

Disclosure Report Cover

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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

1. Committee Information				
a. Full Name			c. ID Number	
Natalie For NC			STA-GIL3600-C-001	
b. Mailing Address (Include City, State and Zip Code)			d. Date Filed	
2616 Erwin Rd Apt 1334 Durham, NC 27705-3820			02/04/2020	
			e. Phone Number	
			(919) 908-9042	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name	
2019	10/11/2019	12/31/2019	Ashia Williamson	
6. Type of Committee (Check one)			9. Type of Report (check only one type of report from one category)	
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Legal Expense Fund			Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
7. Type of Fund (if applicable, check one)			State/County <input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth Semi-annual <input type="checkbox"/> Mid Year <input checked="" type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input checked="" type="checkbox"/> Other: NC Candidates Financing Fund			Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special	
8. Number of Fundraisers this Report			10. Special Report Name	
1				
11. Account Information				
a. Financial Institution Full Name				
M & F Bank IN PERSON				
b. Purpose			c. Account Code	
Receipts and Expenses FEB 04 2020			cr01	
DURHAM BOE			d. Period Begln Balance	
			\$ 0.00	
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 undisclosed 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.				
Natalie S. Miralack Printed Name of Signer			[Signature] Signature of Appointed Treasurer	
			2/4/2020 Date	
FOR OFFICE USE ONLY				
Date Received:	_____	Employee:	_____	Delivery Method
Date Postmarked:	_____	Employee:	_____	<input type="checkbox"/> Normal Mail
Date Scanned:	_____	Employee:	_____	<input type="checkbox"/> Registered Mail
Date Data Entered:	_____	Employee:	_____	<input type="checkbox"/> Hand Delivered
				<input type="checkbox"/> Electronically Filed
				<input type="checkbox"/> Signer has not received mandatory training
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.				
You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.				
CRO-1000		NC State Board of Elections		August 2008

Amendment
 Yes No

Detailed Summary

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

1. Committee Full Name (and Fund if applicable)	2. Type Of Report	3. ID Number
Natalie For NC	2019 Year End Semi-Annual	
Start of Election Cycle: January 1, 2019	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$0.00	\$0.00
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$875.00	\$875.00
6) Contributions from Individuals (CRO-1210)	\$8,108.21	\$8,108.21
7) Contributions from Political Party Committees (CRO-1220)	\$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
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, 11d, and 11e)	\$8,983.21	\$8,983.21
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$5,112.71	\$5,112.71
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)	\$221.54	\$221.54
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)	\$3,270.57	\$3,270.57
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$8,604.82	\$8,604.82
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$378.39	\$378.39
ADDITIONAL INFORMATION		
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$0.00	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$0.00	
22) Debts and Obligations owed By the Committee (CRO-1610)	\$0.00	
23) Debts and Obligations owed To the Committee (CRO-1620)	\$0.00	
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

Aggregated Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number
Natalie For NC					
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	DebitCard		12/05/2019	\$10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	Other		12/07/2019	\$25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	DebitCard		12/21/2019	\$25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	Check		11/15/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	DebitCard		11/26/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	DebitCard		12/24/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	DebitCard		11/25/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	Check		11/25/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	Check		11/15/2019	\$25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	DebitCard		12/02/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	DebitCard		11/25/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	DebitCard		11/24/2019	\$10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	DebitCard		12/02/2019	\$25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	Check		11/29/2019	\$30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	Check		11/25/2019	\$50.00
4. Total only this Page					\$550.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$875.00

Aggregated Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Natalie For NC	

3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	DebitCard		11/24/2019	\$10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	DebitCard		12/02/2019	\$25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	DebitCard		12/27/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	DebitCard		12/02/2019	\$25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	DebitCard		12/19/2019	\$25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	DebitCard		11/25/2019	\$25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	DebitCard		11/24/2019	\$25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	DebitCard		11/24/2019	\$10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	DebitCard		11/26/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	Check		11/25/2019	\$30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	DebitCard		11/24/2019	\$50.00

