Disclosure Rep		C				Yes No
Use this form for gen Do not use this form	eral report and committee i	nformat	ion, must be	signed and sub	omitted along with	other detailed forms.
1. Committee Inform						
a. Full Name						c. ID Number
Ewing for Mebane		,				82-1276120
b. Mailing Address (inclu	de City, State and Zip Code)					d. Date Filed
304 Stratford Road						07/25/2017
Mebane, NC 27302			07-25-	17P01:15	RCVD	e. Phone Number
						614-378-8464
2. Report Year	3. Period Start Date (mm/d	ld/yy)	4. Period F (mm/dd/yy)	End Date	5. Treasurer Fu	II Name
2017	04/25/2017		06/.	30/17	Ellen Edwards	
6. Type of Committee			e of Report			rt from one category)
Candidate Campai		Municip		State/C		Referendum
PAC Independent	Referendum		Organizational		Organizational	Organizational
Expenditure	Joint Fundraiser		Thirty-five day		Quarterly	Pre-referendum
Legal Expense Fund	nd (if applicable, check one)	П	Pre-primary		First	Final
7. Type of Fund Booster Fund"	(ц аррисавие, спеск впе)	lH	Pre-election		Second	Supplemental Final
Building Fund			Pre-runoff		Third	Annual
			Semi-annual		Fourth	Special
			Mid Year		Semi-annual	10.0 LD (N
Other:		lH	Year End		Mid Year Year End	10. Special Report Name
8. Number of Fundr	aisers this Renort		Final Special		Final	
8. Number of Funds	asers this Report				Special	
11. Account Informa	ntion			11. Account I	Information	
a. Financial Institution Fi			,		itution Full Name	
Truliant Federal Cred	lit Union					
b. Purpose	c. Account Code			b. Purpose		c. Account Code
All campaign	1					
expenses	d. Period Begin Balance					d. Period Begin Balance
	\$ 0.00					\$
CERTIFICATION						
I certify that the Com	mittee or Fund is in compli	ance wit	h all applical	ole provisions	of Article 22A, 22	B, & 22D-22M of Chapter 163 of
is complete, true and	tes and that no funds are co correct and that I have been	mmingio trained	by the NC S	tate Board of F	elections.	ls. I further certify that this report
Ellen Edward		trumea	G	Plu Gi	- IM//	07/25/2017
	Printed Name of Signer		Sig	gnature of Appoint	ted Treasurer	Date
FOR OFFICE USE OF				,	•	Dalissams Mothod
Date Received:	7-25-17		Employee:	<u>U</u>	6	Delivery Method Normal Mail
Date Postmarked			Employee:			Registered Mail Hand Delivered
Date Scanned:	7-21-17		Employee:		G	Electronically Filed Signer has not received
Date Data Entere	d:		Employee:			mandatory training
Please Note: This	form cannot be used to am	end com	nmittee inform	nation such as	the committee add	lress, treasurer, assistant treasurer,
				on, or account		
	You must amend the Stater	nent of (Organization	(CRO-2100A-	E) to make comm	ittee changes.

Amendment

Amendment

No

Detailed SummaryUse this form to summarize all disclosure reporting forms and to total monetary information.

1. Committee Full Name (and Fund if applicable) Ewing for Mebane	2. Type of Report Mid Year		3. ID Number 82-1276120
2.1.1.19	11110 1 000		
Start of Election Cycle: January 1,	2017	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 0.00	\$ 0.00
RECEIPTS: 115			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 350.00	\$ 350.00
6) Contributions from Individuals	(CRO-1210)	\$ 1,864.16	\$ 1,864.16
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			The state of the s
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Organizati	ons (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, 11	c, 11d and 11e)	\$ 2,214.16	\$ 2,214.16
EXPENDITURES	Alektrik (d. K.	1 11 11 11 11 11	
13) Disbursements		**************************************	Control of the Contro
13a) Operating Expenditures	(CRO-1310)	\$ 11.96	\$ 11.96
13b) Contributions to Candidates/Political Commit	ttees (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)	\$ 669.16	\$ 669.16
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)	\$ 681.12	\$ 681.12
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$ 1,533.04	\$ 1,533.04
ADDITIONAL INFORMATION		在 自用力第4	
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaign	ns) (CRO-1430)	\$	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$	
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$	HAMILE
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 Contributions from Individuals

