

Certification of Inactive Status

This certification is used by Candidate, Party, PACs and Referendum Committees to declare their intent to be inactive, which is not raising or spending any money on behalf of the campaign.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

FILED BY:

Committee Name: Ewing for Mebane

Treasurer Name: Ellen Edwards

Treasurer Address: 2848 Barksdale Drive

(include city, state, & zip) Haw River

NC

27258

Treasurer Phone: 336-417-3172

I certify that the above named candidate/political committee intends to receive no contributions, nor make any expenditures, until the committee resumes activity.

I understand that if the above circumstances change, it will be necessary for the person responsible for filing financial disclosure reports to file an amended Statement of Organization and the Certification to Return to Active Status form (CRO-3300) within ten days.

01/31/2020

Date Signed

Eller Gall

RECEIVED FEB 14 2020

BY:

CRO-3200

Certification of Inactive Status

Disclosure Repo						Yes No
Use this form for generation	al report and committee in	formation, i	must be sign	ed and sub	mitted along with oth	ner detailed forms.
Do not use this form to	1					one and the second seco
1. Committee Informa	tion				B 4 2	In N. I
a. Full Name Ewing for Mebane						e. ID Number 82-1276120
b. Mailing Address (include	City, State and Zip Code)					d. Date Filed
304 Stratford Road	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Mebane, NC 27302						01/31/2020
						e. Phone Number
-						614-378-8464
2. Report Year 3.	Period Start Date (mm/dd		Period End I n/dd/yy)	Date	5. Treasurer Full I	Name
2019	10/21/2019		12/31/20	19	Ellen Edwards	
6. Type of Committee	·	9. Type of	Report		ly one type of report j	T
Candidate Campaign		Municipal		State/C		Referendum
PAC	Referendum	Organ	nizational		Organizational	Organizational
Independent Expenditure	Joint Fundraiser	Thirty	y-five day	(Quarterly	Pre-referendum
Legal Expense Fund						
	(applicable, check one)	_	orimary		First	Final
"Booster Fund"		=	lection		Second	Supplemental Final
Building Fund		Pre-ru	uno11 -annual		Third Fourth	Annual Special
	Control of the contro		Mid Year		Semi-annual	Зрестаг
Other:			Year End		Mid Year	10. Special Report Name
		Final			Year End	A
8. Number of Fundrais	ers this Report	Speci	al	☐ F	inal	
					pecial	
11. Account Information	on		11.	Account I	nformation	
a. Financial Institution Full	Name		a. Fi	nancial Insti	tution Full Name	
Truliant Federal Credit	Union				1	
b. Purpose	c. Account Code		b. Pu	ırpose		c. Account Code
All campaign	1				RAPERME	No. of the contract of the con
expenses	d. Period Begin Balance					d. Period Begin Balance
					1.51.001	
	\$ 443.96			duagnes.		\$
CERTIFICATION		•		135	E .	
the NC General Statutes	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.					
Ellen Edwards	mar i mar v occii (and of the	11	lu G		1/31/2020
F	rinted Name of Signer		Signatur	e of Appoint		Date
FOR OFFICE USE ONL				10		
Date Received:	2114120	Emp	loyee:	16		Delivery Method Normal Mail
Date Postmarked:	01:010:00		loyee:		<u> </u>	Registered Mail Hand Delivered
Date Scanned:	3/12/2020	Emp	loyee:		<u>G</u>	Electronically Filed Signer has not received
Date Data Entered:		Emp	loyee:			mandatory training
Please Note: This fo			ee information, o			s, treasurer, assistant treasurer,
Yo	ou must amend the Statemo	ent of Orgar	nization (CR	O-2100A-l	E) to make committee	e changes.