4. Total only this Page	\$325.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>	\$875.00

Contributions from Individuals

Page 5 of 37

Amendment

Yes No

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	
Natalie For NC						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Melanie Allen 4323 Pin Oak Dr Durham, NC 27707-5272			Philanthropy			
			c. Employer's Name/Specific Field			
			The Windward Fund			
					e. Election Sum to Date	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
<input type="checkbox"/>	cr01	DebitCard		10/23/2019	\$100.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Melanie Allen 4323 Pin Oak Dr Durham, NC 27707-5272			Philanthropy			
			c. Employer's Name/Specific Field			
			The Windward Fund			
					e. Election Sum to Date	
					\$500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
<input type="checkbox"/>	cr01	DebitCard		11/24/2019	\$500.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Joi Bass 203 Rebecca Cir Longview, TX 75605-8027			Compliance Officer			
			c. Employer's Name/Specific Field			
			Dollar General			
					e. Election Sum to Date	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
<input type="checkbox"/>	cr01	DebitCard		10/23/2019	\$500.00	

4. Total only this page	\$1,100.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$8,108.21

Contributions from Individuals

Page 6 of 37

Amendment

Yes No

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	
Natalie For NC						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Joi Bass 203 Rebecca Cir Longview, TX 75605-8027			Compliance Officer			
			c. Employer's Name/Specific Field			
			Dollar General			
					e. Election Sum to Date \$250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
<input type="checkbox"/>	cr01	DebitCard		11/18/2019	\$250.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Marlon Brown 244 Price St Mason, MI 48854-8509			Management			
			c. Employer's Name/Specific Field			
			State of Michigan			
					e. Election Sum to Date \$100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
<input type="checkbox"/>	cr01	DebitCard		11/11/2019	\$50.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Marlon Brown 244 Price St Mason, MI 48854-8509			Management			
			c. Employer's Name/Specific Field			
			State of Michigan			
					e. Election Sum to Date \$100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
<input type="checkbox"/>	cr01	DebitCard		11/24/2019	\$50.00	

4. Total only this page	\$350.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$8,108.21

Contributions from Individuals

Amendment
 Yes No

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	
Natalie For NC						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Basil Coley 1009 Greensboro, NC 27410			Professor			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			A&T State Univeristy			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
<input type="checkbox"/>	cr01	Check		10/15/2019	\$250.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Carl Edwards 750 Weaver Dairy Rd Apt 3109 Chapel Hill, NC 27514-1443			Minister			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			Retired		\$150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
<input type="checkbox"/>	cr01	DebitCard		11/08/2019	\$100.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Carl Edwards 750 Weaver Dairy Rd Apt 3109 Chapel Hill, NC 27514-1443			Minister			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			Retired		\$150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
<input type="checkbox"/>	cr01	DebitCard		11/24/2019	\$50.00	

4. Total only this page	\$400.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$8,108.21

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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	
Natalie For NC						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Harold Feilds 1602 Tommys Rd Goldsboro, NC 27534-7988			Retired			
			c. Employer's Name/Specific Field			
			Retired		e. Election Sum to Date	
					\$100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>	cr01	Check			11/18/2019	\$100.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Eleshia Glover 1693 Donna Lynn Dr SE Smyrna, GA 30080-2409			Senior Project and Policy Manager		Website Design	
			c. Employer's Name/Specific Field			
			City of Alanta , GA		e. Election Sum to Date	
					\$1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>		In-Kind	Website Design and Implementation		11/10/2019	\$1,000.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Geoffery Green 111 Simerville Rd Chapel Hill, NC 27517-8145			City Planner			
			c. Employer's Name/Specific Field			
			Clarion Associates		e. Election Sum to Date	
					\$175.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>	cr01	DebitCard			11/11/2019	\$150.00

