Disclosure Report Cover

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 Information

a. Full Name	c. ID Number
Courtney Banks-McLaughlin	
b. Mailing Address (include City, State and Zip Code)	**d. Date Filed**
6559 Pacific Ave Fayetteville NC 28314	10/01/19
	e. Phone Number
	910.527.0248

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2019	07/29/19	09/24/19	Courtney Banks-McLaughlin

6. Type of Committee (Check One)

- ☒ Candidate Campaign
- ☐ PAC
- ☐ Independent Expenditure
- ☐ Legal Expense Fund
- ☐ Party
- ☐ Referendum
- ☐ Joint Fundraiser

7. Type of Fund *(if applicable, check one)*

- ☐ "Booster Fund"
- ☐ Building Fund
- ☐ Other:

8. Number of Fundraisers this Report

0

9. Type of Report *(check only one type of report from one category)*

Municipal	State/County	Referendum
☐ Organizational	☐ Organizational	☐ Organizational
☒ Thirty-five day	Quarterly	☐ Pre-referendum
☐ Pre-primary	☐ First	☐ Final
☐ Pre-election	☐ Second	☐ Supplemental Final
☐ Pre-runoff	☐ Third	☐ Annual
Semi-annual	☐ Fourth	☐ Special
☐ Mid Year	Semi-annual	
☐ Year End	☐ Mid Year	**10. Special Report Name**
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

11. Account Information

a. Financial Institution Full Name	
SECU	
b. Purpose	**c. Account Code**
	01
	d. Period Begin Balance
	$

11. Account Information

a. Financial Institution Full Name	
b. Purpose	**c. Account Code**
	d. Period Begin Balance
	$

CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

Courtney Banks-McLaughlin (Printed Name of Signer) | Courtney Banks-McLaughlin (Signature of Appointed Treasurer) | 10-1-19 (Date)

FOR OFFICE USE ONLY

OCT - 1 2019

Date Received:		Employee:	Kathleen
Date Postmarked:		Employee:	
Date Scanned:		Employee:	
Date Data Entered:		Employee:	

Delivery Method
- ☐ Normal Mail
- ☐ Registered Mail
- ☑ Hand Delivered
- ☐ Electronically Filed
- ☐ Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

Amendment ☐ Yes ☐ No

Use 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	3. ID Number
Courtney Banks-McLaughlin	35 Day Report	

Start of Election Cycle: January 1, _____		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$	$
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	$ 2110	$ 2110
6) Contributions from Individuals	(CRO-1210)	$ 851	$ 851
7) Contributions from Political Party Committees	(CRO-1220)	$	$
8) Contributions from Other Political Committees	(CRO-1230)	$	$
9) Loan Proceeds	(CRO-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 Organizations	(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, 11c, 11d and 11e)*		$ 2961	$ 3131.88
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	$ 539.40	$ 710.28
13b) Contributions to Candidates/Political Committees	(CRO-1310)	$	$
13c) Coordinated Party Expenditures	(CRO-1310)	$	$
14) Aggregated Non-Media Expenditures	(CRO-1315)	$ 144.8	$ 144.8
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)*		$ 684.20	$ 855.08
19) Cash on Hand at End *(Add lines 4 and 12 together, then subtract line 18)*		$ 2276.80	$ 2276.80
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	$ 170.88	
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)	$	$

Aggregated Non-Media Expenditures

Page 1 of 1

Amendment ☐ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Courtney Banks-McLaughlin	

3. Payee Information

a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
☐ Add ☐ Remove	01	Checking		08/23/19	$ 16.2	Volunteers meal
☐ Add ☐ Remove	01	Checking		08/23/19	$ 10.68	volunteers meal
☐ Add ☐ Remove	01	Checking	K	08/31/19	$ 5.35	clipboards
☐ Add ☐ Remove	01	Checking		08/30/19	$ 39.49	volunteer meals
☐ Add ☐ Remove	01	Checking	K	09/06/19	$ 5.77	office expense
☐ Add ☐ Remove	01	Checking	K	09/06/19	$ 4.28	office expense
☐ Add ☐ Remove	01	Checking		09/20/19	$ 27.31	volunteer meals
☐ Add ☐ Remove	01	Checking		09/05/19	$ 35	PO Box
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	

4. Total only this Page	$ 144.08
5. Total of ALL CRO-1315 Pages *(This line must be on line 14 of Detailed Summary Page CRO-1100)*	$ 144.08

6. Purpose Codes (List detailed expenditure code in (d) above)

	B* - Printing	**C* - Fundraising**	D - To Another Candidate
E - Salaries	**F* - Equipment**	G - Political Party	**H* - Holding Public Office Expenses**
I - Postage	J - Penalties	**K* - Office Expenses**	**Q* - Donations to Legal Expense Fund**
O* - Other			

