Disclosure Report Cover

1. Committee Information		114 MOV -1 PM 12:04			
a. Full Name	2	<u> 10 NOV - 1 PM 12: U4</u>	c. ID Number		
MARY CAMEREN FOR CONCULCEIVED					
b. Mailing Address (include City, Sta	ate and Zip Code)		d. Date Filed		
7927 ABGL			7-5-19		
CLEMMON	S NC 27012	_	e. Phone Number		
			336766688		
2. Report Year 3. Period Star	t Date (mm/dd/yy) 4. Period	End Date (mm/dd/yy) 5. Treasur	er Full Name		
6 Tune of Committee (Charles)	()				
6. Type of Committee (Check ) Candidate Campaign Par		port (check only one type of repo State/County	Referendum		
	ferendum Organization.	·	Organizational		
🔲 Independent Expenditure 🔲 Joi			Pre-referendum		
Legal Expense Fund	Pre-primary	First			
	Pre-election	Second	Supplemental Final		
7. Type of Fund (if applicable	. check one) 🔲 Pre-runoff	Third	Annual		
Booster Fund	Semi-annual	Eourth	Special		
Building Fund	Mid Ye:	ar Semi-annual			
	Year En		10. Special Report Name		
Other: 8. Number of Fundraisers this	Final	Year End			
8. Number of Fundraisers this	Report Special	Final Special			
11. Account Information		11. Account Information			
a. Financial Institution Full Name		a. Financial Institution Full Name			
		Fidsity			
b. Purpose	c. Account Code	b. Purpose	c. Account Code		
		Politice l demperpu	6871		
	d. Period Begin Balance	de sola	d. Period Begin Balance		
	\$	( empargu	s Ø		
CERTIFICATION			,		
of the NC General Statutes and th	at no funds are commingled with	icable provisions of Article 22A, 22I prohibited or other non-disclosed fue the NC State Board of Elections.	B & 22D-22M of Chapter 163 inds. I further certify that this		
	er and that i have been traineye by	ule inc. State Board of Elections.			
MARTIN MALK	OPER (	Mart	11-01-19		
Printed Name of Sigr	ner Sig	nature of Appointed Treusurer	Date		
FOR OFFICE USE ONLY		/			
Date Received:	Employ	yee: Del	<u>ivery Method</u> Normal Mail		
Date Postmarked:	Employ	yee:	Registered Mail Hand Delivered		
Date Scanned:	Employ		Electronically Filed		
Date Data Entered:	Emplo	yee:	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	n (CRO-2100A-E) to make comm	ittee changes.		
CRO-1000	NC State Boa	rd of Elections	August 2008		

## **Detailed Summary**

Use this form to summarize all disclosure reporting forms and			
1. Committee Full Name (and Fund if applicable)	Report	3. ID Number	
MARY CAMERON FOR COUNCIL	r		
Start of Election Cycle: January 1, $\geq O \setminus C$	5	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ Ø	\$
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 620	\$
6) Contributions from Individuals	(CRO-1210)	S	\$
7) Contributions from Political Party Committees	(CRO-1220)	\$	5
8) Contributions from Other Political Committees	(CRO-1230)	\$750	\$
9) Loan Proceeds	(CRO-1410)	\$	\$
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)	\$	\$
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5. 6, 7, 8, 9,10,11a,11b,13c,	lld and llc)	\$ 1270	S
EXPENDITURES			in the state of the second
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$430	\$
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
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, 1)	5, 16 and 17)	\$430	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	otract line 18)	\$ 840	\$
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)	\$2002.1	7
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)	\$	\$

Contributions from Individuals by Pg \_\_\_\_ of \_\_\_\_ Mendme Use this form to report contributions from other candidate, referendum or PAC committees Amendment D No