4. Total only this page	\$1,250.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$8,108.21

Contributions from Individuals

Amendment
 Yes No

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	
Natalie For NC						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Geoffery Green 111 Simerville Rd Chapel Hill, NC 27517-8145			City Planner			
			c. Employer's Name/Specific Field			
			Clarion Associates			
					e. Election Sum to Date	
					\$175.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
<input type="checkbox"/>	cr01	DebitCard		11/24/2019	\$25.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Shella Kerrigan 2310 Stansbury Rd Chapel Hill, NC 27516-9399			Mime			
			c. Employer's Name/Specific Field			
			Self Employed			
					e. Election Sum to Date	
					\$100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
<input type="checkbox"/>	cr01	DebitCard		12/22/2019	\$100.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Senadzi Kpeglo 402 Livingstone Dr Cary, NC 27513-2919			HR			
			c. Employer's Name/Specific Field			
			FRA			
					e. Election Sum to Date	
					\$100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
<input type="checkbox"/>	cr01	DebitCard		10/24/2019	\$100.00	

4. Total only this page	\$225.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$8,108.21

Contributions from Individuals

Page 10 of 37

Amendment

Yes No

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	
Natalie For NC							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Kel Landis 2710 Rosedale Ave Raleigh, NC 27607-7122				Investment Manager			
				c. Employer's Name/Specific Field			
				Plexus Capital			
				e. Election Sum to Date		\$200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description			j. Date	k. Amount
<input type="checkbox"/>	cr01	DebitCard				12/09/2019	\$200.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Loius Latta PO Box 936 Hillsborough, NC 27278-0936				Retired			
				c. Employer's Name/Specific Field			
				Retired			
				e. Election Sum to Date		\$100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description			j. Date	k. Amount
<input type="checkbox"/>	cr01	Check				11/25/2019	\$100.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Hazelene Mebane M 5109 George Miles Rd Burlington, NC 27217-8522				Nurse			
				c. Employer's Name/Specific Field			
				Home Health Nurse			
				e. Election Sum to Date		\$200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description			j. Date	k. Amount
<input type="checkbox"/>	cr01	Check				12/05/2019	\$200.00

4. Total only this page	\$500.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$8,108.21

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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	
Natalie For NC						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702			Retired			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			Retired			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>	cr01	Check			11/03/2019	\$100.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702			Retired		Printing	
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			Retired		\$1,349.21	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>		In-Kind	Stickers		11/12/2019	\$12.56
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702			Retired		Post Cards	
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			Retired		\$1,349.21	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>		In-Kind	Post Cards		11/12/2019	\$26.69

4. Total only this page	\$139.25
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$8,108.21

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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	
Natalie For NC						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702			Retired		Printing	
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			Retired		\$1,349.21	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>		In-Kind	Letterhead and Envelops		11/12/2019	\$126.90
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702			Retired		Venue Rental	
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			Retired		\$1,349.21	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>		In-Kind	Volunteer Kick off Venue Rental		11/17/2019	\$200.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702			Retired		Office Supplies	
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			Retired		\$1,349.21	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>		In-Kind	Office Supplies		11/20/2019	\$21.80

4. Total only this page	\$348.70
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$8,108.21

Contributions from Individuals

Page 13 of 37

Amendment

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

Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Natalie For NC							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702			Retired		Parade Accessories		
			c. Employer's Name/Specific Field Retired				
						e. Election Sum to Date \$1,349.21	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount	
<input type="checkbox"/>		In-Kind	Candy for NCCU Parade		11/20/2019	\$56.80	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702			Retired		Food for Kickoff Event		
			c. Employer's Name/Specific Field Retired				
						e. Election Sum to Date \$1,349.21	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount	
<input type="checkbox"/>		In-Kind	Food from Costco for Kickoff event		11/24/2019	\$15.98	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702			Retired		Food for Kickoff Event		
			c. Employer's Name/Specific Field Retired				
						e. Election Sum to Date \$1,349.21	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount	
<input type="checkbox"/>		In-Kind	Food from Aldi's for Kickoff event		11/24/2019	\$48.41	

