Disclosure F	leport	Cover
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Am	endm	ent	
	Yes	X	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 undate information

Do not use this form to update	e information.					-		
1. Committee Information							Ta, Million	
a. Full Name								c. ID Number
MASCHE FOR COUNCIL								
b. Mailing Address (include Ci	ty, State and Zip	Code)		**** .>******** .**				d. Date Filed
3420 N CENTER ST								09/30/2019
HICKORY, NC 28601								e. Phone Number
1								***************************************
								(828) 310-8823
2. Report Year 3. Period Star	n Date (mm/dd/y)	y) 4	4. Period	End Da	te (mi	m/dd/yy)	5. Treasu	rer Full Name
2019	08/28/2019			09/23/2	2019		ERNEST V	WILLIAM MASCHE
6. Type of Committee (Check (	One)	9. Type	of Report	t (c.	heck o	only one	type of rep	ort from one category)
🛛 Candidate Campaign 🔲 Par	riy	Municip	pal		State	County		Referendum
☐ Joint Fundraiser ☐ PA	.c [i		Organizatio	nal		)rganizatio	nal	Organizational
☐ Referendum ☐ Lei	gal Expense Fund		Thirty-five	day	0	uarterly		☐ Pre-referendum
7. Type of Fund (if applicab	le, check one)	X I	Pre-primar	y		First		■ Final
☐ "Booster Fund"			Pre-election			Second	1	Supplemental Final
☐ Building Fund			Pre-runoff			Third		Annual
☐ Presidential Election Year Can	ididates Fund		emi-annua	1	同	Fourth		Special
☐ NC Public Campaign Financing			Mid Ye		— s	emi-annua		
	1		Year E		آ ما	Mid Ye		10. Special Report Name
Other:			Final	L.C.	H	Year E		AV. Special Report 1 ame
8. Number of Fundraisers this			pecial		H B		1179	
o. Number of rundraisers this	s Keport	L *	pecial					
1						pecial		
3. Account Information				3. Acc	ount l	informat	ion	
a. Financial Institution Full Na	me			a, Fina	ncial	Instituti	on Full Nan	0.6:
PEOPLES BANK								
b. Purpose	c. Account Code			b. Pur	pose			c. Account Code
CAMPAIGN FUNDS	2	1.77				************************		
	3.	17						
	d. Period Begin	Balanc	e					d. Period Begin Balance
	\$		552.70					S
CERTIFICATION	,							
I certify that the Committee	or Fund is in com	pliance	with all a	pplical	ole or	ovisions	of Article	22A, 22B & 22D-22M of
Chapter 163 of the NC Gener								
funds. I further certify that t					-	- 1		
itulius. Thurmer cermy that	I s report is con	ipiete, t	and c	girect i	TIU U	1/1/1	Deen u mi	ed by the NC State Board
LONGE N	1AGRILE	=	111	181	1/1	1/12	1. Ke	09/30/2019
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TOR OFFICE OBE ONE	Et av nu n t	10 10	= 1				D.	livery Method
Date Received:	BUELL		Employ	yee .			- 🗖	Normal Mail
Date Postmarked:			The section					Registered Mail
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Date Scanned:			Formion	176.6				Electronically Filed
		-	Emplo	yee .			-	
Date Data Entered:			Employ	yee .				Signer has not received mandatory training
Please Note: This form o	annot be used to	amend	l committe	e info	matio	n such a	s the comm	ittee address, treasurer
	nt treasurer, cust							
	d the Statement							
1 ou must amen	a me piatement	OF CLES	THYNHOU (		UU.AL-	e) to mai	te committe	e Changes.

