profession | | d. C | Comments | |
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| | | | | Amendm | ent |
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| Pg | 5 | of | 13_ | ☐ Yes | X No |

| 1. Comr | nittee Full Name | (and Fund if applicable | e) | | | 2. I | D Numbe | |
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Pg 6 of 13 Amendment Yes No

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| 1. Com | nittee Full Name | (and Fund if applicabl | (e) | | 建设备的公司 | 2. I | D Numb | ær |
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| 1. Com | mittee Full Name | (and Fund if applicabl | e) | | | 2.1 | D Numb | er |
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Pg 10 of 13 Amendment Ves No

| 1. Com | mittee Full Name | (and Fund if applicabl | e) | | | 2. I | D Number | |
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Pg 12 of 13 Amendment No

| Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not | not used | 205 is no | 1205 | (0) | CR | form |) if · | \$50 | der! | une | itions | contribu | or. | - \$50 | over | utions | contrib | idual | indiv | report | form to | e this | Isi |
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| 1. Com | mittee Full Name | | 2. I | D Number | | | | |
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| COMN | IITTEE TO ELE | CT LAURA BLACK | WELL LINDS | EY | | | | |
| 3. Cont | ributor Informati | on | | Add 🔲 Rei | nove | | | |
| | Name, Mailing Ado | | | b. Job Title/Pro | ofession | d. C | Comments | |
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| | TURNER LISTER AVE S' | N/ | | c. Employer's I | Name/Specific Field | | | |
| | ORD, NC 28027 | | | DUKE ENER | | | | |
| CONC | OKD, NC 28027 | | | DOKE ENER | KG I | e. E | Dection Sun | n to Date |
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| 3. Cont | ributor Informati | on . | | Add Ren | move | | | |
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| 3. Conti | ributor Informati | on | | Add Rei | nove | | | |
| | ame, Mailing Ado | | | b. Job Title/Pro | ofession | d. C | Comments | |
| | de city, state, & z | ip) | | OWNER | | | | |
| | Г WHICHEL OMERSET LAN | Е | | c. Employer's ! | Name/Specific Field | | | ļ |
| Se 100,000 101450 | SBURG, NC 28 | | | WOBO WAL | LET | | | |
| | | | | Mary Saucenting Professional | | e. E | Dection Sur | n to Date |
| | | | | | } | \$ | | 500.00 |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Des | cription | j. Date (mm/dd/yyyy) | (| k. Amount | |
| | LI | In-Kind | DONATED R | AFFLE ITEM | 01/03/2024 | | \$ | 200.00 |
| | Ll | Check | | | 01/30/2024 | | \$ | 300.00 |
| | | | | | | | \$ | |
| 4. Tota | al only this Pa | ge | | | | \$ | | 893.00 |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | \$ | | 9,066.70 | |
| | | | 3 1.00) | | | d. | | |

| ~ | | o2 ●: | • | TOTAL 100 | erne we |
|-----|-------|--------|------|-----------|---------|
| Con | tribi | itions | trom | Indiv | iduals |

Pg 13 of 13 Amendment Yes No

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

| 1. Com | nittee Full Name | 2.1 | ID Numbe | er | | | | |
|--|---------------------|---------------------|----------------|-----------------------------------|----------------------|-------------|-----------|------------|
| COMM | IITTEE TO ELE | CT LAURA BLACK | WELL LINDS | EY | | | | |
| 3. Conti | ributor Informati | on | | Add □ Re | move | | | |
| a. Full N | ame, Mailing Ad | dress & Phone | | b. Job Title/Pr | ofession | d. Comments | | |
| (inclu | de city, state, & z | ip) | | CABARRUS | COUNTY | | | |
| ARTH | JR WHITTAKE | R | | SCHOOLS | | | | |
| 30102 | WESTRIDGE C | Γ | | c. Employer's Name/Specific Field | | | | |
| ALBEN | MARLE, NC 280 | 001 | | TRANSPORTATION | | | | |
| | | | | | | e. I | Jection S | um to Date |
| | | | | | | \$ | | 143.70 |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Des | cription | j. Date (mm/dd/yyyy) | | k. Amou | nt |
| | L1 | Electric Funds Tran | | | 02/05/2024 | | \$ | 143.70 |
| | | | | | | | \$ | |
| | | | | | | | \$ | |
| 4. Tota | al only this Pa | ge | | 1 | | \$ | | 143.70 |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | | \$ | | 9,066.70 |

