Disclosure	Report	Cover
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Amendment

Yes No
with other detailed forms

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 Committee to Elect Mackenzie b. Mailing Address (include City, State and Zip Code) d. Date Filed 3490 Pridgen Ridge Dr. Ve Winston-salem, NC 27127 2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasurer Full Name 2019 12/12 6. Type of Committee (Check One) 9. Type of Report (check only one type of report from one category) Candidate Campaign Party Municipal State/County Referendum Organizational Referendum ✓ Organizational Organizational ☐ Independent Expenditure ☐ Joint Fundraiser Thirty-five day Quarterly Pre-referendum Pre-primary Legal Expense Fund Final First Pre-election Second Supplemental Final 7. Type of Fund (if applicable, check one) Pre-runoff Third Annual Booster Fund Semi-annual Fourth Special Special Building Fund Mid Year Semi-annual 10. Special Report Name Year End Mid Year Final Year End Other: 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 Truliant Federal Credit Union b. Purpose c. Account Code b. Purpose c. Account Code Committee d. Period Begin Balance 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. rinted Name of Signer Signature of Appointed Treasurer FOR OFFICE USE ONLY Delivery Method Date Received: Employee: Normal Mail Registered Mail Employee: Date Postmarked: Hand Delivered Electronically Filed Employee: Date Scanned: ☐ Signer has not received Date Data Entered: Employee: 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.

Detailed	Summary
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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 Committee to Elect Mackenie CHOS-Allen Organizational Total this Total this 2020 Start of Election Cycle: January 1, Reporting Period **Election Cycle** 4) Cash on Hand at Start RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) \$ 10 \$ \$ 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 (CRO-1410) \$ \$ \$ 10) Refunds/Reimbursements to the Committee \$ (CRO-1240) 11) Other Receipt Sources (CRO-1250) \$ 11a) Interest on Bank Accounts \$ 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, 9,10,1fa,11b,11c,11d and 11e) \$ 10 \$ **EXPENDITURES** 13) Disbursements (CRO-1310) \$ 13a) Operating Expenditures \$ 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ \$ \$ (CRO-1310) \$ 13c) Coordinated Party Expenditures \$ 14) Aggregated Non-Media Expenditures (CRO-1315) \$ \$ (CRO-1420) \$ 15) Loan Repayments \$ (CRO-1320) \$ 16) Refunds/Reimbursements from the Committee \$ \$ 5 17) In-Kind Contributions (CRO-1510) 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) \$ 5 \$ \$ 5 \$ 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) ADDITIONAL INFORMATION (CRO-1330) 20) Non-Monetary Gifts Given to Other Committees \$ 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) \$ (CRO-1710) \$ \$ 25) Administrative Support \$ (CRO-1440) \$ 26) Forgiven Loans \$ \$ 27) 48-Hour Notice Reports Sum (CRO-2220) \$ (CRO-1215) 28) Contributions to be Refunded

Cont	ributions fi	rom Individua	els	P	e of		Yes No
		ndividual contributio		ontributions un	der \$50 if form CI	RO 1	205 is not used
1. Com	mittee Full Nan	ne (and Fund if app	licable)			2. I	D Number
Cor	nmittee t	- Elect Ma	nckenzie	Ontes-1	Allen		
A SALVINGS OF THE PARTY OF	tributor Inform			Add Re			
	ame, Mailing Addr			b. Job Title/Prof		d. C	omments
	le city, state, & zip)			Coundid	ate		
MAC	Kentile C	ontes-Alten		c. Employer's Name/Specific Field		1	
340	go Pridge	n Ridge (rive			L_	
Wil	1ston-Saler	n Ridge (127				lection Sum to Date
		Passa design of the same of th	•			\$	10
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	/y)	k. Amount
	MCACC MCACC	Check	filing fo	ee	12/2/19		\$5
	MCACC	Debit			12/9/19	1	\$ 5
							\$
Seal of Seal of Seal of Seal	tributor Inform			And the second s	emove		
	ame, Mailing Addre	ess & Phone		b. Job Title/Prof	ession	d. C	omments
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2001	tributor Informa			THE RESERVE TO SHARE THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED	emove		
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f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yy)	ry)	k. Amount
			_				\$
							\$
							\$
4. Tot	al only this P	age				\$1	10
5. Total of ALL CRO-1210 Pages					\$	10	
(This l	(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Amendment

In-Kind Contributions Pg ____ of ___ 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.

1. Committee Full Name (and Fund if applicable)			2. ID Number	
committee to Elect Mackena'e	Cates-All	en		
3. Contributor Information	Add Rei	nove		
a. Full Name, Mailing Address & Phone	b. Type of Contributor		c. Comments	
(include city, state, & zip)	Individual Candidate			
Macrenere cortes-Allen	Party			
Macrenzie cortes-Allen 3490 Pridgen Ridge Dr.Ve Winston-Salcm, NC 27127	PAC			
" lacton - Solem No 27177	Referendum		d. Election Sum to Date	
Other Receipt S		Source	s <u>5</u>	
e. Description		f. Date (mm/dd/yyy	y) g. Fair Market Amount	
Filing Fee		12/2/19	\$ 5	
			\$	
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3. Contributor Information		nove		
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(include city, state, & zip)	Candidate			
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	_		\$	
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3. Contributor Information	N. S.	move		
a. Full Name, Mailing Address & Phone	b. Type of Contril	butor	c. Comments	
(include city, state, & zip)	Individual Candidate			
	Party			
	☐ PAC			
	Referendum		d. Election Sum to Date	
	Other Receipt	Source	\$	
e. Description		f. Date (mm/dd/yyy	y) g. Fair Market Amount	
			\$	
		_	\$	
			\$	
4. Total only this Page			\$ 5	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$5	
(1 mo must be on one 17 of beating balance y 1 ago Otto-1100)				