No

 $\boxtimes$ 

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

1. Committee rull Name (and rund if applicable)		3. ID Number			
Masche for Council					
Start of Election Cycle: January 1,	2019	Total this Reporting Period	Total this Election Cycle		
4) Cash on Hand at Start		\$ 552.70	\$ 0		
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 30.00	\$ 30.00		
6) Contributions from Individuals	(CRO-1210)	\$ 461.52	\$ 1061.52		
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 Committee	(CRO-1240)	\$	\$		
11) Other Receipt Sources					
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$		
11b) Contributions from Not-for-Profit Organizat	ions <i>(CRO-1250)</i>	\$	\$		
11c) Outside Sources of Income	(CRO-1250)	\$	\$		
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$		
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$		
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 1.	lc, 11d and 11e)	\$ 491.52	\$ 1091.52		
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	\$		
13b) Contributions to Candidates/Political Commi	ttees (CRO-1310)	\$	\$		
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$		
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$ 47.30		
15) Loan Repayments	(CRO-1420)	\$	\$		
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$		
17) In-Kind Contributions	(CRO-1510)	\$ 261.52	\$ 261.52		
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	15, 16 and 17)	\$ 261.52	\$ 308.82		
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	btract line 18)	\$ 782.70	\$ 782.70		
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$			
21) Outstanding Loans (incl. ones from other campaig	ns) <i>(CRO-1430)</i>	\$			
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$	The House of the Party of the P		
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$			
24) Account Transfers Within the Committee	(CRO-1720)	\$	TITE OF THE PARTY AND ADDRESS.		
25) Administrative Support	(CRO-1710)	\$	\$		
26) Forgiven Loans	(CRO-1440)	\$	\$		
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$		
28) Contributions to be Refunded	\$	\$			

Aggreg	ated Contril	butions from I	ndividuals Page s From Individuals of \$	1 of	1	Amendme	No.
1. Committe	e Full Name (and	Fund if applicable)	2 1 2 M I I I I I I I I I I I I I I I I I I	JO OI IESS	2. ID 7	Vumber	5756 FE B
MASCHE FO	OR COUNCIL			ben effen. effenned enfloareiken mytoeken.	a	The substitute of the substitu	vereingensperennenhöpper men.
3. Contribut	or Information			1000			
s. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/de	Hereve's	f. Amount	
□ Add □ Remove	317	Cash		09/14/201	******	3	30.00
4. Total or	ly this Page						30.00
	ALL CRO-12	05 Pages			8		\$30.00
(This line m	ust be on line 5 of D	etailed Summary Page (	CRO-1100)		\$		\$30.00
CRO-1205			C State Board of Elections				April 2007

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		e (and Fund if applicab		.0110100100113	Milder 350 it form CRO	191	ID Number		
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	Name, Mailing Ad				Profession	IA.	Comments		
	ude city, state, & 2			DENTIST	J. FULLSIUM	The s	Commens		
JOHN	***************************************	and the second second		"DENTI9T					
PO BO				c. Employe	r's Name/Specific Field	1			
	BRAN, NC 28637			JOHN FISH	***************************************	"			
	2141,110 20001			JOHNTIBI	1, 005	e. 1	Election Su	m to Date	
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e we u	T + .00 1	N TO SITE .	To 10 1000 6 100	N of	0 40 4 4 40 40			100.00	
	***************************************	h. Form of Payment Check	i. In-Kind De	scription	j. Date (mm/dd/yyyy	)	k. Amoun	È.	
	317	Спеск			09/14/2019		\$	100.00	
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. Full !	Name, Mailing Add	dress & Phone		27=	Profession	d. (	Comments		
(incl	ude city, state, & 2	aip)		SALES MA	NAGER			*******************************	
FRANI	K LENOIR		######################################	OI ILLEO IVII I	TWIGDA				
	TH ST BLVD NW			c. Employer's Name/Specific Field TOM JOHNSONS CAMPING CENTER					
HICKO	ORY, NC 28601								
	•						e. Election Sum to Date		
						S		100.00	
Prior	g. Account Code	h. Form of Payment	i. In-Kind De	scription	j. Date (mm/dd/yyyy)	)	k. Amount	ıt.	
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_		Cash			03/07/2013		-	50.00	
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Full I	Name, Mailing Add	dress & Phone	1 (0)	b. Job Title	Profession	d. (	Comments		
(inch	ude city, state, & zi	ip)		SALES CON	NSULTANT		/#111079-111040-1411-1-1414-1-1	*** ***********************************	
ERNES	T WILLIAM MAS	CHE							
3420 N.	. CENTER ST.			c. Employer	's Name/Specific Field				
HICKO	RY, NC 28601			PARAMOU	JNT AUTOMOTIVE				
(828) 310-8823						e, E	lection Sur	n to Date	
						S		261.52	
Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	scription	j. Date (mm/dd/yyyy)	_	k. Amount		
	• <del>317</del> •	In-Kind	FOOD AND SU	JPPLIES .	09/14/2019	4,114.174.19	\$	161.52	
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Tot	al only this Pag	rin.				S		361.52	
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y Tot	al of ALL CRO	U-1210 Pages				0		461.50	

