## **Disclosure Report Cover**

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					c. ID Number		
Scott Elliott for City	y Council		RECEIVED				
b. Mailing Address (incl	lude City, State and Zip Code)	/1	07 0 7 100		d. Date Filed		
36 Gerogia Street N			00 0 0 200		10/30/2018		
Concord, NC 28025	5	SNOIL	<b>RD OF ELEC</b>	AOA			
		YTNU	SARRUS CO	CAI	e. Phone Number		
				704-534-7313			
2. Report Year	3. Period Start Date (mm/d	(mm/dd/yy)					
2017	09/27/2017	10/2	3/2017	Mark Edwin Hay	nes		
6. Type of Committee	tee (Check One)	9. Type of Report	(check onl	y one type of report	t from one category)		
Candidate Campa	aign 🗌 Party	Municipal	State/Co	ounty	Referendum		
PAC PAC	Referendum	Organizational		Organizational	Organizational		
Independent Expenditure Legal Expense Fi	Joint Fundraiser	Thirty-five day	/ C	Quarterly	Pre-referendum		
7. Type of Fund	(if applicable, check one)	Pre-primary		First	Final		
"Booster Fund"		Pre-election		Second	Supplemental Final		
Building Fund		Pre-runoff		Third	Annual		
a second and second and second and		Semi-annual		Fourth	Special		
		Mid Year	·	Semi-annual			
Other:		Year End		Mid Year	10. Special Report Name		
		Final		Year End	2		
8. Number of Fund	raisers this Report	Special		Final			
				Special			
11. Account Inform			11. Account I				
a. Financial Institution			11. Account I				
<b>a. Financial Institution</b> Uwharrie Bank	Full Name		11. Account I a. Financial Insti	nformation			
<ul> <li>a. Financial Institution</li> <li>Uwharrie Bank</li> <li>b. Purpose</li> </ul>			11. Account I	nformation	c. Account Code		
<b>a. Financial Institution</b> Uwharrie Bank	Full Name	25	11. Account I a. Financial Insti	nformation	c. Account Code		
<ul> <li>a. Financial Institution</li> <li>Uwharrie Bank</li> <li>b. Purpose</li> <li>Campaign</li> </ul>	Full Name c. Account Code		11. Account I a. Financial Insti	nformation	c. Account Code d. Period Begin Balance		
<ul> <li>a. Financial Institution</li> <li>Uwharrie Bank</li> <li>b. Purpose</li> <li>Campaign</li> </ul>	Full Name c. Account Code 152		11. Account I a. Financial Insti	nformation			
<ul> <li>a. Financial Institution</li> <li>Uwharrie Bank</li> <li>b. Purpose</li> <li>Campaign</li> </ul>	Full Name  c. Account Code  152  d. Period Begin Balanc  \$ 1743.50		11. Account I a. Financial Insti	nformation	d. Period Begin Balance		
a. Financial Institution Uwharrie Bank b. Purpose Campaign Funds CERTIFICATION I certify that the Cor	Full Name   c. Account Code  152  d. Period Begin Balanc  \$ 1743.50  I  mmittee or Fund is in compl	e iance with all applica	11. Account I a. Financial Insti b. Purpose	nformation tution Full Name	d. Period Begin Balance \$ 8, & 22D-22M of Chapter 163 of		
<ul> <li>a. Financial Institution         Uwharrie Bank         b. Purpose         Campaign         Funds     </li> <li>CERTIFICATION     I certify that the Corr     the NC General Stat     </li> </ul>	Full Name    c. Account Code    152  d. Period Begin Balanc  \$ 1743.50   mmittee or Fund is in compli- nutes and that no funds are complemented or complemente	e iance with all applica ommingled with proh	11. Account I a. Financial Insti b. Purpose	nformation tution Full Name of Article 22A, 22B non-disclosed funds	d. Period Begin Balance \$		
<ul> <li>a. Financial Institution         <ul> <li>Uwharrie Bank</li> <li>b. Purpose</li> <li>Campaign             <ul> <li>Funds</li> </ul> </li> </ul> </li> <li>CERTIFICATION         <ul> <li>I certify that the Corr</li> <li>the NC General Statistic complete, true and</li> </ul> </li> </ul>	c. Account Code         152         d. Period Begin Balance         \$ 1743.50         Immittee or Fund is in complicates and that no funds are coded correct and that I have been	e iance with all applica ommingled with proh	11. Account I a. Financial Insti b. Purpose b. Purpose	nformation tution Full Name of Article 22A, 22B non-disclosed funds	d. Period Begin Balance \$ 8, & 22D-22M of Chapter 163 of		
<ul> <li>a. Financial Institution         Uwharrie Bank         b. Purpose         Campaign         Funds     </li> <li>CERTIFICATION     I certify that the Corr     the NC General Stat     </li> </ul>	c. Account Code         152         d. Period Begin Balance         \$ 1743.50         Immittee or Fund is in complexities and that no funds are coded correct and that I have been in Haynes	e iance with all applica ommingled with proh n trained by the NC S	11. Account I a. Financial Insti b. Purpose able provisions of able or other n State Board of F	nformation tution Full Name of Article 22A, 22B non-disclosed funds Elections.	d. Period Begin Balance \$ 3, & 22D-22M of Chapter 163 of 5. I further certify that this report 10/3v/17		
a. Financial Institution Uwharrie Bank b. Purpose Campaign Funds CERTIFICATION I certify that the Cor the NC General Stat is complete, true and Mark Edwi	c. Account Code         152         d. Period Begin Balance         \$ 1743.50         Immittee or Fund is in complexities and that no funds are coded correct and that I have been in Haynes         Printed Name of Signer	e iance with all applica ommingled with proh n trained by the NC S	11. Account I a. Financial Insti b. Purpose b. Purpose	nformation tution Full Name of Article 22A, 22B non-disclosed funds Elections.	d. Period Begin Balance \$ 8, & 22D-22M of Chapter 163 of		