CRO-1210

NC State Board of Elections

April 2007

| | | | | Amenam | ent |
|---------------|------|----|---|--------|------|
| Disbursements | Pg1_ | of | 4 | ☐ Yes | X No |
| | | | | | |

| 1. Committee Fu | ıll Name (and Fund i | f applicable) | | | | | | 2. ID Nu | mber | |
|--------------------|-------------------------------------|----------------------|----------|-----------------|---------------|-----------------------|--------|------------|--------------|------|
| COMMITTEE | TO ELECT LAURA | BLACKWELL | LINDS | EY | | | | | | |
| 3. Type of Disbu | rsement (Please | use separate CRO |)-1310 | forms for each | i type | of Disbu | rseme | nt.) | | |
| Operating Exp | | ibutions to Candidat | | | | | | | xpenditures | |
| 4. Payee Inform | ation | | | Add \square | Remo | ove | | | 。 | |
| | ailing Address & Pho | one | | b. Coordinate | d Con | mittee Na | ım e | d. Com m | ents | |
| (include city, sta | | | | | | | | | | |
| EAGLE GUN | | | | | | | | | | |
| 2791 ROBERTA | A CHURCH RD | | | c. Level Regist | | | | | | |
| CONCORD, NO | 28075 | | | ☐ Federal | Ē | County: | | ¥** | 0 | |
| | | | | ☐ State | L | Municip | anty: | e. Electio | on Sum to Da | ite |
| | | | | | | | | \$ | 1,000 | 0.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date | (mm/dd/yyyy) | j. Am | ount | k. Re | quired Re | emarks | |
| LI | Debit Card | 0 | 0 | 1/27/2024 | \$ | 1,000.00 | RAF | FLE PRI | ZE | |
| | | | | | \$ | | | | | |
| 4. Payee Informa | ation | TEAN STREET | П | Add \square | Rem | ove | | | | |
| | ailing Address & Pho | one | | b. Coordinate | TOWNSON STATE | Selling A. L. III-III | ım e | d. Comm | ents | |
| (include city, sta | | | | | | | | | | |
| STAPLES INC | | | | | | | | | | |
| 1480 CONCOR | D PKWY N | | | c. Level Regis | tered | A | | | | |
| CONCORD, NO | 28025 | | | Federal | Ē | County: | | 5 | g , | |
| | | | | State | | Municip | anty: | e. Bectio | on Sum to Da | ite |
| | | | | | | | | \$ | 129 | 80.6 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date | (mm/dd/yyyy) | j. An | ount | k. Re | quired R | emarks | |
| L1 | Debit Card | В | 0 | 1/02/2024 | \$ | 69.97 | RAF | FLE TIC | CKETS | |
| L1 | Debit Card | В | 0 | 1/22/2024 | \$ | 59.11 | PAL | M CARI | OS | |
| 4. Payee Informa | ation | | | Add 🔲 | Rem | ove | | | | |
| | iling Address & Pho | one | | b. Coordinate | d Con | nmittee Na | ame | d, Comm | ents | |
| (include city, sta | te, & zip) | | | | | | | | | |
| ANEDOT INC. | | | | | 127 | (0 15: | | | | |
| | ON AVE SUITE 106 | ó | | c. Level Regis | | (Specify) County: | | J | | |
| BATON ROUG | E, LA 70808 | | | Federal State | - 1 | | | e Hecti | on Sum to Da | ıfe |
| | | | | state | | withintelp | anty. | | | |
| | | | | | | | | \$ | 113 | 5.90 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date | (mm/dd/yyyy) | j. An | ount | k. Re | quired R | emarks | |
| Li | Electric Funds Tran | О | 02 | 2/05/2024 | \$ | 115.90 | BAN | IK FEES | | |
| | | | | | \$ | | | | | |
| 5. Total only this | s Page | | | | | | | \$ | 1,24 | 1.98 |
| | CRO-1310 Pages | | | | | | | | 18140 | |
| | n line 13a of Detailed S | Summary Page CRO. | -1100 it | Operatino Expe | nses) | | | | 6.6= | |
| | n line 13b of Detailed S | | | | | /Political C | omm) | \$ | 8,07 | 8.46 |
| | n line 13c of Detailed S | | | | | | | | | |
| 7. Purpose Co | des (List detailed | expenditure code | in (h.) | above) | | | | | | |
| A* - Media | B* - Printin | g | | undraising | | | | her Cand | | |
| E - Salaries | F* - Equipme | ent | | litical Party | | | - | | Office Exper | |
| I - Postage | J - Penaltie | S | K* - C | Office Expense | s | Q* - D | onatio | on to Leg | al Expense l | Fund |
| O* Other | Control of the second second second | Name of the section | - | | | | | | | |
| * Codes require | e detailed explanatio | n in required ren | arks f | ield (k) | | | u W A | | | 2000 |

