Disclosure Re	nort Cover			I	Amendment		
	port Cover neral report and committee i	information must be	signed and s	•	Yes No		
	to update information	111011114110111111111111111111111111111	Signou min -	domino mong	ioi domitod formis.		
1. Committee Inform	mation						
a. Full Name					c. ID Number		
Carmen Eckard for I	Hickory City Council						
	- 70 (0.1)						
b. Mailing Address (included) 619 2 nd St NE	ude City, State and Zip Code)				d. Date Filed		
Hickory, NC 28601					10/1/2019		
111011019,110 20001					e. Phone Number		
					929 475 1222		
		1			828.475.1323		
2. Report Year	3. Period Start Date (mm/d	4. Period (mm/dd/yy)		5. Treasurer Full	Name		
2019	7/22/2019	7/2	6/2019	Monica Parache			
6. Type of Committe	ee (Check One)	9. Type of Report	t (check	only one type of report	from one category)		
Candidate Campa	ign Party	Municipal		e/County	Referendum		
PAC Independent	Referendum	Organizationa	.1	Organizational	Organizational		
Expenditure	Joint Fundraiser	Thirty-five da	у	Quarterly	Pre-referendum		
Legal Expense Fu					<u> </u>		
7. Type of Fund	(if applicable, check one)	Pre-primary		First	Final		
"Booster Fund" Building Fund		Pre-election Pre-runoff		Second Third	Supplemental Final Annual		
Bunding I and		Semi-annual		Fourth	Special		
		Mid Yea	r	Semi-annual	American A		
Other:		Year End	· 🔲	Mid Year	10. Special Report Name		
0 N				Year End			
8. Number of Fundr	•	Special		Final			
11 A	0		11 4	Special			
11. Account Informa				nt Information			
BB&T	univanic		a. Financiai i	istitution Pull Name			
b. Purpose	c. Account Code		b. Purpose		c. Account Code		
Cam Funds	ECI	K					
	d. Period Begin Balance				d. Period Begin Balance		
	\$ 0				\$		
CERTIFICATION					- 1		
I certify that the Com	mittee or Fund is in compli	ance with all applica	able provision	of Article 22A, 22B,	& 22D-22M of Chapter 163 of		
the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report							
is complete, true and correct and that I have been trained by the NC State Board of Elections.							
Monica Para	Printed Name of Signer	 	ignature of Appe		Date		
FOR OFFICE USE OF			ignature of Appe	January Treasurer	Date		
		2.000		_			

is complete, true and correct and that I have been trained by the NC State Board of Elections.									
Monica Parache	;	I Wer	rfell	10/1/	2019				
Pr	rinted Name of Signer	Gighatur	of Appointed Treasurer		Date				
FOR OFFICE USE ONLY	Y								
Date Received:		Employee:		Deliv	<u>rery Method</u> Normal Mail				
Date Postmarked:	M nc: 1 2019	Employee:			Registered Mail Hand Delivered				
Date Scanned:		Employee:			Electronically Filed Signer has not received				
Date Data Entered:	By	Employee:			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.

Amendment \boxtimes Yes

No

Detailed SummaryUse 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		
Carmen Eckard for Hickory City Council	Organizational				
Start of Election Cycle: January 1,	2019	Total this Reporting Period	Total this Election Cycle		
4) Cash on Hand at Start		\$ 0	\$ 0		
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$		
6) Contributions from Individuals	(CRO-1210)	\$ 1719.08	\$ 1719.08		
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$		
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$		
9) Loan Proceeds	(CRO-1410)	\$	\$		
10) Refunds/Reimbursements To the Committee11) Other Receipt Sources	(CRO-1240)	\$	\$		
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$		
11b) Contributions from Not-for-Profit Organizat	ions (CRO-1250)	\$	\$		
11c) Outside Sources of Income	(CRO-1250)	\$	\$		
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$		
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$		
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 1	lc, 11d and 11e)	\$ 1719.08	\$ 1719.08		
EXPENDITURES	1 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2				
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	\$		
13b) Contributions to Candidates/Political Commi	ittees (CRO-1310)	\$	\$		
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$		
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$		
15) Loan Repayments	(CRO-1420)	\$	\$		
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$		
17) In-Kind Contributions	(CRO-1510)	\$ 609.08	\$ 609.08		
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14,	15, 16 and 17)	\$ 609.08	\$ 609.08		
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18)	\$ 1110.00	\$ 1110.00		
ADDITIONAL INFORMATION			***		
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$			
21) Outstanding Loans (incl. ones from other campaig	(CRO-1430)	\$	HINKS DEPT		
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$			
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$			
24) Account Transfers Within the Committee	(CRO-1720)	\$			
25) Administrative Support	(CRO-1710)	\$	\$		
26) Forgiven Loans	(CRO-1440)	\$	\$		
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$		
28) Contributions to be Refunded	(CRO-1215)	\$	\$		

