Disclosure	Report	Cover	

Amendment

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		CONTRACTOR OF STREET					
a. Full Name					ная политу не в	c. ID Number	
MACINTOSH FOR CIT		COMMIT	TEE			538-F62 6-001	M98-
b. Mailing Address (include City, Sta						d. Date Filed	
3945 SPRINGLAK	150						
CLEMMONS, NC 27	012					e. Phone Number	
						336-785-6	(-1)
2. Report Year 3. Period Start	Date (mm/dd/yy)	4. Period I	End Dat	P (mm/dd/vv)	5. Treasur	er Full Name	514
2019 7-1-19	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	12-31		c (minutaryy)		CLAS LEMME	RMHN
6. Type of Committee (Check C	One) 9. 7	Type of Rep	ort (ch	eck only one	type of repo	ort from one cate	gory)
Candidate Campaign Part		nicipal		State/County		Referendum	
	erendum	9		Organizat		Organizationa	
Independent Expenditure Join Legal Expense Fund	nt Fundraiser	Thirty-five da	У	Quarterly		Pre-referendu	m
Legal Expense Fund	片	Pre-primary Pre-election		First Seco		Final	***
7. Type of Fund (if applicable,	check one)	Pre-runoff		Third		Supplemental Annual	Final
☐ Booster Fund		Semi-annual		Four		Special	
☐ Building Fund		Mid Yea	r	Semi-anni		Special	
	×	Year End	1		Year	10. Special Rep	port Name
Other:	10	Final		Year	End		portrume
8. Number of Fundraisers this	Report	Special		Final			
0				☐ Special			
11. Account Information			11. Acc	ount Inforn	nation		euro Preferencia
a. Financial Institution Full Name				cial Institution			
PIEDMONT FEDERAL	SAVINGS BA	+ NK					21
b. Purpose	c. Account Code		b. Purpos	se		c. Account Code	20
CHECHING	MCCCL					IT.	
	d. Period Begin Ba	lance				d. Period Begin Ba	alance
	\$ 4047.4	2				\$	Tr)
CERTIFICATION							
I certify that the Committee or Fur of the NC General Statutes and the report is complete, true and correct the NC General Statutes and the report is complete, true and correct the NC General Statutes and the Printed Name of Sign	at no funds are com t and that I have be	nmingled with een trained by	prohibite the NC S	ed or other no	n-disclosed for Elections.		tify that this
FOR OFFICE USE ONLY	1			1 /			
Date Received:	31/2020	Employ	/ee: <u></u>	20	- Del	livery Method Normal Mail	
Date Postmarked:		Employ	/ee: _		- D	Registered Mail Hand Delivered	L _i
Date Scanned:		Employ	/ee: _			Electronically F Signer has not re	
Date Data Entered:		Employ	/ee: _			mandatory train	
Please Note: This form ca assistant You must amend	treasurer, custod	lian of books	s informa	ation, or acco	ount informa	nmittee address, tation.	THE RESERVE TO THE PERSON NAMED IN

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 538- F62/198-MACENTOSH FOR CITY COUNCIL COMMITTEE YEAR END C-001 Total this Total this Start of Election Cycle: January 1, 20/0 **Reporting Period** Election Cycle 4) Cash on Hand at Start \$ 4047,42 \$4042,42 RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) \$ 6) Contributions from Individuals (CRO-1210) \$250.00 \$250,00 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 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) [2] TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) \$250.00 \$ 250,00 EXPENDITURES 13) Disbursements 13a) Operating Expenditures (CRO-1310) \$ 251.99 \$251,99 \$500,00 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ 500.00 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, 15, 16 and 17) \$ 751,99 \$ 751.99 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) 3545.43 \$ 3545,43 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) \$ (CRO-1620) 23) Debts and Obligations owed to the Committee 24) Account Transfers Within the Committee (CRO-1720) \$ (CRO-1710) \$ 25) Administrative Support \$ 26) Forgiven Loans (CRO-1440) 27) 48-Hour Notice Reports Sum (CRO-2220) \$ \$ \$ 28) Contributions to be Refunded (CRO-1215)