Yes

No

 \boxtimes

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

Ewing for Mebane			3. 1D Number 82-1276120
Lwing for Medane	Pre-Election Repo	111	82-12/0120
Start of Election Cycle: January 1,	2018	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 443.96	\$ 2.63
RECEIPTS		Joseph W. College	
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 120.00	\$ 860.00
6) Contributions from Individuals	(CRO-1210)	\$	\$ 3,497.27
7) Contributions from Political Party Committees	(CRO-1220)	\$ 84.69	\$ 84.69
8) Contributions from Other Political Committees	(CRO-1230)	\$ 1,000.00	\$ 1,000.00
9) Loan Proceeds	(CRO-1410)	\$	\$
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources		118 72 84 12	
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Organizati	ions <i>(CRO-1250)</i>	\$	\$
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, 11a)	lc, 11d and 11e)	\$ 1,204.69	\$ 5,441.96
EXPENDITURES		34437	
13) Disbursements		the state of	
13a) Operating Expenditures	(CRO-1310)	\$ 1,404.51	\$ 5,003.18
13b) Contributions to Candidates/Political Commi	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)	\$ 84.69	\$ 281.96
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)	\$ 1,489.20	\$ 5,285.14
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	otract line 18)	\$ 159.45	\$ 159.45
ADDITIONAL INFORMATION		The second of	
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaign	ns) <i>(CRO-1430)</i>	\$	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$	
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$	3.44.46
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

of <u>1</u>

Amendment

☐ Yes
☐

N

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

1. Com	ımittee Full N	ame (and Fun	id if applicable)	<u> </u>		2. ID	Number
	for Mebane						82-1276120
3. Con	tributor Infor	mation			1.00		
a. Amen		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yy)	уу)	f. Amount
	Add Remove	1	Check		10/22/2	2019	\$ 50.00
	Add Remove	1	Electronic		11/04/2	2019	\$ 20.00
	Add Remove	1	Electronic		11/04/2	2019	\$ 50.00
H	Add	1			1		
П	Remove	7					\$
	Add						
	Remove	7					\$
	Add						0
	Remove						\$
	Add	_					\$
Д	Remove						Ų
	Add	_					\$
	Remove						
႕	Add	_					\$
<u> </u>	Remove						
<u> </u>	Add	4					\$
 	Remove	-			 		
<u> </u>	Add	4					\$
<u> </u>	Remove	+			+		
 	Remove	-					\$
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	Remove						\$
	Add Remove	-					\$
	Add						
<u> </u>	Remove	-					\$
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而	Remove	7					\$
	Add						Ф
	Remove	1					\$
	Add						\$
	Remove						Φ
	Add						\$
	Remove						Ψ
	Add	_					\$
<u> </u>	Remove						·
	Add Remove						\$
4. Tota	al only this	Page				\$	120.00
	al of ALL C			··· — — ···	-	\$	120.00
(This li	(This line must be on line 5 of Detailed Summary Page CRO-1100)						

