



Certification to Close Committee

This Certification is used to express the intent to close the committee after all funds have been properly disbursed.

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

FILED BY:						
Committee Name:	Committee to Elect Cynthia LaCorte					
Treasurer Name:	Melanie Norvell					
Treasurer Address:	1004 Tiffin Ct					
(include city, state, & zip)	Jacksonville, NC 28546					
Treasurer Phone:	910-219-4707					

I certify that the above mentioned Committee intends to close and cease existence. Upon signing this certification, I declare that all funds have been distributed and reported (if required). In addition, no contributions will be accepted or disbursements made after the "Final Report" is filed or this form is signed. If the Committee at any future time intends to accept or spend funds in support or opposition of any candidate or ballot issue, a new political committee must be formed and registered with the Board of Elections before such activities may commence.

Committees that have filed under the \$1,000 threshold will only be required to sign this Certification. No "Final Report" will be required for committees meeting this criterion. Any Committee that did not file under the \$1,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

04/16/2020 Date Signed Molace nou

CRO-3400

Certification to Close Committee

Amendment

Disclosure Report Cover

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.

1. Committee In	formation			·					
a. Full Name								c. ID Number	
COMMITTEE T	TO ELECT CY	YNTHIA LAC	ORTE						
b. Mailing Addre	ss (include Cit	y, State and Zip	Code)		-			d. Date Filed	
220 ELM ST. SWANSBORO	NC 28584							04/16/2020	
	,							e. Phone Number	
								(910) 467-3847	
2. Report Year	3. Period Stars	t Date (mm/dd/y	y)	4. Period 1	End Dat	te (mm/dd/yy)	5. Treasur	er Fuli Name	
2020	02	2/16/2020		()6/30/2	2020	MELANII	E NORVELL	
6. Type of Committee (Check One)				e of Report	(cl		type of rep	ort from one category)	
X Candidate Can	-	•	Munic			State/County		Referendum	
Joint Fundraise				Organizatio		☐ Organizatio	onal	☐ Organizational	
☐ Referendum		al Expense Fund		Thirty-five	-	Quarterly		☐ Pre-referendum	
7. Type of Fund		le, check one)] 🗆	Pre-primary		First		☐ Final	
Booster Fund	ľ			Pre-election	1	☐ Second	1	Supplemental Final	
Building Fund				Pre-runoff		☐ Third		Annual	
Presidential El				Semi-annual	l j	☐ Fourth		☐ Special	
☐ NC Public Can	npaign Financing	;Fund		Mid Ye	ar	Semi-annua	al		
				Year Er	ıd	☐ Mid Ye	ear	10. Special Report Nam	
Other:			Ø	Final		Year E	ind		
8. Number of Fu	ındraisers this	Report		Special					
	0					Special			
3. Account Info						ount Informat			
a. Financial Insti		me			a. Fina	ncial Instituti	on Full Nam	16	
NAVY FEDER	AL CREDIT U	NOIN			ANEDOT				
b. Purpose		c. Account Cod	le		b. Purpose			c. Account Code	
CAMPAIGN TRANSACTIO)NS		001		ELECTRONIC FUND PROCESSING		ANE		
		d. Period Begi	n Balan	ce				d. Period Begin Balance	
		s		2,943.60				\$ 0.00	
Chapter 163 o funds. I furth	he Committee of of the NC Gener ner certify that t	ral Statutes and this report is co	l that no	o funds are true and c	commi orrect a	ingled with pro and that I have	ohibited or o	22A, 22B & 22D-22M of other non-disclosed ed by the NC State Board 04/16/2020	
		igner		Sign	ature of	Appointed Trea	asurer `	Date	
FOR OFFICE U	SEONL		NAME OF TAXABLE PARTY.						
Date Receiv	ed:		_	Emplo	yee:			livery Method Normal Mail	
Date Postma			7318"	Emplo	yee:		- 📙	Registered Mail Hand Delivered	
Date Scanne	ed: <u>BY:</u>	The state of the s		Emplo	yee:			Electronically Filed	
Date Data E	ntered:			Emplo	yee:			Signer has not received mandatory training	
Please Not		annot be used nt treasurer, cu						nittee address, treasurer, ion.	
,	You must amen	d the Statemen	it of Or	zanization (CRO-2	100A-E) to ma	ke committe	ee changes.	

