

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.

1. Committee Information																																								
a. Full Name <u>Committee to Elect Naomi Hatchell</u>			c. ID Number																																					
b. Mailing Address (include City, State and Zip Code) <u>1804 Clay St Kannapolis NC 28083</u>			d. Date Filed <u>10/27/25</u>																																					
			e. Phone Number <u>704 795 8316</u>																																					
2. Report Year <u>2025</u>	3. Period Start Date (mm/dd/yy) <u>9/24/2025</u>	4. Period End Date (mm/dd/yy) <u>10/20/2025</u>	5. Treasurer Full Name <u>Tony R. Still</u>																																					
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)																																						
☒ Candidate Campaign ☐ Party ☐ PAC ☐ Referendum ☐ Independent Expenditure ☐ Joint Fundraiser ☐ Legal Expense Fund		<table border="1" style="width:100%"><tr><td>Municipal</td><td>State/County</td><td>Referendum</td></tr><tr><td>☐ Organizational</td><td>☐ Organizational</td><td>☐ Organizational</td></tr><tr><td>☐ Thirty-five day</td><td>☐ Quarterly</td><td>☐ Pre-referendum</td></tr><tr><td>☐ Pre-primary</td><td>☐ First</td><td>☐ Final</td></tr><tr><td>☒ Pre-election</td><td>☐ Second</td><td>☐ Supplemental Final</td></tr><tr><td>☐ Pre-runoff</td><td>☐ Third</td><td>☐ Annual</td></tr><tr><td>☐ Semi-annual</td><td>☐ Fourth</td><td>☐ Special</td></tr><tr><td>☐ Mid Year</td><td>☐ Semi-annual</td><td></td></tr><tr><td>☐ Year End</td><td>☐ Mid Year</td><td></td></tr><tr><td>☐ Final</td><td>☐ Year End</td><td></td></tr><tr><td>☐ Special</td><td>☐ Final</td><td></td></tr><tr><td></td><td>☐ Special</td><td></td></tr></table>			Municipal	State/County	Referendum	☐ Organizational	☐ Organizational	☐ Organizational	☐ Thirty-five day	☐ Quarterly	☐ Pre-referendum	☐ Pre-primary	☐ First	☐ Final	☒ Pre-election	☐ Second	☐ Supplemental Final	☐ Pre-runoff	☐ Third	☐ Annual	☐ Semi-annual	☐ Fourth	☐ Special	☐ Mid Year	☐ Semi-annual		☐ Year End	☐ Mid Year		☐ Final	☐ Year End		☐ Special	☐ Final			☐ Special	
Municipal	State/County	Referendum																																						
☐ Organizational	☐ Organizational	☐ Organizational																																						
☐ Thirty-five day	☐ Quarterly	☐ Pre-referendum																																						
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☐ Pre-runoff	☐ Third	☐ Annual																																						
☐ Semi-annual	☐ Fourth	☐ Special																																						
☐ Mid Year	☐ Semi-annual																																							
☐ Year End	☐ Mid Year																																							
☐ Final	☐ Year End																																							
☐ Special	☐ Final																																							
	☐ Special																																							
7. Type of Fund (if applicable, check one)		10. Special Report Name																																						
☐ Booster Fund ☐ Building Fund ☐ Other:																																								
8. Number of Fundraisers this Report <u>0</u>																																								
11. Account Information		11. Account Information																																						
a. Financial Institution Full Name <u>Truist</u>		a. Financial Institution Full Name																																						
b. Purpose <u>Campaign</u>		b. Purpose <u>RECEIVED IN-PERSON</u> <u>OCT 27 2025</u> <u>CABARRUS COUNTY BOARD OF ELECTIONS</u>																																						
c. Account Code <u>1</u>		c. Account Code																																						
d. Period Begin Balance <u>\$ 1063.24</u>		d. Period Begin Balance <u>\$</u>																																						
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.																																								
<u>Naomi Hatchell</u> Printed Name of Signer		<u>Naomi Hatchell</u> Signature of Appointed Treasurer		<u>10/27/25</u> Date																																				
FOR OFFICE USE ONLY																																								
Date Received:	<u>10-27-25</u>	Employee:	<u>WAN</u>																																					
Date Postmarked:		Employee:																																						
Date Scanned:	<u>10-27-25</u>	Employee:	<u>WAN</u>																																					
Date Data Entered:		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

☐ Yes☐ No

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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
Committee to Elect Naomi Hatchell	Pre-Election	
Start of Election Cycle: January 1, 2025	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 1063.24	\$
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 100.00	\$ 221.35
6) Contributions from Individuals (CRO-1210)	\$ 600.00	\$ 2135.00
7) Contributions from Political Party Committees (CRO-1220)	\$	\$
8) Contributions from Other Political Committees (CRO-1230)	\$ 100.00	\$ 100.00
9) Loan Proceeds (CRO-1410)	\$	\$
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$	\$
11) Other Receipt Sources		
11a) Interest on Bank Accounts (CRO-1250)	\$	\$
11b) Contributions from Not-For-Profit Organizations (CRO-1250)	\$	\$
11c) Outside Sources of Income (CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$	\$
11e) Exempt Purchase Price Sales (CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 1863.24	\$ 2,456.35
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 287.40	\$ 750.51
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures (CRO-1315)	\$	\$
15) Loan Repayments (CRO-1420)	\$	\$
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$	\$
17) In-Kind Contributions (CRO-1510)	\$ 100.00	\$ 230.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 387.40	\$ 980.51
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 1475.84	\$ 1475.84
ADDITIONAL INFORMATION		
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$	
22) Debts and Obligations owed by the Committee (CRO-1610)	\$	
23) Debts and Obligations owed to the Committee (CRO-1620)	\$	
24) Account Transfers Within the Committee (CRO-1720)	\$	
25) Administrative Support (CRO-1710)	\$	\$
26) Forgiven Loans (CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum (CRO-2220)	\$	\$
28) Contributions to be Refunded (CRO-1215)	\$	\$