Contributions from Political Party Committees

				Amendme	nt	
Pg	1	of	1	☐ Ye		No

Use this form to report contributions from a political party

Second Fibrio Finder and the second content of the second conten	1. Committee Fu	2. ID Number				
F. Full Name, Mailing Address & Phone (include city, state, & zip) S S	Ewing for Mebar		82-1276120			
Ginellade city, starts, & zip)			⊠ Add	Remove		
North Carolina Democratic Party 220 Hillsborough Street Raleigh, Nc 27603 919-821-2777 C. Election Sum to Date S					b. Cor	nments
2.20 Hilbsbrough Street Raleigh, NC 27603 S 84.69 S 84.69						
S 84 69	220 Hillsborough	h Street			Ĺ	
d. Account Code c. Form of Payment E. In-Kind Description E. Date (mm/sid/yyyy) h. Amount		03			c. Elec	ction Sum to Date
In-Kind Text messaging on behalf of candidate	919-821-2777				\$	84.69
In-Kind	d. Account Code	e. Form of Payment			y)	h. Amount
S S S S S S S S S S	1	In-Kind				\$ 84.69
3. Contributor Information a. Full Name, Mailing Address & Phone (include city, state, & zip) d. Account Code c. Form of Payment c. Election Sum to Date s s 3. Contributor Information a. Full Name, Mailing Address & Phone (include city, state, & zip) c. Election Sum to Date s s d. Account Code c. Form of Payment c. Election Sum to Date s s d. Account Code c. Form of Payment f. In-Kind Description g. Date (include city, state, & zip) c. Election Sum to Date s d. Account Code c. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount s 4. Total only this Page 5. Total of ALL CRO-1220 Pages			Outain of canadate			\$
3. Contributor Information a. Full Name, Mailing Address & Phone (include city, state, & zip) c. Election Sum to Date \$ d. Account Code c. Form of Payment f. In-Kind Description s 3. Contributor Information Add Remove 5 3. Contributor Information c. Fluit Name, Mailing Address & Phone (include city, state, & zip) d. Account Code c. Form of Payment f. In-Kind Description c. Election Sum to Date \$ 4. Account Code c. Form of Payment f. In-Kind Description c. Election Sum to Date \$ 4. Total only this Page 5 84.69						
A. Account Code C. Form of Payment C. Election Sum to Date C.			FT Add			2
(include city, state, & zip) c. Election Sum to Date S d. Account Code c. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount S 3. Contributor Information a. Full Name, Mailing Address & Phone (include city, state, & zip) d. Account Code c. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount c. Election Sum to Date S d. Account Code c. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) s s 4. Total only this Page S 84.69 S 46.9		7	Add L	Kemove	h Cor	m mants
d. Account Code c. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) s s 3. Contributor Information a. Full Name, Mailing Address & Phone (include city, state, & zip) d. Account Code c. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) c. Election Sum to Date s d. Account Code c. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount s 4. Total only this Page s 84.69 5. Total of ALL CRO-1220 Pages					D. CC.	Aments
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d. Account Code c. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount s \$ 3. Contributor Information S. Full Name, Mailing Address & Phone (include city, state, & zip) d. Account Code c. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount s \$ 4. Total only this Page \$ 84.69 5. Total of ALL CRO-1220 Pages				-		Hon Sum to Date
Account Code c. Form of Payment f. In-Kind Description (mm/dd/yyyy) a. Full Name, Mailing Address & Phone (include city, state, & zip) d. Account Code c. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) b. Amount f. In-Kind Description g. Date (mm/dd/yyyy) c. Election Sum to Date s. S 4. Total only this Page s. S. 84.69					<u> </u>	
S 3. Contributor Information a. Full Name, Mailing Address & Phone (include city, state, & zip) c. Election Sum to Date s d. Account Code c. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) s s 4. Total only this Page 5. Total of ALL CRO-1220 Pages	d. Account Code	e. Form of Payment	f. In-Kind Description		<u>) </u>	h. Amount
3. Contributor Information a. Full Name, Mailing Address & Phone (include city, state, & zip) c. Election Sum to Date s d. Account Code c. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount \$ \$ 4. Total only this Page 5. Total of ALL CRO-1220 Pages \$ 84. 69						\$
3. Contributor Information a. Full Name, Mailing Address & Phone (include city, state, & zip) c. Election Sum to Date \$ d. Account Code c. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount \$ \$ 4. Total only this Page 5. Total of ALL CRO-1220 Pages \$ 84.69						\$
a. Full Name, Mailing Address & Phone (include city, state, & zip) c. Election Sum to Date \$ d. Account Code c. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount \$ \$ 4. Total only this Page 5. Total of ALL CRO-1220 Pages \$ 84.69						\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)	3. Contributor Ir	oformation (1)	Add	Remove		
d. Account Code c. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount \$ \$ 4. Total only this Page 5. Total of ALL CRO-1220 Pages \$ 84.69	a. Full Name, Mailing	g Address & Phone		-	b. Con	nments
d. Account Code c. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount s \$ \$ \$ \$ 4. Total only this Page \$ 84.69 5. Total of ALL CRO-1220 Pages	(include city, state,	, & zip)				
d. Account Code c. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount s \$ \$ \$ \$ 4. Total only this Page \$ 84.69 5. Total of ALL CRO-1220 Pages						
d. Account Code e. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount \$ \$ \$ 4. Total only this Page \$ 84.69 5. Total of ALL CRO-1220 Pages				- -	c. Elec	tion Sum to Date
4. Total only this Page 5. Total of ALL CRO-1220 Pages 8. In-Kind Description (mm/dd/yyyy) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$					\$	
\$ \$ 4. Total only this Page \$ 84.69 5. Total of ALL CRO-1220 Pages \$ 84.69	d. Account Code	e. Form of Payment	f. In-Kind Description		·)	h. Amount
4. Total only this Page \$ 84.69 5. Total of ALL CRO-1220 Pages \$ 84.69						\$
4. Total only this Page \$ 84.69 5. Total of ALL CRO-1220 Pages \$ 84.69						\$
5. Total of ALL CRO-1220 Pages						\$
5. Total of ALL CRO-1220 Pages	4. Total only t	his Page			\$	84.69
	5. Total of AL	L CRO-1220 Page			\$	84.69

