Disclosure Report Cover Use this form for general report and committee information, must be signed and submitted along with other detailed forms.

a. Full Name							c.	ID Number
Ewing for Mebane								82-1276120
b. Mailing Address (include C	City, State and Zip Code)			***			d.	Date Filed
304 Stratford Road Mebane, NC 27302					· · ·			10/28/2019
medane, me 27502				7 . A . A	ł U 1		e.	Phone Number
								614-378-8464
2. Report Year 3. P	eriod Start Date (mm/d	d/yy)	4. Period E (mm/dd/yy)	nd Da	te	5. Treasurer F	Full Nar	ne la
2019	09/25/2019	•		1/2019		Ellen Edwards		
6. Type of Committee (C	Check One)	9. Typ	e of Report	(c)	heck o	nly one type of rep	ort from	n one category)
Candidate Campaign	Party	Municip	oal		State/	County	R	eferendum
PAC	Referendum		Organizational			Organizational		Organizational
Independent Expenditure	Joint Fundraiser		Thirty-five day			Quarterly		Pre-referendum
7. Type of Fund	applicable, check one)		Pre-primary			First	-] Final
Booster Fund"	appricable, check one)		Pre-election		Ħ	Second	1 =	Supplemental Final
Building Fund			Pre-runoff		H	Third		Annual
Bunding I and		LJ	Semi-annual			Fourth] Special
			Mid Year			Semi-annual		
Other:			Year End			Mid Year	10). Special Report Name
			Final			Year End		
8. Number of Fundraise	rs this Report		Special			Final		
1						Special		
11. Account Information	n			11. Ac	count	Information		
a. Financial Institution Full N	ame			a. Finan	cial In	stitution Full Name		
Truliant Federal Credit U	Jnion							
b. Purpose	c. Account Code			b. Purp	ose		- 1	c. Account Code
All campaign	1						İ	
expenses								
	d. Period Begin Balance		:				<u> </u>	d. Period Begin Balance
	\$ 2,847.94						:	\$
CERTIFICATION								
I certify that the Committ	tee or Fund is in compli	ance wit	h all applicab	le prov	isions	of Article 22A ₁ /2.	2B, & 2	2D-22M of Chapter 163 of
the NC General Statutes a	and that no funds are co	mmingle	ea with prohil	oited of	otnei	non-disclosed fur	ias. I Tu	rther certify that this report
is complete, true and corr	ect and that I have been	trained	by the NC 3		ard of	riections.	∽ 10/2	8/2019
Ellen Edwards	inted Name of Signer		Sio	mature of	f Annoi	nted Treasurer	10/2	Date
FOR OFFICE USE ONLY			Jig	,	тррог		. /	-
Date Received:	10/30/19		Employee:		<u> </u>	<u>G</u>	<u>Deli</u> □	<u>very Method</u> Normal Mail
Date Postmarked:			Employee:					Registered Mail Hand Delivered
Date Scanned:	10/31/2019		Employee:		J	6		Electronically Filed Signer has not received
Date Data Entered:			Employee:				_	mandatory training
Place Note: This for	m cannot be used to am	end com	mittee inforn	nation s	such a	s the committee ac	ldress. t	reasurer, assistant treasurer,
Tiease Note. This for						t information.	,	, • • • • • • • • • • • • • • • • • • •