Contributions from Individuals

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Amendment

☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to Elect Naomi Hatzhell						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) John Plemmons 1259 Braeburn Rd. Concord, NC 28027				b. Job Title/Profession Retired		d. Comments
				c. Employer's Name/Specific Field none		e. Election Sum to Date \$ 200 ⁰⁰
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	check		10/05/2025	\$ 200 ⁰⁰	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Jonah Edwards 1393 Zion Church Rd East Concord NC 28025				b. Job Title/Profession owner		d. Comments
				c. Employer's Name/Specific Field 77 towing & Recovery		e. Election Sum to Date \$ 150 ⁰⁰
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	cash		10/3/2025	\$ 50 ⁰⁰	
☐	1	cash		10/12/2025	\$ 50 ⁰⁰	
☐	1	cash		10/19/2025	\$ 50 ⁰⁰	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Betty Edwards 1521 Daybreak Ridge Rd Kannapolis, NC 28081				b. Job Title/Profession Retired		d. Comments
				c. Employer's Name/Specific Field none		e. Election Sum to Date \$ 350 ⁰⁰
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	check		10/16/2025	\$ 250 ⁰⁰	
☐					\$	
☐					\$	
4. Total only this Page					\$ 600.00	
5. Total of ALL CRO-1210 Pages					\$	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Other Political Committees

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Amendment

☐ Yes ☐ No

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee to Elect Naomi Hatchell					
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee ☒ Candidate ☐ PAC ☐ Referendum		d. Comments
Elect Isaiah Payne 909 Haley St Kannapolis NC 28083 828-432-7688			c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☒ Municipality:		e. Election Sum to Date
					\$ 100.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
		Rent portion for event space	10/19/2025	\$ 100.00	
				\$	
				\$	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee ☐ Candidate ☐ PAC ☐ Referendum		d. Comments
			c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date
					\$
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
				\$	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee ☐ Candidate ☐ PAC ☐ Referendum		d. Comments
			c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date
					\$
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
				\$	
4. Total only this Page				\$	
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$	

Page 1 of 1☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
Committee to Elect Naomi Hatchell	

[illegible]

In-Kind Contributions

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Amendment

☐ Yes ☐ No

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 Number
Committee to Elect Naomi Hatchell		
3. Contributor Information ☐ Add ☐ Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Elect Isaiah Payne 909 Haley St Kannapolis NC 28083 828-432-7688	☐ Individual ☒ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
		d. Election Sum to Date
		\$ 100.00
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Rent portion for space of an event	10/19/2025	\$ 100.00
		\$
		\$
3. Contributor Information ☐ Add ☐ Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
	☐ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
		d. Election Sum to Date
		\$
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		\$
		\$
		\$
3. Contributor Information ☐ Add ☐ Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
	☐ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
		d. Election Sum to Date
		\$
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		\$
		\$
		\$
4. Total only this Page		\$
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$

Disbursements

Pg 1 of 2

Amendment
☐ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee to Elect Naomi Hatchell					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures					
4. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Amazon 440 Terry Ave N Seattle WA 98109 206-266-1000			c. Level Registered (Specify)		
			☐ Federal ☐ County: ☐ State ☒ Municipality:		
					e. Election Sum to Date
					\$ 40.56
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	debit card	0	10/9/2025	\$ 29.95	door hanger bags
				\$	
4. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Staples 1480 Concord Pkwy N Suite 350 Concord, NC 28085 704-262-3503			c. Level Registered (Specify)		
			☐ Federal ☐ County: ☐ State ☒ Municipality:		
					e. Election Sum to Date
					\$ 432.85
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	debit card	B	10/14/2025	\$ 117.69	palm cards
				\$	
4. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Dollar General 2500 Ln St Ranapalis NC 28083 980-283-2868			c. Level Registered (Specify)		
			☐ Federal ☐ County: ☐ State ☐ Municipality:		
					e. Election Sum to Date
					\$ 5.35
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	debit card	0	10/19/2025	\$ 5.35	plates & napkins for event
				\$	
5. Total only this Page					\$ 152.99
6. Total of ALL CRO-1310 Pages					\$ 287.40
(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)					
7. Purpose Codes (List detailed expenditure code in (h.) above)					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		D - To Another Candidate	
I - Postage		J - Penalties		G - Political Party	
O* Other				H* - Holding Public Office Expenses	
				K* - Office Expenses	
				Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k)					

Disbursements

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Amendment
☐ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Committee to Elect Naomi Hatchell							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Sam's Club 2421 SuperCenter Dr NE Kannapolis NC 28083 704-792-9000							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$ 47.04	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	debit card	0	10/19/2025	\$ 47.04	Cookies for Event		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Uprinting 8000 Haskell Ave Van Nuys, CA 91406 888-888-4211							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$ 87.37	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	debit card	B	10/06/2025	\$ 87.37	Stickers		
				\$			
4. Payee Information ☐ Add ☐ Remove							
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	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				\$			
				\$			
5. Total only this Page						\$ 134.41	
6. Total of ALL CRO-1310 Pages						\$ 287.40	
(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)							
7. Purpose Codes (List detailed expenditure code in (h.) above)							
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							
* Codes require detailed explanation in required remarks field (k)							