Contributions from Other Political Committees

				Ame	nameni		
Pg	1	of	1		Yes	\boxtimes	No

Use this form to report contributions from other candidate, referendum or PAC committees

	ll Name (and Fund if applicable	e)			2. ID	Number
Ewing for Mebane	e					82-1276120
3. Contributor In			· · · · · · · · · · · · · · · · · · ·	emove		
a. Full Name, Mailing			b. Type of Committee		d. Com	ıments
(include city, state, or Southern States Po	· · · · · · · · · · · · · · · · · · ·		Candidate Deformation			
Association	olice Benevoient	ĺ	Referendum c. Level Registered (Specify	r\	-	
2155 Hwy 42 Sou	ıth	ĺ	E. Level Registered (Specify	County:	-	
McDonough, GA		,	State	Municipality:	e. Elec	tion Sum to Date
770-389-5391		!		<u></u>	\$	1,000.00
f. Account Code	g. Form of Payment	h. In-Kind	d Description	i. Date (mm/dd/yyyy))	j. Amount
1	Check			10/29/2019		\$ 1,000.00
						\$
	ļ					\$
3. Contributor In	formation		[⊥] Add	emove		
a. Full Name, Mailing		- 1-1	b. Type of Committee	anov C	d. Com	ıments
(include city, state, &			Candidate	PAC		
			Referendum			
			c. Level Registered (Specify		1	
		l	Federal	County:	Flage	· ^ B.4-
			State	Municipality:		tion Sum to Date
	·				\$,
f. Account Code	g. Form of Payment	h. In-Kind	l Description	i. Date (mm/dd/yyyy)	<u>, </u>	j. Amount
						\$
						\$
						\$
3. Contributor Inf			/	movė		
a. Full Name, Mailing			b. Type of Committee		d. Com	ments
(include city, state, &	<u>& zip)</u>		Candidate	PAC	I	
		}	Referendum c. Level Registered (Specify		l.	
		ŀ	Federal	County:	I	
			State	Municipality:	e. Elect	ion Sum to Date
				Minus	\$	-
f. Account Code	g. Form of Payment	h. In-Kind	Description	i. Date (mm/dd/yyyy)		j. Amount
						\$
						\$
						\$
4. Total only this F				118	\$	1,000.00
5. Total of ALL C	RO-1230 Pages i line 8 of Detailed Summary Page CRO)-1100)			\$	1,000.00

Disbursements

Amendment Yes

 \boxtimes

No

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

	1. Committee Full Name (and Fund if applicable) 2. ID Number					
Ewing for Meb					82-1276120	
3. Type of Disb			CRO-1310 forms for ea			
Operating E			ndidates/Political Committee		pordinated Party Expenditures	
4. Payee Inforn			Add	Remove		
	ing Address & Phone		b. Coordinated Committee	tee Name	d. Comments	
(include city, state,						
Clay Street Prin	nting					
124 West Clay	Street		c. Level Registered (Spec	cify)		
Mebane, NC 27	7302		Federal	County:		
919-563-5034			State	Municipality:	e. Election Sum to Date	
					\$ 1,191.34	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
					Post cards	
I	Draft	В	10/30/2019	\$204.96		
1	Draft	В	12/08/2019	\$140.91	Post cards	
4. Payee Inform	nation		Add	Remove		
	ing Address & Phone		b. Coordinated Committ		d. Comments	
(include city, state,	-					
Facebook		,	1			
12 Hacker Way			c. Level Registered (Spec	rify)		
Menlo Park, CA			Federal	County:		
855-867-4017	191023		State	Municipality:	e. Election Sum to Date	
\$ 40.43						
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
n recount code					Facebook ads	
1	Draft	Α	11/02/2019	\$40.43	T uses out uus	
				\$		
4. Payee Inform	 nation		Add T	Remove		
	ng Address & Phone		b. Coordinated Committee		d. Comments	
(include city, state,	-		0,000,000,000			
Google Advertis						
1600 Ampitheat			c. Level Registered (Spec	:f\		
•	•				-	
Mountain View	, CA 94043		Federal [County:	El di C de D	
650-253-0000			State	Municipality:	e. Election Sum to Date	
					\$ 616.33	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debit	A	11/05/2019	\$350.00	Online ads	
1	Debit	A	12/05/2019	\$266.33	Online ads	
5. Total only this Page \$ 1,002.63					\$ 1,002.63	
6. Total of ALL	CRO-1310 Pages					
(This line goes in	line 13a of Detailed Sun	ımary Page CRO-1100	if Operating Expenses)		¢ 1.404.51	
(This line goes in	line 13b of Detailed Sum	ımary Page CRO-1100) if Contrib to Candidates/Po	olitical Comm)	\$ 1,404.51	
(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* - Fund		D - To Anothe	er Candidate	
E - Salaries	F* - Equipment	G - Politic			Public Office Expenses	
I - Postage	J - Penalties		e Expenses		n to Legal Expense Fund	
O* - Other				100 m	voideamining for the filter of the trial life that New Architect	
* Codes require	e detailed explanati	on in required re	marks field (k)			

