Disclosure Report	Cover	8 187	E .		Amendment	
Use this form for general re	port and commit	tee information,	must be signed and	submitted al	Yes ong with other detai	☐ No led forms.
Do not use this form to upda	te information.	192			- 4	VIX
1. Committee Information	发射机线线	John State	A的性数数数量的	Teracal Page		P.T. E. L. C. C.
a. Full Name		4 4 9	F 1		c. ID Number	
Courtney			ughlin			
b. Mailing Address (include City	State and Zip Coo	le)			d. Date Filed	
6559 Paci fayetten	FIC FLUE	18314	ş		10/25/19	9
rage no					e. Phone Number	
	5) (E) (E)		(910)25U-	2548
2. Report Year 3. Period S	tart Date (mm/d) 5. Treasu	rer Full Name	对的基础
509 0915	5/2019.	10/2	1/2019	Carl	mey Ban	5-mala
6. Type of Committee (Che	ck One)	19. Type of Ren	ort (check only or	ie type of rer	port from one catego	
Candidate Campaign	Party	Municipal	State/Count		Referendum	ory)
PAC T	Referendum	Organization			Organizational	
Independent Expenditure	Joint Fundraiser	Thirty-five da			Pre-referendum	
Legal Expense Fund		Pre-primary	Fir		Final	
_ ,	et 2	Pre-election		cond		
7. Type of Fund (if application	able, check one)	Pre-runoff	H Th		Supplemental Fire	nai
Booster Fund	one, encentione,	Semi-annual			Annual	
Building Fund		Mid Yea		orth •	☐ Special	
Dunding Fund					20 07 WHO IS - 1878	07
Other:	10	Year End		d Year	10. Special Repo	rt Name
Number of Fundraisers t	#12 n 250882 0 1-2	Final		ar End	,	
of rundraisers i	nis Keport	Special	Final		6 8	*
			☐ Special			
1. Account Information	等於別情學的觀	And Court al	11. Account Infor	mation	通行批准各位的	state in the
. Financial Institution Full Name			a. Financial Institution	a Full Name)	
Stato Empla	ge Cred	and the				* ±
. Purpose	c. Account Co	de	b. Purpose		c. Account Code	- I
#				<u>.</u>		
*						
	d. Period Beg	n Balance			d. Period Begin Balar	ice ·
	\$				\$	
CERTIFICATION					Ψ	
	P					0
I certify that the Committee or	runa is in compi	ance with all appli	cable provisions of A	rticle 22A, 22	B & 22D-22M of Cha	pter 163
of the NC General Statutes and	i mai no funds are	commingted with	prohibited or other no	on-disclosed f	unds. I further certify	that this
report is complete, true and co	rrect and that I have	ve been trained by	the NC State Board o	f Elections.		
Or whom Br.	E-Mara	11. 08		N.c	. 1 0	1
Company to	N3 MOLOW	30-1- 00	Marray D.	melexe	10/52	119
Printed Name of		Sign	ature of Appointed Trea	surer . G	Date	-
OR OFFICE USE ONLY			()			
Date Received:		Employ	ee: W	— Del	livery Method Normal Mail	
Data Daster 1 1	2 5 2019		0	H	Registered Mail	
Date Postmarked: 0CI	7.3 6010	Employ	ee:	_ 片	PHand Delivered	
Date Scanned:	9 2	Employ	ee;	门	Electronically Filed	i
Date Data Entered:		_ Employ			Signer has not rece	ived
A MAN TO VIETNESS OF THE STATE				_	mandatory training	
Please Note: This form	cannot be used	to amend commi	ttee information suc	ch as the con	mittee address, trea	surer.
assist	ant treasurer, cu	stodian of books	information, or acc	ount informa	tion.	3
You must ame	nd the Statement	of Organization	(CRO-2100A-E) to	make comm	sittee changes	*

