# **CERTIFICATION OF LATE REPORTS**

TO:

State Board of Elections Campaign Finance Office Post Office Box 27255 Raleigh, NC 27611-7255

FROM: Cabarrus

County Board of Elections

DATE:

5/4/2018

The following report was received by Campaign Reporting at our County Board of Elections after the due date and does not bear a U.S. postmark of the due date or earlier.

N All oca				
Name, Address, & Office of the Candidate or Political Committee	Name & Address of the Committee Treasurer	Report Name	Due Date	Date Filed
Jessica Dixon Touart 910 Juniper Street Kannapolis, NC 28081	same	First Q	4/30/18	5/3/18
		,		
	,			

A copy of the late received report and the envelope in which the report was received MUST be enclosed. If received by manual delivery, a notation must be made on the report by the date-stamp.

Submitted by:

Carse L. Soles
Director's Signature

Date

## **Disclosure Report Cover**

Amendment

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 In	formation							
a. Full Name					CABAI	RRUS COL	INTY	c. ID Number
COMMITTEE TO ELECT JESSICA DIXON TOUART B					DARD	OF ELECT		
b. Mailing Address (include City, State and Zip Code)					M	AY <b>0 3</b> 201	Ω	d. Date Filed
910 SJU Karnapa	enver-S	-	XD	V	7717	11 00 2011	<b>J</b>	05/02/2018
11000	116	28081	7.		R	ECEIVED		e. Phone Number
Karnapa	ovs ac	(1000)						
2. Report Year	3. Period Star	t Date (mm/dd/3	y)	4. Period I	End Dat	e (mm/dd/yy)	5. Treasur	er Full Name
2018	0	1/01/2018			04/21/20	018	JESSICA E	DIXON TOUART
6. Type of Comn	uittee (Check C	ne)	9. Typ	e of Report	(ch	eck opky one	type of rep	ort from one category)
Candidate Can	npaign 🔲 Par	ty	Munic	ipal		State/County		Referendum
Joint Fundrais	er PA	C		Organization	nal	Organizatio	nal	Organizational
☐ Referendum	☐ Leg	al Expense Fund		Thirty-five	day	Quarterly		Pre-referendum
7. Type of Fund	(if applicabl	e, check one)		Pre-primary	,	First		☐ Final
☐ "Booster Fund	"			Pre-election		Second		Supplemental Final
Building Fund				Pre-runoff		☐ Third		Annual Annual
Presidential E	lection Year Can	didates Fund		Semi-annual		Fourth		☐ Special
☐ NC Public Car	npaign Financing	Fund		Mid Ye	ar	Semi-annua	1	
				Year Er	nd	☐ Mid Ye	ar	10. Special Report Name
Other:				Final		Year E	nd	
8. Number of Fu	ındraisers this	Report		Special .	1	☐ Final		
***************************************	0	***************************************				Special		
3. Account Info	rmation				3. Acc	ount Informat	on	
a. Financial Inst	itution Full Na	me			a. Fina	ncial Institutio	on Full Nan	16
UWHARRIE BA	NK							
b. Purpose		c. Account Cod	e		b. Purp	ose		c. Account Code
CAMPAIGN FIN	IANCE		1					
		d. Period Begin	Balan	ce				d. Period Begin Balance
		S	•••••••	0.00				S
CERTIFICATIO	N							
I certify that t Chapter 163 o	he Committee of f the NC Gener	al Statutes and	that no	funds are	commi	ngled with pro	hibited or o	22A, 22B & 22D-22M of other non-disclosed
funds. I furth	er certify that t	his report is co	mplete.	true and c	orrect a	nd that I have	been train	ed by the NC State Board
Jessler	a Down	Toves		few )	2	a la	4	05/02/2018
P	rinted Name of S	igner		Sign	ature of	Appointed Trea	surer	Date
FOR OFFICE U	SE ONLY	LATE						
Date Receiv	ed: <u>5/</u>	3/18	-	Employ	yee _	5mg	_ <u>De</u>	<u>livery Method</u> Normal Mail
Date Postma	arked:		-	Employ	yee _		- 8	Registered Mail Hand Delivered
Date Scanne	ed:			Employ	yee .		- 🛱	Electronically Filed
Date Data E	ntered:			Emplo	yee _			Signer has not received mandatory training
Please Not	e: This form c	annot be used	to ame	nd committe	ee infor	mation such a	s the comm	nittee address, treasurer,
		nt treasurer, cu						
		d the Statemen						