		rom Individua		Pg	of	_	Yes V No
		individual contribution					
		1					D Number 36- F62 M98 -
MAC	INTOSH FOI	CITY COUV	LIR COMNI	ftt <i>ee</i>		ر ا	C-001
		ation			move .		
a. Full N	lame, Mailing Addr	ess & Phone		b. Job Title/Profe	ssion	d, C	omments
	te city, state, & zip) イヤムビ みんど			RETIRE	O		
	OB FACUL			c. Employer's Na	ne/Specific Field	•	
		EM, NC 27106		f		ABUMAN.	errik og partikke signer er eftere sta Landstokker i trænste en er er f
	36-408-19						ection Sum to Date
<u> </u>			_		_		250,00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion			k. Amount
	MCCCI	CHECK			12/02/20	19	\$ 250.00
므							\$
							\$
109,000009 (1932) (0000000	ributor Inform	man algebras (1 manus - 12) albert as comes este " angre and " and a silab angre a	organija 🗆	A SERVICE OF THE PROPERTY OF T	nove	7.8; SESS, SEES	visiony serious de la Sala
And Spirit a section of the co	ame, Mailing Addr	A CONTRACTOR OF THE PROPERTY O		b. Job Title/Profes	ssion	d. Co	omments'
i (includ	levity, state, & zip)						
				c. Employer's Nan	ne/Specific Field		
						Si dina	
			1			Star CO. Comp.	ection Sum to Date
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	y)	k. Amount
	<u></u>					\bigvee	\$
	<u>-</u> ,						X
							\$
The same your 1 hours	ributor Informa			Add Ren	winder, was a demokry of demokration of the property of the first of t	All of	Stradictor Venezum
	ame, Mailing Addre e city, state, & zip)			b. Job Title/Profes	sion	d. Co	imments
i (menua	,		unan. Salatesa nan				`
				c. Employer's Nan	ne/Specific Field		
					}	e. Ele	ection Sum to Date
					_	\$	
amenda a Mela	Filodoka i estatewe 2.5 ∞ ie 1 6teo et	No.	Le cimus viventinai vis Liutolia	Dell'Estate programme della companya della companya della companya della companya della companya della companya	j, Date (mm/dd/yyy		k Amount
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descript	HVIII SANTAS TERRESISTA	1. Date (military)	178 l	\$
			_			V	
	-	1 1			•	\dashv	
							\$
Chapter system :	al only this P	TO THE STATE OF THE PARTY OF TH					250,00
		O-1210 Pages of Detailed Summary Po	ge CRO-1100)			\$	250.00

Amendment

T		
ne	bursem	antc
וטועו	nuistii	CIII)