Amendment

No

Detailed Summary	I monetary in	formation.	☐ Yes ☐ No
Use this form to summarize all disclosure reporting forms and to total 1. Committee Full Name (and Fund if applicable) 2. Type	of Report	3.1	D Number
1. Committee Fun Hame (and 2 and 14)	e Run	039	
Country Darks	T	Total this	Total this
Start of Election Cycle: January 1,		Reporting Period	Election Cycle
4) Cash on Hand at Start		\$ 2276.80	
RECEIPTS	(CDO 1205)	\$ 40	\$ 2,150
5) Aggregated Contributions from Individuals		\$ 90	\$ 851
6) Contributions from Individuals	· -	\$ 1500	\$ 75%
7) Contributions from Political Party Committees	,	3 1)	s
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$ 10028
9) Loan Proceeds	(CRO-1410)	\$	\$
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	2
11) Other Receipt Sources	(CRO-1250)	\$. 85	\$.85
11a) Interest on Bank Accounts	.10	\$ 5	s
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)		s
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$ 3747.73
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d a	nd He)	\$ 155.85	\$ 3747.113
EXPENDITURES			
13) Disbursements	(ana 1110)	001011	\$ 1500.0
13a) Operating Expenditures	(CRO-1310)	\$ 860.42	\$
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 188.31	\$ 333.11
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 a	md 17)	\$ 10480.3	\$ 1903.81
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract li		\$ 1343,92	\$ 1343.92
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	(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)) S	
	(CRO-1710	\$	\$
	(CRO-1440) S	\$
	(CRO-2200)) S	\$
27) 48-Hour Notice Reports Sum	(CRO-1215		\$
28) Contributions to be Refunded	(CRU-1213	/ •	August 20

Aggregated Contributions from Individuals

Page

<u>i</u> of <u>1</u>

Amendment

Yes

No

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

1. C	Comr ourtne	nittee Full Na y Banks-McLa	2. ID 1	Number				
		ributor Inform						
	Amend	10utor - 2010111	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
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5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100) \$ 40.00								40.00

Contribut	tions from Other	Political Com	mittees P	g _\ of _	1	Yes No
	to report contributions fro					
	Full Name (and Fund if				2. I	D Number
	they Banks		ghlin			2 1,011002
	r Information		Add Re	emove		a Weight
THE STATE OF THE S	ailing Address & Phone		b. Type of Comm	nittee	d. C	omments
(include city, st			Candidate	☐ PAC		
Democ	cratic Women	3 of Cumberr	Referendum			
COUNT	A STIND	ru .	c. Level Register	red (Specify) County:	-	
	43400		State		a El	ection Sum to Date
1-aye	theurly, DC			L. Indincipality.	\$	15.00
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3. Contributor				emove	D. F	
promote the second seco	iling Address & Phone		b. Type of Comm		d. Co	omments
(include city, sta	ate, & zip)		Candidate	PAC		
	a		Referendum c. Level Registere	od (Cnoolfy)		
<i>⊈</i> 2			Federal	County:	š	
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(include city, sta	te, & zipj		Candidate Referendum	PAC		•
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(This line must be	e on line 8 of Detailed Summar	y Page CRO-1100)		, a	\$	ns.00