Page

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

Amendment

Yes

No

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

	g for Mebane	N	nd ii applicable)			82-1276120
3. Cor	ntributor Info	rmation				
a. Ame		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
	Add Remove	1	Check		06/03/201	7 \$ 50.00
	Add Remove	1	Check		06/06/201	7 \$ 25.00
	Add Remove	1	Credit card		06/13/201	7 \$ 20.00
	Add Remove	1	Credit card		06/20/201	7 \$ 20.00
	Add Remove	1	Check		06/20/201	7 \$ 50.00
	Add Remove	1	Check		06/20/201	7 \$ 50.00
	Add Remove	1	Check		06/20/201	7 \$ 50.00
	Add Remove	1	Cash		06/20/201	7 \$ 25.00
	Add Remove	1	Cash		06/20/201	7 \$ 40.00
	Add Remove	1	Cash		06/20/201	7 \$ 20.00
	Add Remove	1	Check		06/20/201	7 \$ 50.00
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	Add					\$
4. To	tal only this	Page				\$ 350.00
5. To	tal of ALL C	CRO-1205 P	Pages ummary Page CRO-1100)			\$ 350.00

Contributions from Individuals

				Ame	ndment		
Pg	_1	of	4_		Yes	\boxtimes	No

ca thic form to	report individual	contributions	Over \$50	or contributions ur	der \$50 if form	CRO 1205 is not used
se uns ioni to	16DOIL IIIUIVIUUAI	committudions !	0001 300	or communitations ar	inci ado ii ioiiii	

	Name, Mailing Address & Phone	1. Comn	nittee Full Name ((and Fund if applical	ble)			2, ID Nun	nber	
A. Full Name, Mailing Address & Phone (nicule city, state, & zip)	Il Name, Mailing Address & Phone	Ewing fo	or Mebane						82-1276120)
Cinclude city, state, & zip) Sean Ewing 304 Stratford Road Webane, NC 27302 614-378-8464 Volvo Group Trucks 6. Employer's Name/Specific Field S 464.16 S 464.	Engineer	3. Contr	ibutor Informatic	on .		Add Rem	nove			
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Mebane, NC 27302 614-378-8464 Volvo Group Trucks	Note		_					_		
614-378-8464 f. Prior g. Account Code b. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior g. Account Code l. Form of Payment in-kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior l. In-kind l. Button l. In-kind l. Button l. In-kind l.								_		
S 464.16 S	S 464.16					Volvo Group Truck	.s	731 <i>diam</i> 6	~ :- Do4o	
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			1	Draft	<u> </u>		04/25/20	017	\$	95.00
3. Contributor Information a. Full Name, Mailing Address & Phone (include city, state, & zip) Sean Ewing 304 Stratford Road Mebane, NC 27302 614-378-8464 C. Employer's Name/Specific Field Volvo Group Trucks c. Election Sum to Date \$ 464.16 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount In-kind Website fees 05/01/2017 \$ 99 In-kind Buttons 05/18/2017 \$ 81	Name, Mailing Address & Phone		1	In-kind	Butto	ons	04/15/2	.017	\$	1.92
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Sean Ewing 304 Stratford Road C. Employer's Name/Specific Field Volvo Group Trucks E. Election Sum to Date \$ 464.16	Ewing Stratford Road Anne, NC 27302 378-8464 Stratford Road Volvo Group Trucks (c. Election Sum to Date \$464.16 \$464	a. Full Nai	me, Mailing Address &	& Phone		b. Job Title/Profession		d. Comment	ts	
C. Employer's Name/Specific Field Volvo Group Trucks C. Election Sum to Date S. Election Sum to	C. Employer's Name/Specific Field Volvo Group Trucks C. Election Sum to Date S. 464.16 S. 46	(include	: city, state, & zip)			Engineer				
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☐ 1 In-kind Buttons 05/18/2017 \$ 81	1	f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy)	yy)	k. Amount	
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		m Individuals	.	Pg	2 of	<u>4</u>	Amendment Yes	No		
		ividual contributions of (and Fund if applica		0 or contributions unde	er \$50 if form CK	O 1205 is no 2. ID Nu m				
	or Mebane		uic)				82-1276120			
3. Contr	ibutor Informatio	on	\boxtimes	Add Ren	nove					
a. Full Nar	me, Mailing Address	& Phone	<u> </u>	b. Job Title/Profession	F. C.	d. Comments	:S	<u> </u>		
	city, state, & zip)			Professor						
Susan Co										
3720 Tars				c. Employer's Name/Spe]				
	TN 37142			Austin Peay State U	Jniversity			<u></u>		
205-317-4	4466					e. Election St	um to Date			
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Sharon Ev	-					1				
	ooked Creek Drive			c. Employer's Name/Spe	ecific Field					
	OH 44691			Retired	a Floation C	to Data				
330-345-6	5520				l	e. Election Su	im to Date			
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Constance			ļ	c. Employer's Name/Spe	i@a Eiold	}				
	toway Terrace n, NC 27215		ļ	Retired	cinc rieiu					
336-228-7			ļ	Keineu	ŀ	e. Election Su	am to Date			
330-220° i	1407				\$					
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							\$			
							\$			