				Amendment	
Pg	_1_	of	3_	☐ Yes	X No

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

1. Committee F	ull Name (and Fund	if applicable)	o the second				2. ID Number	
	t FOR CITY CO						538-F62M98- C-001	
3. Type of Dish	ursement (Please	use separate CR	0-1310	forms for e	ach type of Dish	urse	ment.)	
Operating Expe		ributions to Candida					ted Party Expenditures	
	ailing Address & Pho				ed Committee Name			
(include city, state,				<u> </u>		. Promise	Antique de la Contraction de l	
SHAOQIA				1				
	· -	0		c. Level Regi	stered (Specify)			
	LLEGIAN TI			☐ Federal	County:			
WINSTO	K-SALEM, NO	27106		☐ State	Municipa	lity:	e. Election Sum to Date	
336-698	2-9642			C.			\$ 21.99	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount		equired Remarks	
MCCC1	CHECK	B	10-	26.19	\$ 21.99		IMBURSE FOR NEW CHECK PRILIZES	
				<u> </u>	¢		THE PARTY OF	
and the last of th	ong•element les die less tolle	j s negriazinkanananin		المالية والمالية	j™ N asilagiilgadigianaa a	-25 ° A P	AND AND THE PARTY OF THE PARTY	
	nation		, - I					
a. Full Name, Mail (include city, sta	ing Address & Phone	grand and the second se	, s	D. Coordinate	ed Committee Name	er. (e. 3	a. Comments	
				-}				
	COUNTY BO	d bugation	25	c I avál Pagi	stered (Specify)	L 2.,e		
201 N.C	HEST NUT 5 T.			Federal	County:	<u> 3. K. "</u>		
WILSTON-	SALEM, NL 2710)		State	= '	litv:	e. Election Sum to Date	
336-703	1000							
			E := - * *	no na mara ana ana ana ana ana ana ana ana ana	I	12 =	\$ 5.00	
f. Account Code	2 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 /			mm/dd/yyyy)	2	K. R. 127	equired Remarks* CFFG = EE	
MCCC1	CHECK	⊢	12-	2-19	\$ 5.00	-	.0770 1 02	
			-		\$		•	
4. Payee Inform	nation	and the second		Add 🔲	Remove			
a. Fúll Name, Mail	ing Address & Phone te, & zip)				ed Committee Name	-	d. Comments	
		CLUR		İ				
	PARK TENNIS	0208		c. Level Regi	stered (Specify)		1	
	POWORTH DR.			☐ Federal	County:			
WINSTOR-	SALEM, NC 27101	4		☐ State	Municipa Municipa	dity:	e. Election Sum to Date	
336-922-3	3 176						\$ 100.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. R	equired Remarks	
MCCL1	CHECK	0	11-	23-19	\$ 100.00	151	MO COUTRIBUTION	
1 (300 1	11,004		_	-	\$	\vdash		
5 Total only th	is Page	A STATE OF THE STA	l Pityji,			 	\$ 126-99	
	CRO-1310 Pages		W .		A PARK	4	136-99 251.99	
market mich market Se	line 13a of Detailed Sun	The reserve to the second	00 if Ope	rating Expens	es)	4	1	
,					•)	\$757.99500,00	
(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)								
24 12 1 1 2 1 1 W 1 1 W 1	odes (List detailed	9	and the great	Ten care care,		. 8 S		
A* - Media	B* - Printi				D - To	Ano		
E - Salaries	F* - Equip		G - Po	litical Party	H* - H	oldi	ng Public Office Expenses	
I - Postage	J - Penalti			Office Exper			ion to Legal Expense Fund	
O* Other	,			- <u>-</u>	-			
	re detailed explanati	on in required	remark	s field (k)	R Land			

Dis	bur	ser	ner	its

				Amendment			
Pg	2	of	3	☐ Yes	λ	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 Fur		1 × 200			Marie Control	2. ID Number
MACINTOSA	FOR CITY CO	VULL COMP	15778	E			536. F62 M98 - C-001
3. Type of Disl		e use separate Ci	RO-131	0 forms for	each type of L	Disburs	
Operating Exp	penses 🔲 Co	entributions to Candid					ated Party Expenditures
4. Payee Infor	mation			Add 🗆	Remove		
a. Full Name, N	Mailing Address & Pl	hone		b. Coordina	ted Committee N	ame	d. Comments
(include city, state							
	ROLINA DEMOC	RATIC PAR	14	T I D	1 1 1/5 16 1		-
	BOROVEH ST.			Federal	istered (Specify) Coun	tv	
BALEIGH,	W 27603			State		cipality:	e. Election Sum to Date
919-821-2	1777						\$ 125-00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. R	tequired Remarks
MCCUI	CHECK	0	10-	5-19	\$125.00	40	TER DATA BASE
					\$	1	THE PAIN
4. Payee Inform	nation	The second second		Add 🗍	Remove	200500	
The party of the Name of the Party of the Pa	ing Address & Phone			AND DESCRIPTION OF THE PERSON	ed Committee N	ame	d. Comments
(include city, sta							
	\ /				Stered (Specify)		
				Føderal State	Coun	•	e. Election Sum to Date
			/	State	Mulik	apanty:	e. Election Sum to Daje
							\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. R	equired Remarks
					\$		
					\$	1	
4. Payee Inform	nation			Add []	Remove	/	
	ing Address & Phone			-	ed Committee N	ame	d. Comments
(include city, sta							
	\times				stered (Specify)	\	
				Federal State	Count		e. Election Sum to Date
				State	L Munic	пранту.	
				1			\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	mm/dd/yyyy)	j. Amount	k. R	equired Remarks
					\$		
					\$	\top	
5. Total only th	ic Paga						\$ 120.4
							\$ 126.00
PROPERTY AND PROPERTY AND PASSAGE	CRO-1310 Pages	P. CRO II	00:50			學是	
	line 13a of Detailed Sur line 13b of Detailed Sur					nm)	\$
The second secon	line 13c of Detailed Sun					,	
7. Purpose Co	odes (List detailed	expenditure code	in (h.)	above)			
A* - Media	B* - Printi	AND DESCRIPTION OF THE PARTY OF	No. of the last of	undraising	D - 7	o Anot	ther Candidate
E - Salaries	F* - Equip	ment	G - Po	litical Party			ng Public Office Expenses
I - Postage	J - Penalti	ies	K* - C	Office Expen	ises Q*-	Donat	ion to Legal Expense Fund
O* Other				P 1 2 (2)	CONTRACTOR OF THE PARTY OF THE		
" Codes requir	e detailed explanat	ion in required r	emark	s neld (k)	THE PROPERTY OF THE PARTY.		