4. Total only this page	\$121.19
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$8,108.21

Contributions from Individuals

Page 14 of 37

Amendment

Yes No

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	
Natalie For NC						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Job Title/Profession		d. Comments	
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702			Retired		Food for Kickoff Event	
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			Retired		\$1,349.21	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
<input type="checkbox"/>		In-Kind	Punch for Kickoff event	11/24/2019	\$51.12	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Job Title/Profession		d. Comments	
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702			Retired		Food for Kickoff Event	
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			Retired		\$1,349.21	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
<input type="checkbox"/>		In-Kind	Food from Food Lion for Kickoff event	11/24/2019	\$54.06	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702			Retired		Food for Kickoff Event	
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			Retired		\$1,349.21	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
<input type="checkbox"/>		In-Kind	Food from K&W for Kickoff event	11/24/2019	\$115.16	

4. Total only this page	\$220.34
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$8,108.21

Contributions from Individuals

Amendment
 Yes No

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	
Natalie For NC						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Job Title/Profession		d. Comments	
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702			Retired		Supplies for Kickoff Event	
			c. Employer's Name/Specific Field			
			Retired		e. Election Sum to Date	
					\$1,349.21	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>		In-Kind	Cups, plates, silverware and Napkins for Kickoff event		11/24/2019	\$125.36
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Job Title/Profession		d. Comments	
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702			Retired		Food for Kickoff Event	
			c. Employer's Name/Specific Field			
			Retired		e. Election Sum to Date	
					\$1,349.21	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>		In-Kind	Food from Golden Coral for Kickoff event		11/24/2019	\$239.84
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Job Title/Profession		d. Comments	
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702			Retired		Decorations	
			c. Employer's Name/Specific Field			
			Retired		e. Election Sum to Date	
					\$1,349.21	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>		In-Kind	Decorations for Filing Event		12/03/2019	\$41.73

4. Total only this page	\$406.93
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$8,108.21

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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	
Natalie For NC						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Job Title/Profession		d. Comments	
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702			Retired		Parade Accessories	
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			Retired		\$1,349.21	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>		In-Kind	Candy for Durham Christmas Parade		12/20/2019	\$72.80
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Job Title/Profession		d. Comments	
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702			Retired		BOE Filing Fees	
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			Retired		\$1,349.21	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>		In-Kind	Filing Fees		12/20/2019	\$140.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Job Title/Profession		d. Comments	
Harold Murdock 1001 Amity Dr Greensboro, NC 27406-5702			Retired			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			Retired		\$500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>	cr01	Check			11/19/2019	\$500.00

4. Total only this page	\$712.80
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$8,108.21

Contributions from Individuals

Amendment
 Yes No

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	
Natalie For NC						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Natalie Murdock 2616 Erwin Rd Apt 1334 Durham, NC 27705-3820 (919) 908-9042			Elected Official			
			c. Employer's Name/Specific Field Durham County Government			
					e. Election Sum to Date \$560.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>	cr01	DebitCard			11/13/2019	\$25.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Natalie Murdock 2616 Erwin Rd Apt 1334 Durham, NC 27705-3820 (919) 908-9042			Elected Official			
			c. Employer's Name/Specific Field Durham County Government			
					e. Election Sum to Date \$560.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>	cr01	DebitCard			11/24/2019	\$25.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Natalie Murdock 2616 Erwin Rd Apt 1334 Durham, NC 27705-3820 (919) 908-9042			Elected Official		Food	
			c. Employer's Name/Specific Field Durham County Government			
					e. Election Sum to Date \$560.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>		In-Kind	Food for meeting		11/24/2019	\$60.00

