Due July 29,2019

Disclosure Report			2 ⁽⁸⁾			Amendment Yes N	0
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 upon. Committee Information		nformation.	in the second of the	Stat Comerci	O september 2 description		
a. Full Name	- TDM - 1						
Courtney B	<u>a</u>	KS-MCL	auchlin	2		c. ID Number	
b. Mailing Address (include Cit			. 0	*		¥ 0	
6559 Pacific						d. Date Filed	
Fayetteville, IX 28314					07/19/19		
3	:= \	ec 96				e. Phone Number	
			* (4)	5		(410)527-0548	
2. Report Year 3. Period			yy) 4. Period	End Date (m			Mark
501d OU/10	1/1	9	07/20	1/19	Co	ulthay Banks-Mal	sught;
6. Type of Committee (Ch	eck (One)	9. Type of Rep	ort (check	only one type	of report from one category)	DANIE NO.
Candidate Campaign	Par	ty	Municipal	Stat	e/County	Referendum	100000
PAC	and a		Organization		Organizational	Organizational	
Independent Expenditure	Join	nt Fundraiser	Thirty-five da	ay	Quarterly	Pre-referendum	- 1
Legal Expense Fund		1	Pre-primary Pre-election		First	Final	
7. Type of Fund (if applicable, check one)			Pre-election Pre-runoff		Second Third	Supplemental Final	
Booster Fund	CUDIE	check one)	Semi-annual	H	Fourth	Annual Special	.
Building Fund		l)	Mid Yea	nr	Semi-annual	Special	
4 3		Įi,	Year En	d 🔲	Mid Year	10. Special Report Na	me
Other:			Final	. _	Year End	A CONSTRUCTION OF THE PARTY OF	
8. Number of Fundraisers	this	Report	Special		Final		
O				⊔	Special		
11. Account Information	(Fig.)	为和种类的数数			t Information	在核聯集的信仰的特勢(b)	经过滤
a. Financial Institution Full Nan		**************************************	-	a. Financial I	nstitution Full Na	me	
STOKE SWINING	_ (rear Out	Obs			B = 0	
State Employee							- 1
b. Purpose	14	c. Account Code		b. Purpose	1	c. Account Code	
b. Purpose Comittee	14			b. Purpose	# ·	c. Account Code	
b. Purpose Comittee Fords	14	c. Account Code	e	b. Purpose	से क च	9	
b. Purpose Comittee	## #	c. Account Code	e	b. Purpose		d. Period Begin Balance	
b. Purpose Comittee Funds Deposits		c. Account Code	e	b. Purpose		9	
b. Purpose COMITACE FUNDS DEPOSITS CERTIFICATION		c. Account Code	Balance	i	* 4	d. Period Begin Balance	
b. Purpose COMITICE FUNDS DEPOSITS CERTIFICATION I certify that the Committee of	or Fu	d. Period Begin	Balance nce with all appl	icable provisi	ons of Article 22	d. Period Begin Balance \$ A, 22B & 22D-22M of Chapter 1	63
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Detailed Summary

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

Amendment

Yes

No

1. Committee Full Name (and Fund if applicable)	2. Type of	Report	3. ID Number
Courney Bank McLaughii	N		
Start of Election Cycle: January 1,		Total this Reporting Period	Total this d Election Cycle
4) Cash on Hand at Start	11 (\$ O	\$
<u>RECEIPTS</u>			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$	\$
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CBO 1410)	\$ 170 88	\$
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 Organization	s (CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c	c,11d and 11e)	\$ 100.87	\$
EXPENDITURES	M 47. m 44 m 47. m	TO THE CONTRACTOR OF THE CONTR	
3) Disbursements	-		
13a) Operating Expenditures	· (CRO-1310)	\$	\$
13b) Contributions to Candidates/Political Committees		\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
4) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
5) Loan Repayments	(CRO-1420)	\$	\$
6) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	\$
7) In-Kind Contributions	(CRO-1510)	\$	\$
8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	INVESTMENT OF THE PARTY OF THE	\$	\$
9) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18)	\$ Ø	\$
ADDITIONAL INFORMATION			Control of the Contro
D) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
1) Outstanding Loans (incl. ones from other campaigns)	- The second specific and the second	\$	
2) Debts and Obligations owed by the Committee	(CRO-1610)	<u>\$</u>	
3) Debts and Obligations owed to the Committee	(CRO-1620)	\$	
Account Transfers Within the Committee	(CRO-1720)	\$	
6) Administrative Support	(CRO-1710)	\$	\$
) Forgiven Loans	(CRO-1440)	\$	\$
7) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$
) Contributions to be Refunded	(CRO-1215)	\$	\$