Pg 38 of 3 Amendment No

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

12 Committee Full Name (and Fund if applicable).

2 1D Numbers

MALINTOS	4 FOR CITY COU	INUSL COMMI	FITEE			538-F62M98- C-001	
32 Type of Disl	oursement (Please	use separate Cl	RO-1311	forms for	each type of Disl	arsementi) 28 934 gr	*
Operating Exp	penses 🔀 Con	urbutions to Candid	ates/Politi	cal Committee		rdinated Party Expenditures	
4: Payee Infor	A TOTAL STATE OF THE PARTY OF T			Add 💥 🗖	Rémove		
- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	Iailing Address & Ph	one : A Albair		b. Coordinat	ed Committee Nam	d. Comments	u i
	, & zip)						
	BOUNTY PEROC	NATTE PAR	τ_{4}	best a set a set			
1128 BUK					stered (Specify)		
NILSTON-	SALEM, AC 27	101		Federal State	County:	ality: e. Election Sum to Date	80, mg 1 mg
376-724-	1399			T State	Talumci pa	mry: e. rection sum to pare	1
						\$ 500.00	
f. Account Code 🕆	g. Form of Payment	h. Purpose Code	i. Date (ı	mm/dd/yyyy)	j. Amount	k. Required Remarks	Mr. Karanga
Mccal	CITECH	6		_	\$ 500.00		
·				-	\$		
A Paree Inform	nation 2				Remove 🐉 🦠		PHATE.
	ing Address & Phone					d. Comments	
Property of the Control of the Contr	te, & zip)		\mathbf{X}	o. Coordinae	ed Committee Manie	o. Comments	-00-27 ft
			-/-				
				c. Level Regi	stered (Specify)		
				Federal	County:		
				State	☐ Municipa	lity: e. Election Sum to Date	
						\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (r	nm/dd/yyyyX	j. Amount	k. Required Remarks	24.8
					\$		
					\$		
4 Payee Inform	iation (* 25%)		×Д	Add #4	Remove ***		17
	ing Address & Phone	Version services				d. Comments	distriction
(include city, stat	(g, & zip)	\ * */				7	
				200, 200 and an an an an an an			
X		X		c. Level Regis Federal	stered (Specify)		
/ \			i	State		lity: e. Nection Sum to Date	36-67 Par 11
		/ \		Grace	Mancipa	ny. c. Becuon Sum to Date	#### 3
						\$	
. Account Code	g. Form of Payment 🐣	h. Purpose Code	i. Date (n	nm/dd/yyyy)	j. Amount 🥌 🦠	k.Required Remarks 👉 🧢 🤫	1. C.
					\$		
				$\overline{}$	s		
5. Total only th					**************************************	\$ 500.00	-
To be a series of the series o	CRO-1310/Pages		200			3 3 00,00	
			00:60			<u>_</u>	
	line 13a of Detailed Sum line 13b of Detailed Sum				-	\$ 75 39	
	line 13c of Detailed Sum		-				
to problem a six or colored to be present as six in the	odest (List delailed)		and the first sales	and the state of the same of t	to the last of the second of t		
	B* - Printin					Another Candidate	四季神
E - Salaries	F* - Equipn	ent	G - Pol	itical Party	H* - Ha	lding Public Office Expens	es
	J - Penaltie	enda meni (nedi judi bed Patel 25 State Ladius) S	K* - O	fice Expen	ses Q* - Do	nation to Legal Expense Fi	und
O* Other	e principal of the proof		Bedicases person	antenia confinita ser — many um			
* Codes requir	e detailed explanation	m in required r	emarks	field (k)			學程