Disclosure Report Cover	the state of the s	Yes No			
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.		Department of the second secon			
1. Committee Information		c. ID Number			
a. Full Name	71:10	c, 1D Ivalidei			
Committee to elect Lis	a Patrick				
b. Mailing Address (include City, State and Zip Code)		d. Date Filed			
2711 Monticello Cart		12/31/2018			
		e. Phone Number			
Burlington, NC 27215		336-264-1160			
2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period	End Date (mm/dd/yy) 5. Treasure	r Full Name			
		a Patrick			
6. Type of Committee (Check One) 9. Type of Ro	eport (check only one type of repo				
Candidate Campaign Party Municipal	State/County	Referendum			
PAC Referendum Organizatio	1	Organizational			
Independent Expenditure I Joint Fundraiser I Thirty-five	day Quarterly	Pre-referendum			
Legal Expense Fund Pre-primary	- Common	Final			
Pre-election	Inches I	Supplemental Final			
7. Type of Fund (if applicable, check one) Pre-runoff	Third	Annual Special			
Booster Fund Semi-annua	Recover	Special			
Building Fund Mid Y	person	10. Special Report Name			
Other:	Year End	To: Special Acport same			
8. Number of Fundraisers this Report Special	Final				
o. Number of Fundraisers this Report	Special				
	man operati				
The Telegraph Committee of the Committee	11 Account Information				
11. Account Information	11. Account Information				
a. Financial Institution Full Name	11. Account Information a. Financial Institution Full Name				
a. Financial Institution Full Name Proponent Federal Credit Union	a. Financial Institution Full Name	c. Account Code			
a. Financial Institution Full Name Proponent Federal Credit Union b. Purpose c. Account Code		c. Account Code			
a. Financial Institution Full Name Proponent Federal Credit Union b. Purpose c. Account Code	a. Financial Institution Full Name	c. Account Code			
a. Financial Institution Full Name Proponent Federal Credit Union b. Purpose c. Account Code 1234	a. Financial Institution Full Name	c. Account Code d. Period Begin Balance			
a. Financial Institution Full Name Proponent Federal Credit Union b. Purpose c. Account Code Campaigning d. Period Begin Balance	a. Financial Institution Full Name	d. Period Begin Balance			
a. Financial Institution Full Name Proponent Federal Credit Union b. Purpose c. Account Code 1234 d. Period Begin Balance \$ 5,88	a. Financial Institution Full Name				
a. Financial Institution Full Name Proponent Federal Credit Union b. Purpose c. Account Code Campaigning d. Period Begin Balance \$ 5,88	a. Financial Institution Full Name b. Purpose	d. Period Begin Balance \$			
a. Financial Institution Full Name Proponent Federal Credit Union b. Purpose c. Account Code Campaigning d. Period Begin Balance \$ 5.88 CERTIFICATION I certify that the Committee or Fund is in compliance with all ap	a. Financial Institution Full Name b. Purpose plicable provisions of Article 22A, 22B	d. Period Begin Balance \$ 3 & 22D-22M of Chapter 163			
a. Financial Institution Full Name Propose C. Account Code Campaigning C. Account Code d. Period Begin Balance 5.88 CERTIFICATION I certify that the Committee or Fund is in compliance with all ap of the NC General Statutes and that no funds are commingled with a compliance of the NC General Statutes and that no funds are commingled with a compliance with a commingled with a commingle of the NC General Statutes and that no funds are commingled with a commingle of the NC General Statutes and that no funds are commingled with a commingle of the NC General Statutes and that no funds are commingled with a compliance with a commingle of the NC General Statutes and that no funds are commingled with a compliance with a commingle of the NC General Statutes and that no funds are commingled with a compliance with a commingle of the NC General Statutes and that no funds are commingled with a compliance wi	a. Financial Institution Full Name b. Purpose plicable provisions of Article 22A, 22B th prohibited or other non-disclosed fu	d. Period Begin Balance \$ 3 & 22D-22M of Chapter 163			