Amendment

☐ Yes

X No

1. Committee Full Name (and Fund if applicable) 2. Type of Report 3. ID Number COMMITTEE TO ELECT CYNTHIA LACORTE 2020 Final Total this Total this 2019 Start of Election Cycle: January 1, Reporting Period **Election Cycle** 4) Cash on Hand at Start \$ 2,943.60 0.00 \$ RECEIPTS (CRO-1205) \$ 5) Aggregated Contributions from Individuals \$ 0.00 220.00 6) Contributions from Individuals (CRO-1210) 3,776.25 \$ 15,055.11 (CRO-1220) \$ 7) Contributions from Political Party Committees 0.00 0.00 8) Contributions from Other Political Committees (CRO-1230) \$ 0.00 0.00 9) Loan Proceeds (CRO-1410) \$ 0.00 0.00 0) Refunds/Reimbursements to the Committee (CRO-1240) \$ 0.00 \$ 135.62 1) Other Receipt Sources (CRO-1250) 11a) Interest on Bank Accounts \$ \$ 0.14 0.29 11b) Contributions from Not-For-Profit Organizations (CRO-1250) \$ 00.0 0.00 (CRO-1250) 11c) Outside Sources of Income 0.00 \$ 0.00 (CRO-1270) 11d) Legal Expense Fund - Other Sources \$ \$ 0.00 0.00 11e) Exempt Purchase Price Sales (CRO-1265) \$ 0.00 \$ 0.00 2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e) \$ 3,776.39 15,411.02 EXPENDITURES 3) Disbursements 13a) Operating Expenditures (CRO-1310) \$ 4,795.99 10,723.56 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ \$ 0.00 0.00 13c) Coordinated Party Expenditures (CRO-1310) \$ \$ 0.00 0.00 4) Aggregated Non-Media Expenditures (CRO-1315) \$ \$ 4.30 38.90 (CRO-1420) Loan Repayments \$ \$ 0.00 0.00 16) Refunds/Reimbursements from the Committee (CRO-1320) \$ \$ 243.45 243.45 (CRO-1510) 7) In-Kind Contributions \$ 1,676.25 \$ 4,405.11 (8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) \$ \$ 6.719.99 15,411,02 9) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) \$ 0.00 0.00 ADDITIONAL INFORMATION (CRO-1330) \\$ 20) Non-Monetary Gifts Given to Other Committees 0.00 (CRO-1430) 21) Outstanding Loans (incl. ones from other campaigns) \$ 0.00 22) Debts and Obligations owed by the Committee (CRO-1610) \$ 0.00 (CRO-1620) 23) Debts and Obligations owed to the Committee 0.00 24) Account Transfers Within the Committee (CRO-1720) 0.00 (CRO-1710) 0.00 \$ 25) Administrative Support \$ 0.00 (CRO-1440) 0.00 0.00 \$ 26) Forgiven Loans (CRO-2220) 27) 48-Hour Notice Reports Sum 0.00 \$ 0.00 28) Contributions to be Refunded (CRO-1215)0.00 \$ 0.00

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

Contributions from Individuals

Pg 1 of 2 Amendment Yes No

		σ.				-		
U:	se this form to report individual contributions over \$50 or contributions up	nd	er \$5	0 if form	CRO 1	205 is 1	not used	1
_								_