4. Total only this page	\$110.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$8,108.21

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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	
Natalie For NC					
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Natalie Murdock 2616 Erwin Rd Apt 1334 Durham, NC 27705-3820 (919) 908-9042		Elected Official		Campaign Photos	
		c. Employer's Name/Specific Field		e. Election Sum to Date	
		Durham County Government		\$560.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>		In-Kind	Campaign Photos	11/24/2019	\$200.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Natalie Murdock 2616 Erwin Rd Apt 1334 Durham, NC 27705-3820 (919) 908-9042		Elected Official		Design Work	
		c. Employer's Name/Specific Field		e. Election Sum to Date	
		Durham County Government		\$560.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>		In-Kind	Logo Design	11/24/2019	\$250.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Shalonda Perkins 208 City View Ct Cedar Hill, TX 75104-4818		Director			
		c. Employer's Name/Specific Field		e. Election Sum to Date	
		Passage of Youth , Inc			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	cr01	DebitCard		10/23/2019	\$100.00
4. Total only this page				\$550.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)				\$8,108.21	

Contributions from Individuals

Amendment
 Yes No

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	
Natalie For NC						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Shalonda Perkins 208 City View Ct Cedar Hill, TX 75104-4818			Director			
			c. Employer's Name/Specific Field			
			Passage of Youth , Inc		e. Election Sum to Date	
					\$100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>	cr01	DebitCard			11/15/2019	\$100.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Rebecca Planchard 530 Foster St Unit 518 Durham, NC 27701-2279			Policy Advisor			
			c. Employer's Name/Specific Field			
			NCDHHS		e. Election Sum to Date	
					\$500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>	cr01	DebitCard			12/02/2019	\$500.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Audrey Shore 2520 N Roxboro St Durham, NC 27704-4348			Development Manager			
			c. Employer's Name/Specific Field			
			The Carolina Theatre of Durham		e. Election Sum to Date	
					\$149.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>	cr01	DebitCard			11/14/2019	\$100.00

4. Total only this page	\$700.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$8,108.21

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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	
Natalie For NC							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Audrey Shore 2520 N Roxboro St Durham, NC 27704-4348				Development Manager			
				c. Employer's Name/Specific Field			
				The Carolina Theatre of Durham			
				e. Election Sum to Date		\$149.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description			j. Date	k. Amount
<input type="checkbox"/>	cr01	DebitCard				11/24/2019	\$49.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Cheryl Warren 1 Seagrove Ct Durham, NC 27703-3663				Program Manger			
				c. Employer's Name/Specific Field			
				City of Durham Transportation Dept			
				e. Election Sum to Date		\$100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description			j. Date	k. Amount
<input type="checkbox"/>	cr01	Other				12/02/2019	\$100.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Brenda Williams PO Box 19144 Raleigh, NC 27619-9144				State Treasurer			
				c. Employer's Name/Specific Field			
				NC Treasuer Office			
				e. Election Sum to Date		\$75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description			j. Date	k. Amount
<input type="checkbox"/>	cr01	Check				11/25/2019	\$75.00
4. Total only this page						\$224.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$8,108.21	

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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	
Natalie For NC						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Kimberly Williams 708 Pebblestone Dr Durham, NC 27703-6330			Realtor			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			Right Time Reality			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
<input type="checkbox"/>	cr01	DebitCard		10/25/2019	\$250.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Job Title/Profession		d. Comments	
Kimberly Williams 708 Pebblestone Dr Durham, NC 27703-6330			Realtor			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			Right Time Reality		\$100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
<input type="checkbox"/>	cr01	DebitCard		11/24/2019	\$100.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Leonardo Williams 191 RAJ St Durham, NC 27703 (919) 806-9759			Business Owner		Venue Space	
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			Self Employed		\$400.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount	
<input type="checkbox"/>		In-Kind	Venue Space	11/17/2019	\$400.00	

