Disclosure	Report Cover		
TT 41' C C	and the contract of the contra	 	. 1 1 ***1

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 Infor	mation		NINE PLEASE		
a. Full Name					c. ID Number
Committee to Elect	Charles McKellar				5CELA4
	ude City, State and Zip Code)				d. Date Filed
P. O. Box 8144 Fayetteville, NC 283	301				07/15/2019
					e. Phone Number
					910-987-1482
2. Report Year	3. Period Start Date (mm/d	dd/yy) 4. Period I (mm/dd/yy)	End Date	5. Treasurer Full	
2018	08/14/2018	10/2	0/2017	Charles E. McKel	lar
6. Type of Committ		9. Type of Report	CONTRACTOR DESCRIPTION	A STATE OF THE PROPERTY OF THE PARTY OF THE	from one category)
Candidate Campa		Municipal	State/Co		Referendum
PAC Independent	Referendum	Organizational		Organizational	Organizational
Expenditure	Joint Fundraiser	Thirty-five day	,	Quarterly	Pre-referendum
Legal Expense Fu	MODEL 1				
7. Type of Fund	(if applicable, check one)	Pre-primary		First	Final
"Booster Fund"		Pre-election		Second Third	Supplemental Final
Building Fund		Pre-runoff Semi-annual		Fourth	Annual Special
		Mid Year	S	Semi-annual	Брески
Other:		Year End		Mid Year	10. Special Report Name
		Final		Year End	
8. Number of Funda	raisers this Report	Special		inal	
	None		s	pecial	
11. Account Inform	ation		11. Account I		
11. Account Inform a. Financial Institution F	ation			nformation	
11. Account Inform a. Financial Institution F BB&T	ation Full Name		11. Account In a. Financial Insti	nformation	
11. Account Inform a. Financial Institution F BB&T b. Purpose	ation		11. Account I	nformation	c, Account Code
11. Account Inform a. Financial Institution F BB&T	c. Account Code		11. Account In a. Financial Insti	nformation	c, Account Code
11. Account Inform a. Financial Institution F BB&T b. Purpose	eation Full Name c. Account Code		11. Account In a. Financial Insti	nformation	c, Account Code d. Period Begin Balance
11. Account Inform a. Financial Institution F BB&T b. Purpose Checking	c. Account Code		11. Account In a. Financial Insti	nformation	
11. Account Inform a. Financial Institution F BB&T b. Purpose Checking CERTIFICATION	c. Account Code d. Period Begin Balance \$ 500.00	3	11. Account In a. Financial Institution b. Purpose	nformation tution Full Name	d. Period Begin Balance
11. Account Inform a. Financial Institution F BB&T b. Purpose Checking CERTIFICATION I certify that the Conthe NC General State	c. Account Code c. Account Code d. Period Begin Balance \$ 500.00 mmittee or Fund is in compliates and that no funds are collected and that I have been	ance with all applica	a. Financial Insti	of Article 22A, 22B, non-disclosed funds.	d, Period Begin Balance
11. Account Inform a. Financial Institution F BB&T b. Purpose Checking CERTIFICATION I certify that the Com the NC General Statu is complete, true and	c. Account Code c. Account Code d. Period Begin Balance \$ 500.00 mmittee or Fund is in compliates and that no funds are collected and that I have been	ance with all applica ommingled with proh	a. Financial Insti	of Article 22A, 22B, non-disclosed funds.	d. Period Begin Balance \$ & 22D-22M of Chapter 163 of I further certify that this report
11. Account Inform a. Financial Institution F BB&T b. Purpose Checking CERTIFICATION I certify that the Com the NC General Statu is complete, true and	c. Account Code d. Period Begin Balance \$ 500.00 mmittee or Fund is in compliates and that no funds are collicorrect and that I have been Kellar Printed Name of Signer	ance with all applica ommingled with proh	ble provisions of ibited or other materials.	of Article 22A, 22B, non-disclosed funds.	d. Period Begin Balance \$ & 22D-22M of Chapter 163 of I further certify that this report 07/15/2019 Date
a. Financial Institution F BB&T b. Purpose Checking CERTIFICATION I certify that the Comthe NC General Statutis complete, true and Charles Mcl	c. Account Code d. Period Begin Balance \$ 500.00 mmittee or Fund is in compliates and that no funds are collicorrect and that I have been Kellar Printed Name of Signer	ance with all applica ommingled with proh	ble provisions of ibited or other materials.	of Article 22A, 22B, non-disclosed funds.	d. Period Begin Balance \$ & 22D-22M of Chapter 163 of I further certify that this report 07/15/2019 Date Delivery Method Normal Mail
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a. Financial Institution F BB&T b. Purpose Checking CERTIFICATION I certify that the Conthe NC General Statutis complete, true and Charles Mcl FOR OFFICE USE O Date Received; Date Postmarked Date Data Entered	c. Account Code d. Period Begin Balance \$ 500.00 mmittee or Fund is in compliates and that no funds are collected and that I have been Kellar Printed Name of Signer ONLY d: JUL 15 2019 ed: s form cannot be used to am	ance with all applica ommingled with prohin trained by the NC Si Employee: Employee: Employee:	ble provisions of ibited or other natate Board of Egnature of Appointed	of Article 22A, 22B, non-disclosed funds. lections.	d. Period Begin Balance \$ & 22D-22M of Chapter 163 of I further certify that this report \[\overline{07/15/2019} \] \[\overline{Delivery Method} \] \[\overline{Normal Mail} \] \[\overline{Registered Mail} \] \[\overline{Hand Delivered} \] \[\overline{Delivery Method} \] \[\overline{Signer has not received} \]