Contract of the second s	Full Name (and Fund if a	the second se			2. ID Number
MARY	CAMERON	FOR de	main		
3. Contributor			Add 🗌 Re	move	
(include city, sta 7927	ABGCIAWA		b. Type of Comm Candidate Referendum c. Level Registere	D PAC	d. Comments
	modes loc	27012	Federal	County: Municipality	e. Election Sum to Date
	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yyy	y) j. Amount
6871	Check	07-05	-19		\$ 500
			_		\$
					\$
3. Contributor	Information		Add 🔲 Rei	nove	
(include city, stat	ing Address & Phone te. & zip) DONNET		b. Type of Commi	PAC	d. Comments
581	Drumhele	o Dr	Federal	County:	
Clemi	MOWNE 270	212	State	H Municipality:	e. Election Sum to Date
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yyy)	y) j. Amount
6871	CASH	NA		09-06-	9:20
					\$
					\$
3. Contributor	Information		Add 🔲 Ren	nove	THE REPORT OF A
(include city, stat	ng Address & Phone e, & zip) - 6001 fre Bitting on-Szlem N	202. 027104	b. Type of Commi Candidate Referendum c. Level Registeree Federal State	PAC (Specify) County:	d. Comments e. Election Sum to Date \$ \\
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yyyy	/) j. Amount
6871	Check	NA		09-06-1	9 \$ 100
					S
					\$
4. Total only thi	is Page				\$ 620
a she will be seen the weather the	CRO-1230 Pages on line 8 of Detailed Summar	y Page CRO-1100)			\$ 620

CRO-1210

## Contributions from Other Political Committees $P_{g}$ $\downarrow$ of $\downarrow$ $\Box$ Yes

Amendment

No No

Use this form to report contributions from other candidate, referendum or PAC committees

	Name (and Fund if a				2. ID Number
MARY	CAMERO	N FOR	Counc	il	
3. Contributor Int	formation		Add 🔲 Re	move	
a. Full Name, Mailing (include city, state, d NC DE	SALTODS F	'Ad	b. Type of Comm Candidate Referendum c. Level Registere	D PAC	d. Comments
	Veybeide bord NC		Federal State		c. Election Sum to Date \$ 750
	Form of Payment Check	h. In-Kind Description		i. Date (mm/dd/yyy 94 106 -	
					\$
3. Contributor Inf			and the second s	nove	
a. Full Name, Mailing . (include city, state, &		_	b. Type of Commi Candidate Referendum c. Level Registered Federal State	d (Specify) County.	d. Comments c. Election Sum to Date
f. Account Code g. F	Form of Payment	b. In-Kind Description		i. Date (mm/dd/yyy	\$
					\$
					\$
3. Contributor Info	ormation		Add 🔲 Ren	nove	
a. Full Name, Mailing / (include city, state, &			b. Type of Commi Candidate Referendum c. Level Registered Federal State	PAC (Specify) County:	d. Comments e. Election Sum to Date \$
f. Account Code g. F	form of Payment	n. In-Kind Description		i. Date (mm/dd/yyy	y) j. Amount \$
					s
					\$
4. Total only this P	age				\$ 750
5. Total of ALL CI (This line must be on	RO-1230 Pages line 8 of Detailed Summar	y Page CRO-1100)			\$ 750