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

CRO-1000 NC State Board of Elections August 2008

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

Amendment \boxtimes Yes No

1. Committee Full Name (and Fund i	<u> </u>	Type of Report			Number
Ewing for Mebane	P	Pre-Election Repo	ort	82-12	76120
Start of Election Cycle: J.	anuary 1, _	2018	Total the Reporting 1		Total this Election Cycle
4) Cash on Hand at Start			\$ 2,847.9	4 \$	2.63
RECEIPTS			111		And the Control of
5) Aggregated Contributions from		(CRO-1205)	\$ 130.00	\$	740.00
6) Contributions from Individuals	}	(CRO-1210)	\$ 50.00	\$	3,497.27
7) Contributions from Political Pa	rty Committees	(CRO-1220)	\$	\$	
8) Contributions from Other Polit	ical Committees	(CRO-1230)	\$	\$	
9) Loan Proceeds		(CRO-1410)	\$	\$	
10) Refunds/Reimbursements To the	ne Committee	(CRO-1240)	\$	\$	
11) Other Receipt Sources			4		
11a) Interest on Bank Accounts	,	(CRO-1250)	\$	\$	
11b) Contributions from Not-fo	r-Profit Organization	s <i>(CRO-1250)</i>	\$	\$	
11c) Outside Sources of Income	,	(CRO-1250)	\$	\$	
11d) Legal Expense Fund - Oth	er Sources	(CRO-1270)	\$	\$	
11 e) Exempt Purchase Price Sa	les	(CRO-1265)	\$	\$	
12) TOTAL RECEIPTS (Add lines 5,	6, 7, 8, 9, 10, 11a, 11b, 11c, 1	1d and 11e)	\$ 180.00	\$	4,237.27
EXPENDITURIES	"我们的"		4 6 3		国的护护
13) Disbursements	. 436.144, 171.144		1 1		
13a) Operating Expenditures		(CRO-1310)	\$ 2,583.98	\$ \$	3,598.67
13b) Contributions to Candidat	es/Political Committee	es (CRO-1310)	\$	\$	
13c) Coordinated Party Expend	litures	(CRO-1310)	\$	\$	
14) Aggregated Non-Media Expend	litures	(CRO-1315)	\$	\$	-
15) Loan Repayments		(CRO-1420)	\$	\$	
16) Refunds/Reimbursements From	the Committee	(CRO-1320)	\$	\$	
17) In-Kind Contributions		(CRO-1510)	\$	\$	197.27
18) TOTAL EXPENDITURES (Add	lines 13a, 13b, 13c, 14, 15, 1	6 and 17)	\$ 2,583.98	\$ \$	3,795.94
19) Cash on Hand at End (Add lines 4	and 12 together, then subtrac	ct line 18)	\$ 443.96	\$	443.96
ADDITIONAL INFORMATIC	N Francisco				网络自身设计设备
20) Non-Monetary Gifts Given to O	ther Committees	(CRO-1330)	\$		
21) Outstanding Loans (incl. ones fi	rom other campaigns)	(CRO-1430)	\$		12.00 (10.00) 12.00 (10.00)
22) Debts and Obligations owed By	the Committee	(CRO-1610)	\$		Section 1
23) Debts and Obligations owed To	the Committee	(CRO-1620)	\$		8 7. K 3. C
24) Account Transfers Within the C		(CRO-1720)	\$		
25) Administrative Support		(CRO-1710)	\$	\$	
26) Forgiven Loans		(CRO-1440)	\$	\$	
,		(CRO-2220)	\$	\$	
•		(CRO-1215)	\$	\$	
28) Contributions to be Refunded CRO-1100	NC State Board of Election		Ψ	Φ	August 2008

Aggregated Contributions from Individuals

Page

<u>1</u> of

Amendment Yes

No

 \boxtimes

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

		ame (and Fun	d if applicable)			2. ID	Number
Ewin	g for Mebane						82-1276120
3. Co	ntributor Infori	mation					
a. Ame	nd	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyy		f. Amount
	Add Remove	1	Electronic		09/25/20	019	\$ 25.00
	Add	1	Check		09/27/20	019	\$ 25.00
	Remove Add	1	Electronic		10/03/20)19	\$ 30.00
	Remove Add						
	Remove	1	Check		10/18/20)19 ———	\$ 50.00
	Add Remove						\$
	Add Remove	_					\$
	Add					-	\$
<u> </u>	Remove						,
	Add Remove						\$
П	Add						¢.
	Remove						\$
	Add	_					\$
Щ	Remove						
Ц	Add	-					\$
<u> </u>	Remove Add						
\dashv	Remove	-					\$
	Add						\$
	Remove						Ψ
	Add Remove	-					\$
	Add	_					\$
	Remove						
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Ħ	Add						Φ.
	Remove						\$
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<u> </u>	Remove	<u> </u>					
<u> </u>	Add Remove						\$
<u> </u>	Add						
\exists	Remove						\$
	Add						¢
	Remove				_		\$
<u> </u>	Add	1					\$
1 To	Remove	Page			1	\$	130.00
	tal only this l					Ψ	150.00
	tal of ALL C line must be on line		ages mmary Page CRO-1100)			\$	130.00
1 4 1110	oc on and	- of - common one	······································				