CRO-1000

Amendment \boxtimes Yes No

Detailed SummaryUse 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	OF DESCRIPTION OF THE PROPERTY	. ID Number
	hird Quarter Plus		CELA4
		Total this	Total this
Start of Election Cycle: January 1,	2018	Reporting Period	Election Cycle
4) Cash on Hand at Start		\$ 500.00	\$ 0.00
RECTIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 235.00	\$ 235.00
6) Contributions from Individuals	(CRO-1210)	\$ 3,686.51	\$ 4,542.96
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 Organization	s (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
11 e) 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	11d and 11e)	\$ 3,921.51	\$ 4,777.96
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 1,933.63	\$ 1,933.63
13b) Contributions to Candidates/Political Committee	es (CRO-1310)	\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 0.00	\$ 0.00
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)	\$ 1,936.51	\$ 2,292.96
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 1	16 and 17)	\$ 3,870.14	\$ 4,226.59
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract	ct line 18)	\$ 551.37	\$ 551.37
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.00	To Brown
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	\$ 0.00
26) Forgiven Loans	(CRO-1440)	\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum	(CRO-2200)	\$ 0.00	\$ 0.00
28) Contributions to be Refunded	(CRO-1215)	\$ 0.00	\$ 0.00
-5, Contributions to be Refunded	(CRO-1213)	Ψ 0.00	Ψ 0.00

Aggregated Contributions from Individuals

Page

<u>1</u> of

Amei	ıdment	
\boxtimes	Yes	No

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

		mittee Full Na ttee to Elect Ch		SCELA4				
10075525								
3.	Cont	ributor Inforn						
a.	Amend		b. Account Code	c. Form of Payment	d, In-Kind Description	e. Date (mm/dd/yyyy	, ւ	Amount
		Add	01	Cash		08/14/20		\$ 20.00
]	Remove	01	Casii		00/14/20	10	Ψ 20.00
Ļ		Add	01	Check 1722		09/11/20	18	\$ 50.00
Ļ]	Remove						
Ĺ]	Add Remove	01	Check 6831	-	09/11/20	18	\$ 15.00
		Add	01	Cash		09/26/20	1.8	\$ 50.00
]	Remove	01	Cash		09120120	10	J0.00
]	Add	01	Cash		09/27/20	18	\$ 50.00
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				mmary Page CRO-1100)			\$ 2	35.00