| - | | | | | 2 |
|-----|------|-----|----|-----|---|
| Dis | hiii | rse | me | ent | 2 |

| | | | | Amendm | ent |
|----|---|----|---|--------|------|
| Pg | 2 | of | 4 | ☐ Yes | X No |

| 1. Committee Fu | ıll Name (and Fund i | f applicable) | | | | | wite (| 2. ID Nu | mber |
|--|--|-----------------------|---|-----------------|---------------|-------------------|---------|------------|-----------------|
| COMMITTEE | TO ELECT LAURA | BLACKWELL | LINDS | EY | | | | | |
| 3. Type of Disbu | rsement (Please | use separate CRO | 0-1310 | forms for each | typ | e of Disbur | seme | nt.) | |
| X Operating Exp | enses | ibutions to Candidat | es/Polit | ical Committees | | Coo | rdinate | ed Party E | cpenditures |
| 4. Payee Informa | ation | | | Add \square | Rem | ove | | | A CONTRACTOR |
| a. Full Name, Ma | ailing Address & Pho | one | | b. Coordinate | d Cor | nmittee Na | me | d. Comm | ents |
| (include city, sta | te, & zip) | | | | | | | | |
| 2 GALS KITCH | IEN & CATERING | | | | | | | | |
| 80 Union St S | | | | c. Level Regist | | | | | |
| CONCORD, NO | 28025 | | | Federal | | County: | | F9 | C D . |
| | | | | State | | Municip | anty: | e. Mectio | n Sum to Date |
| N. | | | | | | | | \$ | 200.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date | (mm/dd/yyyy) | j. Aı | nount | k. Re | quired Re | marks |
| L1 | Debit Card | О | 0 | 1/19/2024 | \$ | 200.00 | EVE | NT SPA | CE RENTAL |
| | | | | | \$ | | | | |
| 4. Payee Informa | ation | | | Add \square | Rem | iove | - 7500 | | |
| | ailing Address & Pho | one | | b. Coordinated | TORK ASSESSED | | me | d. Comm | ents |
| (include city, sta | | | | | | | | | |
| | IEN & CATERING | | | | | | | | |
| 80 Union St S | ibi, a cirrbiano | | | c. Level Regist | | | | | |
| CONCORD, NO | 28025 | | | ☐ Federal | | County: | 1 | | |
| 2 | | | | State | | Municip | ality: | e. Electio | n Sum to Date |
| | | | | | | | | \$ | 200.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date | (mm/dd/yyyy) | j. Ar | nount | k. Re | quired Re | marks |
| L1 | Debit Card | O | 0 | 1/03/2024 | \$ | 200.00 | EVE | NT SPA | CE RENTAL |
| | | | | | \$ | | - | | |
| 4. Payee Informa | ation | | | Add \square | Ren | nove | | | |
| STREET, STREET | iling Address & Pho | one | | b. Coordinate | d Co | mmittee Na | me | d. Comm | ents |
| (include city, sta | A | | | | | | | | |
| CAMERON OU | | | | | | | | | |
| | 'S VINEYARD RD | | | c. Level Regis | te re d | 35000 | | | |
| YORK, SC 297 | 45 | | | ☐ Federal | | County: | | | |
| | | | | State | | Municip | ality: | e. Electio | n Sum to Date |
| | | | | | | | | \$ | 1,800.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date | (mm/dd/yyyy) | j. Aı | nount | k. Re | quired Re | marks |
| L1 | Check | A | 02 | 2/13/2024 | \$ | 1,800.00 | DIG | ITAL BII | LBOARD |
| | | - | | | \$ | | | | |
| 5 Total auto this | Dan | | NE 400 L | | Aller | | | \$ | 2,200.00 |
| 5. Total only this | | | | | | | | Ф | 2,200.00 |
| | CRO-1310 Pages | | | | | | | | |
| | n line 13a of Detailed S | 5 (5 | | | | - /n - !!-! I - C | V | \$ | 8,078.46 |
| 7 3 | n line 13b of Detailed S n line 13c of Detailed S | | 75/ | | | | omm) | | |
| | des (List detailed | restance and a second | | | | | | | |
| A* - Media | B* - Printin | | 100000000000000000000000000000000000000 | undraising | | D-To | Anotl | her Candi | date |
| E - Salaries | F* - Equipme | | | litical Party | | | | | Office Expenses |
| I - Postage | J - Penaltie | | | Office Expenses | s | | _ | | al Expense Fund |
| O* Other | - AND THE PARTY OF | | | | | | | | |
| * Codes require | detailed explanatio | n in required ren | narks f | ield (k) | | | | | |