<ul> <li>a. Financial Institution         <ul> <li>Uwharrie Bank</li> <li>b. Purpose</li> <li>Campaign             <ul> <li>Funds</li> </ul> </li> </ul> </li> <li>CERTIFICATION         <ul> <li>I certify that the Corr</li> <li>the NC General Statistic complete, true and Mark Edwine</li> </ul> </li> <li>FOR OFFICE USE Content of the Statement of the Statement</li></ul>	c. Account Code         152         d. Period Begin Balance         \$ 1743.50         Immittee or Fund is in complexate and that no funds are coded correct and that I have been in Haynes         Printed Name of Signer         DNLY	e iance with all applica ommingled with proh n trained by the NC s S	11. Account I a. Financial Insti b. Purpose able provisions of able or other n State Board of F	nformation tution Full Name of Article 22A, 22B non-disclosed funds Elections.	d. Period Begin Balance \$ a, & 22D-22M of Chapter 163 of a. I further certify that this report $10/3 \cdot 17$ Date		
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<ul> <li>a. Financial Institution         <ul> <li>Uwharrie Bank</li> <li>b. Purpose</li> <li>Campaign             <ul> <li>Funds</li> </ul> </li> </ul> </li> <li>CERTIFICATION         <ul> <li>I certify that the Corr</li> <li>the NC General Statistic complete, true and Mark Edwine</li> </ul> </li> <li>FOR OFFICE USE CONTINUES (Content of the Content of the</li></ul>	c. Account Code         152         d. Period Begin Balance         \$ 1743.50         Immittee or Fund is in complexities and that no funds are coded correct and that I have been in Haynes         Printed Name of Signer         DNLY         10/30/17	e iance with all applica ommingled with proh n trained by the NC s S	11. Account I a. Financial Insti b. Purpose able provisions of able or other n State Board of F	nformation tution Full Name of Article 22A, 22B non-disclosed funds Elections.	d. Period Begin Balance         \$         a. 22D-22M of Chapter 163 of         b. & 22D-22M of Chapter 163 of         c. I further certify that this report         16/3.17         Date         Delivery Method         Normal Mail         Registered Mail         Hand Delivered		
a. Financial Institution Uwharrie Bank b. Purpose Campaign Funds CERTIFICATION I certify that the Cor the NC General Stat is complete, true and Mark Edwi FOR OFFICE USE O Date Received:	c. Account Code         152         d. Period Begin Balance         \$ 1743.50         Immittee or Fund is in complexities and that no funds are coded correct and that I have been in Haynes         Printed Name of Signer         DNLY         10/30/17	e iance with all applica ommingled with proh n trained by the NC S S Employee:	11. Account I a. Financial Insti b. Purpose able provisions of able or other n State Board of F	nformation tution Full Name of Article 22A, 22B non-disclosed funds Elections.	d. Period Begin Balance         \$         d. Period Begin Balance         \$         d. 22D-22M of Chapter 163 of         s. I further certify that this report         1 (3) (3) (17)         Date         Delivery Method         Normal Mail         Registered Mail		
<ul> <li>a. Financial Institution</li> <li>Uwharrie Bank</li> <li>b. Purpose</li> <li>Campaign</li> <li>Funds</li> <li>CERTIFICATION</li> <li>I certify that the Cort the NC General Statis complete, true and Mark Edwi</li> <li>FOR OFFICE USE OF</li> <li>Date Received:</li> <li>Date Postmarke</li> </ul>	c. Account Code         152         d. Period Begin Balance         \$ 1743.50         Immittee or Fund is in complicate or Fund is in complicate and that no funds are conditioned to correct and that I have been in Haynes         Printed Name of Signer         DNLY         10/30/17         ed:         10/31/17	e iance with all applica ommingled with prof n trained by the NC S <u>S</u> Employee: Employee:	11. Account I a. Financial Insti b. Purpose able provisions of able or other n State Board of F	nformation tution Full Name of Article 22A, 22B non-disclosed funds Elections.	d. Period Begin Balance         \$         3. & 22D-22M of Chapter 163 of         s. I further certify that this report         10/3./17         Date         Delivery Method         Normal Mail         Registered Mail         Hand Delivered         Electronically Filed		
<ul> <li>a. Financial Institution         Uwharrie Bank         b. Purpose         Campaign         Funds     </li> <li>CERTIFICATION     I certify that the Corr     the NC General State     is complete, true and         Mark Edwing     </li> <li>FOR OFFICE USE OF</li> <li>Date Received:</li> <li>Date Postmarkee</li> <li>Date Scanned:</li> <li>Date Data Enter</li> </ul>	c. Account Code         152         d. Period Begin Balance         \$ 1743.50         Immittee or Fund is in compli- nutes and that no funds are con- d correct and that I have been in Haynes         Printed Name of Signer         DNLY         10/30/17         ed:         10/31/17         red:	e iance with all applica ommingled with prob n trained by the NC S W Employee: Employee: Employee: Employee:	11. Account I a. Financial Insti b. Purpose able provisions of bibited or other in State Board of Fill ignature of Appoint 500 500 500 500 500 500 500 50	nformation tution Full Name	d. Period Begin Balance         \$         d. Period Begin Balance         \$         d. 22D-22M of Chapter 163 of         s. I further certify that this report         10/30/17         Date         Delivery Method         Normal Mail         Registered Mail         Hand Delivered         Electronically Filed         Signer has not received		