		(and Fund if applicable				2. ID Number		
COMM	IITTEE TO ELEC	CT CYNTHIA LACO	RTE				•	
3. Contr	ributor Informatio	on		Add 🔲 Rer	nove			
	ame, Mailing Add			b. Job Title/Profession			Comments	
	de city, state, & zi			REALTOR				
	HIA LACORTE						İ	
220 EL	M ST		Ì	c. Employer's l	Name/Specific Field			
SWAN	SBORO, NC 285	584	į	COLDWELL	BANKER	<u></u>		
	67-3847		I	1	Ì	e. E	Dection Sum to Date	
						\$	5,456.00	
f. Prior	g. Account Code		i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)		k. Amount	
	001	Check			02/27/2020		\$ 2,000.00	
							\$	
							\$	
	ributor Informatio			1 X OF CT 1000				
a. Full N	Name, Mailing Add	dress & Phone		b. Job Title/Pro		d. C	Comments	
	ıde city, state, & zi	ip)		REALTOR				
CYNTHIA LACORTE					N	1		
	220 ELM ST				Name/Specific Field	1		
SWANSBORO, NC 28584			I	COLDWELL	BANKER	e -	Taction Cum 4x N	
(910) 4	67-3847		I		1	_	Election Sum to Date	
			ı		1	\$	720.00	
f. Prior	g. Account Code		i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)	-	k. Amount	
		In-Kind	ELECTRONIC BILLBOARD	C	04/13/2020		\$ 720.00	
							\$	
							s	
	ributor Informatio		П		move	_		
	Name, Mailing Add			b. Job Title/Pr	ofession	d. C	Comments	
—	ide city, state, & zi			REALTOR				
	LIVER-KINGRE	EΥ		1	Nama E C	-		
	ESTERN BLVD	20546			Name/Specific Field	1		
JACKS	SONVILLE, NC	20040		REMAX		e r	Election Sum to Date	
						\$	100.00	
f. Prior	g. Account Code	<u> </u>	i. In-Kind Des	cription	j. Date (mm/dd/yyyy))	k. Amount	
	001	Electric Funds Tran			02/27/2020		\$ 100.00	
							\$	
							\$	
4. Tot	al only this Pa	ge	- 	 		\$	2,820.00	
5. Tota	al of ALL CR		Page CPO TIAM	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	\$		
(I NIS	one musi de on une	o oj vetauca summary I	u ₅ c CRO-1100)			į		

\mathbf{C}	ntributions	from	Individuals
VU	manamana		CIMMINICALO

			Amendme	ent	
Pg	 of	2	Yes	X	No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Comr	nittee Full Name		2. ID Number					
COMM	IITTEE TO ELE	CT CYNTHIA LACC	ORTE					
3. Conti	ibutor Informati	on		Add 🔲 Rei	move			
a. Full Name, Mailing Address & Phone b. Job Title/Profession d						d. C	Comments	
(include city, state, & zip)				MARKETING	G MGR			
SARAH STEINHAUS								
2355 WESTERN BLVD				c. Employer's l	Name/Specific Field			
JACKSONVILLE, NC 28546			40 SAILS RE	EAL ESTATE	<u> </u>		<u> </u>	
			GROUP		e. I	dection Sun	n to Date	
						\$		956.25
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
		In-Kind	LOGO, BILLE DESIGN, POO		03/03/2020		\$	956.25
							\$	
							\$	
4. Tot:	al only this Pa	ge				\$		956.25
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$		3,776.25

CRO-1210

NC State Board of Elections

April 2007

Other	Rece	eipt	So	urces
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					Amena	ment	
F	g	_1_	of	1	☐ Yes		No

Use this form to report income not reported on another form, i.e. interest income, not for profit contributions etc.