Detailed Summary Use this form to summarize all disclosure reporting forms are	nd to total mo	netary information		Amendment □ Yes 🏿 No	r
	2. Type of Re		3. II	D Number	
CO. D. T.	2018 First Qua	a			•••••
Start of Election Cycle: January 1,2018		Total this Reporting Perio	od	Total this Election Cycle	
4) Cash on Hand at Start			0.00		0.00
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 105	5.00	S 105	5.00
6) Contributions from Individuals	(CRO-1210)	\$ 1,140	0.98	S 1,140	).98
7) Contributions from Political Party Committees	(CRO-1220)	\$ 214	1.99	S 214	_
8) Contributions from Other Political Committees	(CRO-1230)	s (	0.00	\$ 0	0.00
9) Loan Proceeds	(CRO-1410)	S (	0.00	\$ 0	0.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	S (	0.00	4	0.00
11) Other Receipt Sources					7.00
11a) Interest on Bank Accounts	(CRO-1250)	S	0.00	\$ 0	0.00
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	_	0.00	•	0.00
11c) Outside Sources of Income	(CRO-1250)		0.00	-	0.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)		0.00	_	0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	-	0.00		0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,		\$ 1,460		\$ 1,460	
EXPENDITURES		1,400	,.,,	1,400	.91
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$ 395	5.89	\$ 395	89
13b) Contributions to Candidates/Political Committees	(CRO-1310)	c	0.00	c	0.00
13c) Coordinated Party Expenditures	(CRO-1310)	c	0.00	c	0.00
14) Aggregated Non-Media Expenditures	(CRO-1315)		5.98		5.98
15) Loan Repayments	(CRO-1420)		0.00	c	0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	c	5.00	c	
17) In-Kind Contributions	(CRO-1510)	200	5.97	200	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,		\$ 1,303	_		
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	2 72		1.13	\$ 1,303 \$ 157	
ADDITIONAL INFORMATION			.13	157.	.13
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	S 0	.00		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0	.00		
22) Debts and Obligations owed by the Committee	(CRO-1610)	S 0	.00		
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$ 0	.00		
24) Account Transfers Within the Committee	(CRO-1720)	S 0	.00		
25) Administrative Support	(CRO-1710)	\$ 0	.00	\$ 0.	0.00
26) Forgiven Loans	(CRO-1440)	\$ 0	.00	-	.00
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0	.00	\$ 0.	.00

		outions from I	ndividuals Page From Individuals of \$	<u>l</u> of _	1	Amendmer Yes	nt No
The second of th		Fund if applicable) ICA DIXON TOUART	Γ		2. ID N	Number	
3. Contribut	or Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd	/yyyy)	f. Amount	
☐ Add ☐ Remove	1	Check	***************************************	03/16/2018		S	50.00
☐ Add ☐ Remove	1	Check		03/12/2018		S	50.00
Add Remove	1	Debit Card		04/02/2018		S	5.00
4. Total or	aly this Page				S		\$105.00
	FALL CRO-12 tust be on line 5 of D	05 Pages Setailed Summary Page	CRO-1100)		S		\$105.00
CRO-1205		The state of the s	C State Board of Elections				April 2007

## Amendment Contributions from Individuals ☐ Yes X 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 JESSICA DIXON TOUART 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) LEGAL EEO CONSULTANT MARY DEGNER 12514 BRADFORD HILL LANE c. Employer's Name/Specific Field HUNTERSVILLE, NC 28078 WELLS FARGO BANK e. Election Sum to Date 100.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check 03/13/2018 S 100.00 S S 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) DIrector of Operations JOSEPH DIXON c. Employer's Name/Specific Field 120-1859 Stainsbury Avenu VANCOUVER, BRITISH COLUMBIA, CANADA V5N GENISIS FERTILITY 2M6 e. Election Sum to Date 300.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Debit Card 1 03/13/2018 S 300.00 S S 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) CHIROPRACTOR JAMES LITAKER 4949 PROFESSIONAL PARK DRIVE c. Employer's Name/Specific Field SUITE 206 CABARRUS CHIROPRACTIC KANNAPOLIS, NC 28081 CLINIC e. Election Sum to Date 100.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check 1 04/02/2018 S 100.00 S

(This line must be on line 6 of Detailed Summary Page CRO-1100)

