Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.

Do not use this form to update information.

1. Committee Information
   a. Full Name
      Citizens to Elect Deb Hardin County Commissioner
   c. ID Number
      CCB12F4
   b. Mailing Address (include City, State and Zip Code)
      518 Lee Drive
      Shelby, NC 28152
   d. Date Filed
      01/01/19
   e. Phone Number
      704-460-9030

2. Report Year
   2018

3. Period Start Date (mm/dd/yy)
   10/21/18

4. Period End Date (mm/dd/yy)
   11/27/18

5. Treasurer Full Name
   Elizabeth Frances Bumgardner

6. Type of Committee (Check One)
   □ Candidate Campaign
   □ PAC
   □ Independent Expenditure
   □ Legal Expense Fund
   □ Other:

7. Type of Fund (If applicable, check box)
   □ "Booster Fund"
   □ Building Fund
   □ Other:

8. Number of Fundraisers this Report
   0

9. Type of Report (check only one type of report from one category)
   □ Municipal
   □ Organizational
   □ Thirty-five day
   □ Pre-primary
   □ Pre-election
   □ Pre-runoff
   □ Semi-annual
   □ Mid Year
   □ Mid Year
   □ Final
   □ Special

10. Special Report Name

11. Account Information
   a. Financial Institution Full Name
      Fifth Third Bank
   b. Purpose
      To fund the campaign for
      Deb Hardin
      for county commissioner
   c. Account Code
      A1254
   d. Period Begin Balance
      $ 409.98
   e. Account Code

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 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.

Elizabeth Bumgardner
Printed Name of Signer
11/27/18
Signature of Authorized Treasurer
Date

FOR OFFICE USE ONLY

Date Received: 11-27-18
Employees: [Signature]
Delivery Method
□ Normal Mail
□ Registered Mail
□ Hand Delivered
□ Electronically Filed
□ Signer has not received mandatory training

Date Postmarked: [Signature]
Employees: [Signature]
Date Scanned: [Signature]
Employees: [Signature]
Date Data Entered: [Signature]
Employees: [Signature]

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
<table>
<thead>
<tr>
<th>Description</th>
<th>Reporting Period</th>
<th>Election Cycle</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Start of Election Cycle:</strong> Jan 1, 2018</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>4) Cash on Hand at Start</strong></td>
<td>$409.88</td>
<td>$2000.00</td>
</tr>
<tr>
<td><strong>5) Aggregated Contributions from Individuals</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>6) Contributions from Individuals</strong></td>
<td>$</td>
<td>$4000.00</td>
</tr>
<tr>
<td><strong>7) Contributions from Political Party Committees</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>8) Contributions from Other Political Committees</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>9) Loan Proceeds</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>10) Refunds/Reimbursements To the Committee</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>11) Other Receipt Sources</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>11a) Interest on Bank Accounts</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>11b) Contributions from Non-profit Organizations</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>11c) Outside Sources of Income</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>11d) Legal Expense Fund – Other Sources</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>11e) Exempt Purchase Price Sales</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>12) TOTAL RECEIPTS</strong> (Add lines 5, 6, 7, 8, 9, 11a, 11b, 11c, 11d and 11e)</td>
<td>$</td>
<td>$4000.00</td>
</tr>
<tr>
<td><strong>13) Disbursements</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>13a) Operating Expenditures</strong></td>
<td>$409.88</td>
<td>$4000.00</td>
</tr>
<tr>
<td><strong>13b) Contributions to Candidates/Political Committees</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>13c) Coordinated Party Expenditures</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>14) Aggregated Non-Media Expenditures</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>15) Loan Repayments</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>16) Refunds/Reimbursements From the Committee</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>17) In-Kind Contributions</strong></td>
<td>$260.70</td>
<td></td>
</tr>
<tr>
<td><strong>18) TOTAL EXPENDITURES</strong> (Add lines 13a, 13b, 14, 15, 16 and 17)</td>
<td>$409.88</td>
<td>$4000.00</td>
</tr>
<tr>
<td><strong>19) Cash on Hand at End</strong></td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

**Amendment:** No

CRO-1100

NC State Board of Elections

August 2008
### Disbursements

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

1. **Committee Full Name and Fund** (if applicable): Citizens to Elect Deb Hardin County Commissioner

2. **ID Number**: CCBIP4

3. **Type of Disbursement** (Please see separate CRO-1310 forms for each type of Disbursement):
   - [X] Operating Expenses
   - [ ] Contributions to Candidate/Political Committee
   - [ ] Coordinated Party Expenditures

4. **Payee Information**
   - **Full Name, Mailing Address & Phone** (include city, state, & zip):
     - Fifth Third Bank
     - 114 East Gold Street
     - Kings Mountain, NC 28086

   - **Coordinated Committee Name**
   - **Comments**:
   - **Level Registered (Specify)**
     - Federal
     - County
     - State
     - Municipality
   - **Date (mm/dd/yyyy)**: 11/13/18
   - **Amount**: $11.00
   - **Required Remarks**: Campaign bank account fees

   - **Account Code**: A1254
   - **Form of Payment**: Bank draft
   - **Amount**: $110.99

   - **Payee Information**
     - **Full Name, Mailing Address & Phone** (include city, state, & zip):
       - Community First Media
       - 700 E. Gold St.
       - Kings Mountain, NC 28086

     - **Coordinated Committee Name**
     - **Comments**
     - **Level Registered (Specify)**
       - Federal
       - County
       - State
       - Municipality
     - **Date (mm/dd/yyyy)**: 10/29/18
     - **Amount**: $378.00
     - **Required Remarks**: 6x6 Color Political Ad in KM Herald

     - **Account Code**: A1254
     - **Form of Payment**: Check
     - **Amount**: $378.00

   - **Payee Information**
     - **Full Name, Mailing Address & Phone** (include city, state, & zip):
       - Clifford's Army
       - Rescue Extravaganza

     - **Coordinated Committee Name**
     - **Comments**
     - **Level Registered (Specify)**
       - Federal
       - County
       - State
       - Municipality
     - **Date (mm/dd/yyyy)**: 11/27/18
     - **Amount**: $20.88
     - **Required Remarks**: Balance to Non-Profit

     - **Account Code**: A1254
     - **Form of Payment**: Check
     - **Amount**: $20.88

5. **Total only this page**
   - **Total of ALL CRO-1310 Pages** (This line goes in line 11a of Detailed Summary Page C O-1100 if Operating Expenses)
   - **Total of ALL CRO-1310 Pages** (This line goes in line 11b of Detailed Summary Page C O-1100 if Contrib to Candidate/Political Committee)
   - **Total of ALL CRO-1310 Pages** (This line goes in line 11c of Detailed Summary Page C O-1100 if Coordinated Party Expenditures)
   - **Total of ALL CRO-1310 Pages**

6. **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

   *Codes require detailed explanation in required remarks field (h)*

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**CRO-1310**

NC State Board of Elections

December 2009
Certification to Close Committee

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

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

FILED BY:

Committee Name: Citizens to Elect Deb Hardin County Commissioner
Treasurer Name: Elizabeth Frances Bumgardner
Treasurer Address: 142 Countryside Rd
Kings Mtn, NC 28086

Treasurer Phone: 704-974-7859

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

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

11/22/18
Date Signed

[Signature]