Disclosure Re					-	Amendment Yes No
Use this form for generating Do not use this form			e information, r	nust be signed and su	bmitted alor	ng with other detailed forms
1. Committee Infor	THE RESERVE OF THE PARTY OF THE	iformation.				
a. Full Name	mation					c. ID Number
0 :1	0 + 5	Jack N	Janai 1	1-1-1-11		C. ID Number
			Jaomi t	tatzbell	125 (2000)	
b. Mailing Address (incl						d. Date Filed
1804 Clay Kannapoli	St		MARKATOO			10/27/25
Kannapoti	IS NO	2808	3			e. Phone Number
101.						704 795 831
2. Report Year 3. P	Period Start	Date (mm/dd	/yy) 4. Period I	End Date (mm/dd/yy)	5. Treasure	er Full Name
2025	9/24	12025	1	20/2025	Ton	y R. Still
6. Type of Committ	too (Check C	Charles and the Control of the Contr				ort from one category)
Candidate Campaign		THE RESERVE OF THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER, THE PERSON	Municipal	State/County	type of repo	Referendum
☐ PAC	_	erendum	Organizationa		ional	Organizational
Independent Expend	diture Join	nt Fundraiser	☐ Thirty-five da			☐ Pre-referendum
Legal Expense Fund	i		Pre-primary	☐ First		Final
			Pre-election	☐ Seco	nd	Supplemental Final
7. Type of Fund	(if applicable,	check one)	Pre-runoff	☐ Third	i	Annual
Booster Fund			Semi-annual	Four	th	☐ Special
☐ Building Fund			☐ Mid Yea	r Semi-anni	ıal	
			Year En	d 🔲 Mid	Year	10. Special Report Name
Other:			Final	☐ Year	End	A STATE OF THE STA
8. Number of Fund	raisers this	Report	☐ Special	☐ Final		
^				☐ Special		
0				Special		
11. Account Inform	nation			11. Account Inform	nation	
11. Account Inform a. Financial Institution l						
a. Financial Institution l	Full Name			11. Account Informa. Financial Institution	Full Name	
	Full Name	c. Account Coo	de	11. Account Inform a. Financial Institution	Full Name	c. Account Code
a. Financial Institution I TYUISH	Full Name	c. Account Cod	de	a. Financial Institution RECE b. Purpose IN-PER	Full Name	c. Account Code
a. Financial Institution I TYUISH	Full Name	I		11. Account Inform a. Financial Institution	Full Name	c. Account Code
a. Financial Institution I TYUISH	Full Name	c. Account Coo		11. Account Inform a. Financial Institution RECE b. Purpose OCT 2	Full Name IVED RSON 7 2025	c. Account Code d. Period Begin Balance
a. Financial Institution I TYUISH	Full Name	d. Period Begi	in Balance	a. Financial Institution RECE b. Purpose IN-PER	Full Name IVED RSON 7 2025	
a. Financial Institution I Truist b. Purpose	Full Name	d. Period Begi		11. Account Inform a. Financial Institution RECE b. Purpose IN-PER OCT 2 CABARRUS	Full Name IVED RSON 7 2025	d. Period Begin Balance
a. Financial Institution I Truist b. Purpose Campaign CERTIFICATION	Full Name	d. Period Begin	in Balance 3,24	11. Account Inform a. Financial Institution RECE b. Purpose IN-PER OCT 2 CABARRUS BOARD OF E	Full Name IVED RSON 7 2025 S COUNTY ELECTIONS	d. Period Begin Balance
a. Financial Institution I Truist b. Purpose Campaign CERTIFICATION I certify that the Com	Full Name	d. Period Begins 106	in Balance 3,24 ance with all appl	a. Financial Institution RECE b. Purpose OCT 2 CABARRUS BOARD OF E	Full Name IVED SON 7 2025 COUNTY ELECTIONS ticle 22A, 22B	d. Period Begin Balance \$ 3 & 22D-22M of Chapter 163
a. Financial Institution I Truist b. Purpose Campaign CERTIFICATION I certify that the Conof the NC General St	Full Name nmittee or Fun tatutes and tha	d. Period Begins / / O / O.	in Balance 3,24 ance with all apple commingled with	a. Financial Institution RECE b. Purpose OCT 2 CABARRUS BOARD OF E	Full Name IVED SON 7 2025 S COUNTY ELECTIONS ticle 22A, 22I n-disclosed fu	d. Period Begin Balance
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Detailed	Summary
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Amendment