a. Financial Institution Full Name Proponent Federal Credit Union b. Purpose c. Account Code Campaigning d. Period Begin Balance \$ 5.88 CERTIFICATION I certify that the Committee or Fund is in compliance with all ap	a. Financial Institution Full Name b. Purpose plicable provisions of Article 22A, 22B th prohibited or other non-disclosed fu	d. Period Begin Balance \$ 3 & 22D-22M of Chapter 163			
a. Financial Institution Full Name Propose C. Account Code Campaigning c. Account Code d. Period Begin Balance 5.88 CERTIFICATION I certify that the Committee or Fund is in compliance with all ap of the NC General Statutes and that no funds are commingled we report is complete, true and correct and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and the NC General Statutes and that I have been trained to the NC General Statutes and the	a. Financial Institution Full Name b. Purpose plicable provisions of Article 22A, 22I th prohibited or other non-disclosed further than the provisions of Elections.	d. Period Begin Balance \$ 3 & 22D-22M of Chapter 163			
a. Financial Institution Full Name Proponent Federal Credit Union b. Purpose c. Account Code Campaigning d. Period Begin Balance \$ 5,88 CERTIFICATION I certify that the Committee or Fund is in compliance with all ap of the NC General Statutes and that no funds are commingled we report is complete, true and correct and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and the I have been trained to the NC General Statutes and th	a. Financial Institution Full Name b. Purpose plicable provisions of Article 22A, 22I th prohibited or other non-disclosed further than the provisions. Can Dallin Article 22A, 22I the prohibited or other non-disclosed further than the provisions of Article 22A, 22I the prohibited or other non-disclosed further than the provisions of Article 22A, 22I the prohibited or other non-disclosed further than the prohibited f	d. Period Begin Balance \$ 3 & 22D-22M of Chapter 163			
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a. Financial Institution Full Name Propose for Federal Credit Union b. Purpose c. Account Code Campaigning d. Period Begin Balance \$ 5.88 CERTIFICATION I certify that the Committee or Fund is in compliance with all ap of the NC General Statutes and that no funds are commingled wreport is complete, true and correct and that I have been trained to the NC General Statutes and the standard or the NC General Statutes and the standard or the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and the standard or the NC General Statutes and the NC General S	a. Financial Institution Full Name b. Purpose plicable provisions of Article 22A, 22I th prohibited or other non-disclosed further NC State Board of Elections. Law Lawrence Company of Appointed Treasurer	d. Period Begin Balance \$ 3 & 22D-22M of Chapter 163 ands. I further certify that this \[\frac{1}{2} \frac{3}{2018} \] \[\text{Date} \]			
a. Financial Institution Full Name Propose c. Account Code Campaigning 234 d. Period Begin Balance \$ 5.88 CERTIFICATION I certify that the Committee or Fund is in compliance with all ap of the NC General Statutes and that no funds are commingled we report is complete, true and correct and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and that I have been trained to the NC General Statutes and the NC General	a. Financial Institution Full Name b. Purpose plicable provisions of Article 22A, 22I th prohibited or other non-disclosed further NC State Board of Elections. Law Lawrence Company of Appointed Treasurer	d. Period Begin Balance \$ 3 & 22D-22M of Chapter 163 ands. I further certify that this \[\frac{1}{2\left(3)\left(20)\delta}{\text{Date}} \] \[\text{ivery Method} \] Normal Mail			