		n Individuals vidual contributions o	ver \$50	Pg or contributions unde	<u>1</u> of or \$50 if form CR	<u>3_</u> O 1205 is no	Amendmen Yes t used	,
Sween word warmer to be a		and Fund if applicab				2. ID Num	white with the same of the sam	
Committe	ee to Elect Charles	McKellar					5CELA4	
a. Full Nan (include	butor Informations, Mailing Address & city, state, & zip)			Add Rem b. Job Title/Profession Retired	love	d. Comments Donation		
	ee Johnson stead Drive			c. Employer's Name/Spe	ocific Rield			
	lle, NC 28304			I.R.S.				
•	,					e. Election St	um to Date	
						\$	100.00	
f. Prior	g, Account Code	h. Form of Payment	i. In-k	ind Description	j. Date (mm/dd/yy	уу)	k, Amount	
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							\$	
	butor Informatio	to the state of th		Add 🗌 Rem	iove			
	ie, Mailing Address &	è Phone		b. Job Title/Profession		d. Comments	i	
Thomas I	city, state, & zip) D. Macon			Retired		Donation		
	okside Avenue			e. Employer's Name/Spe	cific Field			
Fayettevi	lle, NC 28305			U.S. Postal Service			u.	
						e. Election Si	ım to Date	
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	butor Informatio	Control of the Artist Control of the		Add 🗌 Rem	ove			
23/24/03/24/03/25/25/25	ie, Mailing Address &	Phone		b. Job Title/Profession		d, Comments		
myrethysis (northwise for the second	city, state, & zip) ph deViere			Owner		Donation		
513 Oakr	idge Avenue			c. Employer's Name/Spc	eific Field			
Fayettevil	lle, NC 28305			219 Group, Inc.		TC1 - 42 C		
						e. Election Su		
encusempganaiamistal		SHORESTALE AND MADE AND	aggariessiones	ogsill: (Sphilapping) pini (Opposition (Danishele - Shinese		\$	150.00	
f. Prior	g, Account Code	h. Form of Payment	i, In-K	ind Description	j. Date (mm/dd/yy)		k. Amount	
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						\$	
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4. Tota	lonly this Pag	e			\$		350.00
	l of ALL CRO e must be on line 6 of	-1210 Pages Detailed Summary Page Cl	RO-1100)		\$		350.00
CDO IA			3100 0 1 401				

					Amei	ıament	
Contributions from Individuals	Pg	2	of	3	\boxtimes	Yes	ſ

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

1. Comm	1. Committee Full Name (and Fund if applicable)					2, ID Num	ber	
Committe	ee to Elect Charles	McKellar					5CELA4	
a. Full Nan	ibutor Informatio ne, Malling Address &			Add Remo	ove.	d, Comments		
Mary E.		See Silver of the Control of the Con		Retired	·~ • • • • • • • • • • • • • • • • • • •	Donation		
217 Cecil Fayettevi	ille, NC 28390		,	c. Employer's Name/Spec U.S. Postal Service	Mic Piela			
						e, Election Su		
f. Prior	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	L East of Barressel		Z-2 Dazzaisana	** Data (martidalini	\$	100.00	
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Martin C. Williams 1736 Joncee Street			<u> Sanamangar</u>	2	ec. pial			
	, NC 28312			c. Employer's Name/Spec U.S. Army				
						e. Election Su		
f, Prior	I	I. r			and the state of	\$	100.00	
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200000000000000000000000000000000000000	ne, Mailing Address & city, state, & zip)	¿ Phone		b. Job Title/Profession Instructor		d. Comments Donation		
Charles N	McKellar	<u>500 2000 11 1900 11 10 10 10 10 10 10 10 10 10 10 10 1</u>	ZBWIRWINESCO.	c. Employer's Name/Spec	**************************************			
	eham Court ille, NC 28305			FTCC	Hic Field		······································	~~~~
						e. Election Su		
f. Prior	g, Account Code	h. Form of Payment	a a a a a	and Description	j. Date (mm/dd/yy)	\$	2,399.01 k. Amount	- 1.04 (March 1902)
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	01	Check 2604			10/01/20		\$	300.00
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4, Total	l only this Page					\$		2,049.01
	of ALL CRO	-1210 Pages	0.1100			\$		2,399.01

No

							Amendment	,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-
		n Individuals		Pg	of	3_	☐ Yes	No No
44/1976/July constitution of the constitution		vidual contributions or		or contributions unde	r \$50 if form CR	r bedereasyerless bearing the property of	CONTRACTOR OF THE PROPERTY AND ADDRESS OF THE PARTY AND ADDRESS OF THE	
I, Comn	iittee Full Name (and Fund if applicab	le)			2. ID Num	ber	
Committe	ee to Elect Charles	McKellar					5CELA4	
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550 650 7550 7550	ne, Malling Address &	& Phone		b. Job Title/Profession		d, Comments		
(include Rachel M	city, state, & zip)			Retired		Donation		
1	eham Court			c. Employer's Name/Spe	cific Field			
1	lle, NC 28311			Cape Fear Medical	21 (2003) 1 (Coupa (21) Coupa (20) Coupa (20			
						e. Election Si	ım to Date	
						\$	987.50	
f. Prior	g, Account Code	h, Form of Payment	i, In-K	i Sind Description	j. Date (mm/dd/yy	yy)	k. Amount	
☐ 01 CreditCard		Yard	Signs/Wire	09/07/2018		\$	987.50	
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	city, state, & zip)			Retired		Donation		
Horace W	viinams stone Road			c. Employer's Name/Spc	cific Field			
	lle, NC 28301			U.S. Army				
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	city, state, & zip)		10. 12. 15.	IRetired		Donation		
Theresa (sale hore Drive			c. Employer's Name/Spe	cific Field			
	lle, NC 28311			U.S. Army				