Yes No

Use this form to summarize all disclosure reporting forms and 1. Committee Full Name (and Fund if applicable)	to total mor		3. ID Number
A		-	, ID Number
Committee to Elect Naomi Hate	hell t	re-Electim	T
Start of Election Cycle: January 1, 2625		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1063.24	\$
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 10000	\$ 221.35
6) Contributions from Individuals	(CRO-1210)		\$ 2/35.00
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)	\$ / 863, 24	\$ 2,456,35
<u>EXPENDITURES</u>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 287.400	\$ 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	5, 16 and 17)	\$ 387.40	\$ 980.51
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$ 1475, 84	1 \$ 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)	\$	\$

		rom Individua		Pg		Yes No	
		individual contributio		ontributions und			
0		ne (and Fund if appl		,1 , ,	/	2. ID Number	
(0)	mmittee	to Elect	Naomi	. Hettele	l		
STATE OF THE PARTY OF THE PARTY.	tributor Informa			AND THE PROPERTY OF THE PROPERTY OF	move		
	ame, Mailing Addre le city, state, & zip)			b. Job Title/Profes	ssion	d. Comments	
				Retired	l I		
10	hn Plemn 59 Brae	hons Pal		c. Employer's Nan			
				10 = 00		Whater Courts Date	
Co	incord, N	K 28027		none		e. Election Sum to Date	
						\$ 20000	
	g. Account Code	h. Form of Payment	i. In-Kind Descrip	ption	j. Date (mm/dd/yyy	yy) k. Amount	
	1	check			10/05/202	25 \$ 20000	
						\$	
						\$	
3. Cont	ributor Informa	ation		Add Ren	move		
	ame, Mailing Addre			b. Job Title/Profes	ssion	d. Comments	
	le city, state, & zip)			owner			
Jo	nah Edu	wards		c. Employer's Nan	ne/Specific Field		
13	93 Ziov	n Church	Rd East	77 + 10000 4			
0	phiprd	NC 2802	_	000	wing of	e. Election Sum to Date	
						\$ 15000	
	g. Account Code	h. Form of Payment	i. In-Kind Descrip	ition	j. Date (mm/dd/yyy		
		Cash			10/3/20	\$ 5000	
		cash			10/12/20	5000	
	/	Cash			the same of the sa	\$ 5000	
	ributor Informa			AND THE RESIDENCE AND ADDRESS OF THE PARTY O	move '		
	ame, Mailing Addre e city, state, & zip)			b. Job Title/Profes	ssion	d. Comments	
			_	Retire			
15	P Daub	ards PreaK Ridge , NC 2808	· RD	c. Employer's Nan	ne/Specific Field		
12.		NIC COL	- Nec	hone	1	e. Election Sum to Date	
Ka	nnapous,	NC 2808	31	none		\$ 35000	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy	yy) k. Amount	
	į	Check			10/16/20	25 \$ 25000	
						\$	
						\$	
4. Tota	al only this Pa	age				\$ 600.00	
		RO-1210 Pages				\$	
(This li	ne must he on line (6 of Detailed Summary Po	age CRO-1100)			D.	

Contributions from Other Political Committees Pg ☐ 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 Remove 3. Contributor Information ☐ Add . Full Name, Mailing Address & Phone b. Type of Committee d. Comments Candidate PAC (include city, state, & zip) Elect Isaich Payne 909 Haley St Kannapolis NC 28083 Referendum c. Level Registered (Specify) Federal County: State Municipality: e. Election Sum to Date 100,00 h. In-Kind Description i. Date (mm/dd/yyyy) j. Amount f. Account Code Rent portion for \$ 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Type of Committee d. Comments Candidate (include city, state, & zip) ☐ PAC Referendum c. Level Registered (Specify) Federal County: State Municipality: e. Election Sum to Date f. Account Code g. Form of Payment h. In-Kind Description j. Amount i. Date (mm/dd/yyyy) \$ \$ \$ 3. Contributor Information Add ☐ Remove a. Full Name, Mailing Address & Phone b. Type of Committee d. Comments Candidate ☐ PAC (include city, state, & zip) Referendum c. Level Registered (Specify) Federal County: ☐ State Municipality: e. Election Sum to Date h. In-Kind Description f. Account Code g. Form of Payment 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)

Aggregated Contributions from Individuals Page of	Amendment Yes No
1. Committee Full Name (and Fund if applicable)	2. ID Number
Committee to Elect Naomi Hatchell	
2 Contributor Information	