CRO-1210

NC State Re

4. Total only this Page

5. Total of ALL CRO-1210 Pages

500.00

S

S

S

Amendment Contributions from Individuals Pg 2 of ☐ Yes 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 JESSICA DIXON TOUART 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) PRESCHOOL JESSICA TOUART 910 S JUNIPER ST c. Employer's Name/Specific Field KANNAPOLIS, NC 28081 KANNAPOLIS PRESCHOOL e. Election Sum to Date OF THE ARTS 390.98 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount In-Kind WIX 03/05/2018 S 17.50 In-Kind 1 JIGGY WITH THE PIGGY 03/05/2018 S 50.00 In-Kind 1 VISTAPRINT 03/10/2018 S 114.49 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) PRESCHOOL JESSICA TOUART 910 S JUNIPER ST c. Employer's Name/Specific Field KANNAPOLIS, NC 28081 KANNAPOLIS PRESCHOOL e. Election Sum to Date OF THE ARTS 390.98 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount In-Kind 1 **SQUARE** 03/11/2018 S 49.00 In-Kind 1 PALM CARD 03/12/2018 S 159.99 S 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) DATABASE ENGINEER ROBERT TOUART SR 6120 SWANSTON DRIVE c. Employer's Name/Specific Field CHARLOTTE, NC 28069 ORABLE INC e. Election Sum to Date 250.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Debit Card 04/03/2018 S 250.00 5 5 4. Total only this Page 640.98 5 5. Total of ALL CRO-1210 Pages

1,140.98

S

		cal Party Committee s from a political party	S Pg 1 of	1_	Amendment  Yes No
1. Committee Fu	II Name (and Fund if a ELECT JESSICA DIX	pplicable)		2. ID 1	Number
3. Contributor In	formation	□ Add □	Remove		
a. Full Name, Mai (include city, st	ling Address & Phone ate, & zip)			b. Cor	nments
CABARRUS COU PO BOX 1041 CONCORD, NC 2	JNTY DEMOCRATIC 1 28025	PARTY			
				c. Elec	tion Sum to Date 214.99
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/d	d/yyyy)	h. Amount
1	In-Kind	SIGNS	03/05/20	18	\$ 214.99
					S
	-				S
4. Total only t	his Page			S	214.99
	L CRO-1220 Pag e on line 7 of Detailed Su	es mmary Page CRO-1100)		S	214.99
CRO-1220		NC State Board of Elec	tions		April 2007