a. Financial Institution Full Name Propose	a. Financial Institution Full Name b. Purpose plicable provisions of Article 22A, 22B, th prohibited or other non-disclosed function of the NC State Board of Elections. Lawrence Del Del Del	d. Period Begin Balance \$ 3 & 22D-22M of Chapter 163 ands. I further certify that this \[\frac{1}{2} \frac{3}{2} \frac{20}{8} \] \[\text{Date} \] \[\text{ivery Method} \] Normal Mail Registered Mail			
a. Financial Institution Full Name Propose	a. Financial Institution Full Name b. Purpose plicable provisions of Article 22A, 22I th prohibited or other non-disclosed further than the position of Appointed Treasurer oyee: Del oyee:	d. Period Begin Balance \$ 3 & 22D-22M of Chapter 163 ands. I further certify that this \[\frac{1}{2} \frac{3}{2} \frac{20}{8} \] \[\text{Date} \] \[\text{ivery Method} \] Normal Mail Registered Mail Hand Delivered			
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a. Financial Institution Full Name Propose	a. Financial Institution Full Name b. Purpose plicable provisions of Article 22A, 22B, th prohibited or other non-disclosed for the NC State Board of Elections. Figure 1	d. Period Begin Balance \$ 3 & 22D-22M of Chapter 163 ands. I further certify that this \[\frac{1}{2\left(3)\left(2\right)\left\text{8}}{2\right\text{1}\left\text{2}\right\text{8}} \] \[\frac{1}{2\left(3)\left\left\left\text{2}\right\text{8}\right\text{9}\right\text{8}}{\text{Date}} \] \[\frac{1}{2\left(3)\left\left\left\text{2}\right\text{8}\right\text{9}\right\text{8}}{\text{Date}} \] \[\frac{1}{2\left(3)\left\left\left\text{2}\right\text{8}\right\text{1}\right\text{8}}{\text{Date}} \] \[\frac{1}{2\left\left\text{1}\left\text{2}\right\text{1}\right\text{8}\right\text{1}\right\text{8}}{\text{Date}} \] \[\frac{1}{2\left\text{1}\left\text{2}\right\text{1}\right\text{8}\right\text{1}\right\text{8}}{\text{Date}} \] \[\frac{1}{2\left\text{1}\left\text{2}\right\text{1}\right\text{8}\right\text{1}\right\text{2}\right\text{1}\right\text{1}\right\text{1}\right\text{1}\right\text{1}\right\text{1}\right\text{1}\right\text{1}\right\text{1}\right\text{1}\right\text{1}\right\text{1}\right\text{1}\right\text{2}\right\text{1}\right\text{1}\right\text{1}\right\text{1}\right\text{1}\right\text{1}\right\text{2}\right\text{1}\right			
a. Financial Institution Full Name Propose C. Account Code	a. Financial Institution Full Name b. Purpose plicable provisions of Article 22A, 22I th prohibited or other non-disclosed further than the property of the NC State Board of Elections. Parameter of Appointed Treasurer oyee: oyee: oyee:	d. Period Begin Balance \$ 3 & 22D-22M of Chapter 163 ands. I further certify that this 2 3 2018 Date Date Date Date			
a. Financial Institution Full Name Propose for Federal Credit Union b. Purpose c. Account Code Campaigning d. Period Begin Balance \$ 5.88 CERTIFICATION I certify that the Committee or Fund is in compliance with all ap of the NC General Statutes and that no funds are commingled we report is complete, true and correct and that I have been trained been trained by the printed Name of Signer FOR OFFICE USE ONLY Date Received: 4-11-19 Date Postmarked: Employed Date Scanned: 4-30-19 Employed Empl	a. Financial Institution Full Name b. Purpose plicable provisions of Article 22A, 22I th prohibited or other non-disclosed further than the property of the NC State Board of Elections. Address Del Oyee: oyee: oyee: oyee: mittee information such as the committee informati	d. Period Begin Balance \$ 3 & 22D-22M of Chapter 163 ands. I further certify that this 12 3 2018 Date Date Date Date Da			