Α		nd Fund if applical		san matematica planta proprio de la propertica del la propertica della	2. ID Number				
Committee to Elect Naomi Hatchell									
3. Contribu	itor Information								
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyy	y) f. Amount				
Add Remove	1	check		10/05/20	25\$ 5000				
Add Remove	i	check Cash		10/05/201	25 \$ 50°0 25 \$ 50°0				
Add Remove					\$				
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	nly this Page		L		\$ 10000				
5. Total of	FALL CRO-1		DO HAA		\$ 10000				
CRO-1205	isi ve on une 5 0j De	etailed Summary Page C	NC State Roard of Flections		April 2007				

In-Kind Contributions	Pg		_ Yes No	
Use this form to report non-monetary contributions, donations, goo			ee or fund.	
Use CRO-1215 if In-Kind Contributions were or will be reful. 1. Committee Full Name (and Fund if applicable)	nded within / day		2. ID Number	
	! //2/-0.	11	a. ID Italiaci	
Committee to Elect Maomi		\mathcal{I}		
3. Contributor Information		move		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contril Individual	butor	c. Comments	
Flock Topical Dayne	Candidate	-		
and I suavi full	Party	1		
909 Haley St	PAC	ŀ		
Kanpapolis NC 18082	Referendum Other Receipt	4	d. Election Sum to Date	
Elect Isaiah Payre 909 Haley St Kannapolis NC 28083 828-432-7688		Journal	\$ 10000	
e. Description		f. Date (mm/dd/yyyy	g. Fair Market Amount	
Rent portion for space of	an event	10/19/2025	5 \$ 10000	
\		100	\$	
			\$	
3. Contributor Information	Add Rer	nove		
a. Full Name, Mailing Address & Phone	b. Type of Contril	butor (c. Comments	
(include city, state, & zip)	Individual Candidate	1		
,	Party			
	☐ PAC	L		
	Referendum		d. Election Sum to Date	
	Other Receipt	Source	\$	
e. Description		f. Date (mm/dd/yyyy	g. Fair Market Amount	
			\$	
			\$	
			\$	
3. Contributor Information	Add Rer	move		
a. Full Name, Mailing Address & Phone	b. Type of Contrib	outer c	c. Comments	
(include city, state, & zip)	Individual Candidate			
	Party			
	☐ PAC	L		
,	Referendum	100	d. Election Sum to Date	
	Other Receipt	Source	\$	
e. Description		f. Date (mm/dd/yyyy	g. Fair Market Amount	
			\$	
1			\$	
			\$	
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)			\$	

				Amendmen	t	
Disbursements	Pg	 of	2	☐ 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		Fund if applicable)				2. ID Number
Comm	THE RESIDENCE AND ADDRESS OF THE PERSON NAMED IN COLUMN 2 IS NOT T	Elect N	THE PERSON NAMED IN COLUMN 2 IS NOT	THE RESERVE OF THE PERSON NAMED IN		
3. Type of Dis	the same of the sa	lease use separate C	'RO-1310	forms for e	each type of Disl	bursement.)
Operating Ex	NAME AND ADDRESS OF THE OWNER, TH	Contributions to Candie	dates/Politi	cal Committees	Coc	ordinated Party Expenditures
4. Payee Infor				Add	Remove	
a. Full Name, N	Mailing Address &	k Phone		b. Coordinate	ed Committee Nam	d. Comments
(include city, state	e, & zip)					
Amaz	on	0 /			stered (Specify)	
Sell H	terry A	ve IV 20109		Federal State	County:	
200	0-266-10	000				\$ 40.56
f. Account Code	g. Form of Paymer	nt h. Purpose Code		(mm/dd/yyyy)		k. Required Remarks
/	debotcan	d 0	10/	9/2025	\$ 29:95	door hanger bags
4. Payee Infor	mation			Add \square	Remove	
	iling Address & Pho	ne		The state of the s	ed Committee Nam	d. Comments
(include city, sta	ate, & zip)					U COMMENTO
Staples	A 0 1	Kuy NSW 85		c. Level Regis	stered (Specify)	
1480	Concord P	Kuly NJU	He 350	☐ Federal	County:	
aniod) ACC 781	20/2		☐ State	Municipa	ality: e. Election Sum to Date
704-	262-350	3				\$ 432.85
f. Account Code	g. Form of Paymer	nt h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	debitea	ed B	101	14/2025	\$ 117.69	palm cards
ì		// _	المدد ا	,	\$	
4. Payee Inform				Add	Remove	
a. Full Name, Mai (include city, sta	iling Address & Pho ate, & zip)	ne		b. Coordinate	ed Committee Nam	d. Comments
Dollar	General					THE STATE OF THE S
	1 4				stered (Specify)	
	In St	20182		State	County:	ality: e. Election Sum to Date
980 -	283-2	78083 868		L State	Municipa	\$ 5.35
f. Account Code	g. Form of Paymer	nt h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	dalaire	11 0	10/	-1		Name a roding for
	Utilit (au	el U	101	19/2025	\$ 5.35	EVENT
5. Total only th	nis Page					\$ 152:99
	L CRO-1310 Pag	TOS				1 1 2 2 11
		ges I Summary Page CRO-1	100 if One	ti-a Evnana		4:-
(This line goes in	n line 13b of Detailed	l Summary Page CRO-1	100 if Con	trib to Candida	ates/Political Comm	1) \$ 287,40
photos contract contr		Summary Page CRO-1	THE R. P. LEWIS CO., LANSING	The second second second	Expenditures)	
		iled expenditure coo		AND DESCRIPTION OF THE PERSON		
A* - Media	B* - Pr			undraising	a du Casa de la company de	Another Candidate
E - Salaries	AND THE PERSON OF THE PERSON O	uipment		litical Party		olding Public Office Expenses
I - Postage O* Other	J - Per			office Expens	ses Q* - Do	onation to Legal Expense Fund
* Codes requir	re detailed expla	nation in required	remarks	field (k)		