\$

\$

750.00

1,864.16

4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Amendment **Contributions from Individuals** Yes 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 Ewing for Mebane 82-1276120 3. Contributor Information \boxtimes Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Educator Elaine Berry 409 Doral Court c. Employer's Name/Specific Field Mebane, NC 27302 Retired 410-370-5137 e. Election Sum to Date \$ 300.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 300.00 1 In-kind Cookout suppl. 06/17/2017 \$ \$ \$ 3. Contributor Information 冈 Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Candle maker Erin Hils c. Employer's Name/Specific Field 404 S First Street Harmony Farm Candles Mebane, NC 27302 919-698-5200 e. Election Sum to Date 100.00 f. Prior h. Form of Payment i. In-Kind Description g. Account Code j. Date (mm/dd/yyyy) k. Amount 1 Check 06/20/2017 \$ 100.00

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3. Contr	ibutor Informati	on		Add Re	move			
a. Full Na	me, Mailing Address	& Phone		b. Job Title/Profession	<u> </u>	d. Comme	nts	
(include	city, state, & zip)			Business Manager				
Cindy W	'right							
218L W	oodlawn Road			c. Employer's Name/S	pecific Field			
Mebane,	NC 27302			Kennon Craver, Pl	LLC			
336-380-0530						e. Election	Sum to Date	
						\$	75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Lind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	1	Check			06/20/2	017	\$	75.00
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4. Tota	l only this Pag	e		33 M (1		\$		475.00

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

1,864.16

\$

Contributions from Individuals

				Amen	ament		
Pg	4	of	4_		Yes	\boxtimes	No

se this form to report individual contributions over \$50 or contributions under	er \$50 if form CRO 1205 is not used
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1. Comn	iittee Full Name ((and Fund if applica	ble)			2. ID Nun	nber	
Ewing fo	or Mebane						82-1276120	
3. Contr	ibutor Informatic	on	\boxtimes	Add 🔲 Rem	nove			
1	me, Mailing Address é	& Phone	2700	b. Job Title/Profession	2018http://www.community	d. Comment	ts	
	city, state, & zip)			Commander, Retire	∌d			
1	eddingfield					_		
	e Farm Road			c. Employer's Name/Spo	ecific Field	_		
	ough, NC 27278			US Navy				
919-732-	6369					e. Election S	um to Date	
						\$	75.00	
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(include	city, state, & zip)			Educator				
Jane Purd	•							
	er Hagen Drive		ļ	c. Employer's Name/Spe	ecific Field			
	NC 27302		I	Retired	į			
919-418-7384			!		J	e. Election St	um to Date	
						\$	100.00	
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	ents report expenditures coordinated party ex		e for; ope	rating expe	Pg enses,	1 of contributions		Amendment Ves ate/political	\boxtimes	No
	Full Name (and Fun							2. ID Number		
Ewing for Meb		и паррисаль,			2		<u> </u>	82-1276		<u> </u>
3. Type of Disb		ise use separate Ck	20-1310 i	forms for e	ach t	one of Dishurs	ement.)			
Operating I		Contributions to Cano						d Party Expenditures		<u>Bahiman</u>
4. Payee Inform		×	Add			Remove	_			
	ing Address & Phone			nated Commi	ttee Na		d. Co	mments	<u> </u>	<u> </u>
(include city, state,	· ·									
Piryx, Inc.										
995 Market Str	eet, 2 nd Floor		c. Level Ro	egistered (Spe	ecify)					
San Francisco,	CA 94103		Fee	deral		County:				
888-648-2220		ĺ	Sta	ıte		Municipality:	e. Elec	ction Sum to Date		
							\$ 1	1.96		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy	/)	j. Amount	k. Rec	quired Remarks		
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I	Diait .		03123	/201/		\$8.20	tion f	fee		
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			00/15	/201/			tion f	fee		
4. Payee Inform			Add			Remove		Anna and an		
a. Full Name, Maili	ing Address & Phone	_	b. Coordin	ated Commit	ttee Na	ıme	d. Cor	mments		
(include city, state,	& zip)									
Piryx, Inc.		-								
995 Market Stre	•	_		egistered (Spe	ecify)					
San Francisco,	CA 94103		=	ieral		County:	<u> </u>			
888-648-2220		-	Sta	te		Municipality:	e. Elec	ction Sum to Date		
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	Dian	<u> </u>	00/20/			9 1.00	tion f	èe		
						\$				
4. Payee Inform	ation					Remove				33.1
a. Full Name, Maili	ng Address & Phone	L	b. Coordin	ated Commit	tee Na	me	d. Con	nments		
(include city, state,	& zip)									
		L								
				gistered (Spe	cify)					- 1
			=	leral	Ц	County:				
		<u> </u>	Stat	ie	Щ_	Municipality:	e. Elec	ction Sum to Date		
							\$			
. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/www	١ ١	j. Amount	k. Rea	uired Remarks		
	g. I of hi of I ayment			mm/uu/yyyy,		Jirkinount				
	g. 1 of m of 1 ayment		1	mm/dd/yyyy,	,	\$				