Yes

No

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

	ull Name (and Fun	d if applicable)			2. ID Number
Ewing for Meba			10.0 10.10.0		82-1276120
3. Type of Disb			RO-1310 forms for each		nent.) pordinated Party Expenditures
4. Payee Inform		Contributions to Car	Add	Remove	
	ng Address & Phone		b. Coordinated Committee		d. Comments
(include city, state,			D. Coordinated Committee	, i vaine	u. comments
Mebane Enterpr					
106 N 4 th Street			c. Level Registered (Specif	···	-
Mebane, NC 27			Federal Federal	County:	
919-563-3555	302		State	Municipality:	e. Election Sum to Date
717-303-3333			State	ј Тишториту.	\$ 779.37
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Draft	A	10/25/2019	\$150.00	Local newspaper ads
1	Draft	A	11/12/2019	\$155.40	Local newspaper ads
4. Payee Inform	ation		Add	Remove	
	ng Address & Phone		b. Coordinated Committee		d. Comments
(include city, state,	_				
Piryx					
995 Market Stre	et, 2 nd Floor		c. Level Registered (Specify	y)	
San Francisco, (•		Federal	County:]
888-648-2220			State	Municipality:	e. Election Sum to Date
					\$ 6.53
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	D 6	0	11/04/2010	04.25	Online
1	Draft	0	11/04/2019	\$4.25	transaction fee
				\$	
4. Payee Inform	ation		Add	Remove	
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee	Name	d. Comments
(include city, state,	& zip)				
Starbucks					_
3890 Brundage			c. Level Registered (Specify		
Mebane, NC 27	302		Federal	County:	
336-524-3331			State	Municipality:	e. Election Sum to Date
					\$ 19.16
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Debit	O	11/05/2019	\$19.16	Drinks for team
				\$	
5. Total only thi	s Page	990	A Congress		\$ 328.81
	CRO-1310 Pages				
(This line goes in	line 13a of Detailed Sum				\$ 1,404.51
) if Contrib to Candidates/Poli		ψ 1,404.31
			if Coordinated Party Expend	itures)	
	es (List detailed exp				
A* - Media	B* - Printing	C* - Fund		D - To Anothe	
E - Salaries	F* - Equipment J - Penalties	G - Politic K* - Offic	al Party e Expenses		Public Office Expenses n to Legal Expense Fund
I - PostageO* - Other	J - Felialues	K - Offic	e nyhenaes	Q - Donation	n to Degat Expense Fund
	e detailed explanati	on in required re	marks field (k)		