1. Committee Fu	. Committee Full Name (and Fund if applicable)							
COMMITTEE	TO ELECT CYNTHIA	LACORTE						
3. Type of Recei		e separate CRO-1						
X Interest	☐ Contrib	utions from Not-for-	Profit Organizat	ions 🔲 Outside Sou	rces	of Income		
4. Contributor L			Add 🔲 Re	move				
	iling Address & Phone		b. Not-for-Pro	fit Federal ID #	d. Comments			
(include city, s	tate, & zip)							
1171 WESTER		c. Outside Sou	irce Explanation					
JACKSONVILI	· ·				Tantina Cara	4. D.t.		
(888) 842-6328					e. Election Sum to Date			
					\$		0.27	
f. Account Code	g. Form of Payment	h. In-Kind Descrip	tion	i. Date (mm/dd/yy	уу)	j. Amount		
001	Electric Funds Tran			02/28/2020		\$	0.12	
						\$		
4. Contributor I	nformation		Add Re	move		·		
a. Full Name, Ma	iling Address & Phone		b. Not-for-Profit Federal ID # d. Comments					
(include city, s	tate, & zip)							
	AL CREDIT UNION		c. Outside Source Explanation					
1171 WESTER								
JACKSONVILI			•		e. Election Sum to Date			
(888) 842-6328						action Sun		
					\$		0.02	
f. Account Code	g. Form of Payment	h. In-Kind Descrip	tion	i. Date (mm/dd/yy	уу)	j. Amount		
001	Electric Funds Tran			03/31/2020		\$	0.02	
						\$		
5. Total only	this Page			*	\$		0.14	
6. Total of Al	LL CRO-1250 Pag	es						
(This line goes ù	n line 11a of Detailed Sun	umary Page CRO-116	0 if Interest)		\$		0.14	
-	n line 11b of Detailed Sun	- -			Ð		0.14	
	n line 11c of Detailed Sum	mary Page CRO-116	0 if Outside Sou	rces of Income)	į			
CRO-1250		Dece	mber 2007					

							Amendment
Disbursem					Pg 1 of		4 Yes X No
Use this form to committees and	report expenditures coordinated party ex	from the committe xpenditures	ee for o	perating expen	ises, contributi	ons to	o candidate/political
1. Committee Fo	ull Name (and Fund i	if applicable)					2. ID Number
COMMITTEE	TO ELECT CYNTH	IIA LACORTE					
3. Type of Disbu		use separate CRC)-131 <i>0</i>	forms for each	h type of Disbu	rseme	ent.)
X Operating Exp	enses	ributions to Candidat					ted Party Expenditures
4. Payee Inform				Add 🔲	Remove		
	ailing Address & Pho	one		b. Coordinate	d Committee N	ame	d. Comments
(include city, sta	.te, & zip)						
4 OVER				ļ			
5900 SAN FER				c. Level Regis	tered (Specify)		_
GLENDALE, C (818) 246-1170				State	County:		e. Dection Sum to Date
(010) 240-11/0				<u> </u>	In tremient	/апт.	
							\$ 224.12
	g. Form of Payment		i. Date	e (mm/dd/yyyy)	j. Amount	k. Re	quired Remarks
001	Debit Card	В	0:	2/21/2020	\$ 64.94	PAL	M CARDS
					\$		
4. Payee Inform							
a. Full Name, Mailing Address & Phone b. Coordinated Committee Name							d. Comments
(include city, sta	te, & zip)	·		_			
910 SIGN CO				- Torol Dogia	4 3 /0 260		
614 RICHLAN				Federal	tered (Specify) County:		
JACKSONVILI	JE, INC 20340			State			e. Election Sum to Date
•							\$ 930.92
f. Account Code	g. Form of Payment	h. Purpose Code	li Date	(mm/dd/yyyy)	I: Amount	lı, Re	equired Remarks
001	Debit Card	A	·			 	<u> </u>
001	Don Cad	A	V.	2/25/2020		LAK	RGE SIGNS
1 N Y C	. •				\$		
4. Payee Inform			<u> </u>	Add	Remove		T
a. Full Name, Ma (include city, sta	ailing Address & Pho	one		b. Coordinate	d Committee Na	am e	d. Comments
BIAGIOS	te, & zipj			1			
622 COURT ST	r			c. Level Regist	tered (Specify)		
UNIT 100				Federal	County:		1
JACKSONVILI	LE, NC 28540			☐ State	☐ Municip	ality:	e. Election Sum to Date
							\$ 315.65
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Remarks
001	Debit Card	0	02	2/26/2020	\$ 315.65	FOO	DD
					\$		
5. Total only this	s Page		<u> </u>				\$ 733.70
6. Total of ALL	CRO-1310 Pages						
(This line goes is	n line 13a of Detailed S	ummary Page CRO-	·1100 if	Operating Exper	nses)	:	¢ 4.705.00
(This line goes is	n line 13b of Detailed S	Summary Page CRO-	.1100 if	Contrib to Cand	idates/Political C	omm)	\$ 4,795.99
	n line 13c of Detailed Si				ty Expenditures)		
7. Purpose Co	des (List detailed	expenditure code	in (h.):	above)			