Disburseme	ents				Pa	of	Amendmer Yes	
Use this form to	report expenditures coordinated party ex		ee for	r; operating exp	enses, o	contributions to c		
1. Committee E	ill Name (and Fun	d if applicable)			ys 24 19	16 17 18 18 18 18 18 18 18 18 18 18 18 18 18	2. ID Num	ber
3. Type of Dishi		XXXFS — M se use separate C				ve of Disbursen.	eidi)	
Operating Ex	xpenses	Contributions to Ca		es/Political Commit		Coo	ordinated Party Expend	tures
4, Payee Inform a Full Name Maili	201011 ng Address & Phone		CONTRACTOR OF THE	u Coordinated Comm	ittee Na	Remove me	d. Comments	
(include city; state;	of Sientin							
-2007 F	infainka kullo, Li	24301 1010	c.I	evel Registered (S)	pecify)			
1 reeps		L 0.) - 1		Federal State		County: Municipality:	e; Election Sum to I	ate
							\$	
f. Account Code	g:Form of Payment	h. Purpose Code		i: Date:(mm/dd/yyy	25-10-22-22-22-22-22-22-22-22-22-22-22-22-22	j: Amount	k Required Remarl	S
	money	H		00/10/20	ગળ	\$10088	Filo feo	
						\$		
4, Payec Inform	various survivarios de la company de la comp		Ad	ang mga tang mga manang mga mga mga mga mga mga mga mga mga mg		Remove		
a. Full Name, Maili (include city, state,	ng Address & Phone & zip)		D.C	Coordinated Comm	uitee Na	ıme	d: Comments	
			e I	evel Registered (S	necify)	450 E. (2015) E. (2016) E. (2016)		
			Sinker Land	Federal		County:		
			쁜	State	<u> </u>	Municipality:	e. Election Sum to I	Charles and Alberta Committee and Committee
16 Account Code	g: Form:of Payment:	h, Purpose Code	evintar (il. ev.)	i, Date (mm/dd/yy	vv)	aj. Amount	k: Required Remar	
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				evel Registered (S Federal	pecify)	County:		
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	line 13a of Detailed Sun line 13b of Detailed Sun	. –				al Comm)	\$	
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A*-Media	es (List detailed ex B* - Printing	C* -:Fun	drais	ing		D - To Anoth		
E - Salaries I - Postage	F*-Equipment J - Penalties	G - Politi K* - Off i					Public Office Expe n to Legal Expense	
O* - Other * Codes require	e detailed/explanat	ion in required r	emai	rks field (k)				

Disburseme	ents				Pg	1 of	Amendment Yes No		
	report expenditures		e for	r; operating exp					
	coordinated party ex	Name of Street, or other Designation of the Owner, where the Parket of the Owner, where the Owner, which is the Owner,							
	ull Name (and Fun	d if applicable)	بليند				2. ID Number		
Courtney Banks			n o	12100		CDII			
3. Type of Disbu		se use separate C							
Operating E		Contributions to Can			ttees		ordinated Party Expenditures		
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Fayetteville, NC	28301	10		Federal		County:			
910.484.2313				State		Municipality:	e. Election Sum to Date		
							\$ 567.1		
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01	check			10/05/2019		\$502.90			
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	ng Address & Phone			Coordinated Com	nittee Na		d. Comments		
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Publix	CC 2.1p)								
3114 Raeford R	d		c. L	evel Registered (S	Specify)				
Fayetteville, NC	28303			Federal		County:			
910.321.0114				State		Municipality:	e. Election Sum to Date		
							\$ 60.46		
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Sams Club	& zip)						Cincipi		
Skibo			c. L	evel Registered (S	Specify)				
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910.864.7080				State		Municipality:	e. Election Sum to Date		
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	CRO-1310 Pages								
	line 13a of Detailed Sur	nmary Page CRO-110	0 if 0	perating Expenses	;)		\$		
100 0000 MODE 9500 10 C	line 13b of Detailed Sur	(7/))/75	577			32.7	•		
	line 13c of Detailed Sur				Expenditu	res)			
	es (List detailed ex								
A* - Media E - Salaries	B* - Printing F* - Equipment	C* - Fund G - Politic					ner Candidate g Public Office Expenses		
I - Postage	J - Penalties	K* - Offi					on to Legal Expense Fund		
O* - Other	589 = E E E E E	-10-0-1	200			- 00 801			

				Ame	ndment	
Disbursements	Pg	2	of <u>2</u>		Yes	No
Use this form to report expenditures from the committee for; operating	expenses,	contr	ributions to candida	te/polit	ical	

committees and coordinated party expenditures.