| Dis | hiii | 192 | me | ntc |
|-----|------|-----|----|-----|

| | | | | Amen | dment | |
|----|----|----|----|------|-------|----|
| Pg | 3_ | of | 4_ | □ Ye | es 🛚 | No |

| 1. Committee Fi | ull Name (and Fund i | f applicable) | | | | | 2. ID Nu | mber |
|-------------------------------------|--|-------------------|------------------------|------------|-----------------------|------------|-------------|-----------------|
| COMMITTEE | TO ELECT LAURA | BLACKWELL | LINDSEY | | | | | |
| 3. Type of Disbu | rsement (Please) | use separate CR(| 0-1310 forms for ea | ch tvpe | of Disbu | rseme | nt.) | |
| Operating Exp | | | tes/Political Committe | | | | | xpenditures |
| 4. Payee Inform | | | ☐ Add ☐ | Remo | ve | | | |
| | ailing Address & Ph | one | b. Coordina | ted Com | mittee Na | am e | d. Comm | ents |
| (include city, sta | te, & zip) | | | | | | | |
| MINUTEMAN | PRESS | | | | Parce Separate | | | |
| 400-50 MCGIL | | | c. Level Reg | | | | ē. | |
| CONCORD, N | C 28027 | | ☐ Federal ☐ State | - | County: | | a Floatic | n Sum to Date |
| | | | LI State | | _ iviuiiicij. | anty. | | n Sum to Date |
| | | | | | | | \$ | 555.56 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyy) | y) j. Am | ount | k. Re | quired Re | marks |
| L1 | Debit Card | В | 02/06/2024 | \$ | 88.35 | LAP | EL STIC | KERS |
| LI | Debit Card | В | 02/07/2024 | \$ | 178.60 | PAL | M CARD | os . |
| 4. Payee Inform | ation | | ☐ Add ☐ | Remo | ve | | 型 500 加 | |
| | ailing Address & Pho | one | b. Coordina | 1100000000 | 2.30.45) = \1. H | am e | d. Comm | ents |
| (include city, sta | | _ | | 20000000 | | | - Incontinu | |
| MINUTEMAN | | | | | | | | |
| 400-50 MCGIL | | | c. Level Reg | | 15100 | | | |
| CONCORD, NO | | | Federal | | County | | | |
| | | | ☐ State | | Municip | ality: | e. Electio | n Sum to Date |
| | | | 1 | | | | \$ | 555.56 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyy | y) j. Am | ount | k. Re | quired Re | marks |