*** Codes require detailed explanation in required remarks field (g)**

Aggregated Contributions from Individuals

Amendment ☐ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Courtney Banks-McLaughlin	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove		check		08/04/19	$ 25
☐ Add ☐ Remove		check		08/04/19	$ 25
☐ Add ☐ Remove		check		08/04/19	$ 50
☐ Add ☐ Remove		check		08/03/19	$ 25
☐ Add ☐ Remove		check		08/03/19	$ 25
☐ Add ☐ Remove		check		08/03/19	$ 25
☐ Add ☐ Remove		check		08/03/19	$ 25
☐ Add ☐ Remove		check		08/02/19	$ 50
☐ Add ☐ Remove		check		08/02/19	$ 25
☐ Add ☐ Remove		check		08/02/19	$ 25
☐ Add ☐ Remove		check		08/01/19	$ 40
☐ Add ☐ Remove		check		08/01/19	$ 25
☐ Add ☐ Remove		check		07/31/19	$ 10
☐ Add ☐ Remove		check		7/31/19	$ 25
☐ Add ☐ Remove		check		07/30/19	$ 25
☐ Add ☐ Remove		check		07/30/19	$ 25
☐ Add ☐ Remove		check		07/30/19	$ 25
☐ Add ☐ Remove		check		08/05/19	$ 25
☐ Add ☐ Remove		check		07/30/19	$ 25
☐ Add ☐ Remove		check		07/30/19	$ 25
☐ Add ☐ Remove		cash		08/02/19	$ 25
☐ Add ☐ Remove		cash		08/02/19	$ 25

4. Total only this Page	$ 600
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$

Aggregated Contributions from Individuals

Amendment ☐ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Courtney Banks-McLaughlin	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove		check		08/12/19	$ 30
☐ Add ☐ Remove		check		08/11/19	$ 25
☐ Add ☐ Remove		check		08/11/19	$ 25
☐ Add ☐ Remove		check		08/10/19	$ 25
☐ Add ☐ Remove		check		08/09/19	$ 25
☐ Add ☐ Remove		check		08/08/19	$ 25
☐ Add ☐ Remove		check		08/08/19	$ 40
☐ Add ☐ Remove		check		08/08/19	$ 25
☐ Add ☐ Remove		check		08/07/19	$ 25
☐ Add ☐ Remove		check		08/06/19	$ 20
☐ Add ☐ Remove		check		08/06/19	$ 25
☐ Add ☐ Remove		check		08/06/19	$ 25
☐ Add ☐ Remove		check		08/06/19	$ 25
☐ Add ☐ Remove		check		08/05/19	$ 25
☐ Add ☐ Remove		check		08/05/19	$ 25
☐ Add ☐ Remove		check		08/05/19	$ 25
☐ Add ☐ Remove		check		08/05/19	$ 25
☐ Add ☐ Remove		check		08/05/19	$ 25
☐ Add ☐ Remove		check		08/05/19	$ 25
☐ Add ☐ Remove		check		08/13/19	$ 25
☐ Add ☐ Remove		cash		08/13/19	$ 25
☐ Add ☐ Remove		cash		08/13/19	$ 10

4. Total only this Page	$ 550
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$

Aggregated Contributions from Individuals

Amendment ☐ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Courtney Banks-McLaughlin	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove		check		08/13/19	$ 21
☐ Add ☐ Remove		check		08/13/19	$ 25
☐ Add ☐ Remove		check		08/13/19	$ 25
☐ Add ☐ Remove		check		08/04/19	$ 25
☐ Add ☐ Remove		check		08/16/19	$ 25
☐ Add ☐ Remove		check		08/14/19	$ 25
☐ Add ☐ Remove		check		08/16/19	$ 25
☐ Add ☐ Remove		check		08/15/19	$ 25
☐ Add ☐ Remove		check		08/18/19	$ 25
☐ Add ☐ Remove		check		08/24/19	$ 25
☐ Add ☐ Remove		check		08/24/19	$ 25
☐ Add ☐ Remove		check		08/24/19	$ 40
☐ Add ☐ Remove		check		08/26/19	$ 20
☐ Add ☐ Remove		cash		08/24/19	$ 20
☐ Add ☐ Remove		cash		08/24/19	$ 2
☐ Add ☐ Remove		cash		08/24/19	$ 4
☐ Add ☐ Remove		cash		08/24/19	$ 5
☐ Add ☐ Remove		cash		08/27/19	$ 4
☐ Add ☐ Remove		check		08/27/19	$ 25
☐ Add ☐ Remove		check		08/28/19	$ 25
☐ Add ☐ Remove		check		08/29/19	$ 25
☐ Add ☐ Remove		check		08/20/19	$ 25