CRO-1000

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

NC State Board of Elections

August 2008

Amendment

Amendment Yes ☐ No

Detailed Summary	Yes No		
Use this form to summarize all disclosure reporting forms and 1. Committee Full Name (and Fund if applicable)	2. Type of	Report	3. ID Number
Committee to elect Lisa Patricle	Contract to the base of the base of the contract of the base of the contract o		
Start of Election Cycle: January 1, 2015			Total this d Election Cycle
4) Cash on Hand at Start		\$ 5.88	\$ 5.88
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	T	\$ 213
6) Contributions from Individuals	(CRO-1210)	\$ 4,55	\$ 2139,24
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)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	11d and 11e)	\$ 4.55	\$ 2139,24
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$	\$
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)	\$ 4.55	\$ 2139,24
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)	\$ 4,55	\$ 2139,24
19) Cash on Hand at End (Add lines 4 and 12 together, then sul			\$ 5,88
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)	\$	
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)	\$	\$

		om Individua		Pg	0f	Amendment Yes No 1205 is not used
CONTRACTOR SEASON AND ADMINISTRA	Charles and Control of the Control o	ndividual contributione (and Fund if appl	化基金银矿 化氯化二甲基氯甲基甲基氯甲基甲基甲基甲基	ontributions unde	er \$50 H 10HH Cr	2. ID Number
16.G0III	CONTRACTOR OF THE PROPERTY OF	ittee to ele	79.3	a Patric	K	Committee of the Commit
3. Cont	ributor Inform		CANCERTED OF FREIGNESS INCANCESS COMMENTS	Add Ren	and the control of th	
THE PROPERTY SERVE	ame, Mailing Addro	Account to the second of the second to the second s		b. Job Title/Profes	sion	d. Comments
(includ	le city, state, & zip)					
0	2711 Mar	ticello Cou	rl	c. Employer's Nan	ne/Specific Field	
Ţ	Burlingt	on, Ne a	7210			e. Election Sum to Date
	Ý					\$
e in the late of the	Lance of Article	The second se	le reference nelle se	24 S	j. Date (mm/dd/yyy	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	£3, 11, t	07/00/201	- 5.4
	1234	in kind	electic	Winders	07/04/201	1 7
	1234	inkind	Campa	GI.384	the mountain	8/ \$
	÷					\$
は行うはははなるというない	ributor Informa	each residence of the second s		Add 🔲 Ren	September 19 and September 19 and Party Line September 19 and 19	
1. 以表现 性情况 (1977)	ime, Mailing Addre e city, state, & zip)	ss & Phone		b. Job Title/Profes	sion	d. Comments
menu	c city, giate, & zip)	<u> Parada Kabupatèn Kabupatèn Bangatan Kabupatèn Kabupatè</u>	19 (1994) (1994) - 1995 (1994) (1994) (1994) 1			
			. '	c. Employer's Nan	ne/Specific Field	
				:		e. Election 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
						\$
						\$
						\$
3. Cont	ributor Informa	tion		Add Ren	nove	
	ime, Malling Addre	ss & Phone		b. Job Title/Profes	sion	d. Comments
(includ	e city, state, & zip)		guis <u>leich Williades</u> ,	-		
	•	-		c. Employer's Nan	ie/Specific Field	·
						e. Election 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
						\$
						\$
						\$
4. Tota	al only this Pa	age				\$
5. Tota	al of ALL CR	O-1210 Pages of Detailed Summary Pa	ge CRO=1100)			\$ 4.55