## Disbursements

Pg \_\_\_\_\_ of \_\_\_\_ Amendment

D No

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

	Full Name (and Fun		5 m 7 m			2. ID Number
MARY	damore	w For	<u>12</u>	dain	دئد	
3. Type of Disl		use separate Cl	<u>RO-1310</u>	forms for e	each type of Dis	bursement.)
Operating Exp		itributions to Candid	ates/Politi	cal Committees	Co	ordinated Party Expenditures
4. Payee Inform		A CONTRACTOR		Add 🔲	Remove	
a. Full Name, M	lailing Address & Ph	one		b. Coordinate	ed Committee Nan	ne d. Comments
(include city, state	, & zip)					
111200	- FORSY	<del>7-</del> . /				
		*1		c. Level Regi	stered (Specify) County.	
dow	MONS A	VI 276	212	State		pality: e. Election Sum to Date
	111002 0		12			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (	nm/dd/yyyy)	j. Amount	k. Required Remarks
6871	Check	K	09-	10-19	\$20	Candelolote Forom
			<u> </u>			CEINCE WE WIDM
					3	
4. Payee Inform	a second s		Ļ		Remove	
	ling Address & Phone			b. Coordinate	ed Committee Nan	d. Comments
(include city, sta	ite, & zip)	MA				
HORSY	TH TAMLY	INDGA 3	ቅ	c. Level Regis	stered (Specify)	
6255	TH FAMILY TOWNG	ENTER ]	DR.	Federal	County:	
die	0	0		State	Municig	
agr	nmous N	0210	$\leq$			-
						\$ 900
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (1	mm/dd/yyyy)	j. Amount	k. Required Remarks
6871	CHECK	A	b9-	18-19	\$400	Acrol.
					\$	
			-			
4. Payee Inform					Remove ed Committee Nam	e d. Comments
a. Full Name, Man (include city, sta	ling Address & Phone			o. Coordinate	eu Committee Nam	d. Comments
(include city, sta						
				c. Level Regis	stered (Specify)	
				Federal	County:	
				State	🔲 Municip	olity. e. Election Sum to Date
						s
	1				Γ	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (i	mm/dd/yyyy)	j. Amount	k. Required Remarks
					\$	
					\$	
5. Total only th	nis Page				A COLOR OF STREET	5430
			-			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
CONTRACTOR AND	L CRO-1310 Pages					1-
(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* - MediaB* - PrintingC* - FundraisingD - To Another CandidateE - SalariesF* - EquipmentG - Political PartyH* - Holding Public Office Expenses						
I - Postage	J - Penalti			ffice Expen		Condition to Legal Expense Fund
O* Other	g remain		V			
* Codes require detailed explanation in required remarks field (k)						
CRO-1310				rd of Elections		December 2009

<b>Debts and Obligation</b>	ns Owed By	y the Committee	р
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Amendment

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Debts and Obligati					of _		No No
Use this form to report any u	inpaid debts or obligation of the second sec	ons owed	by the committee, to	o inclu	ude cam		l purchases.
1. Committee Full Name (and Fund if applicable) MARY CAMERON FORCOUN				t	÷	2. ID Number	
	IGRON HORI						
3. Creditor Information a. Full Name, Mailing Address &	Phone		Add I Remov	-			
(include city, state, & zip)			Note: All payments m 1310 w			ts should be listed ed as this creditor	
MARY CA	MERON		b. Description of Cred	litor			
7927 ABE CLEMMON	LIA WAY		CANDIDAD	ধনত	:		
c. Beginning Balance	d. Total Amount Paid		e. Total Amount Incur	rred		f. Remaining Bala	nce
\$	\$		\$			\$	
g. Incurred Debts (what the comn							
g1. Purchase Place Full Name, Ma (include city, state, & zip)	ailing Address & Phone		g2. Date (mm/dd/yyyy)		g3. Amou		
MARY CAME	PON		10-11-19	<u>ବ</u>	\$ 3	04.50	
7927 ABEU	is usay		g4. Purpose Code	1.1	equired F		
CLEMMONS		S	A	C	lem	moral Ce	പ ന്യം
g1. Purchase Place Full Name, Ma	ailing Address & Phone		g2. Date (mm/dd/yyyy)	)	g3. Amou	at .	
(include city, state, & zip) MARY CAMI			10-15-1	9	\$ 50	$\infty, \infty$	
7927 ABEN			g4. Purpose Code	g5. R	equired R	emarks	
· · ·	•		A	10	0.00	monsdor	ານທີ່ດະ
CLEMMONS			• • •				
g1. Purchase Place Full Name, Ma (include city, state, & zip)	alling Address & Phone		g2. Date (mm/dd/yyyy)		g3. Amou	-	<u> </u>
MARY CAM	SLON		10-19-19	9	<u>\$ 3</u>	<u>04.5</u> (	>
7927 ABER			g4. Purpose Code	g5. R	equired R	emarks	
diemnour	•	z	A	$\mathcal{O}$	emi	navsa	omer
g1. Purchase Place Full Name, Ma			g2. Date (mm/dd/yyyy)	) [2	g3. Amou	nt	
(include city, state, & zip)			10-24-19	9	\$ 30	04.50	o l
7927 ABE		ļ	g4. Purpose Code		equired R	emarks	
CLEMMON	-	~	A	U		monsch	nurier
g1. Purchase Place Full Name, Ma			g2. Date (mm/dd/yyyy)	· ·	z3. Amour		
(include city, state, & zip)			10-24-1	9	\$ 40	19.00	
MARY CAN	Velon	- -	g4. Purpose Code	g5. R	equired R	emarks (	
7927 ABEL CLEMMON	S NC 270	אב	A	de	zimm	onsdour	ner.
4. Total only this Page (This should be the sum of all	Г. к. т.	-•'		-	\$	1912.	50
5. Total of ALL CRO-1610 Pages (This line must be on line 22 of Detailed Summary Page CRO-1100) \$ 2002./7				-17			
6. Pupose Codes (List detailed expenditure code in (g4.)							
A* - MediaB* - PrintingC* - FundraisingD - To Another CandidateE - SalariesF* - EquipmentG - Political PartyH* - Holding Public Office Ex			`				
	• Equipment	G - Poli	ucai Party	·n* -	rioldin	g rudiic Uificê	r-xpenses
I - Postage J -	Penalties	'K* - Of	fice Expenses	0*-	Other		A

