Disclosu	re Reg	ort C	over
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Mendment	
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

	nformation						
a. Full Name						c. ID N	lumber
The Committee to	Elect Elyse Dashew	MEC-Y	GX5CK				
b. Malling Addres	ss (include City, State and Zip	Code)				d. Dat	e Filed
PO Box 220994						7/29/2	020
Charlotte, NC 282	22-0994					- Sho	<b>LtL_</b> _
						e. Pho	ne Number
7 Posset Voes	3. Period Start Date (mm/dd/)	RM.	Marcologia con			F 7	surer Eul Name
2020	01/01/2020	L <b>y</b> .)		30/2020	III UUU YYYYY	Emily P	
2020	01/01/2020		00/	30/2020		Ennly P	lauche
6. Type of Comm	lttee (Check one)	le m		hook on	v one tune o	f connui	from one category)
		Munic	cipai		ate/County		eferendum
✓ Candidate Can		По	Organizational	l٢	Organizatio	nal	Organizational
☐ PAC	Referendum	Т	hirty-five day		Quarterly	Ϊ́	Pre-referendum
Independent E	· —	□Р	re-primary		First		 │ Final
Legal Expense Fund			re-election		Second	17	Supplemental Final
			re-runoff	10	Third		Annual
7. Type of Fund (If applicable, check one)			Semi-annual		Fourth	15	Special
☐ "Booster Fund"			Mid Year		Semi-annu	al 🗔	-
Building Fund	1		Year End	Ir	☐ Mid Yea		0. Special Report Name
[Z]Other: NC C	Candidates Financing Fund	□F	inal		Year En	1	
	idraisers this Report	- ⊟s	Special		Final		
6. Number of Ful	IOTAISETS INIS REDUCT	TWO I			Special		
11. Account Info	mallon						
a. Financial Insti							
Wells Fargo	West of the control o		,	en e la la grave			
				J = .4 ==			
b. Purpose  Campaign Finance		1 +4 +4 +4 +111		01	ount Code	3+4+4+11111.	
Campaign Financ	8			101			
			d. Period Begin B			-	
				d. Per	lod Begin Ba	lance	
				d. Per \$ 2,27		lance	
						lance	
CERTIFICATION		ace with	u all applicable pr	\$ 2,27	9.07	<u> </u>	
I certify that the ( 163 of the NC G	Committee or Fund is in complia eneral Statutes and that no fund	s are co	mmingled with pr	\$ 2,27	'9.07 of Article 22A or other undi	, 22B &	22D-22M of Chapter funds. I further certify
l certify that the 0 163 of the NC Go that this report is	Committee or Fund is in compliant eneral Statutes and that no funds complete, true and correct and it	s are co that I ha	ommingled with prave been trained,	\$ 2,27	'9.07 of Article 22A or other undi	, 22B &	22D-22M of Chapter funds. I further certify tions.
I certify that the to 163 of the NC Gothat this report is	Committee or Fund is in complian eneral Statutes and that no funds complete, true and correct and t C. PLAVCHE	s are co that I ha	ommingled with prave been trained	\$ 2,27 ovisions rohibited by the No	of Article 22A or other undi	, 22B &	22D-22M of Chapter funds. I further certify tions.
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I certify that the of 163 of the NC Gothat this report is Printed  FOR OFFICE USI  Date Receive	Committee or Fund is in compliar eneral Statutes and that no funds complete, true and correct and the complete could be complete.    C	s are co that I ha Si INTY E	emmingled with prove been trained to be the second signature of Appointment of Ap	\$ 2,27  ovisions rohibited by the No	of Article 22A or other undi	, 22B & sclosed if of Election	22D-22M of Chapter funds. I further certify lions. 20 Z O Date  livery Method  Normal Mall  Registered Mall  Hand Delivered  Electronically Filed  Signer has not received
FOR OFFICE USI Date Postmar Date Data En	Committee or Fund is in compliant eneral Statutes and that no funds complete, true and correct and the complete could be complete.    C	S are coothat? I had Si	emmingled with provided the pro	\$ 2,27  ovisions rohibited by the Not lined Tre	of Article 22A or other undi C State Board asurer	, 22B & sclosed if	22D-22M of Chapter funds. I further certify tions.      Jac   Zo Zo     Date
FOR OFFICE USI Date Postmar Date Data En	Committee or Fund is in compliant eneral Statutes and that no funds complete, true and correct and in complete and com	Sinty E E E MS E mend co	emmingled with provide been trained with provide in the contraction of Appointment of Appointmen	\$ 2,27  ovisions rohibited by the Not limited Tre	of Article 22A or other undictions as a surer	, 22B & sclosed if of Elect	22D-22M of Chapter funds. I further certify tions.      20
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## **Detailed Summary**

Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund (families))

2. Type Of Report

Amendment	
∐Yes	✓No

1. Committee Full Name (and Fund If applicable)	2. Type Of Report 3	3. ID Number		
The Committee to Elect Elyse Dashew	2020 Year End Semi- Annual	MEC-YGX5CK  Total this Election Cycle		
Start of Election Cycle: January 1, 2019	Total this Reporting Period			
4) Cash on Hand at Start	\$2,279.07	\$2,279.07		
RECEIPTS				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$0.00	\$0.00	
6) Contributions from Individuals	(CRO-1210)	\$0.00	\$0.00	
7) Contributions from Political Party Committees	(CRO-1220)	\$0.00	\$0.00	
B) Contributions from Other Political Committees	(CRO-1230)	\$0.00	\$0.00	
9) Loan Proceeds	(CRO-1410)	\$0.00	\$0.00	
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$0.00	\$0.00	
11) Other Receipt Sources				
11a) Interest on Bank Accounts	(CRO-1250)	\$0.00	\$0.00	
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$0.00	\$0.00	
11c) Outside Sources of Income	(CRO-1250)	\$0.00	\$0.00	
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$0.00	\$0.00	
11e) Exempt Purchase Price Sales	(CRO-1265)	\$0.00	\$0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 1	\$0.00	\$0.00		
<u>EXPENDITURES</u>				
13) Disbursements				
13a) Operating Expenditures	(CRO-1310)	\$681.60	\$681.60	
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$0.00	\$0.00	
13c) Coordinated Party Expenditures	(CRO-1310)	\$0.00	\$0.00	
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$37.34	\$37.34	
15) Loan Repayments	(CRO-1420)	\$0.00	\$0.00	
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$0.00	\$0.00	
17) In-Kind Contributions	(CRO-1510)	\$0.00	\$0.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16	and 17)	\$718.94	\$718.94	
19) Cash on Hand at End (Add lines 4 and 12 together, then sub lne 18)	tract	\$1560.13	\$1560.13	
ADDITIONAL INFORMATION				
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$0.00		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$3,000.00		
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$0.00		
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$34.00		
24) Account Transfers Within the Committee	(CRO-1720)	\$0.00		
25) Administrative Support	(CRO-1710)	\$0.00	\$0.00	
26) Forgiven Loans	(CRO-1440)	\$0.00	\$0.00	
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$0.00	\$0.00	
28) Contributions to be Refunded	(CRO-1215)	\$0.00	\$0.00	
CRO-1100 NC Sta	(0110-1210)		Ψ0.00	

Disburseme	ents eport expenditures from the	commit	tee for; operatir		age 1 of 2	Amendment  Yes No
committees and c	coordinated party expenditure	es	, •			ID Number
		aviej				
3. Type of Disbu	to Elect Elyse Dashew	arata C	PO-1310 form	s for each type of Di		MEC-YGX5CK
Operating Exp			ndidates/Politica			rty Expenditures
4. Payee Inform						nty Experiences
		L		emove	To a	
	alling Address & Phone		b. Coordinate	ed Committee Name	d. Commen	ts and the second
(Include city, s	tate, or Zip)	**********	-		Fundralsing	g Database Monthly Fee
NGP 1101 15th St NW	ı			stered (Specify)	337X 1	
Ste 500			Federal	County:	- Flootion	A
Washington, DC (202) 686-9330	20005-5006		State	Municipality	/; e. Election	Sum to Date \$500.00
f. Account Code	e g. Form of Payment	h Pi	  rpose Code	I. Date (mm/dd/yy)	//\landle	k. Required Remarks
01	Debit Card	С	irpodo codo	01/03/2020	\$250.00	
						Fee
4. Payee Infor	mation		Add []R	emove		
a. Full Name, Ma	alling Address & Phone		b. Coordinate	ed Committee Name	d. Commen	ts
(include city, s	tate, & zip)				Cundroisin	Databasa Manibly Can
NGP			c Level Regi	stered (Specify)	1 Distribution	g Database Monthly Fee
1101 15th St NV	√		Federal	County:		
Ste 500 Washington, DC	20005-5006		State	Municipality	e. Election	Sum to Date
(202) 686-9330	2000 0000			Through the state of the state		\$500.00
f. Account Code	e g. Form of Payment	h. Pı	rpose Code	I. Date (mm/dd/yy)		k. Required Remarks
01	Debit Card	С		02/03/2020	\$250.00	Fundraising Database Monthly Fee
4. Payee Infor	mation		]Add []R	emove		
a. Full Name, Ma	ailing Address & Phone		b. Coordinate	ed Committee Name	d. Commen	ts
(include city, s	tate, & zip)				Mobalta Ma	oling Ego
Wix.com			c Level Regi	stered (Specify)	Website Ho	osting ree
500 Terry A Fran	ncols Boulevard		Federal	County:		
Sixth Floor San Francisco, C	CA 94158		State	Municipality	e. Election	Sum to Date
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					\$76.00
f. Account Code	e g. Form of Payment	h. Pı	irpose Code	I. Date (mm/dd/yy)	/y) j. Amount	k. Required Remarks
01	Debit Card	A		06/03/2020	\$76.00	Website Hosting Fee
5. Total only t	his page					\$576.00
6. Total of ALI	L CRO-1310 Pages					
(This line goes in	n line 13a of Detailed Summa	rv Page	CRO-1100 if C	perating Expenses)		\$681.60
· '	n line 13b of Detailed Summa	-			Political Comm)	
	iline 13c of Detailed Summa	-			1	
7. Purpose Co	des (List detailed Expen	diture	code in (h.)	above)	·	
A* - Media	B* - Printing			draising	D - To Another C	andidate
E - salaries	F* - Equipment		G - Politi	ical Party	H* - Holding Pul	blic Office Expenses
I - postage	J - Penalties		K* - Offi	ce Expenses	Q* - Donation to	Legal Expense Fund