Disclosure Report Cover The this form for seneral report and committee information, must be signed and submitted along with other detailed for THOSE HASE THIS FORM TO UPdate Information. a. Full Name Committee to elect Lisa Patrick b. Mailing Address (include City, State and Zip Code) 06/30/2018 2711 Monticello Court Burlingtonine 27215 e. Phone Number 336-264-1160 2. Report Year 3. Period Start Date (mm/od/yy) 4. Period End Date (mm/od/yy) 5. Treasurer Full Name Lisa Patricle 06/30/2018 01/01/2018 2018 9. Type of Report (check only one type of report from one calegoly) Type of Committee (Check One) Referendum Municipal Candidate Campaign Organizational Organizational Organizational Referendum Pre-referendum Independent Expenditure I Joint Fundraiser Thirty-five day Quarterly Final Pre-primary First Legal Expense Fund Supplemental Final Pre-election Annual Third 7. Type of Fund Pre-runoff Special Semi-annual Fourth Booster Fund Mid Year Semi-annual Building Fund 10. Special Report Name Year End Mid Year Year End Final Other: Special Special Final 8. Number of Fundraisers this Report LI Special 11. Account Information a. Financial Institution Full Name a. Financial Institution Full Name Credit Union Proponent Federal c. Account Code c. Account Code b. Purpose 234 Campaign d. Period Begin Balance d. Period Begin Balance 5.58 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. 06/30/2018 Signature of Appointed Treasurer Printed Name of Signe FOR OFFICE USE ONLY 4/10/19 Delivery Method Employee: Date Received: Normal Mail Registered Mail Employee: Date Postmarked: Hand Delivered Electronically Filed 16 Employee: Date Scanned: Signer has not received Employee: Date Data Entered: mandatory training Please Note: This form cannot be used to amend committee information such as the committee address, treasurer,

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

NC State Board of Elections

assistant treasurer, custodian of books information, or account information.

August 2008

Detailed Summary Use this form to summarize all disclosure reporting forms and	Yes Yes	Yes No		
1. Committee Full Name (and Fund if applicable)	2. Type of	Report	3. ID Number	
Committee to elect LisaPatrick	MIG-	Tear		
Start of Election Cycle: January 1, 🏖 🗗 🖟 🗷 30	18	Total this Reporting Perio	1	al this on Cycle
4) Cash on Hand at Start		\$ 5,88	\$	5 ; St
<u>RECEIPTS</u>				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$	
6) Contributions from Individuals	(CRO-1210)	\$ 2134,69	\$ 21=	34,69
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)	\$	\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	11d and 11e)	\$ 2134,69	\$ 213	14.69
EXPENDITURES				
13) Disbursements				
13a) Operating Expenditures	(CRO-1310)	\$	\$	
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)	\$ 2134,69	\$ 213	4,69
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15	5, 16 and 17)			14,69
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)			57,88
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)	\$		
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)	\$	\$	

		om Individua		Pg	of _	granus and a second	Amendment Yes No
		ndividual contributio		ontributions und	er \$50 if form Ck		Number
		ne (and Fund if app		1		24. II	Number
(ommittee	to elect L	159 Patric	IC			
3. Cont	ributor Informa	ation			nove	T	
	a. Full Name, Mailing Address & Phone b. Job Title/Profession					d. Co	mments
	e city, state, & zip)	1.		namema	alces		
Li	sa Patric	cello Cart		c. Employer's Nan	ne/Specific Field		
0	2711 Mant	Cello Carr				e. Ele	ection Sum to Date
1	Butington (33/1)	, NC 27215				\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	(y)	k. Amount
	1234	in kind	Postago	estamps	01/11/201	8	\$ 39,20
	1234	inkind	campai	gn cards	02/06/20	18	\$ 75.79
							\$
3. Cont	ributor Informa	ation		Add Rer	nove		
	ame, Mailing Addre	ess & Phone		b. Job Title/Profes	ssion	d. Co	mments
	le city, state, & zip)	.//		houseui			
1	isa Patric	n o t		c. Employer's Nan	ne/Specific Field		
2-	III Montie	cello Cast				e. Ele	ection Sum to Date
B	urlington	INC 27215				\$	Sun to Sun
f. Prior	(336) 266 g. Account Code	h. Form of Payment	i. In-Kind Descrip	l tion	j. Date (mm/dd/yyy	(y)	k. Amount
	1234	in kind	Photos		02/05/20	18	\$ 64,03
	1234	in kind	gnscl				\$ 20.00
	1234	in kind	Stamps	sl Buslington	01/22/2	018	\$ 40,00
	ributor Informa				nove	I. a	
100	ame, Mailing Addre	ess & Phone		b. Job Title/Profes		d. Co	mments
	le city, state, & zip)	1.		hanema	rer		
1	Sa Patric	e allo Cont		c. Employer's Nan	ne/Specific Field		
2	711 Montie	2715				e. Ele	ection Sum to Date
F	Burlington	NC 27215 1160 h. Form of Payment				\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip		j. Date (mm/dd/yyy	(y)	k. Amount
	1234	inkind	car deco	ils	03/09/2018		\$ 404.47
	1234	inkind	Supplie	S office	01/27/2012	8	\$ 2.01
	1234	inkind	members	np Alwot	01/11/2018		\$ 3000
4. Tot	al only this P	age				\$	675.50
		RO-1210 Pages S of Detailed Summary P	Page CRO-1100)			\$	2134,69