Amendment **Contributions from Individuals** \boxtimes 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 Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Retired Teacher BeBe Mitchell O'Donnell c. Employer's Name/Specific Field 30 Bent Tree Court Gibsonville, NC 27249 Retired 336-447-1024 e. Election Sum to Date \$ 150.00 k. Amount f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) \$ 50.00 1 Check 10/18/2019 \$ \$ Add | Remove b. Job Title/Profession d. Comments (include city, state, & zip)

							Amendment	
Disbursements			Pg	1	of	2	Yes	\boxtimes
			_	_			Committee contract of the cont	

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 Fun	d if applicable)						2. ID Number		
Ewing for Meba	ane							82-1276120		
3. Type of Disb	ursement <u>(Plea</u>	ise use separate C	RC	0-1310 forms for ed	ich t	vpe of Disbursem	ent.)			
Operating E	xpenses	Contributions to Car	ndid	ates/Political Committee	es	Coo	ordinate	d Party Expenditures		
4. Payee Inform	ation		A	.dd		Remove				
a. Full Name, Maili	ing Address & Phone		b.	. Coordinated Commit	tee N	ame	d. Co	mments		
(include city, state,	& zip)							· · · · · · · · · · · · · · · · · · ·		
Vantiv										
8500 Governors Hill Drive				Level Registered (Spe	cify)		1			
Cincinnati, OH 45249				Federal		County:				
866-622-2390	866-622-2390				State Municipali			ction Sum to Date		
							6 6	:0.74		
							\$ 50.74			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy) j. Amount			k. Re	quired Remarks			
1	Draft	О	10/09/2019 \$1.66				Onli	ne txn fee		
1	Diait			10/09/2019		\$1.00				
						\$				
						Ψ				
4. Payee Inform	nation		Α	dd l		Remove		The second secon		
a. Full Name, Maili	ng Address & Phone		b.	Coordinated Committ	ee Na	ame	d. Co	mments		
(include city, state,	& zip)									
Banners On The	Cheap									
11525a Stoneho	llow Drive		c.	Level Registered (Spec	ify)					
Austin, TX 787:	58			Federal		County:				
877-710-1876	877-710-1876			State Municipality			e. Election Sum to Date			
						\$ 174.12				
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy) j. Amount				k. Red	quired Remarks		
								g Banner		
1	Draft	В	ļ	09/27/2019		\$78.29		-6		
						\$				
4. Payee Inform			Λ	dd	7	Remove				
		اسا	b. Coordinated Committee Name					mments		
	ng Address & Phone			Coordinated Committee		inic	u. Coi	mments		
(include city, state, a	& ZIP)									
475 L'Enfant Pla	272 SW		c. Level Registered (Specify)							
Washington, DC			Federal County:					-		
800-275-8777	, 20200					Municipality:	e. Election Sum to Date			
800-273-8777			_			Trainespaney.				
								,160.00		
f. Account Code	g. Form of Payment	h. Purpose Code	_	i. Date (mm/dd/yyyy)		j. Amount	·········	quired Remarks		
1	Debit	I		10/12/2019		\$350.00		ige for		
		ļ	_				maile			
1	Debit	I		10/13/2019		\$700.00		ige for		
							maile			
5. Total only thi							\$	1,129.95		
TO COLO TO TAX Media de de desperante con construir de la compansa de la construir de la const	CRO-1310 Pages									
, .	line 13a of Detailed Sum						\$	2,583.98		
(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):										
						D 75-4 d	C - 1	: 1-4-		
A* - Media	B* - Printing	C* - Fund G - Politica				D - To Anothe		odate Office Expenses		
E - Salaries I - Postage	F* - Equipment J - Penalties	K* - Offic						gal Expense Fund		
O* - Other	e - i chamos	K - Office	- 1 2	whempen		Z Donation	. to Del	2m. Tyhonoo x ana		
	e detailed explanati	on in required re	ma	rks field (k)						