B* - Printing

J - Penalties

F* - Equipment

O* Other

A* - Media

E - Salaries

I - Postage

C* - Fundraising

G - Political Party

K* - Office Expenses

D - To Another Candidate

H* - Holding Public Office Expenses

Q* - Donation to Legal Expense Fund

Dis	hiii	·c _	me	nte
1718		SU	шк	

			Amendment						
Pg	2_	of	4	☐ Yes	X	No			

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

1. Committee Fu	dl Name (and Fund i	f applicable)						2. ID Num	ber
	COMMITTEE TO ELECT CYNTHIA LACORTE								
3. Type of Disbu	rsement <i>(Please i</i>	ise separate CRO	-1310	forms for each	typ	e of Disbur	seme	nt.)	
X Operating Exp	enses 🔲 Contr	ibutions to Candidat	es/Polit:	ical Committees		Coo	rdinate	ed Party Exp	enditures
4. Payee Inform	ation	· ·		Add □	Ren	nove		· · · · · · · · · · · · · · · · · · ·	
	iling Address & Pho	one		b. Coordinate	d Co	mmittee Na	me	d. Comme	nts
(include city, sta	-					, ,			
BUILD A SIGN									
	EHOLLOW DR			c. Level Regist	tere				
SUITE 100				☐ Federal		County:			
AUSTIN, TX 7	8758			☐ State		Municip	ality:	e. Election	Sum to Date
								\$	2,006.38
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(m m/dd/yyyy)	j. A	mount	k. Re	quired Rev	arks
001	Debit Card	A		2/18/2020	\$	535.17	SIGN		
					_	555.17	010.		
					\$				
4. Payee Inform				Add 🔲		nove			
a. Full Name, Ma	ailing Address & Pho	one		b. Coordinate	d Co	mmittee Na	me	d. Comme	nts
(include city, sta	te, & zip)				-				
FACEBOOK									
1601 WILLOW	RD			c. Level Regist	tere				
MENLO PARK, CA 94025				Federal		County:			
				☐ State		☐ Municip	ality:	e. Election	Sum to Date
								\$	870.90
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Re	quired Ren	arks
001	Debit Card	A		2/18/2020	\$	125.00	SOC	IAL MED	IA AD
001	Debit Card	A	0:	2/24/2020	\$	10.90	FAC	EBK FEE	
4. Payee Inform	ation			Add 🔲	Ren	nove	***************************************		
a. Full Name, Ma	ailing Address & Pho	one		b. Coordinate	d Co	mmittee Na	me	d. Comme	nts
(include city, sta	te, & zîp)								
FACEBOOK									
1601 WILLOW	RD			c. Level Regist	tere				
MENLO PARK	, CA 94025			Federal		County:			
				☐ State		Municip	ality:	e. Dection	Sum to Date
								\$	870.90
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Re	quired Ren	ıarks
001	Debit Card	A		2/24/2020	\$	175.00	FAC	EBK AD	
001	Debit Card	A	0:	3/03/2020	\$		-	EBK AD	
5. Total only thi	s Page		<u> </u>		<u> </u>			\$	1,096.07
6. Total of ALL	CRO-1310 Pages					 			
1	n line 13a of Detailed S	Summary Page CRO	-1100 H	Onerating Expe	nses)			_	
1	n line 13b of Detailed S	· -	_			s/Political C	0 <i>mm</i>)	\$	4,795.99
1	n line 13c of Detailed S		-						
	odes (List detailed	expenditure code	in (h.)	above)					
A* - Media B* - Printing C* - Fundraising D - To Another Candidate									
E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses									
I - Postage	J - Penaltie	s	K* - C	Office Expense:	s	Q* - D	onatio	on to Legal	Expense Fund
O* Other									
* Codes requir	e detailed explanatio	n in required ren	arks f	ield (k)					