In-Kind Contributions	Pg	of	Yes No
Use this form to report non-monetary contributions, donations, good Use CRO-1215 if In-Kind Contributions were or will be refu			ee or fund.
1. Committee Full Name (and Fund if applicable)	unded within 7 da		2. ID Number
Committee to elect Lisa	Patrick		
3. Contributor Information		move	
a. Full Name, Mailing Address & Phone	b. Type of Contri	butor	c. Comments
(include city, state, & zip)	Individual		
Lisa Patrick Cart	Candidate Party		
2711 Manticella Cari	PAC		
21 Lington INC 2721	Referendum		d. Election Sum to Date
Lisa Patricello Cart 2711 Menticello Cart Birlingtonine 27215 336-264-1160	Other Receip	Source	\$
e. Description		f. Date (mm/dd/yyy	
office sopplies		01/27/2018	\$ 2'01
• • • • • • • • • • • • • • • • • • • •		01/11/201	8 \$ 39,20
postage club membership		01/11/201	8 \$ 30,00
3. Contributor Information		move	
a. Full Name, Mailing Address & Phone	b. Type of Contri	butor	c. Comments
(include city, state, & zip)	Individual Candidate		
Lisa Patricia	Party		
2711 Monticello Carolis	☐ PAC		
2 lington, NC alais	Referendum		d. Election Sum to Date
a. Full Name, Mailing Address & Phone (include city, state, & zip) Lisa Patick 2711 Monticello Cart 2711 Hondicello Cart 3710 Hondicello Cart 3710 Hondicello Cart 3710 Hondicello Cart 2711 Hondicello Cart 3310 - 264 - 1160	Other Receip	Source	\$
e. Description	CV Y X S T T T T T T T T T T T T T T T T T T	f. Date (mm/dd/yyy	g. Fair Market Amount
cosmetic		01/29/201	
cards business		02/06/201	
Photography		02/05/20	\$ 64,00
3. Contributor Information	Add Rei		<i>a</i> .
a. Full Name, Mailing Address & Phone	b. Type of Contri	butor	c. Comments
(include city, state, & zip)	Candidate		
LISA Licola Court	Party		
2711 Manticult 27215	☐ PAC		
Quelington, NC 2	Referendum		d. Election Sum to Date
(include city, state, & zip) Lisa Patricle 2711 Manticello Ctort 2711 Manticello Ctort Barlington, NC 27215 336-264-1160 e. Description	Other Receipt	Source	\$
e. Description		f. Date (mm/dd/yyy	
Supplies/wardrobe		03/06/20	18 \$ 3,20
visitation		0/122/20	18 \$ 20,00
GOP		01/26/201	\$ \$ 40.80
4. Total only this Page			\$ 377.45
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$ 2134.69
(1 ms and must be on the 17 of Detailed Sammary Tage CKS-1100)			December 200