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4. Tota	l only this Pag	e			\$	•	1,287.50
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CDO 12	10	, , , , , , , , , , , , , , , , , , ,	MCG D 1 CDL .				1 10000

Disbursements Pg 1 of 3

Amei	idment	
\boxtimes	Yes	No

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

	ull Name (and Fun							2. ID Number
	lect Charles McKell	PROGRAMMA TO THE PROGRAMMA PROGRAMMA TO THE PROGRAMMA PROGRAMA PROGRAMMA PROGRAMMA PROGRAMMA PROGRAMMA PROGRAMMA PROGRAMMA PRO			Wine WHO I I Section		neody)	5CELA4
3, Type of Disb		se use separate C.					*********	
Operating E	PANAMENTAL PROPERTY OF THE PANAMENT OF THE PAN	Contributions to Can			ittees		rdinate	d Party Expenditures
4. Payee Inform			Ad			Remove		
	ng Address & Phone		D, C	Coordinated Com	mittee Na	me	(SOSSINOSCANO)	mments
(include city, state, SpeediPrint Fay							Pay.	ment
201 Franklin Sti			a T	evel Registered (Sanaira)			
Fayetteville, NC			Г	Federal	precity)	County:		
i uyotto viiio, ivo	20301		ᅢ	State	Ä	Municipality:	e. Ele	ction Sum to Date
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							\$ 4	165.45
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01	Check 1002	В		08/29/2018		\$171.21		1 Cards/
		<b>D</b>			motes and the same	IMODIATANA INTERNATIONAL AND	Info.	Cards
4. Payee Inform			Ad			Remove		
	ng Address & Phone		b, C	Coordinated Com	mittee Na	me	62600-0297000	mments
(include city, state,	& zip)						Pay:	ment
BB&T	antan Duina		2012F1634	1.5	1 10 1			
5137 College Co Fayetteville, NC		:	C. L	evel Registered (! Federal		Country		
rayenevine, NC	20311			State	$\boxtimes$	County: Municipality:	a Ela	ction Sum to Date
		3	┡	State	لبيا _	widincipality.		Chon Sum to Date
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f. Account Code	g. Form of Payment	h. Purpose Code	i	i. Date (mm/dd/yy	уу)	j. Amount	k. Re	quired Remarks
01	Bank Debit	О		08/31/2018		\$29.07	Serv	ice Charges
			+					
						\$		
4. Payee Inform	CALLED CAR STORY AND A SECURIT OF THE SECURIT OF TH		Ad			Remove		
	ng Address & Phone		b. C	Coordinated Com	mittee Na	me	CANTAGARDINA.	mments
(include city, state,							Pay	ment
SpeediPrint Fay			25005043					
201 Franklin Str Fayetteville, NC		ļ	C. L	evel Registered (S	specity)	Country		
rayetteville, NC	20301		$\parallel$	Federal State		County: Municipality:	o Dio	ction Sum to Date
		Į.	Ш	State		withincipanty.	C. DIC	chon Sunt to 19ate
							\$ 6	504.55
f. Account Code	g. Form of Payment	h. Purpose Code	i	i. Date (mm/dd/yy	уу)	j. Amount	731740,040,04,00	quired Remarks
01	Check 1003	В	-	09/13/2018		\$139.10		mation
	CHOCK 1005		$\perp$	05,15,2010		Ψ133.10	Card	S
						\$		
5. Total only thi	s Page						\$	633.63
	CRO-1310 Pages	The second second					-	
(This line goes in	line 13a of Detailed Sun	mary Page CRO-1100	if Op	perating Expenses	)		\$	633.63
	line 13b of Detailed Sun		-				Ψ	055.05
	line 13c of Detailed Sum				xpenditur	·es)	Vardee ARG	
7. Purpose Code		renditure code in (				D		111.
A* - Media E - Salaries	B* - Printing F* - Equipment	C* - Fund G - Politic				D - To Anothe		lidate Office Expenses
I - Postage	J - Penalties	K* - Offic						gal Expense Fund
O* - Other						The state of the s	Version Commission of the	***
* Codes require	e detailed explanati	on in required re	mar	ks field (k)				