No

					Amendment
Disbursements	Pg	<u>2</u>	of	<u>2</u>	☐ Yes 🏻
					* 1 . / 11.4 1

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

1. Committee F Ewing for Meb	ull Name (and Fun	d if applicable)		1000	-		2. ID Number 82-1276120
		isa usa sanarata (`R (0-1310 forms for each	1 1	ne of Dishursem	
Operating E				lates/Political Committees	<i>5 - L y</i>		ordinated Party Expenditures
4. Payee Inform	-			vdd -		Remove	
•	ing Address & Phone		********	. Coordinated Committee	Na		d. Comments
(include city, state,	_						
Gephart Market			1				
1401 Poplar La	ne		c.	Level Registered (Specify	y)		
Hillsborough, N	IC 27278			Federal		County:	
919-732-6464				State]	Municipality:	e. Election Sum to Date
						\$ 589.35	
f. Account Code	g. Form of Payment	h. Purpose Code	.l	i. Date (mm/dd/yyyy)		j. Amount	k. Required Remarks
1	Debit	В		10/14/2019 \$589.		\$589.35	Yard signs
						\$	
4. Payee Inform			T	dd 🔲	<u> </u>	Remove	La Communit
	ng Address & Phone		D.	. Coordinated Committee	Na	me	d. Comments
(include city, state,			1				
Mebane Enterpi 106 N 4 th Street			-	Level Registered (Specify	υŇ		
Mebane, NC 27			-	Federal	,	County:	
919-563-3555			-	State		Municipality:	e. Election Sum to Date
717 303 3333							\$ 473.97
f. Account Code	g. Form of Payment	h. Purpose Code	\vdash	i. Date (mm/dd/yyyy)	\neg	j. Amount	k. Required Remarks
						<u> </u>	Local newspaper
1	Debit	Α		10/15/2019		\$473.97	ad
						\$	
4. Payee Inform	ation		******	dd		Remove	Control of the Control of Control
a. Full Name, Maili	ng Address & Phone		b.	Coordinated Committee	Na	me	d. Comments
(include city, state,		<u> </u>	ļ				
Clay Street Prin	•						
124 West Clay S			e.	Level Registered (Specify	<u>()</u>		
Mebane, NC 27	302		Federal County:			- Fl - 4' - C 4 - D - 4	
919-563-5034			┝┕	State Municipality:			e. Election Sum to Date
							\$ 845.47
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)		j. Amount	k. Required Remarks
1	Debit	В		10/13/2019		\$390.71	Post cards
						\$	
5. Total only thi	s Page	r eg		and on the party of		1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1	\$ 1,454.03
	CRO-1310 Pages						-,
. A	line 13a of Detailed Sum	mary Page CRO-1100) if (Operating Expenses)	.cecuiidh		¢ 2.592.09
				Contrib to Candidates/Polit	tica	l Comm)	\$ 2,583.98
(This line goes in	line 13c of Detailed Sum	mary Page CRO-1100	if (Coordinated Party Expendi			
	es (List detailed ext						
A* - Media	B* - Printing	C* - Fund				D - To Anothe	
E - Salaries I - Postage	F* - Equipment J - Penalties	G - Politic K* - Offic					Public Office Expenses 1 to Legal Expense Fund
O* - Other	o - i charces	K - One	, <u>11</u>	Aponoco		v Donation	
	e detailed explanati	on in required re	m2	rks field (k)			

No