| L1 | Debit Card | В | 02/14/2024 | \$ | 288.61 | PAL | M CARE | OS |
| | | | | \$ | | | | |
| 4. Payee Inform | ation | | ☐ Add ☐ | Remo | ve | | | |
| | ailing Address & Pho | one | b. Coordina | ted Com | mittee N | am e | d. Comm | ents |
| (include city, sta | te, & zip) | | | | | | | |
| 247 SIGNS | | | | | · · · · | | | |
| N.S. W. MARKET MARKET | STAL LAKE ST. #1 | .00 | c. Level Reg | istered (| Specify) County | | | |
| ORLANDO, FL | . 32806 | | State | F | <u> </u> | | e. Electic | on Sum to Date |
| | | | LI State | | _ manion | anty. | | |
| | | | | | | | \$ | 3,000.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyy | y) j. Am | ount | k. Re | quired Re | emarks |
| L1 | Debit Card | В | 01/02/2024 | \$ 3 | ,000.00 | SIG | NS | |
| | | | | \$ | | | | |
| E Total only thi | Doga | | | | | 10.00 (24) | ¢ | 2 555 56 |
| 5. Total only this | | | | | | ALL STATE | \$ | 3,555.56 |
| | CRO-1310 Pages | | | | | | | |
| | n line 13a of Detailed S | 5 5 | | | Dollar - 1 C | Ya see | \$ | 8,078.46 |
| | n line 13b of Detailed S n line 13c of Detailed S | | | | | | | |
| NAME OF THE OWNER, OF THE OWNER, OF | des (List detailed | | | | i i jalen eli Lyke | | | |
| A* - Media | B* - Printin | | C* - Fundraising | | D - To | Anot | her Cand | idate |
| E - Salaries | F* - Equipm | | G - Political Party | | | | | Office Expenses |
| I - Postage | J - Penaltie | | K* - Office Expens | ses | Q* - D | onatio | on to Leg | al Expense Fund |
| O* Other | Non-molecularity management | | | | | | | |
| * Codes require | e detailed explanatio | n in required ren | narks field (k) | | | | | |

| - | | | | | | dane. |
|---|----|-----|-----|------|----|-------|
| | 10 | hII | rse | m | OH | to |
| v | 12 | υu | 136 | 7111 | CI | 113 |

| | | | | Amendm | ent |
|------|---|----|----|--------|------|
| Pg . | 4 | of | 4_ | ☐ Yes | X No |