O\* - Other \*Codes require detailed explanation in required remarks field (k)

Disbursement Use this form to repo	ts rt expenditures from the co	ommitte	ee for; operati		Page 2 of butlons to candi	Amendment  2 Yes V No  Idate/political
committees and coor	dinated party expenditures	S		•		•
	ame (and Fund if applica	pie)				2. ID Number
	Elect Elyse Dashew <u>ment     (Please use sepa</u> l	Is CI	00.4240.form	- for each time of D	d-Luraament)	MEC-YGX5CK
Operating Expens			ididates/Politica	_		Party Expenditures
4. Payee Informat	ilon	Г	]Add []R	lemove		
a. Full Name, Mailln	ng Address & Phone		b. Coordinate	ed Committee Name	e d. Comm	nents
(include city, state	, & zip)		:		Website	- Hartha Eco
Arvixe Web Solution 7031 Center Parkwa Suite 150 Pleasanton, CA9456	ау		c. Level Regi	istered (Specify)  County:  Municipality		e Hosting Fee on Sum to Date
Fiedsamon, Onoto	Ю			******	<del>'</del>	\$105.60
f. Account Code	g. Form of Payment	h. Pu	rpose Code	I. Date (mm/dd/yy)	yy) J. Amount	k. Required Remarks
01	Debit Card	Α		04/15/2020	\$105	
4. Payee Informat	tion		]Add []R	 Remove		
a. Full Name, Mailin	ng Address & Phone			ed Committee Name	e d. Comm	nents
(include city, state	어른 등 사람들이 살아 들어 가는 사람들이 들어 가는 것이 없었다.		10 3 a 1a 1a 1 a 1 a 1 a 1	Transfer of the second	First Francisco	AMAN CONTRACTOR OF THE STATE OF
			o Level Reg	Istered (Specify)	- Andrews	
:			Federal	County:		
			State	Municipalit	y: e. Electic	on Sum to Date
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yy)	yy) j. Amount	k. Required Remarks
4. Payee Informa	lion		Add R	Remove		
	ng Address & Phone	•		ed Committee Name	e d. Comm	nanta
(include city, state	1 주는 사용을 제가하실 하는 10 개를 보고 있다. 다음		V. 202.2	WM Awareness to a consense	Z.i. i. u. ovniji	16iil Sanna III san Theasan Indian an Andreas
	the military of		- Lovel Bea	Istered (Specify)		
			C. Level Regi	Istered (Specify) County:	10.000	
			State	Municipalit	e. Election	on Sum to Date
				<u> </u>	·.	
f. Account Code	g. Form of Payment	h. Pu	rpose Code	I. Date (mm/dd/yy	yy) J. Amount	k. Required Remarks
5. Total only this	page					\$105.60
6. Total of ALL C	RO-1310 Pages					
	e 13a of Detailed Summary	v Page	CRO-1100 If C	Operating Expenses)		\$681.60
	e 13b of Detailed Summary	-				
-	e 13c of Detailed Summary	-				7
7. Purpose Code	s (List detailed Expend	diture	code in (h.)	above)		
A* - Media	B* - Printing			ndraising	D - To Anothe	
E - salaries	F* - Equipment			tical Party	H* - Holding	Public Office Expenses
I - postage	J - Penalties		K* - Offi	ice Expenses	Q* - Donation	n to Legal Expense Fund
O \$ O 11						