Disbursements	Pg	3	of

			Amendment							
Pg	3	of	4		Yes	X	No			

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 Fund	if applicable)						2. ID Numb	er
COMMITTEE	TO ELECT CYNTI	HIA LACORTE							
3. Type of Disbu		use separate CRO				of Disbu	rseme	nt.)	
Operating Exp	oenses Cont	ributions to Candidat	es/Polit	ical Committees	3	Coo	ordinat	ed Party Expe	nditures
4. Payee Inform	ation			Add 🔲	Rem	ove			
a. Full Name, Ma	ailing Address & Ph	one	·	b. Coordinate	d Cor	nmittee N	am e	d. Commen	ts
(include city, sta	te, & zip)								
FACEBOOK				<u> </u>					
1601 WILLOW				c. Level Regis					
MENLO PARK	C, CA 94025			Federal		County:			
				State		Municip	auty:	e. Dection S	um to Date
								\$	193.62
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	i. An	ount	k. Re	quired Rema	ırks
001	Debit Card	A		3/23/2020	\$	193.62	}	EBOOK AI	
			<u> </u>		\$	1,,,,,,,	1110		
4.70 7.6			<u> </u>				<u> </u>		
4. Payee Inform				Add 🔲	Rem				
a. Full Name, Ma (include city, sta	ailing Address & Pho	one		b. Coordinate	d Con	nmittee Na	ame	d. Comment	ts
	NTY BOARD OF 1	CI ECTIONS		1					
246 GEORGET		ELECTIONS		c. Level Regis	tered	(Specify)			
JACKSONVILI				Federal	1	County:			
UTTO LOCITY ILA	20,110 20340			State	Ī	Municip		e. Election S	um to Date
						<u>.</u>	-		
		I			· ·			\$	336.06
	g. Form of Payment				1			quired Rema	
001	Check	0	02	2/27/2020	\$	336.06	ADD	RESS LAB	ELS
					\$	i			
4. Payee Inform	ation			Add □	Rem	ove			
a. Full Name, Ma	ailing Address & Pho	one		b. Coordinate	d Con	mittee Na	ıme	d. Comment	s
(include city, sta	te, & zip)				· · · · · · · · · · · · · · · · · · ·				
SQUARESPAC				<u> </u>					
225 VARICK S	T			c. Level Regis					
12TH FLOOR				Federal	-	County:			
NEW YORK, N	Y 10014			State		Municip	auty:	e. Dection S	um to Date
								\$	72.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	ј. Ап	ount	k. Re	quired Rema	rks
001	Debit Card	A		2/18/2020	\$	26.00		SSITE MON	
					\$				
5. Total only this	s Page							\$	555.68
6. Total of ALL	CRO-1310 Pages)		
	n line 13a of Detailed S							\$	4,795.99
	n line 13b of Detailed S						omm)	Ψ	4,193.99
	n line 13c of Detailed S				rty Exp	enditures)		····	
	des (List detailed								
A* - Media	B* - Printin	•		undraising	_			ner Candidat	
E - Salaries	F* - Equipme			litical Party				Public Offi	
I - Postage O* Other	J - Penaltie	S	K* - C	office Expenses	S	Q* - D	onatio	n to Legal E	xpense Fund
	e detailed explanatio	n in required rem	arke f	ield (k)					
			43 J	(41)					