4. Total only this page	\$750.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$8,108.21

Amendment
 Yes No

Disbursements

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	
Natalie For NC							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments		
Copy King, INC 611 W Gate City Blvd Greensboro, NC 27403-3034 (336) 333-9900			c. Level Registered (Specify)		Printing Service		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				
					e. Election Sum to Date		
					\$229.51		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
cr01	Credit Card	B	11/27/2019	\$64.05	Printing		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments		
Copy King, INC 611 W Gate City Blvd Greensboro, NC 27403-3034 (336) 333-9900			c. Level Registered (Specify)		Printing Service		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				
					e. Election Sum to Date		
					\$229.51		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
cr01	Credit Card	B	11/29/2019	\$165.46	Printing		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments		
Clay Desouza 705 Reynolds Ave Durham, NC 27707-4641 (336) 539-5881			c. Level Registered (Specify)				
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				
					e. Election Sum to Date		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
cr01	Electronic Funds Transfer	E	11/01/2019	\$62.04	Campaign Consulting		
5. Total only this page						\$291.55	
6. Total of ALL CRO-1310 Pages						\$5,112.71	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(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* - Fundraising		D - To Another Candidate	
E - salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* - Other							
*Codes require detailed explanation in required remarks field (k)							

Disbursements

Amendment
 Yes 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
Natalie For NC						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Clay Desouza 705 Reynolds Ave Durham, NC 27707-4641 (336) 539-5881			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
cr01	Electronic Funds Transfer	E	11/04/2019	\$772.05	Campaign Consulting	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Clay Desouza 705 Reynolds Ave Durham, NC 27707-4641 (336) 539-5881			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
cr01	Electronic Funds Transfer	E	12/30/2019	\$500.00	Campaign Consulting	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Emily Hagstrom 110 Higbee St Durham, NC 27704-4327 (919) 641-3449			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
cr01	Electronic Funds Transfer	E	12/09/2019	\$514.80	Campaign Consulting	
5. Total only this page					\$1,786.85	
6. Total of ALL CRO-1310 Pages					\$5,112.71	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)						
(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* - Fundraising		D - To Another Candidate
E - salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund
O* - Other						
*Codes require detailed explanation in required remarks field (k)						

Disbursements

Amendment
 Yes 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						
Natalie For NC												
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)												
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures												
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove												
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments							
Lori Jone (919) 641-3449			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$750.00							
								f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks				
cr01			Electronic Funds Transfer		E		12/20/2019		\$750.00		Campaign Consulting	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove												
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments							
LOCO Visuals 3206 Stones Throw Ln Apt 7 Durham, NC 27713-5209			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date							
								f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks				
cr01			Check		A		11/04/2019		\$250.00		Video Production	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove												
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments							
LOCO Visuals 3206 Stones Throw Ln Apt 7 Durham, NC 27713-5209			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date							
								f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks				
cr01			Check		A		11/04/2019		\$300.99		Video Production	
5. Total only this page						\$1,300.99						
6. Total of ALL CRO-1310 Pages						\$5,112.71						
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)												
(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* - Fundraising		D - To Another Candidate						
E - salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses						
I - postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund						
O* - Other												
*Codes require detailed explanation in required remarks field (k)												

Amendment
 Yes No

Disbursements

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	
Natalie For NC							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Coordinated Committee Name		d. Comments		
Long Leaf Agency 1053 E Whitaker Mill Rd Ste 115 Raleigh, NC 27604-5305					Political Planning		
			c. Level Registered (Specify)				
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date		
					\$120.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
cr01	Electronic Funds Transfer	K	11/29/2019	\$120.00	Political Consulting		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Coordinated Committee Name		d. Comments		
Mailchimp 675 Ponce De Leon Ave NE # E178 Atlanta, GA 30308-1884							
			c. Level Registered (Specify)				
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date		
					\$149.98		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
cr01	Electronic Funds Transfer	C	12/02/2019	\$74.99	Mass Email Service		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Coordinated Committee Name		d. Comments		
Mailchimp 675 Ponce De Leon Ave NE # E178 Atlanta, GA 30308-1884					End of year push.		
			c. Level Registered (Specify)				
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date		
					\$149.98		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
cr01	Electronic Funds Transfer	C	12/30/2019	\$74.99	Mass Email Service		
5. Total only this page						\$269.98	
6. Total of ALL CRO-1310 Pages						\$5,112.71	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(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* - Fundraising		D - To Another Candidate	
E - salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* - Other							
*Codes require detailed explanation in required remarks field (k)							