G								Amendmen	ıt
		m Individuals			P		5_	Yes	No.
		ividual contributions		or contribu	utions un	der \$50 if form CR	· · · · · · · · · · · · · · · · · · ·		
1. Com	nittee Full Name	(and Fund if applica	ble)				2. ID Nu	mber	
Carmen	Eckard for Hickor	y City Council							
3. Contr	ibutor Informati	on		Add [Re	emove			
	me, Mailing Address	& Phone		b. Job Title	Profession	n	d. Comme	its	
	city, state, & zip)			Retired					
Don Eck									
2625 11 th					Specific Field				
Hickory,	NC 28601		Duke En	ergy					
							e. Election	Sum to Date	
							\$	500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Descripti	ion	j. Date (mm/dd/yy	уу)	k. Amount	
	ECK	Check				7/23/20	119	\$	500.00
								\$	
								\$	
3. Contr	ibutor Informatio	on		Add [] Re	emove			
a. Full Nar	ne, Mailing Address	& Phone		b. Job Title	/Profession	1	d. Commen	its	
	city, state, & zip)			Teacher					
Jenelle B									
1022 Nes				c. Employer's Name/Specific Field					
Pleasant	Gardens, NC 2717	73		Deaf Edu	ication				
							e. Election	Sum to Date	
							\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	and Descripti	on	j. Date (mm/dd/yy	yy)	k. Amount	
	ECK	Paypal				7/16/20	19	\$	100.00
								\$	
								\$	
3. Contr	ibutor Informatio	on .		Add [Re	move			
a. Full Name, Mailing Address & Phone			b. Job Title/Profession			d. Commen	ts		
	city, state, & zip)			Marketer					
Kim Hud									
3005 10 th Ave			c. Employer's Name/Specific Field						
Hickory,	NC 28601			Sandy Po	rter Agei	ncy	a Florder 4	Pum to Data	
						e. Election Sum to Date			

(This line must be on line 6 of Detailed Summary Page CRO-1100)

CRO-1210

NC State Board of Elections

April 2007

i. In-Kind Description

h. Form of Payment

Paypal

f. Prior

g. Account Code

ECK

4. Total only this Page

5. Total of ALL CRO-1210 Pages

50.00

\$

\$

\$

\$

\$

j. Date (mm/dd/yyyy)

7/15/2019

k. Amount

50.00

650.00

1719.08

Contributions from Individuals

Use this form to report individua	d contributions over \$50	or contributions under \$	550 if form CRO 1205 is not	t used
-----------------------------------	---------------------------	---------------------------	-----------------------------	--------

1. Comm	ittee Full Name (and Fund if applica	ble)					2. ID Number		
Carmen I	Eckard for Hickory	City Council								
3. Contri	ibutor Informatio	n		Add		Rem	ove			
a. Full Nan	ne, Mailing Address &	& Phone		b. Job T	itle/Pro	fession		d. Comments	3	
	city, state, & zip)			Insura	nce					
Chris Wi				c. Employer's Name/Specific Field						
	ewberry Ln						ecific Field			
Chester,	VA 23831			Self E	mploye	ea		e. Election Si	um to Doto	
								e. Election St	um to Date	
								\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descri	iption		j. Date (mm/dd/yy	yy)	k. Amount	
	ECK	Paypal					7/19/20)19	\$	100.00
									\$	
									\$	
3. Contri	butor Informatio	n		Add		Rem	ove			
a. Full Nan	ne, Mailing Address &	k Phone		b. Job T	itle/Pro	fession		d. Comments		
(include	city, state, & zip)			Chief (Creativ	e Offic	cier			
Laura Levinson										
3339 Stonesthrow Dr NE				c. Employer's Name/Specific Field Valdese Weavers						
Hickory, NC 28601				valuese weavers				e. Election St	ım to Data	
								\$	40.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Description j. Date (mm/dd/y			j. Date (mm/dd/yy	уу)	k. Amount	
	ECK	Paypal					7/16/20	119	\$	40.00
									\$	
									\$,
3. Contri	butor Informatio	n		Add		Rem	ove			
a. Full Nan	ne, Mailing Address &	k Phone		b. Job T				d. Comments		
	city, state, & zip)			Execut	ive As	sistant				
Angela L				ъ. т	1.37	10	.te. Tit.la			
309 Patrio				Krispy			cific Field			
Concora,	NC 28015			Кизру	KICIII			e. Election Su	ım to Date	
								\$	20.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descri	ption		j. Date (mm/dd/yy	yy)	k. Amount	
	ECK	Paypal			-		7/20/20	19	\$	20.00
									\$	
									\$	
4. Total	only this Page	e						\$		160.00
5. Total	5. Total of ALL CRO-1210 Pages						\$		1719.08	
(This line	e must be on line 6 of i	Detailed Summary Page C	RO-1100,)						