Con	tributions fr	om Individual	S	1	0	2 of	2	Amendme	No X
		ndividual contribution						Sis not use	A No
1. Com	mittee Full Name	(and Fund if applical	ile)		ander	Journal Cr	-	. ID Number	
	HE FOR COUNCIL		riching the management of the	*************************	diamenta (	***************************************	1000	ALS I VILLED TO	***************************************
3. Comt	ributor Informati	ion		Add D R	lemov				
	Vame, Mailing Ad			b. Job Title			1.9	C	
	ide city, state, & z				rivies	sion	d.	Comments	
	D STARNES	ap;		OWNER					
				e Frankover	- Name	-/6			
4830 1ST ST CT NW			c. Employer's Name/Specific Field WINDY CITY GRILL			ici.			
Incko	HICKORY, NC 28601					0.	e. Election Sum to Date		
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f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription.	j. D	ate (mm/dd/yy	yy)	k. Amount	
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							S		
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4. Tota	al only this Pa	ge	5150 FG/W	Talkin di	PHI	Michael Wall	S		100.00
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CRO-12				ard of Election	5				April 2007

To Tries A Chamberly and a second				Amendm	ent
In-Kind Contributions	- 1	of		☐ Yes	K No
Use this form to report non-monetary contributions			to the con	nmittee or f	und.
Use CRO-1215 if In-Kind Contributions were or		in 7 days.	10 m		
1. Committee Full Name (and Fund if applicable	le)	in	2. ID	Vumber	
MASCHE FOR COUNCIL					
3. Contributor Information	☐ Add ☐ Re				
a. Full Name, Mailing Address & Phone	b. Type of Co		- C	ments	
(include city, state, & zip)	X Individual	GLIOUIOF.	e, con	1006012	
	Candidate				
ERNEST WILLIAM MASCHE 3420 N. CENTER ST.	☐ Party				
HICKORY, NC 28601	□ PAC				
(828) 310-8823	☐ Referendur	ກ	d. Election Sum to Date:		
(020) 310 0023	Other Rece	eipt Source	\$7************************************		
			\$		261.52
e. Description	(	f. Date (mm)	dd/yyyy)	g. Fair M:	irket Amount
FOOD AND SUPPLIES FOR FUNDRAISER		09/14/2	2019	\$	161.52
				s	
				S	
3. Contributor Information	□ Add □ Re	move			
a. Full Name, Mailing Address & Phone	b. Type of Cor		e. Com	ments	
(include city, state, & zip)	X Individual			******************************	***************************************
ARNOLD STARNES	☐ Candidate				
4830 1ST ST CT NW	☐ Party				
HICKORY, NC 28601	☐ PAC				
,	☐ Referendun		d. Election Sum to Da		Date
	Other Rece	ript Source	s		100.00
e. Description		f. Date (mm/	dd/yyyy)	g. Fair Ma	rket Amount
FOOD DONATED FOR FUND RAISER		09/14/2	019	\$	100.00
				s	
				3	
				\$	
4. Total only this Page			S		261.52
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary)	Page CRO-1100)		\$		261.52

CRO-1510 NC State Board of Elections December 2007