Detailed Summary Use this form to summarize all disclosure reporting forms and	Yes No		
1. Committee Full Name (and Fund if applicable)	2. Type of		3. ID Number
Committee toelect Lisa Particle	(4° 14 (End 2017	
Start of Election Cycle: January 1, 200	<u> </u>	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 5.88	\$ -0 -
<u>RECEIPTS</u>			
5) Aggregated Contributions from Individuals	(CRO-1205)	I '	\$
6) Contributions from Individuals	(CRO-1210)	\$ 697.90	\$ 1611.90
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)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	11d and 11e)	\$ (697,90	\$ 1611,90
<u>EXPENDITURES</u>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$	\$
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)	\$ 697,90	\$ 1606.02
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 13	5, 16 and 17)	\$ (,97,90	\$ 1606,00
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	otract line 18)	\$ 5,88	\$ 5.88
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)	\$	
25) Administrative Support	(CRO-1710)	\$	\$
26) Forgiven Loans	(CRO-1440)	\$	\$
21) 10 110 11 110 110 110 110 110 110 110	(CRO-2220)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$

2-1-12-12-14

Use this form to report individuals Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not use. 1. Committee Full Name (and Fund if applicable) Committee Full Name (and Fund if applicable) 2. ID Number 3. Contributor Information a. Full Name, Mailing Address & Phone (include city, state, & zip) Lisa Patick 2. ID Number b. Job Title/Profession d. Comments Comments Comments Comments	No sed
1. Committee Full Name (and Fund if applicable) Committee Full Name (and Fund if applicable) Committee Full Name (and Fund if applicable) 2. ID Number 3. Contributor Information Add Remove b. Job Title/Profession (include city, state, & zip) Comments Commen	
3. Contributor Information a. Full Name, Mailing Address & Phone (include city, state, & zip) Add Remove b. Job Title/Profession d. Comments Comments Comment	
a. Full Name, Mailing Address & Phone (include city, state, & zip) b. Job Title/Profession CVSGLIFC c. Employer's Name/Specific Field	
(include city, state, & zip) Novsewife c. Employer's Name/Specific Field	
Lisa Patick 2711 Menticello Cart c. Employer's Name/Specific Field	
2711 Monticello Cart	
2111 17(1111(11) CW)	
Burlington, Ne 27215	Date
Burlington, Ne 2120	
f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount	
□ 1234 in kind election products 12/11/2017 \$ 14.	92
3. Contributor Information	
a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments	
(include city, state, & zip)	
Lisa Patrick 2711 Monticello Cart c. Employer's Name/Specific Field	
2 11 1 110 27215	D.4.
By In 9 to No 2 1210 e. Election Sum to	Date
336-264-1160	
f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount	
1234 in leind wardrebe 11/4/17 \$ 133	
1234 in kind entertainment 12/7/17 \$ 80	
1234 in kind entertainment 12/30/17 \$ 3	20
3. Contributor Information Add Remove a. Full Name. Mailing Address & Phone b. Job Title/Profession d. Comments	
1 ica Datack	
2711 Manticello Cart (c. Employer's Name/Specific Field	
e. Election Sum to	Date
Burlington, M 27215	
f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount	97)
□ 1234 in kind Postage 11/28/2017 \$ 9°	
	54
□ 1234 in kind election products 10/30/2017 \$ 40)' DU
4. Total only this Page \$ 3.05	02
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) \$ \(\sqrt{9} \)	90