Disbursements

Amendment
 Yes 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	
Natalie For NC							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
NGP 1101 15th St NW Ste 500 Washington, DC 20005-5006				c. Level Registered (Specify)		e. Election Sum to Date \$280.00	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
cr01	Debit Card	K	11/15/2019	\$140.00	NGP Monthly Subscription		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
NGP 1101 15th St NW Ste 500 Washington, DC 20005-5006				c. Level Registered (Specify)		e. Election Sum to Date \$280.00	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
cr01	Debit Card	K	12/02/2019	\$140.00	NGP Monthly Subscription		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Audrey Shore 2520 N Roxboro St Durham, NC 27704-4348				c. Level Registered (Specify)		e. Election Sum to Date \$406.76	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
cr01	Electronic Funds Transfer	E	12/09/2019	\$406.76	Campaign Consulting		
5. Total only this page						\$686.76	
6. Total of ALL CRO-1310 Pages						\$5,112.71	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(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* - Fundraising		D - To Another Candidate	
E - salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* - Other							
*Codes require detailed explanation in required remarks field (k)							

Disbursements

Amendment
 Yes 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	
Natalie For NC							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Coordinated Committee Name		d. Comments		
Skewers Bar 1013 W Main St Durham, NC 27701-2026 (919) 680-8048					Food for Volunteer Meeting		
			c. Level Registered (Specify)				
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				
					\$128.58		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
cr01	Debit Card	K	12/20/2019	\$128.58	Food for Volunteers		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Coordinated Committee Name		d. Comments		
The Tennie Group, LLC PO Box 1279 Knightdale, NC 27545-1279 (919) 814-5400					LLC License for the Candidate Committee		
			c. Level Registered (Specify)				
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				
					\$127.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
cr01	Electronic Funds Transfer	K	11/19/2019	\$127.00	Legal Processing Fee		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Coordinated Committee Name		d. Comments		
United States Parcel Service 201 N Murrow Blvd Greensboro, NC 27435-0809 (336) 333-9900					Postage		
			c. Level Registered (Specify)				
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				
					\$221.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
cr01	Debit Card	I	11/29/2019	\$221.00	Postage for mailer		
5. Total only this page						\$476.58	
6. Total of ALL CRO-1310 Pages						\$5,112.71	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(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* - Fundraising		D - To Another Candidate	
E - salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* - Other							
*Codes require detailed explanation in required remarks field (k)							

Disbursements

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			
Natalie For NC					
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4: Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments		
Zwelis 4600 Durham Chapel Hill Blvd Ste 26 Durham, NC 27707-2669 (984) 219-7555			Food for Kickoff		
		c. Level Registered (Specify)	e. Election Sum to Date		
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	\$300.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
cr01	Debit Card	C	11/18/2019	\$300.00	Food for Kickoff

5. Total only this page	\$300.00		
6. Total of ALL CRO-1310 Pages	\$5,112.71		
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (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* - Fundraising	D - To Another Candidate
E - salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund
O* - Other			
*Codes require detailed explanation in required remarks field (k)			

Aggregated Non-Media Expenditures

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Natalie For NC						
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	Electronic Funds Transfer	K	10/31/2019	\$116.61	Tshirts
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	Debit Card	B	11/08/2019	\$30.96	Printing Donation Form
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	Electronic Funds Transfer	K	11/12/2019	\$49.97	Tshirts
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	Electronic Funds Transfer	K	11/29/2019	\$12.00	Bank Monthly Fees
<input type="checkbox"/> Add <input type="checkbox"/> Remove	cr01	Electronic Funds Transfer	K	12/31/2019	\$12.00	Bank Monthly Fees

4. Total only this Page	\$221.54		
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>	\$221.54		
6. Purpose Codes (List detailed expenditure code in (d.) above)			
E - salaries	B* - Printing	C* - Fundraising	D - To Another Candidate
I - postage	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
O* - Other	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund
*Codes require detailed explanation in required remarks field (g)			