| 1. Committee Fo | ull Name (and Fund i | f applicable) | | | | | | 2. ID Nu | mber | |
|--------------------|--|--|--------------|-------------------------|--------|--|----------|------------|----------|-------------------------|
| COMMITTEE | TO ELECT LAURA | BLACKWELL | LINDS | EY | | | | | | |
| 3. Type of Disbu | rsement (Please | ise separate CR | 0-1310 | forms for each | h type | | | | | |
| X Operating Exp | oenses | ibutions to Candida | tes/Polit | ical Committees | | Coo | rdinat | ed Party E | xpenditu | ıres |
| 4. Payee Inform | ation | | | Add \square | Rem | | V. V. ii | | | |
| a. Full Name, Ma | ailing Address & Pho | one | | b. Coordinate | d Cor | nmittee Na | me | d. Comm | ents | |
| (include city, sta | te, & zip) | | | | | | | | | |
| LAMAR SIGN | | | | | | (0=c=!c\ | | | | |
| 4603 HICKORY | | | | c. Level Regis Federal | | County: | | | | |
| GRANITE FAL | LLS, NC 28630 | | | State | i | Municip | | e. Electio | n Sum | to Date |
| | | | | | | | | \$ | | 477.92 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date | (mm/dd/yyyy) | j. An | ount | k. Re | quired Re | marks | |
| L1 | Electric Funds Tran | A | | 2/13/2024 | \$ | 477.92 | BILI | BOARD | , | |
| | | | | | \$ | | | | | |
| 4. Payee Inform | ation | 当2000000000000000000000000000000000000 | | Add \square | Rem | ove | | | | |
| | ailing Address & Pho | one | A CONTRACTOR | b. Coordinate | | AND THE PARTY OF T | ım e | d. Comm | ents | |
| (include city, sta | | | | | | | | | | |
| QUIK TRIP | | | | | | | | | | , |
| 1086 CONCOR | D PKWY N | | | c. Level Regis | | Territoria de la constitución de | | | | |
| CONCORD, NO | C 28027 | | | Federal | 1 | County: Municip | Y I | a Eleatio | - C | to Data |
| | | | | ☐ State | | Municip | amy: | e. Electio | n Sum | to Date |
| | | | | | | | | \$ | | 500.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date | (mm/dd/yyyy) | j. An | ount | k. Re | quired Re | marks | |
| L1 | Debit Card | O | 02 | 2/05/2024 | \$ | 500.00 | | DRAISE | R - RA | FFLE |
| | | | | | \$ | | PRIZ | ČE . | | |
| 4. Payee Inform | ation | | | Add | Rem | ove | | 100 | | VIII S |
| | ailing Address & Pho | one | | b. Coordinate | d Cor | nmittee Na | ıme | d. Comm | ents | |
| (include city, sta | te, & zip) | | | | | | | | | |
| CABO WINER | Y | | | | | (0===10 \ | | | | |
| 37 Union St S | 2 20025 | | | c. Level Regis | tered | County: | | 4 | | |
| CONCORD, NO | 28025 | | | State | 1 | | | e. Electio | n Sum | to Date |
| | | | | | | | | 14200 | | AND THE PERSON NAMED IN |
| | | | | | | | | \$ | | 100.00 |
| f. Account Code | g. Form of Payment | h, Purpose Code | i. Date | (mm/dd/yyyy) | j. An | nount | k. Re | quired Re | marks | |
| L1 | Debit Card | O | 0 | 1/05/2024 | \$ | 100.00 | EVE | NT SPA | CE DE | POSIT |
| | 2 11 22 32 8 | <u> </u> | | | \$ | | | | | |
| 5. Total only thi | s Page | | | | | | | \$ | | 1,077.92 |
| | CRO-1310 Pages | | | | | | | | | 152 |
| | n line 13a of Detailed S | ummarv Page CRO |)-1100 it | Operating Expe | nses) | | | | | 0.070.46 |
| 100 | n line 13b of Detailed S | 5.70 | | | | /Political C | omm) | \$ | | 8,078.46 |
| 1100 | n line 13c of Detailed S | | Ti | | | | | | | |
| 7. Purpose Co | odes (List detailed | expenditure code | in (h.) | above) | | | | | | |
| A* - Media | B* - Printin | g | C* - F | undraising | | D - To | Anot | her Candi | idate | |
| E - Salaries | F* - Equipme | | | litical Party | | | | g Public (| | 3.5 |
| I - Postage | J - Penaltie | S | K* - C | Office Expense | S | Q* - D | onatio | on to Leg | al Expe | nse Fund |
| O* Other | 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1 | | RUELINI SUF | 110 | | | | | | |
| * Codes require | e detailed explanatio | n in required rer | narks f | iela (k) | | | | | | |

| Aggregated | Non-Media | Expenditures |
|------------|-----------|---------------------|
|------------|-----------|---------------------|