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

Amendment Yes  $\boxtimes$ 

No

1. Committee Full Name (and Fund if applicable)	2. Type of Report		3. ID Number
Scott Elliott for City Council	on	2	
Start of Election Cycle: January 1,	2014	Total this	Total this
4) Cash on Hand at Start		Reporting Period \$ 1,743.50	Election Cycle \$ 0
RECEIPTS		\$ 1,745.50	3 0
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 190	\$ 320
6) Contributions from Individuals	(CRO-1210)	\$ 700	\$ 6,600
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
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 Organizat	ions (CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 1.	1c, 11d and 11e)	\$ 890	\$ 6,920
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 0	\$ 3986.5
13b) Contributions to Candidates/Political Commi	ttees (CR0-1310)	\$ 0	\$ 300
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)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14,	15, 16 and 17)	\$ 0	\$ 4286.5
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18)	\$ 2633.50	\$ 2633.50
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaig	(CRO-1430) (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)	\$	\$

NC State Board of Elections

## **Aggregated Contributions from Individuals**

<u>1</u>

Page

of <u>1</u>

No No

Amendment

Yes

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

Con	tributor Info	rmation				
Amer	ıd	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
]	Add	1525	check		10/03/2017	\$ 50
<u> </u>	Remove				10/05/2017	\$ 50
]	Add	1525	check		10/03/2017	\$ 50
1	Remove Add					
	Add       Remove	1525	cash		10/03/2017	\$ 50
]	Add	1525	cash		10/02/2017	¢ 10
	Remove	1525	cash		10/03/2017	\$ 40
	Add					¢
	Remove	1				\$
	Add					¢
	Remove					\$
	Add					¢
	Remove					\$
	Add		1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 - 1947 -			\$
	Remove					Φ
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То	tal only this	s Page			\$	190

## **Contributions from Individuals** Line this f

Ame	ndment	
	Yes	$\boxtimes$

 $\triangleleft$ No

		<b>n Individuals</b> vidual contributions o	over \$50	Pg ) or contributions unde	<u> </u>	<u>1</u>	Yes Yes	No No	
the local design of the second s	the Section of the se	and Fund if applica				2. ID Num			
Scott Elli	ott for City Counc	il							
3. Contr	ibutor Informatio	n		Add 🗌 Rem	love				
a. Full Name, Mailing Address & Phone				b. Job Title/Profession		d. Comments	8		
Tim Vau	city, state, & zip)			General Manager					
	nty Chruch Road			c. Employer's Name/Spe	cific Field				
Kannapo	lis, NC 28027			Hilbish Ford					
						e. Election St			
						\$	200	е 19	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/dd/yy)	yy)	k. Amount		
	1525	Check			10/12/20	017	\$	200	
							\$		
							\$		
3. Contri	ibutor Informatio	a		Add 🗌 Rem	love				
A THE REAL PROPERTY AND ADDRESS OF	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Comments	8		
Doug Sta	city, state, & zip)			Principal					
100 C	gton Drive			c. Employer's Name/Specific Field					
Concord,	NC 28025			Griffin Stafford Hospitalty					
						e. Election S			
		g			•	\$	500		
f. Prior	g. Account Code	h. Form of Payment	i. In-H	Kind Description	j. Date (mm/dd/yy	D-7	k. Amount		
	1525	Check			10/18/20	017	\$	500	
							\$		
							\$		
3. Contributor Information				Add 🗌 Rem	love				
	ne, Mailing Address & city, state, & zip)	& Phone		b. Job Title/Profession		d. Comments	8		
(include	city, state, & hp			_					
				c. Employer's Name/Spe	ecific Field				
					e. Election Sum to Date				
						\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-H	Kind Description	j. Date (mm/dd/yy	yy)	k. Amount		
	-						\$		
							\$		
							\$		
	l only this Pag					\$	-	700	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$		700		
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