Loan Proceeds	Pg	5 .	Amendment Ves No		
Use this form to report proceeds from a loan and loan end	dorser's information	of	Yes No		
A loan proceeds statement must accompany each loan that	at is from an individual				
1. Committee Full Name (and Fund if applicable)			2. ID Number		
	raughlin				
3. Lender Information	☐ Add ☐ Remove				
a. Full Name, Mailing Address & Phone	b. Job Title/Profession		d. Comments		
(include city, state, & zip)					
Comberland County Board of Electrons	Sold		FILD FEO SINDRY		
Board of Electrons	c. Employer's Name/Speci	fic Field	e. Start Date (mm/dd/yyyy)		
			0/10/15010		
			f. End Date (mm/dd/yyyy)		
g. Rate h. Security Pledged i. A	ccount Code [i. Form of P.				
	ccount Code j. Form of P	ayment	k. Amount		
%			\$		
. Full Name of Lending Institution			m. Loan Number		
	The second secon				
Endorsers/Makers (The people who guarantee the loan.)					
Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c	. Employer's Name/Specific Field		
(menute try, state, et zip)					
			- <i>-</i>		
•	d. Percentage	e.	Amount		
		%	\$		
T. H.M. M. W. A.M. G. D.	many many many many many many many many				
Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c,	Employer's Name/Specific Field		
(declade city) state, et zip)					
			•		
-			•		
	d. Percentage	e.	Amount		
		%	\$		
Full Name, Mailing Address & Phone	h Tab (Ctal. (D) C				
(include city, state, & zip)	b. Job Title/Profession	e.	Employer's Name/Specific Field		
	•				
	d. Percentage	e.	Amount		
		% 3	,		
Full Name, Mailing Address & Phone	b. Job Title/Profession		Employer's Name/Specific Field		
The state of the s	or good Thic/T Tolession	- (0.	Employer's Name/Specific Freid		
include city, state, & zip)					
(include city, state, & zip)			• "		
(include city, state, & zip)					
(include city, state, & zip)					
(include city, state, & zip)	d. Percentage	e,	Amount		
(include city, state, & zip)	d. Percentage	e. % \$			

Disbursem					Pg	of	Yes No
Use this form to	report expenditures coordinated party ex	from the committe	e fo	r; operating e	xpenses,	contributions to c	andidate/political
	ull Name (and Fun						2, ID Number
		· · · · · · · · · · · · · · · · · · ·	C i	aught	10		2, 1D Rumber
3. Type of Disb		ise use separate C				vpe of Disbursem	ents)
Operating E		Contributions to Can				CTOWN .	ordinated Party Expenditures
4. Payce Inform	ation		Ad	d		Remove	
	ng Address & Phone		ъ. С	Coordinated Co	mmittee Na	эте	d. Comments
(include city, state,	& zip)						
- CONCE	of Electro Urnainkx KUNLO, LI	2010.00	600,00554				
Early	tullo, Li	78301	C, L	evel Registered Federal	(Specify)	County:	
(-)	ι		H	State	H	Municipality:	e, Election Sum to Date
							\$
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/	уууу)	j. Amount	k. Required Remarks
	money Order	H		07/19/	2019	\$ 100 geg	File fee
						\$	
4. Payce Inform	ation		Ad	ď		Remove	<u> </u>
n zakraja disegu inigira sebera kejum zarok an jezek a	ng Address & Phone	<u> </u>		Coordinated Co	umittee Na		d. Comments
(include city, state,			1000000	· · · · · · · · · · · · · · · · · · ·		Name 120	
			e. L	evel Registered	(Specify)		
			Ц	Federal		County:	
			Щ	State	<u> </u>	Municipality:	e. Election Sum to Date
							\$
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			Arrada Ass	**************************************	<i>1949</i> /		
						\$	
						\$	
4. Payce Inform	ation		Ad	d	П	Remove	
[3/6527756 SERVICE LOSS 650 SECTION	ng Address & Phone		er consesses	Coordinated Cor	nmittee Na		d. Comments
(include city, state,							10.000 (10.000
			c, L	evel Registered	(Specify)		
			님	Federal	빌	County:	
			Ш	State		Municipality:	e, Election Sum to Date
							\$
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						\$	
						_	
						\$	
5. Total only thi							\$
	CRO-1310 Pages	P. (P.O. 110)					
	line 13a of Detailed Sun line 13b of Detailed Sun					al Cammi	\$
	line 13c of Detailed Sum						
7. Purpose Code	es (List detailed ex				-		1
A* - Media	B* - Printing	C* - Fund	raisi	ng		D - To Anothe	tina and an anti-citation and a second contract and a second contr
E - Salaries I - Postage	F* - Equipment J - Penalties	G - Politic K* - O ffic					Public Office Expenses n to Legal Expense Fund
O* - Other	• Formitios	at 2 Oille	v 44A	henoro		- Λ - nousiloi	n to regat expense rund
* Codes require	e detailed explanati	ion in required re	mar	ks field (k)			

Disbursements

Amendment