Amendment **Contributions from Individuals** \boxtimes 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 Carmen Eckard for Hickory City Council Add Remove 3. Contributor Information b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments Retired (include city, state, & zip) **Timothy Gordon** 1185 Hudson Cash Mtn Rd c. Employer's Name/Specific Field **US Army** Hudson, NC 28638 e. Election Sum to Date 20.00 \$ i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior g. Account Code h. Form of Payment 7/20/2019 \$ 20.00 **ECK** Paypal \$ П \$ Add Remove 3. Contributor Information b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) Entertainer Alicia Baldelli c. Employer's Name/Specific Field 81 Malcome Dr Clayton, NC 27520 Elevate e. Election Sum to Date 10.00 h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior g. Account Code \$ 10.00 7/20/2019 **ECK** Paypal \$ \$

Hickory,	NC 28601				e. Election	Sum to Date	
					\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yy	ууу)	k. Amoun	t
	ECK	Paypal		7/21/20	019	\$	100.00
						\$	
						\$	
4. Total	4. Total only this Page						130.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)							1719.08

b. Job Title/Profession

Stay at home mom

c. Employer's Name/Specific Field

Add

3. Contributor Information
a. Full Name, Mailing Address & Phone

(include city, state, & zip)

Megan Teeter 820 9th Ave NW Remove

d. Comments

Amendment

Yes No

Contributions from Individuals

Use this	form to report indi	ividual contributions of	ver \$50	or contril	butions und	er \$50 if form CR	O 1205 is n	ot used		
1. Comm	nittee Full Name	(and Fund if applica	ble)				2. ID Nu	2. ID Number		
Carmen l	Eckard for Hickory	y City Council								
3. Contr	ibutor Informatio	on		Add	Re	move	7			
	ne, Mailing Address	& Phone			tle/Profession		d. Commen	ts		
	city, state, & zip)			Owner						
Grace Eh				c Employ	yer's Name/Sj	recific Field				
	NC 28601			Vitality		Jeense A tela				
,							e. Election S	Sum to Date		
							\$ 50.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Descrip	otion	j. Date (mm/dd/yy	ууу)	k. Amount		
	ECK	Paypal				7/22/20	019	\$	50.00	
								\$		
								\$,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
3. Contri	ibutor Informatio	on		Add	Reı	move				
	ne, Mailing Address d	& Phone			le/Profession		d. Commen	ts		
	city, state, & zip)			Accoun	ting Clerk					
Jade Wre				e Employ	er's Name/Sp	ecific Field	-			
	Hwy 70 SE NC 28602				k Honda	Active Field	-			
THEROTY,	110 20002			11-11-11			e. Election S	Sum to Date		
							\$	20.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Descrip	otion	j. Date (mm/dd/yy	/уу)	k. Amount		
	ECK	Paypal				7/23/20	019	\$	20.00	
								\$		
								\$		
3. Contri	ibutor Informatio	n		Add	Ren	nove				
	ne, Mailing Address &	& Phone			le/Profession		d. Commen	ts		
	city, state, & zip)			Consult	ant					
	Alderman St Pl NW			c Employ	er's Name/Sp	necific Field	-			
	NC 28601					st Consulting				
,,,	1,0 -0001				•		e. Election S	Sum to Date		
							\$	100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-k	ind Descrip	otion	j. Date (mm/dd/yy	уу)	k. Amount		
	ECK	Paypal				7/21/20	019	\$	100.00	
								\$		
								\$		
4. Total	only this Pag	e					\$	VI	170.00	
5. Total	of ALL CRO	-1210 Pages					•		1719.08	
(900) 21	and be an Base of the	Datallad Commons Dans /	DA 1100	11			\$		1/17.08	