In-Kind Contributions

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
Natalie For NC		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address, & Phone (Include city, state & zip)	b. Type of contributor	c. Comments
Eleshia Glover 1693 Donna Lynn Dr SE Smyrna, GA 30080-2409	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	Website Design
		d. Election Sum to Date
		\$1,000.00
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Website Design and Implementation	11/10/2019	\$1,000.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address, & Phone (Include city, state & zip)	b. Type of contributor	c. Comments
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	Paper Labels
		d. Election Sum to Date
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Paper Labels	10/16/2019	\$11.36
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address, & Phone (Include city, state & zip)	b. Type of contributor	c. Comments
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	Printing
		d. Election Sum to Date
		\$1,349.21
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Stickers	11/12/2019	\$12.56

4. Total only this page	\$1,023.92
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)	\$3,270.57

In-Kind Contributions

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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
Natalie For NC		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address, & Phone (include city, state & zip)	b. Type of contributor	c. Comments
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	Post Cards
		d. Election Sum to Date \$1,349.21
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Post Cards	11/12/2019	\$26.69
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address, & Phone (include city, state & zip)	b. Type of contributor	c. Comments
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	Printing
		d. Election Sum to Date \$1,349.21
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Letterhead and Envelops	11/12/2019	\$126.90
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address, & Phone (include city, state & zip)	b. Type of contributor	c. Comments
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	Venue Rental
		d. Election Sum to Date \$1,349.21
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Volunteer Kick off Venue Rental	11/17/2019	\$200.00

4. Total only this page	\$353.59
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)	\$3,270.57

In-Kind Contributions

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
Natalie For NC		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address, & Phone (Include city, state & zip)	b. Type of contributor	c. Comments
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	Office Supplies
		d. Election Sum to Date \$1,349.21
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Office Supplies	11/20/2019	\$21.80
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address, & Phone (Include city, state & zip)	b. Type of contributor	c. Comments
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	Parade Accessories
		d. Election Sum to Date \$1,349.21
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Candy for NCCU Parade	11/20/2019	\$56.80
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address, & Phone (Include city, state & zip)	b. Type of contributor	c. Comments
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	Food for Kickoff Event
		d. Election Sum to Date \$1,349.21
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Food from Costco for Kickoff event	11/24/2019	\$15.98

4. Total only this page	\$94.58
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)	\$3,270.57

In-Kind Contributions

Amendment
 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
Natalie For NC	

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address, & Phone (include city, state & zip)	b. Type of contributor	c. Comments
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	Food for Kickoff Event
		d. Election Sum to Date
		\$1,349.21
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Food from Aldi's for Kickoff event	11/24/2019	\$48.41

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address, & Phone (include city, state & zip)	b. Type of contributor	c. Comments
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	Food for Kickoff Event
		d. Election Sum to Date
		\$1,349.21
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Punch for Kickoff event	11/24/2019	\$51.12

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address, & Phone (include city, state & zip)	b. Type of contributor	c. Comments
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	Food for Kickoff Event
		d. Election Sum to Date
		\$1,349.21
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Food from Food Lion for Kickoff event	11/24/2019	\$54.06

4. Total only this page	\$153.59
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)	\$3,270.57

In-Kind Contributions

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
Natalie For NC		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address, & Phone (include city, state & zip)	b. Type of contributor	c. Comments
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	Food for Kickoff Event
		d. Election Sum to Date \$1,349.21
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Food from K&W for Kickoff event	11/24/2019	\$115.16
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address, & Phone (include city, state & zip)	b. Type of contributor	c. Comments
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	Supplies for Kickoff Event
		d. Election Sum to Date \$1,349.21
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Cups, plates, silverware and Napkins for Kickoff event	11/24/2019	\$125.36
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address, & Phone (include city, state & zip)	b. Type of contributor	c. Comments
Christine Murdock 1001 Amity Dr Greensboro, NC 27406-5702	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	Food for Kickoff Event
		d. Election Sum to Date \$1,349.21
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Food from Golden Coral for Kickoff event	11/24/2019	\$239.84

4. Total only this page	\$480.36
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)	\$3,270.57