Disbursements	Pg	4	of	4
	^ b .			- 7

Amendment

Pg 4 of 4 Yes X No

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 Fund	if applicable)				***************************************		2. ID Nu	mber
	TO ELECT CYNTI	HIA LACORTE							
3. Type of Disbu	irsement <i>(Please</i>	use separate CR(<u> </u>	forms for eac	h tyj	e of Disbu	rseme	nt.)	· · · · · · · · · · · · · · · · · · ·
X Operating Exp		ributions to Candida	tes/Polit	ical Committees	;	Coc	ordinat	ed Party E	xpenditures
4. Payee Inform				Add 🔲	Rei	nove			
	ailing Address & Ph	one		b. Coordinate	d Co	mmittee N	ame	d. Com m	ents
(include city, sta									
SWEET EDVE	·-								
118 FRONT ST				c. Level Regis	tere	County:		ļ	
SWANSBORO	, NC 28384			State				a Flactio	n Sum to Date
						land		\$	888.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	i. A	mount	k. Re	quired Re	
001	Debit Card	0	 	3/03/2020	\$	888.00	FOO		
			1		\$	000.00	1.00		
4. Payee Inform	ation			Add Π		nove	<u> </u>		
	ailing Address & Pho	one		b. Coordinate			ame	d. Comm	ents
(include city, sta	_	~ ~ ~						C. COMPA	
THE MANUAL		*****		1					
1527 S. COOPI	ER ST			c. Level Regis	tere	l (Specify)			
ARLINGTON, TX 76010				Federal		County:			
				State		☐ Municip	ality:	e. Dectio	n Sum to Date
								\$	1,421.03
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Re	quired Re	marks
001	Debit Card	A	03	3/02/2020	\$	1,421.03	CAN	IPAIGN (CALLS
					\$				
4. Payee Inform	ation			Add 🗆	Ren	nove	L		
a. Full Name, Ma	ailing Address & Pho	one		b. Coordinate	d Co	mmittee Na	ıme	d. Comm	ents
(include city, sta	te, & zip)								
VISTA PRINT									
275 WYMAN S				c. Level Regis	terec	· · ·			
WALTHAM, M	IA 02451			Federal State		☐ County: ☐ Municip		o Mostin	n Sum to Date
				LI State		e a retuited	anty.	c. Mecno	a Sum to Date
								\$	101.51
***	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Re	quired Re	marks
001	Debit Card	0	03	3/04/2020	\$	101.51	THA	NK YOU	CARDS
					\$	•			
5. Total only this	s Page			••				\$	2,410.54
6. Total of ALL	CRO-1310 Pages							···	,
	n line 13a of Detailed S	ummary Page CRO-	-1100 if	Operating Expe	nses)			•	
	n line 13b of Detailed S					s/Political Co	omm)	\$	4,795.99
(This line goes i	n line 13c of Detailed S	ummary Page CRO-	1100 if	Coordinated Pai	rty E	(penditures			
7. Purpose Co	des (List detailed	expenditure code	in (h.) a	above)					
A* - Media	B* - Printin	~	C* - F	undraising		D-To	Anotl	ier Candio	late
E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expense									
I - Postage	J - Penaltie	3	K* - 0	office Expenses	S	Q* - D	onatio	n to Lega	I Expense Fund
O* Other * Codes remire	e detailed explanatio	n in remined new	orica £	iald (Iv)					
Comes reduite	с чесаней схранацо	n 111 1 edattea tett	MIKS I	icin (k)					

Aggregated	Non	-Media	Expenditures
------------	-----	--------	---------------------

			Amendment					
Page	1	of <u>1</u>		Yes	X	No		

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

Optional ic	ann used to repo	It INC INOII-IVIEUM	Expenditures 0	1 \$50 OF 1688.			
1. Committe	e Full Name (and	l Fund if applicable)			2.	ID Number	
COMMITI	TEE TO ELECT	CYNTHIA LACOR	ГЕ				
3. Payee Inf	ormation						·
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yy	уу) f. <i>А</i>	Amount	g. Required Remarks
☐ Add ☐ Remove	001	Electric Funds Tran	0	02/28/2020	\$	4.30	TRANSACTION FEE
4. Total only this Page							4.30
5. Total of ALL CRO-1315 Pages (This line must be on line 14 of Detailed Summary Page CRO-1100)					\$		4.30
6. Purpos	e Codes (List	detailed expenditur	re code in (d) a	bove)			
E - Salar I - Posta O* - Ot	ies F* ge J-	- Printing - Equipment Penalties	C* - Fundr G - Political K* - Office	Party I	H-*F	Contract of the Contract of th	ndidate lic Office Expenses Legal Expense Fund
		led explanation i	n required ren	narks field (g)			