		m Individuals ividual contributions	over \$50	O or contribut	Pg ions und	<u>5</u> of er \$50 if form CR	<u>5</u> O 1205 is no	Amendmen Yes ot used	t No	
1. Comn	nittee Full Name	(and Fund if applica	ble)				2. ID Nun	nber		
Carmen 1	Eckard for Hickor	y City Council								
3. Contr	ibutor Informati	on		Add	Rei	move				
	me, Mailing Address	& Phone		b. Job Title/I	Profession		d. Commen	ts		
Carmen	city, state, & zip) Eckard			Owner						
619 2 nd S				c. Employer'		ecific Field				
Hickory, NC 28601			Foothills I	Digest		- Windian C	Samuel A. Dada			
						e. Election S				
			_					\$ 609.08		
f. Prior	g. Account Code	h. Form of Payment		Kind Description	n.	j. Date (mm/dd/yy		k. Amount		
		In Kind	Cam	paign Signs		7/23/20	019	\$	597.08	
		In Kind	Filin	ng Fee 7/16/20			019	\$	12.00	
								\$		
3. Contr	ibutor Informati	on		Add 🔲	Ren	nove				
	ne, Mailing Address	& Phone		b. Job Title/P	rofession		d. Comment	s		
(include	city, state, & zip)									
				c. Employer's	Name/Sp	ecific Field				
							e. Election S	um to Date		
							\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Lind Description	1	j. Date (mm/dd/yy	yy)	k. Amount		
								\$		
								\$		
								\$		
3. Contri	butor Informatio	on		Add 🔲	Ren	nove		A		
	ne, Mailing Address &	& Phone		b. Job Title/P	rofession		d. Comments	S		
(include	city, state, & zip)									
				c. Employer's	Name/Sp	ecific Field				
							e. Election S	um to Date		
				0			\$			
f. Prior	g. Account Code	h. Form of Payment	i, In-K	ind Description		j. Date (mm/dd/yy)	<u></u>	k. Amount		
	9					,		\$		
								\$		

4. Total only this Page

5. Total of ALL CRO-1210 Pages

\$

609.08

1719.08

\$

\$

In-Kind	Contrib	utions
III-KIIIG	Conurb	uuons

Pg <u>1</u>	of <u>1</u>	<u>l</u>	\boxtimes	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 applic	able)			2. ID	Number
Carmen Eckard for Hickory City Council					
3. Contributor Information A	.dd 🔲 I	Remove			
a. Full Name, Mailing Address & Phone		b. Type of (Contributor	c. Com	ıments
(include city, state, & zip)		Indi	ividual		
Carmen Eckard 619 2 nd St NE		Can Part			
Hickory, NC 28601			erendum	d. Elec	ction Sum to Date
Thereby, 110 2000			er Receipt Source	\$	609.08
e. Description			f. Date (mm/dd/yyy	yy)	g. Fair Market Amount
In Kind - Campaign Signs			7/23/2019		\$ 597.08
In Kind - Filing Fee			7/16/2019		\$ 12.00
					\$
3. Contributor Information	dd 🔲 F	Remove			
a. Full Name, Mailing Address & Phone		b. Type of C		c. Com	ments
(include city, state, & zip)		- -	ividual		
			didate		
		Part	-		
		PAC		. 70	
			erendum	d. Elect	tion Sum to Date
		[Othe	er Receipt Source	\$	
e. Description			f. Date (mm/dd/yyy	/y)	g. Fair Market Amount
					\$
					\$
					\$
The state of the s	dd 🔲 R	Remove			
a. Full Name, Mailing Address & Phone		b. Type of C		c. Com	ments
(include city, state, & zip)		1 =	vidual		
			didate		
		Party PAC			
			erendum	d Elect	tion Sum to Date
			er Receipt Source		don Sum to Date
			i treverpt son	\$	
e. Description			f. Date (mm/dd/yyy	/y)	g. Fair Market Amount
-					\$
					\$
					\$
4. Total only this Page				\$	609.08
5. Total of ALL CRO-1510 Pages				¢.	600 00
(This line must be on line 17 of Detailed Summary Page	e CRO-1100)			\$	609.08