Disbursen	aents				рø	1 of		Amendmer  1  Yes	nt XI No
Use this form to	report expenditure	s from the commit	tee for	operating exp	enses, c	ontributi	ons to	i candidate/poli	itical
committees and	i coordinated party (	expenditures	III Carena				0112	, canada pez	исы
	ull Name (and Fund							2. ID Number	
COMMITTEE T	TO ELECT JESSICA I								
3. Type of Disbu  Operating Ex		e use separate CR0 ntributions to Candida						ent.) ted Party Expendi	•
4. Payee Inform	THE RESERVE THE PARTY OF THE PA	titobiloto to Calibia		Add	Remo	to the same of the same of	Moina.	ed Party Expense	tures
	Tailing Address & Pl	hone		b. Coordinate				d. Comments	
(include city, sta				U1 C001	ieu com	mittee 1.	Hine	d. Comments	
	X AND SIGNS INC								
8112 STATESVI				c. Level Reg	istered (	Specify)		1	
STE F				☐ Federal		County:			
CHARLOTTE, N	√C 28269			State		] Municip	ality:	e. Election Sun	a to Date
								s	217.18
f. Account Code	g. Form of Payment	h Purnose Code	l: Dot	(	VI. 4		1 p.		500000000000000000000000000000000000000
, 1	Debit Card	The same of the sa			T		***************************************	equired Remark	s
2 3	Deon Card	В		04/04/2018	S	217.18	YAR	D SIGNS	
					S				
4. Payee Inform	ation			Add 🗆	Remo	ve			
	ailing Address & Pl	none		b. Coordinat	STATE OF STA		ame	d. Comments	
(include city, sta									
HUNTER HENR	JCKSON								
1113 SETTER LA	ANE SE			c. Level Regi	istered (	Specify)		1	
CONCORD, NC	28025			☐ Federal	-	County:		1	
				☐ State		] Municip	ality:	e. Election Sum	ı to Date
								S	86.91
f Account Code	g. Form of Payment	h. Purpose Code	1. D-4	(11)					
1	Debit Card				T		<del>†</del>	quired Remarks	s
	Deon Caru	0		04/02/2018	S	86.91		MPAIGN	
					S		PHO	TOGRAPHY	
4. Payee Inform				Add 🗆	Remo	ve			
a. Full Name, Ma	ailing Address & Ph	ione		b. Coordinat	THE RESIDENCE IN SALE		ıme	d. Comments	
(include city, sta									
VISTA PRINT				1					
275 WYMAN ST	REET			c. Level Regi	istered (	Specify)		1	
WALTHAM, MA	1 02451			☐ Federal		County:			
				☐ State		Municip	ality:	e. Election Sum	ı to Date
				100 CP0000100000000000000000000000000000				S	91.80
f Account Code	g. Form of Payment	h Durnora Coda	I. Dat	1 1111	.l.,				20100000000
1	T	***	1				•	quired Remarks	1
1	Debit Card	0	U	03/24/2018	S	91.80	DOO	R HANGERS	
					S				
5. Total only thi	s Page							S	205.00
	CRO-1310 Pages						1	2	395.89
(This line goes i	in line 13a of Detailed :	Summary Page CRO	-1100 if	Operating Exp	enses)			S	395.89
(This line goes i	in line 13b of Detailed : in line 13c of Detailed :	Summary Page CRO Summary Page CRO	-1100 ij	County to Can	ididates/F	Political Co	omm)		
					arty Expe	indinires)			
A* - Media	odes (List detailed	expenditure code							
A - Media E - Salaries	B* - Printir			undraising				her Candidate	
I - Postage	F* - Equipm			olitical Party		H* - Ho	olding	Public Office I	Expenses
O* Other	J - Penaltie	35	K* - C	Office Expense	es	Q* - Do	onatio	on to Legal Expe	nse Fund
CONTRACTOR DESCRIPTION OF THE PARTY OF THE P	e detailed explanatio	on in required ren	ml-o	2.11(1.)					
	deminen capanina	Il ili required real	Idi Ka 1	Tera (re)	1	WAR CHARLES			TX 125 (15)

Amendment

Aggregated Non-Media E	xpenditures
------------------------	-------------

	Amendment					
Page1_ of1_	☐ Yes	X	No			

Optional form used to report NC Non-Media Expenditures of \$50 or less.

		l Fund if applicable)			2. ID N	umber	
OMMITTE	EE TO ELECT JES	SICA DIXON TOUAI	RT				
Payee Info	ormation					7.55	
	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyy	y) f. Amor	unt	g. Required Remarks
☐ Add ☐ Remove	1	Debit Card	0	03/13/2018	\$	23.53	ADDRESS SELVE
Add Remove	1	Electric Funds Tran	O	04/03/2018	S	7.45	FEES TO PAYPAL
Add Remove	1	Electric Funds Tran	0	03/19/2018	S	5.00	FEES FOR TRANSFER
. Total or	nly this Page				S		35.98
	f ALL CRO-1 ust be on line 14 o	315 Pages f Detailed Summary Pa	ge CRO-1100)		s		35.98
Purpose	Codes (List o	detailed expenditur	e code in (d) a	bove)			
E - Salari I - Postag O* - Oth	B* ies F* ge J-	- Printing - Equipment Penalties	C* - Fundr G - Political K* - Office	- To Ano [* - Holdi !* - Donat	ng Publ	ndidate lic Office Expenses Legal Expense Fund	