4. Total only this Page	$ 466
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$

Aggregated Contributions from Individuals

Amendment ☐ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Courtney Banks-McLaughlin	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove		check		08/30/19	$ 50
☐ Add ☐ Remove		cash		08/29/19	$ 20
☐ Add ☐ Remove		check		09/01/19	$ 25
☐ Add ☐ Remove		check		08/30/19	$ 25
☐ Add ☐ Remove		check		08/29/19	$ 25
☐ Add ☐ Remove		check		09/06/19	$ 20
☐ Add ☐ Remove		check		09/06/19	$ 25
☐ Add ☐ Remove		check		09/07/19	$ 10
☐ Add ☐ Remove		check		09/03/19	$ 50
☐ Add ☐ Remove		cash		09/20/19	$ 20
☐ Add ☐ Remove		check		09/13/19	$ 25
☐ Add ☐ Remove		check		09/13/19	$ 25
☐ Add ☐ Remove		check		09/13/19	$ 25
☐ Add ☐ Remove		check		09/13/19	$ 25
☐ Add ☐ Remove		check		09/23/19	$ 49
☐ Add ☐ Remove		check		09/24/19	$ 50
☐ Add ☐ Remove		cash		09/13/19	$ 25
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$

4. Total only this Page	$ 494
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 2110

Contributions from Individuals

Amendment ☐ Yes ☐ 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
Courtney Banks-McLaughlin	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Sonya Edmonds PO Box 58394 Fayetteville, NC 28305 910.527.6213	Consumer Safety Officer	Food & Drug Administration		$ 100

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		check		07/30/19	$ 25
☐		check		08/25/19	$ 25
☐		check		08/30/19	$ 50

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Cheryl Murray 9517 Manistique St. Detroit, MI 48224 313.449.5704	Retired			$ 100

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		check		08/13/19	$ 100
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Telisa Watkins 5114 Chapel Lane Fayetteville, NC 28314 214.385.7208	Branch Chief	United States Army Reserve		$ 100

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		check		08/08/19	$ 50
☐		check		09/23/19	$ 50
☐					$

4. Total only this Page	$ 300
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 851

Contributions from Individuals

Amendment ☐ Yes ☐ 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
Courtney Banks-McLaughlin	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Shannon Butler 1606 Louise Dr Se Jacksonville, AL 36265 265.525.0815	Machine Operator	Tyler Union of Anniston AL		$ 100

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		check		08/16/19	$ 100
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Joseph Banks 3100 Shady Side Drive Sherwood, Ar 72120 501.554.0929	Retired			$ 101

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		check		09/03/19	$ 101
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Michael Bailey 5922 Abernathy Lane Columbus, OH	Control Tech	Building Control Intergrator		$ 100

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		check		09/13/19	$ 100
☐					$
☐					$

4. Total only this Page	$ 301
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 851

Contributions from Individuals

Amendment ☐ Yes ☐ 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
Courtney Banks-McLaughlin	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Chas Simpson 997 S. McPherson Fayetteville, NC 28303	CEO	Seven Principles		$ 250

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		check		09/20/19	$ 250
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
				$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐					$
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
				$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐					$
☐					$
☐					$

4. Total only this Page	$ 250
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 851

Disbursements

Amendment ☐ 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 Full Name (and Fund if applicable): Courtney Banks-McLaughlin

2. ID Number:

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Patriots Signs 425 W. Russell St. Fayetteville, NC 28301 910.484.2313		☐ Federal ☐ County: ☐ State ☐ Municipality:	Car magnets	$ 128.40

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	check		08/15/19	$128.4	
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Speediprint 201 Franklin St. Fayetteville, NC 28301 910.818.0586		☐ Federal ☐ County: ☐ State ☐ Municipality:	Palm Cards	$ 117.7

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	check		08/05/19	$58.85	
	check		08/30/19	$58.85	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Patriot Signs 425 W. Russell St. Fayetteville, NC 28301 910.484.2313		☐ Federal ☐ County: ☐ State ☐ Municipality:	Banner	$ 133.75

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	check		09/05/19	$133.75	
				$	

5. Total only this Page: $ 379.15

6. Total of ALL CRO-1310 Pages: $

(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

7. Purpose Codes (List detailed expenditure code in (h.) above)

A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund
O* - Other			

*** Codes require detailed explanation in required remarks field (k)**

Disbursements

Amendment ☐ 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 Full Name (and Fund if applicable)	2. ID Number
Courtney Banks-McLaughlin	

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Speediprint 201 Franklin St. Fayetteville, NC 28301		☐ Federal ☐ County: ☐ State ☐ Municipality:	Envelopes	$ 69.55

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	check		09/05/19	$69.55	
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Jabberwock Scholarship 536 North Eastern Boulevard Fayetteville, NC 28301		☐ Federal ☐ County: ☐ State ☐ Municipality:	Donation	$ 90

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	check		09/21/19	$90	
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
		☐ Federal ☐ County: ☐ State ☐ Municipality:		$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				$	
				$	

5. Total only this Page	$ 159.55
6. Total of ALL CRO-1310 Pages *(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)* *(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 698.25

7. Purpose Codes (List detailed expenditure code in (h.) above)

A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund
O* - Other			

*** Codes require detailed explanation in required remarks field (k)**