Dis	bu	rsem	ents
DIO	νu	190111	CHIS

Amendment Yes

No

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

	ull Name (and Fundlect Charles McKell	- mingrature - and formulation of the section of th			2, ID Number 5CELA4
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	S RECOGNIZACIONES CONTRACTOR CONT		NAME AND ADDRESS (STREET, STREET, STRE		\$ 400.00
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1518 Swainey A Fayetteville, NC		<u> </u>	c. Level Registered (Specify)  Federal	County:	
ray out vino, rec	, 20303		State	Municipality:	e. Election Sum to Date
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A* - Media E - Salaries	B* - Printing F* - Equipment	C* - Fundr		D - To Anothe	
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O* - Other					
· · Coues require	e detailed explanati	on in required ret	narks Heid (K)		

Disbursements				
Disbut sements	Pg	<u>3</u>	of <u>3</u>	

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

Annual Control of the	ull Name (and Fun- lect Charles McKell	STREET STORT TO STORT STORY OF STREET			2. ID Number 5CELA4
3. Type of Disbi			RO-1810 forms for each (	pe of Disbursem	
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Gail Leak					
3341 Red Fox R			c. Level Registered (Specify)		
Spring Lake, NO	3 28390		☐ Federal ☐ State ☐	County: Municipality:	e, Election Sum to Date
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A* - Media	B* - Printing	C* - Fundr	raising	D - To Anothe	
E - Salaries L - Postage	F* - Equipment J - Penalties	G - Politica K* - Office			Public Office Expenses 1 to Legal Expense Fund
O* - Other				Section 2	
* Codes require	detailed explanati	on in required rea	marks field (k)		

Amendment

Yes

 $\boxtimes$ 

No

## **In-Kind Contributions**

				Amei			
Pg	<u>1</u>	of	<u>1</u>		Yes	$\boxtimes$	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.
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1. Committee Full Name (and Fund if applicable)				2. ID	Numl	**************************************
Committee to Elect Charles McKellar		_				5CELA4
3. Contributor Information Add R	Remove					
a. Full Name, Mailing Address & Phone	TO SHARE THE PROPERTY OF THE PARTY OF THE PA	e of C	Contributor	994668868888	nments	
(include city, state, & zip)			vidual	Dona	ation	
Charles McKellar			didate			
313 Wareham Ct. Fayetteville, NC 28311		Party PAC	•			
Fayeueville, NC 28511	片		erendum	A Elei	adan Si	um to Date
!			er Receipt Source	Westpress	menter krainet entrantation	ekanggang ganglik gaman da anggan da da sa
			-	\$	2,399	9.01
e, Description  Vard Signs With Wires			f, Date (mm/dd/yy)	уу)	g, Fai	ir Market Amount
Yard Signs With Wires			08/31/2018	}	\$	949.01
	_	_			\$	
					\$	
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a. Full Name, Mailing Address & Phone	<b>b.</b> Туре	Oxygen repri	Contributor	c. Com	CONTRACTOR STATE AND ASSESSMENT	
(include city, state, & zip)		Indiv	vidual	Dona	ition	(CONT
Rachel McKellar			didate			
313 Wareham Court		Party				
Fayetteville, NC 28311		PAC Refer	erendum	a Elec	******* <b>C</b> V	7 K (1)
			erendum er Receipt Source	***************************************		um to Date
		- Cinc	A Receipt Bourse	\$	987.5	50
e. Description		1881.03	f. Date (mm/dd/yyy	/y)	g. Fai	ir Market Amount
Yard Signs With Wires			09/07/2018	<b>!</b>	\$	987.50
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e. Description			f. Date (mm/dd/yyy	n)	g. Fai	ir Market Amount
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				$\overline{}$		
					1 026	C 61
4. Total only this Page 5. Total of ALL CRO-1510 Pages				\$	1,936	
(This line must be on line 17 of Detailed Summary Page CRO-1100)				\$	1,936	6.51