1. Committee Fi	1. Committee Full Name (and Fund if applicable) 2. ID Number								
Courtney Banks	Courtney Banks-McLaughlin								
3. Type of Disbu	irsement <i>(Plea</i> :	se use separate C	RO-1310 forms for each	type of Disbursem	ent.)				
Operating Ex		Contributions to Can	didates/Political Committees	Co	ordinated Party Expenditures				
4. Payee Inform	ation		Add	Remove					
	ng Address & Phone		b. Coordinated Committee N		d. Comments				
(include city, state,	•				Shirt Designs				
Customs Caps E					January D. Garage				
412 Cross Creek	=		c. Level Registered (Specify)						
Fayetteville, NC			Federal	County:	-				
rayetteville, NC	. 20303			•	e. Election Sum to Date				
			State	Municipality:	e, Election Sum to Date				
					\$ 105.93				
	F 677	h. Purpose Code	(D. 4. 6 (1.14	T ,	t. p				
f. Account Code	g. Form of Payment	n. rurpose Coue	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks				
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				1					
				\$	+				
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a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee !	lame	d. Comments				
(include city, state,	& zip)								
			c. Level Registered (Specify)	i					
			Federal	County:	7.				
			State	Municipality:	e. Election Sum to Date				
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	ng Address & Phone		b. Coordinated Committee	Name	d, Comments				
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				\$					
5. Total only th	is Page				\$ 105.93				
	CRO-1310 Pages								
(This line goes in line 13g 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) \$ 860.42									
(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* - Fund		D - To Anoth	ner Candidate				
E - Salaries	F* - Equipment				g Public Office Expenses				
I - Postage	J - Penalties		ce Expenses		on to Legal Expense Fund				
O* - Other			to the state of the state of the state of the						
* Codes requir	e detailed explanat	ion in required r	emarks field (k)						

Aggregated	Non-Media	Expenditures

1. Committee Full Name (and Fund if applicable) 2. ID Number									
			2. ID Number						
oten and the same of	the state of the s	Banks - M							
3. Payee Ir									
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	check	H	10/12/2019	\$ 40.20	Gas			
Add Remove	01	Check	K	10/12/2019	\$13.91	utensils			
Add Remove	01	checil	G	10/09/50191	\$ 21.25	t-shirts			
Add Remove	01	chock	G	10/12/2019	\$ 35.60	Gift cards			
Add Remove	01	chock	G	10/12/2019	\$ 1,53	water volunters			
Add Remove	01	chock	G	09/29/2019	\$ 24.31	Food voluntarys			
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The control of the co	of ALL CRO	-1315 Pages Detailed Summary Page	cRO-1100)		\$ 188.3	N .			
6. Purpo	se Codes (Lis	t detailed expend	iture code in (d) above)					
E - Salaı	B*	- Printing - Equipment	C* - Fundr G - Politica	raising D - T I Party H* -	o Another Candida Holding Public O	ffice 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)								

	eceipt Sources			g <u>l</u> of <u>l</u>	Amendment Yes No
Use this form	to report income not rep	orted on another form	n. i.e. interest inc	ome, not for profi	it contributions etc.
	e Full Name (and Fund		(1021/A1770)	The state of the late.	2. ID Number
	they Bar				2
3. Type of R	eceipt Source (Please 1	ise separate CRO-125	50 forms for eac	h type of Receipt	Source.)
Interest		ibutions from Not-for-Profi	t Organizations	Outside	Sources of Income
	or Information	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		emove	
a. Full Name, M (include city,	failing Address & Phone		b. Not-for-Profi	t Federal ID #	d. Comments
		Constit	-		Dividend
24010	2 Emystage	Create	c. Outside Source	a Evalenation	
Unic	z Emplujeo no yettevillo, k	24	· Outside Source	e Explanation :	- s
Fau	getteville, L	8	S S	20_ (iii)	e. Election Sum to Date
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				0.4	\$
f. Account Code	8	h. In-Kind Descriptio	n :	i. Date (mm/dd/yy	
	Cheek	*		10112/2010	9 \$.85
	8				\$.
	r Information	(建设)建设工作和经济上	Add Re	emove	建筑的数据高级高级的数据
	ailing Address & Phone		b. Not-for-Profit	Federal ID#	d. Comments
(include city, s	tate, & zip)	=		*	
	*	(E)	/		V e en
	*		c. Outside Source	Explanation	42
		9	12		TRICK O
240 ±8	9		0.0	Ř.	e. Election Sum to Date
	e et :		9. 1	2 70	\$
. Account Code	g. Form of Payment	h. In-Kind Description	,	i. Date (mm/dd/yyy	y) j. Amount
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