CRO-1315

NC State Board of Elections

December 2009

### Refunds/Reimbursements From the Committee Pg 1 of 1 ☐ Yes ☒ No Use this form to report refunds/reimbursements, including contributions returned to the contributor 1. Committee Full Name (and Fund if applicable) 2. ID Number COMMITTEE TO ELECT JESSICA DIXON TOUART 3. Payee Information Add Remove a. Full Name, Mailing Address & Phone d. Type of Committee g. Comments (include city, state, & zip) Candidate PAC ☐ Referendum ☐ Party JESSICA DIXON TOUART e. Level Registered (Specify) 910 SOUTH JUNIPER STREET h. Original Receipt Date ☐ Federal County: KANNAPOLIS, NC 28081 03/10/2018 ☐ State ☐ Municipality: i. Original Receipt Amount b. Job Title/Profession c. Employer's Name/Specific Field f. Purpose Code j. Election Sum to Date TEACHER PRESCHOOL OF THE ARTS (103.00)k. Account Code 1. Form of Payment m. Required Remarks n. Date (mm/dd/yyyy) o. Amount Debit Card REIMBURSMENT S 04/05/2018 103.00 3. Payee Information Add Remove a. Full Name, Mailing Address & Phone d. Type of Committee g. Comments (include city, state, & zip) ☐ Candidate PAC JESSICA DIXON TOUART Referendum ☐ Party NC e. Level Registered (Specify) h. Original Receipt Date ☐ Federal County: 03/11/2018 ☐ State ☐ Municipality: i. Original Receipt Amount b. Job Title/Profession c. Employer's Name/Specific Field f. Purpose Code j. Election Sum to Date TEACHER PRESCHOOL OF THE ARTS (83.00)k. Account Code 1. Form of Payment m. Required Remarks n. Date (mm/dd/yyyy) o. Amount Debit Card REIMBURSEMENT 04/03/2018 83.00 3. Pavee Information Add Remove a. Full Name, Mailing Address & Phone d. Type of Committee g. Comments (include city, state, & zip) Candidate PAC Referendum Party JESSICA DIXON TOUART e. Level Registered (Specify) 910 SOUTH JUNIPER STREET h. Original Receipt Date KANNAPOLIS, NC 28081 ☐ Federal County: 03/05/2018 ☐ State ☐ Municipality: i. Original Receipt Amount b. Job Title/Profession c. Employer's Name/Specific Field f. Purpose Code j. Election Sum to Date TEACHER PRESCHOOL OF THE ARTS (80.00)k. Account Code 1. Form of Payment m. Required Remarks n. Date (mm/dd/yyyy) o. Amount Debit Card REIMBURSMENT 04/09/2018 80.00 4. Total only this Page 5 266.00 5. Total of ALL CRO-1320 Pages S (This line must be on line 15 of Detailed Summary Page CRO-1100) 266.00 6. Purpose Codes (List detailed disbursement code in (f) above) L - Returned to Contributor M - Overpayment for Service N - Exceeded Contibution Limit P\* - Reimbursement of In-Kine O\* Other \* Codes require detailed explanation in required remarks field (m)