CRO-1610

NC State Board of Elections

,

February 2011

Debts and Obligations Owed By the Com	ımittee <sub>Pg</sub> _	Z of Z Amendment No	
Use this form to report any unpaid debts or obligations owed	by the committee, to	o include campaign credit card purchases.	
1. Committee Full Name (and Fund if applicable)	2.5 Caller States	2. ID Number	
MARY CAMERON FOR Cau	ncul		
3. Creditor Information	Add 🗌 Remov	le	
a. Full Name, Mailing Address & Phone	Note: All payments n	nade toward debts should be listed on form CRO-	
(include city, state, & zip)		ith the payce listed as this creditor.	
1927 ABELA WAY	b. Description of Cred	litor	
1927 ABEUA WAY	( Lash		
CLEMMONK NOZOIZ	CAUSIL	AT	
c. Beginning Balance d. Total Amount Paid	e. Total Amount Incur	rred f. Remaining Balance	
\$ \$	\$	\$	
g. Incurred Debts (what the committee received this period) g1. Purchase Place Full Name, Mailing Address & Phone	2 Date (mar (dd (mur	)	
(include city, state, & zip)	g2. Date (mm/dd/yyyy		
	10-28-19	9 \$ 89.67	
MARY CAMERON	g4. Purpose Code	g5. Required Remarks	
7927 ABELIA WAY	A	T- SHIRTS	
CLEMMONS NC. 27012	TT	1 - 2111615	
g1. Purchase Place Full Name, Mailing Address & Phone	g2. Date (mm/dd/yyyy	) g3. Amount	
(include city, state, & zip)		\$	
	od Dumosta Cada		
	g4. Purpose Code	g5. Required Remarks	
g1. Purchase Place Full Name, Mailing Address & Phone	2.0.4. 014		
(include city, state, & zip)	g2. Date (mm/dd/yyyy)	) g3. Amount	
		\$	
	g4. Purpose Code	g5. Required Remarks	
g1. Purchase Place Full Name, Mailing Address & Phone	g2. Date (mm/dd/yyyy)	g3. Amount	
(include city, state, & zip)		\$	
	al Purpose Code	g5. Required Remarks	
	g4. Purpose Code	gs. Required Remarks	
g1. Purchase Place Full Name, Mailing Address & Phone	g2. Date (mm/dd/yyyy)	g3. Amount	
(include city, state, & zip)	gz. Date (mild@yyyy)		
		\$	
	g4. Purpose Code	g5. Required Remarks	
4. Total only this Page		\$ 29 67	
(This should be the sum of all items 'g3.' from this page)		+ 0 1. 0 I	
5. Total of ALL CRO-1610 Pages (This line must be on line 22 of Detailed Summary Page CRO-	-1100)	\$ 89.67 \$ 2002.17	
6. Pupose Codes (List detailed expenditure code :	in (g4.)		
A* - Media B* - Printing C* - Fu	Indraising	D - To Another Candidate H* - Holding Public Office Expenses	
	F* - Equipment G - Political Party		
I - Postage J - Penaltics K* - Of * Codes require detailed explanation in required remarks field	ffice Expenses	O* - Other	
CRO-1610 NC State Boar		February 2011	