\*Codes require detailed explanation in required remarks field (k)

				Amendment	
Page	1	_ of _	1	Yes V No	

Aggregated Non-Media Expenditures

Optional form used to report NC Non-Media Expenditures of \$50 or less

•	used to report NC N II Name (and Fund If a		tures of \$50 or les	SS.	2. ID Number	
The Committe	ee to Elect Elyse Da	MEC	C-YGX5CK			
. Payee Info	rmation					
. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date	f. Amount	g. Required Remarks
Add Remove	01	Debit Card	С	01/02/2020	\$0.38	Fundraising Fees
	01	Debit Card	С	01/09/2020	\$2.46	Fundraising Fees
	01	Debit Card	С	02/11/2020	\$0.50	Fundralsing Fees
	01	Debit Card	0	03/09/2020	\$34.00	Mistake Charge - see attached Form CRO-16

\$37.34
\$37.34
<b>407.15</b> 1
ite
fice Expenses
Expense Fund
fice Expenses

## **Outstanding Loans**

	Pg	20	Of _	20	Y	es	✓ N	ю	
orting	perio	od an	d ur	til the	loan i	s pai	d in fu	11	
				2.	D Nu	mbe	r		
				ME	C-YC	X5C	K		
									9000

Amendment

Committee Full Name (and Fund if applicat	2. ID Number		
ne Committee to Elect Elyse Dashew	MEC-YGX5CK		
. Lender Information	Add Remove		
Full Name, Malling Address & Phone	b. Job Title/Profession	d. Comments	
nclude city, state & zip)	Publishing		
Elyse Dashew 6501 Clscayne Pl		e. Start Date (mm/dd/yyyy)	
Charlotte, NC 28211	c. Employer's Name/Specific Field	07/08/2019	
	Beowulf Inc	f. End Date	
. Rate h. Security Pledged	I. Original Loan Amount	i. Remaining Loan Balance	
0%	\$3,000.00	\$3,000.00	
. Full Name of Lending Institution		I. Loan Number	

4. Total only this page	\$3,000.00
5. Total of ALL CRO-1430 Pages	\$3,000.00
(This line must be on line 21 of Detailed Summary Page CRO-1100)	

		ns Owed To the			of 1 Yes No		
Use this form to report	rt debts a	and obligations owed to t	he comm	ittee.			
		d Fund if applicable)			2. ID Number		
Committee to Elect I	Elyse Das	shew					
3. Debtor Informati	0 <b>n</b>		Add [	Remove	<u>I</u>		
a. Fuli Name, Mailing Address & Phone							
(include city, state, & zip) Elyse Dashew				Note: All payments received toward debts should be listed on the appropriate receipt form with the contributor listed as this debtor.			
							6501 Ciscayne Place
Charlotte, NC 28211							
c. Beginning Balance d. Total Amount Paid		d. Total Amount Paid		e. Total Amount Incurred f. Remaining Balance			
Φ Λ		φ 0		ф 24	***************************************		
\$ 0		\$ 0		\$ 34	\$ 34		
g. Incurred Debts (what	the commi	ttee gave)					
				Description			
03/09/2020 \$ 34.00			Mistak	Mistake debit card charge			
	\$						
	\$				444444		
	\$	***************************************					
	\$			<b>-</b>			
3. Debtor Informati		. <u>U</u>	Add [	Remove			
a. Full Name, Mailing Ad		'hone		Note: All payments received toward debts should be listed on the			
(include city, state, & zip)				appropriate receipt form with the contributor listed as this debtor.			
				b. Description of Debtor			
c. Beginning Balance d. Total Amount Paid			e. Total Amount Incurred	f. Remaining Balance			
\$			\$	\$			
g. Incurred Debts (what	the commi	ittee gave)	·····	L			
g1. Date (mm/dd/yyyy)			g3. Item	Description			
				- 000 (A.)			
	\$				**************************************		
\$							
\$							
	\$						

4. Total only this Page

(This should be the sum of all item '3f' from this page)
5. Total of ALL CRO-1620 Pages

(This line must be on line 23 of Detailed Summary Page CRO-1100)

\$

\$

34.00

34.00