Amendment

Use this form to report non-monetary contributions, donations, goods or service provided to the committee or fund.  Let CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.  Let Committee Full Name (and Fund If applicable)  COMMITTEE TO ELECT JESSICA DIXON TOUART  3. Contributor Information	In-Kind Contributions			1	1	Amendm	
Committee Tull Name (and Education were or will be refunded within 7 days		mations soo	Pg	of	1	☐ Yes	K No
	Use CRO-1215 if In-Kind Contributions were or wil	ll be refund	ed withi	vices provided t n 7 daws.	o the cor	nmittee or i	und.
COMMITTEE TO ELECT JESSICA DIXON TOUART	1. Committee Full Name (and Fund if applicable)				2. ID	Number	
Description	COMMITTEE TO ELECT JESSICA DIXON TOUAR	Т		•••••••••••••••••••••••••••••••••••••••		••••••	•••••••••••••••••••••••••••••••••••••••
Description	3. Contributor Information	□ A44	П п.				
Individual   Canddate   Canddat		THE RESERVE OF THE PERSON NAMED IN COLUMN 2 IS NOT THE PERSON NAME	A STATE OF THE PARTY OF		I. C.		
Candidate   Party   PO BOX 1041   PAC   Party   PO BOX 1041   PAC   Pack   Party   PO BOX 1041   PAC   Pack   Pa				ti i outor	e. Con	uments	
Party	CABARRUS COUNTY DEMOCRATIC PARTY						
Referendum		X P	arty				
Other Receipt Source   S   214.9	CONCORD, NC 28025	(a)					
S   214.9					d. Elec	tion Sum (	o Date
SIGNS		Цο	ther Rece	ipt Source	S		214.99
SIGNS	e. Description			f. Date (mm/d	d/yyyy)	g. Fair M	arket Amount
S  3. Contributor Information  a. Full Name, Mailing Address & Phone (include city, state, & zip)  JESSICA TOUART  JOS JUNIPER ST  KANNAPOLIS, NC 28081  Description  WIX  Description  WIX  Description  WIX  Description  JOS JUNIPER ST  Add Referendom  Other Receipt Source  Description  WIX  Description  JOS JUNIPER ST  Add Referendom  Other Receipt Source  Description  WIX  Description  JOS JUNIPER ST  Add Remove  Description  JOS JUNIPER ST  Description  JOS JUNIPER ST  Description  JOS JUNIPER ST  Description  Add Remove  Description  Descript	SIGNS			03/05/20	18		••••••
3. Contributor Information  a. Full Name, Mailing Address & Phone (include city, state, & zip)  JESSICA TOUART 910 S JUNIPER ST  KANNAPOLIS, NC 28081  Description  WIX  O3/05/2018  Condidate  Date (mm/dd/yyyy)  JESSICA TOUART  Other Receipt Source  Source  Source  Comments  d. Election Sum to Date  Condidate  Date (mm/dd/yyyy)  JESTIC Market Amount  Add Remove  Add Remove  Long With the Piggy  O3/05/2018  Source  Source  Source  Source  Source  Source  Source  Source  Source  Comments  Add Remove  Long With the Piggy  O3/05/2018  Source  Long Add Remove  Long A							214.99
Add   Remove   Remo						2	
Description		_				S	
Individual   Candidate   Party   Par							
Candidate   Party     Candidate   Party     PAC     PAC       PAC     PAC     PAC     PAC     PAC     PAC				tributor	c. Con	nments	
Party							
PAC   Referendum   d. Election Sum to Date   \$ 390.91							
Referendum							
S   390.93		☐ Re	eferendum		d. Elec	tion Sum t	o Date
Date (mm/dd/yyyy)   Eair Market Amount		. 🗆 0	ther Recei	pt Source	S	•••••••••••••••••••••••••••••••••••••••	390.98
WIX	e. Description			f. Date (mm/d	d/vvvv)	g. Fair M	10 00000
O3/05/2018   S   S   S   S   S   S   S   S   S	WIX		••••••	***************************************	***************************************		••••••
O3/05/2018   S   50.00	HCCV NUMBY TWO DIGGS			03/03/20	10	3	17.50
3. Contributor Information	JIGGY WITH THE PIGGY			03/05/20	18	S	50.00
a. Full Name, Mailing Address & Phone (include city, state, & zip)  JESSICA TOUART 910 S JUNIPER ST KANNAPOLIS, NC 28081  PAC Referendum Other Receipt Source S 390.98  e. Description  SQUARE  PALM CARD  PALM CARD  D STATE Market Amount SQUARE  03/11/2018 S 49.06  4. Total only this Page S 605.97	VISTAPRINT			03/10/20	18	S	114.49
a. Full Name, Mailing Address & Phone (include city, state, & zip)  JESSICA TOUART 910 S JUNIPER ST KANNAPOLIS, NC 28081  Description SQUARE  PALM CARD  Description SQUARE  PALM CARD  Description SQUARE  De	3. Contributor Information	☐ Add	☐ Ren	nove		Sich Gales Ho	
Candidate   Party   PAC   Referendum   Other Receipt Source   S   390.98					c. Con	ments	
Party   PAC   Referendum   Other Receipt Source   S   390.98	(include city, state, & zip)				1		
PAC   Referendum   Other Receipt Source   S   390.98	JESSICA TOUART	100					
Referendum							
Other Receipt Source   \$ 390.98	KANNAPOLIS, NC 28081	0					
## Description  ## SQUARE  ## PALM CARD  ## CARD  ## PALM CARD  ##		_			d. Elec	tion Sum t	o Date
Date (mindalyyyy)   Fair Market Amount	D 1.1						390.98
93/11/2018 \$ 49.00 PALM CARD  03/12/2018 \$ 159.99  \$ 4. Total only this Page \$ 605.97  5. Total of ALL CRO-1510 Pages	•			f. Date (mm/do	l/yyyy)	g. Fair Ma	irket Amount
03/12/2018 \$ 159.99  4. Total only this Page \$ 605.97  5. Total of ALL CRO-1510 Pages	SQUARE			03/11/20	18	S	49.00
4. Total only this Page S 605.97 5. Total of ALL CRO-1510 Pages	PALM CARD			03/12/20	18	S	159.99
5. Total of ALL CRO-1510 Pages						S	
5. Total of ALL CRO-1510 Pages	4. Total only this Page				S		605.97
	5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page)	CRO 1100			S		605.97