5. Total only this Page 11.96 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$ 11.96 (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 G - Political Party F* - Equipment 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)

In-Kind Contributions

Amendment Yes

In-Nina Contributions p_g 1 of 2 p_g Ye 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	
Ewing for Mebane				82-1276120		
3. Contributor Information Add Remove						
a. Full Name, Mailing Address & Phone		of C	Contributor	c. Cor	nments	
(include city, state, & zip)	Individual				The same of the sa	
Sean Ewing	! =		didate			
304 Stratford Road		Party				
Mebane, NC 27302		PAC	•			
614-378-8464		Referendum			ction Sum to Date	
3,13,700,101	Other Receipt Source					
				\$	334.16	
e. Description			f. Date (mm/dd/yy	yy)	g. Fair Market Amount	
Campaign buttons			04/15/2017	7	\$ 1.92	
Car magnets			04/29/201	7	\$ 29.98	
Website fees			05/01/201	7	\$ 99.00	
3. Contributor Information Add R	Lemove			i i		
a. Full Name, Mailing Address & Phone	b. Type	of C	ontributor	c. Con	nments	
(include city, state, & zip)		ndiv	/idual			
Sean Ewing		Cano	lidate			
304 Stratford Road		arty	/			
Mebane, NC 27302		PAC				
614-378-8464	Referendum Other Receipt Source		d. Election Sum to Date			
			r Receipt Source	\$ 334.16		
e. Description			f. Date (mm/dd/yyy	/y)	g. Fair Market Amount	
Campaign buttons			05/18/2017	,	\$ 81.90	
Facebook ad boost			05/29/2017	7	\$ 5.00	
Campaign posters			09/09/2017	7	\$ 116.36	
3. Contributor Information Add R	emove		jara -			
a. Full Name, Mailing Address & Phone		of C	ontributor	c. Comments		
(include city, state, & zip)	I 🔀	ndiv	ridual			
Sean Ewing		Cand	lidate			
304 Stratford Road		arty				
Mebane, NC 27302	PAC Referendum					
614-378-8464			d. Election Sum to Date			
)the:	r Receipt Source	\$ 35.00		
e. Description			f. Date (mm/dd/yyy	y)	g. Fair Market Amount	
FB page boost			06/29/2017	,	\$ 35.00	
					\$	
					\$	
4. Total only this Page				\$	369.16	
5. Total of ALL CRO-1510 Pages			1994			
(This line must be on line 17 of Detailed Summary Page CRO-1100)				\$	669.16	

In-Kind Contributions

			Amendment							
Pg	2	of	<u>2</u>		Yes	\boxtimes	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)			194	2. ID	Number	
Ewing for Mebane				82-1276120		
3. Contributor Information Add	Remove				2017年,建立了1918年	
a. Full Name, Mailing Address & Phone		of C	Contributor	c. Cor	nments	
(include city, state, & zip)	Individual Individual					
Elaine Berry	□ ′	Can	didate	İ		
409 Doral Court	_	art				
Mebane, NC 27302	1 =	☐ PAC				
410-370-5137	Referendum Other Receipt Source		d. Election Sum to Date			
			\$ 300.00			
e. Description			f. Date (mm/dd/yy	yy)	g. Fair Market Amount	
Cookout fundraiser costs			06/17/2017	7	\$ 300.00	
					\$	
					\$	
3. Contributor Information Add R	Lemove					
a. Full Name, Mailing Address & Phone	b. Type o	of C	ontributor	c. Con	nments	
(include city, state, & zip)		ndiv	/idual			
		Cano	lidate			
		arty				
	l 📗 P	AC				
			rendum	d. Election Sum to Date		
	Other Receipt Source		r Receipt Source	\$		
e. Description			f. Date (mm/dd/yyy	yy)	g. Fair Market Amount	
					\$	
					\$	
					\$	
3. Contributor Information Add R	emove		5 7 7			
a. Full Name, Mailing Address & Phone	b. Type o	f C	ontributor	c. Con	iments	
(include city, state, & zip)			ridual			
	=		lidate			
	_	arty				
	=	AC		1 101		
	Referendum Other Receipt Source		d. Election Sum to Date			
		· inc		\$		
e. Description		_	f. Date (mm/dd/yyy	y)	g. Fair Market Amount	
					\$	
					\$	
					\$	
4. Total only this Page			i gi	\$	300.00	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)				\$	669.16	