CRO-1315

NC State Board of Elections

December 2009

Refunds/Re	eimbu	rsements	From the Co	mmittee p.	. 1 .e ·	1	Amendm Yes	ient M No
			ements, including co					EXI NO
1. Committee Ful							D Numbe	r*
COMMITTEE 1	O ELEC	CT CYNTHIA	LACORTE					, , , , , , , , , , , , , , , , , , ,
3. Payee Informa	tion			Add 🔲 Re	emove	ــــــــــــــــــــــــــــــــــــــ		
a. Full Name, Mai	ling Add	iress & Phone		d. Type of Comp	nittee	g. C	Comments	
(include city, st	ate, & zi	p)		Candidate	PAC	1		
CYNTHIA LAC	ORTE			Referendum	Party	1		
220 ELM ST			e. Level Registe	red (Specify)	h. (riginal R	Receipt Date	
SWANSBORO, NC 28584 (910) 467-3847			☐ Federal ☐ State	County: Municipality:		02/27/2020		
						i. O	riginal R	eceipt Amount
						\$		2,000.00
b. Job Title/Profes	sioa	c. Employer's l	Name/Specific Field	f. Purpose Code		j. E	ection Su	m to Date
REALTOR		COLDWELL BA	NKER	L		\$		720.00
k. Account Code	l. Form	of Payment	m. Required Remar	ks	n. Date (mm/dd/y	ууу)	o. Amou	n t
001	Electric	Funds Tran			04/08/2020		\$	243.45
4. Total only this	Page					\$	<u></u>	243.45
5. Total of ALL C (This line must be			mmary Page CRO-110	0)		\$		243,45
6. Purpose Cod	les (List	detailed disbur	sement code in (f) al	bove)				
L-Returned to			Overpayment for Se		N - Exceed	led C	Ontibutio	n Limit
P* - Reimburs	ement of		Other					
	e detaile	d explanation i	n required remarks	field (m)				
CRO-1320				rd of Elections		:	***************************************	July 2007

In-Kind Contributions Use this form to report non-monetary contributions, donatic Use CRO-1215 if In-Kind Contributions were or will be	ns, goods or ser	1 of vices provided to 17 days.	the con		No No
1. Committee Full Name (and Fund if applicable)			2. ID 1	Number	
COMMITTEE TO ELECT CYNTHIA LACORTE					
3. Contributor Information	Add □ Rei	move	<u></u>		
a. Full Name, Mailing Address & Phone	b. Type of Con		lc Com	ments	
(include city, state, & zip)	Individual		C. COM	ments	
CYNTHIA LACORTE	Candidate				
220 ELM ST	☐ Party				
SWANSBORO, NC 28584	PAC				
(910) 467-3847	Referendum	1	d. Flec	tion Sum to	Date
(510) 107 3017	Other Rece				
		-	\$		720.00
e. Description	···	f. Date (mm/dd	/уууу)	g. Fair Ma	rket Amount
ELECTRONIC BILLBOARD	04/13/2		20	\$	720.00
				\$	
				\$	W
3. Contributor Information	Add 🔲 Rei	nove		<u></u>	
a. Full Name, Mailing Address & Phone	b. Type of Con	tributor	c. Com	ments	
(include city, state, & zip)	X Individual	***************************************			
SARAH STEINHAUS	☐ Candidate				
2355 WESTERN BLVD	☐ Party				
JACKSONVILLE, NC 28546	☐ PAC				
·	Referendum		d. Elect	tion Sum to	Date
	Other Recei	pt Source	\$ 9		956.25
e. Description		f. Date (mm/dd	/уууу)	g. Fair Ma	rket Amount
LOGO, BILLBOARD DESIGN, POCKET & GREETING CARD, I DESIGN, SOCIAL MEDIA	BROCHURE	03/03/202	20	\$	956.25

CRO-1510

4. Total only this Page

5. Total of ALL CRO-1510 Pages
(This line must be on line 17 of Detailed Summary Page CRO-1100) NC State Board of Elections

December 2007

1,676.25

1,676.25

\$

\$

\$