Cont	Contributions from Individuals Pg 2 of 2 Mendment Yes No						
	Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used						
		ne (and Fund if app		ontroducions und	or 450 ir iorii. er	2. II) Number
		ee to elect		clc			
3. Cont	tributor Informa	ation		- Itualph	nove		
	ame, Mailing Addre	ess & Phone		b. Job Title/Profes	^	d. Co	mments
(includ	le city, state, & zip)	(6)4		housewi	te		
	Lisa Pat	nek		c. Employer's Nan		1	
	2711 Mant	icello Cart	5		-	e. Ele	ection Sum to Date
	336-260	W, NC 272K				\$	
f. Prior	a Account Code	h. Form of Payment	i. In-Kind Descrip	l tion	j. Date (mm/dd/yyy	yy)	k. Amount
	1234	in kind		ient			\$ 8,98
	1234	inkind	election	products	10/3/17		\$ 47.85
	1234	inkind		cosmetic,	10/30/17		\$ 233'00
3. Cont	tributor Informa				nove		
	ame, Mailing Addre			b. Job Title/Profes	ssion	d. Co	mments
	le city, state, & zip)			hasewit	P		
	isa Patne	V		c. Employer's Nar		1	
	11 March	icalla(t		c. Employer's Nai	ne/Specific Field		
	2111 11011	11000				e. Ele	ection Sum to Date
	336-264	N NC 27215				\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	yy) l	k. Amount
	1234	in kind	c osmet	ics	11/2/17		\$ 28.82
	1234	inkind	Cosme		11/3/17		\$ 60.89
	1234	in kind	Products	forcampagn		7	\$ 13,01
-	tributor Inform				move	la c	
III.	ame, Mailing Addr	ess & Phone		b. Job Title/Profe	ssion	a. Co	mments
(includ	de city, state, & zip)						
				c. Employer's Nai	ne/Specific Field		
						e. Ele	ection Sum to Date
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	yy)	k. Amount
							\$
							\$
							\$
4. To	tal only this P	age				\$	392.88
		RO-1210 Pages		akken sekan menerala periodo kalkan menerala kenderala kenderala kenderala kenderala kenderala kenderala kende		\$	392.88
10	(This line must be on line 6 of Detailed Summary Page CRO-1100)						

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In.	. Kin	d ('(ontri	huti	one
TIII.	- 11 / 11 / 11	$\mathbf{u} \cdot \mathbf{v}$		nuu	CILU

	1		~	Amendment	
Pg		of	1	Yes	☐ 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 Lisa	Patrick		
3. Contributor Information		nove	75.20
a. Full Name, Mailing Address & Phone	b. Type of Contril	outor	c. Comments
(include city, state, & zip)	Individual		
(include city, state, & zip)	Candidate		
2711 Monticello CONT	Party PAC		
2711 Monticello Cont Burlington, NC 27215	Referendum		d. Election Sum to Date
000000000000000000000000000000000000000	Other Receipt	Source	SESTIMATION OF THE SESTIMATION O
336-264-1160		e D + / /11/	y) g. Fair Market Amount
e. Description		f. Date (mm/dd/yyy	
Postage		11/28/2017	7 \$ 9180
Pensicampaign election products		11/01/2017	\$ 95.54 17 \$ 40.00
election products		10/30/20	17 \$ 40,00
3. Contributor Information		nove	
a. Full Name, Mailing Address & Phone	b. Type of Contril	outor	c. Comments
(include city, state, & zip)	Individual		
LISA Patrick	Candidate Party		
2711 Monticello Cart	PAC		
Burlington, NC 27215	Referendum		d. Election Sum to Date
2(1-110)	Other Receipt	Source	\$
336 - 264 - 1160 e. Description		f. Date (mm/dd/yyy	y) g. Fair Market Amount
	egyp eel tou superioodadaaluud a agus aa tad	10/30/201	7 \$ 8.98
eauipment		1-1	7 85
election products		10/3/1201	7 \$ 47 ⁸⁵ 7 \$ 60 ⁹
cosmetics		11/03/201	7 \$ 60. 29
3. Contributor Information		nove	
a. Full Name, Mailing Address & Phone	b. Type of Contril	outor	c. Comments
(include city, state, & zip)	Individual Candidate		
Lisa Patrick	Party		
2711 Manticello 27215	☐ PAC		
Burlington, NC 2121	Referendum		d. Election Sum to Date
Lisa Patrick 2711 Monticello Cont Burlington, No. 27215 336-264-1160	Other Receipt	Source	\$
e. Description		f. Date (mm/dd/yyy	
wardrabel cosmetics		10/30/2017	
Cosmetics		11/2/201	7 \$ 28,82
predicts for campage		10/31/2017	\$ 13.34
4. Total only this Page			\$ 538,22
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$ 697.90