	_			
Die	hii	rsem	ents	

Amendment Yes

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 (Plea	ise use separate C	RC	0-1310 forms for each	le ty	pe of Disbursem	ent.)	
Operating E				lates/Political Committees				d Party Expenditures
4. Payee Inform	nation	П	Α	vdd	1	Remove	100	
	ing Address & Phone		~~~	. Coordinated Committee	. Na		d. Cor	mments
(include city, state,	O .							
USPS	C Zip)						}	
100 Village Dri	vo.		_	Level Registered (Specif			1	
•			Г.	Federal Federal	<i>у)</i> 1	County:	-	
Mebane, NC 27	302			=]	•		
800-275-8777			L	State	<u> </u>	Municipality:	e. Elec	ction Sum to Date
							\$ 1	,230.00
f. Account Code	g. Form of Payment	h. Purpose Code	L	i. Date (mm/dd/yyyy)		j. Amount	k. Rec	quired Remarks
1	Draft	I		10/26/2019		\$70.00	Posta	ige
1	Diait	1		10/20/2019		\$70.00		
						\$		
4. Payee Inform	lation		Α	.dd		Remove		
a. Full Name. Maili	ng Address & Phone		b.	. Coordinated Committee	Na	me	d. Cor	nments
(include city, state,	-							
Vantiv	a mp)							
8500 Governors	Hill Drive		-	Level Registered (Specify	v)		1	
Cincinnati, OH			<u>د.</u>	Federal Federal	<i>3)</i> }	County:	-	
· ·	43249		F	= =]]	-		C. C. I D.
866-622-2390				State]	Municipality:	e. Elec	ction Sum to Date
							\$ 5.	3.81
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)		j. Amount	k. Req	uired Remarks
1	Draft	О		11/12/2019		\$2.07	Onlin	
							Uransa Onlin	action fee
1	Draft	0		12/10/2019		\$1.00	l	action fee
4. Payee Inform	ation		A	dd		Remove		
a. Full Name, Maili	ng Address & Phone		b.	Coordinated Committee	Na	me	d. Con	nments
(include city, state,	•							
			c.	Level Registered (Specify	y)			
			Т	Federal		County:	1	
		,	Ē	State		Municipality:	e. Elec	etion Sum to Date
							\$	
f. Account Code	g. Form of Payment	h. Purpose Code	- [i. Date (mm/dd/yyyy)	П	j. Amount		uired Remarks
	g aj ment	•		(1	\$,
					_	Ψ		
						\$		
5. Total only this Page \$ 73.07						73.07		
	CRO-1310 Pages							
	line 13a of Detailed Sum	ımary Page CRO-1100	if (Operating Expenses)			ф	1 404 51
	•			Contrib to Candidates/Poli	tica	l Comm)	\$	1,404.51
	-			Coordinated Party Expend				
	es (List detailed ex							
A* - Media	B* - Printing	C* - Fund			- 0601707	D - To Anothe	r Candi	date
E - Salaries	F* - Equipment	G - Politic						Office Expenses
I - Postage	J - Penalties	K* - Offic						gal Expense Fund
O* - Other				-	ggg .on	1988177, 2000 1986	on concession and	
* Codes require	e detailed explanati	on in required re	me	irks field (k)				

In-Kind Contributions	$\mathbf{p}_{m{lpha}}$
	Pg

Use this form to report non-monetary contributions, donations, go Use CRO-1215 if In-Kind Contributions were or will be refunded	d within	7 da	ys.			
1. Committee Full Name (and Fund if applicable)				2. ID Number		
Ewing for Mebane					82-1276120	
3. Contributor Information Add Add	Remove)				
a. Full Name, Mailing Address & Phone	b. Type of Contributor		c. Comments			
(include city, state, & zip)		Individual				
North Carolina Democratic Party		Candidate				
220 Hillsborough Street Raleigh, NC 27603		Party PAC Referendum		d. Election Sum to Date		
919-821-2777						
717 021-2777	18		Other Receipt Source			
			F	\$ 84.69		
e. Description		f. Date (mm/dd/yy		уу)	g. Fair Market Amount	
Text messaging on behalf of candidate	11/08/2019			9	\$ 84.69	
					\$	
					\$	
3. Contributor Information Add Remove						
a. Full Name, Mailing Address & Phone	b. Тур	b. Type of Contributor Individual Candidate Party		c. Cor	nments	
(include city, state, & zip)						
	PAC Referendum					
			d. Election Sum to Date			
Ot		Othe	r Receipt Source	\$		
e. Description			f. Date (mm/dd/yyyy)		g. Fair Market Amount	
					\$	
					\$	
					\$	
3. Contributor Information Add Remove			arran e			
a. Full Name, Mailing Address & Phone	b. Type	b. Type of Contributor Individual Candidate Party		c. Comments		
(include city, state, & zip)						
	님					
	PAC Referendum					
			d. Elec	d. Election Sum to Date		
		Othe	r Receipt Source	\$		
e. Description			f. Date (mm/dd/yyyy)		g. Fair Market Amount	
					\$	
A CONTRACTOR OF THE CONTRACTOR					\$	
					\$	
4. Total only this Page				\$	84.69	
5. Total of ALL CRO-1510 Pages				Φ.	84.60	

84.69

(This line must be on line 17 of Detailed Summary Page CRO-1100)