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				Amendment	t	
Pg	2	of	2	☐ 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 I	Full Name (and Fun	d if applicable)					2.	D Number
Comm	Hee to El	eet Nao	mi -	Hatche	U			
3. Type of Dish	oursement (Please	use separate Cl	RO-131	forms for e	each ty	pe of Dist	burseme	nt.)
Operating Exp	Name of the Control o	tributions to Candida	ates/Politi	cal Committees	S	Coc	ordinated P	arty Expenditures
4. Payee Inform				Add	Remo	ve	The second	
	failing Address & Ph	one		b. Coordinate	ed Com	mittee Nam	e d. (Comments
(include city, state,	, & zip)							
Jam's	Club	2 11-		c. Level Regi	stered (
29,4 3	uper center i	TINE		Federal State	F	County: Municipa	ality: 6 E	lection Sum to Date
Kanna	uperCenter & polis NC 792-9000	28083		State	_	Wallerp	In Cities	/ // /
704-	792-9000						\$	44.04
	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amo	unt	k. Requi	red Remarks
	debit card	0	10/1	9/2025	\$ 4	7.04	Cook	lies for Event
4 D 4 C					P.			
4. Payee Inform			Ц	Add 🔲	Remo			
(include city, sta	ling Address & Phone te, & zip)			b. Coordinate	ed Com	mittee Nam	e d. C	Comments
Upninti 8000 H Van Au	ng askell Ave 145, CA 9140	6		c. Level Regis	stered (i	Specify) County: Municipa	ality: e. E	lection Sum to Date
f. Account Code	D - 101	h. Purpose Code	li n		ı		1	- 1 / 1
l. Account Code	g. Form of Payment	B. Purpose Code	/6	mm/dd/yyyy) 06 2025		unt 7.37		red Remarks CKE/S
				/	\$			
4. Payee Inforn	nation			Add	Remo	ve		
a. Full Name, Mail	ing Address & Phone			b. Coordinate	ed Com	mittee Name	e d. C	Comments
(include city, stat	te, & zip)							
				c. Level Regis		Specify) County:		
				☐ State		Municipa	ality: e. E	lection Sum to Date
							\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amo	unt	k. Requi	red Remarks
				1	\$			
					\$			
5. Total only th	is Page						\$	-124 181
	_						Ф	10/17/
(This line goes in (This line goes in	CRO-1310 Pages line 13a of Detailed Sum line 13b of Detailed Sum line 13c of Detailed Sum	mary Page CRO-11	00 if Con	trib to Candida	ates/Poli		, \$	287.40
7. Purpose C	odes (List detailed	expenditure code	e in (h.)	above)				
A* - Media E - Salaries I - Postage O* Other	B* - Printin F* - Equipo J - Penaltic re detailed explanati	ng ment es	C* - F G - Po K* - O	undraising litical Party office Expen	ises	H* - H	olding P	Candidate ublic Office Expenses to Legal Expense Fund