| 00 0 | | Tedia Expendi ort NC Non-Media | | Page of \$50 or less. | | ☐ Yes 🛛 No |
|-------------|------------------|-----------------------------------|-----------------|-----------------------|--------------|----------------------------------|
| 1. Committ | ee Full Name (an | d Fund if applicable) | | | 2. ID Number | |
| COMMIT | FEE TO ELECT | LAURA BLACKWI | ELL LINDSEY | | | |
| 3. Payee In | | | | | T | |
| a. Amend | b. Account Code | c. Form of Payment | d. Purpose Code | e. Date (mm/dd/yyyy) | f. Amount | g. Required Remarks |
| Add Remove | L1 | Electric Funds Tran | О | 02/08/2024 | \$ 17.8 | 0 BANK FEES |
| Add Remove | LI | Electric Funds Tran | О | 02/12/2024 | \$ 10.0 | 0 CASHIERS CHECK FEE FOR SIGN |

| 4. Total only this | s Page | | \$ | 27.80 |
|---|--|-----------------------|--------------------------|---------------------|
| | CRO-1315 Pages n line 14 of Detailed Summary Po | 'age CRO-1100) | \$ | 27.80 |
| 6. Purpose Code | es (List detailed expenditu | re code in (d) above) | · Produkta a svetovili i | |
| | B* - Printing | C* - Fundraising | D - To Another Car | ndidate |
| E - Salaries | F* - Equipment | G - Political Party | H* - Holding Pub | lic Office Expenses |
| I - Postage J - Penalties K* - Office Expense | | | Q* - Donations to | Legal Expense Fund |
| O* - Other | | | | |

* Codes require detailed explanation in required remarks field (g) CRO-1315

NC State Board of Elections

December 2009

Amendment

In-Kind Contributions

Amendment Pg __1 of ☐ Yes Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund. Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

| 1. Committee Full Name (and Fund if applicable) | | | 2. ID N | Number |
|---|--|----------------|----------|-----------------------|
| COMMITTEE TO ELECT LAURA BLACKWELL L | INDSEY | | | |
| 3. Contributor Information | Add Rer | nove | | |
| a. Full Name, Mailing Address & Phone | b. Type of Con | tributor | c. Com | ments |
| (include city, state, & zip) | | | | |
| BETTY BABB | Party | | | |
| 590 WESTWOOD DR KANNAPOLIS, NC 28081 | ☐ PAC | | | |
| MANIMA OLIO, NO 20001 | Referendum | | d. Elect | tion Sum to Date |
| | Other Recei | pt Source | \$ | 250.00 |
| e. Description | | f. Date (mm/dd | /yyyy) | g. Fair Market Amount |
| EVENT FOOD | | 01/03/202 | 24 | \$ 250.00 |
| | | | | \$ |
| | | | | \$ |
| 3. Contributor Information | THE RESIDENCE OF THE PARTY OF T | nove | | |
| a. Full Name, Mailing Address & Phone | b. Type of Con | tributor | c. Com | ments |
| (include city, state, & zip) | X Individual | | | |
| SEAN TURNER | Candidate Party | | | |
| 3489 ALISTER AVE SW | Party PAC | | | |
| CONCORD, NC 28027 | Referendum | | d. Elect | tion Sum to Date |
| | Other Recei | | \$ | 347.30 |
| e. Description | | f. Date (mm/dd | /yyyy) | g. Fair Market Amount |
| DONATED RAFFLE PRIZE | | 01/03/202 | 24 | \$ 200.00 |
| | | | | \$ |
| | | | | \$ |
| 3. Contributor Information | | move | | |
| a. Full Name, Mailing Address & Phone | b. Type of Con | tributor | c. Com | iments |
| (include city, state, & zip) | | | | |
| BRENT WHICHEL | Party | | | |
| 5445 SOMERSET LANE HARRISBURG, NC 28075 | PAC | | | |
| In Made Court | Referendum | | d. Dec | tion Sum to Date |
| | Other Recei | ipt Source | \$ | 500.00 |
| e. Description | | f. Date (mm/dd | l/yyyy) | g. Fair Market Amount |
| DONATED RAFFLE ITEM | | 01/03/20 | 24 | \$ 200.00 |
| | | | | \$ |
| | | | | \$ |
| 4. Total only this Page | | | \$ | 650.00 |
| 5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO | 0_1100) | | \$ | 650.00 |