Disclosure Report Cover

Amendment

Yes 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 In	format	ion							
a. Full Name	7 1 5 1								c. ID Number
CAMPAIGN T	O ELE	CT B	ETSY S. HARN	AGE					-LCBR90
b. Mailing Addre	ess (incl	ude C	ity, State and Zij	Code)					d. Date Filed
1501 LACKEY SHELBY, NC									07/03/2020
STILLED 1, INC	20132								e. Phone Number
2. Report Year	3. Peri	od Sta	art Date (mm/dd/	yy)	4. Period	End Date	(mm/dd/yy)	5. Treasur	er Full Name
2020			02/16/2020			06/30/202	20	DONNA I	MABRY
6. Type of Comn	nittee (Check	One)	9. Typ	e of Repor	t (chec	ck only one	type of rep	ort from one category)
X Candidate Can	npaign	□ P	arty	Munic			tate/County		Referendum
■ Joint Fundraise	er	□ P	AC		Organizatio	nal	Organizati	onal	☐ Organizational
Referendum		\Box L	egal Expense Fund		Thirty-five	day	Quarterly		Pre-referendum
7. Type of Fund	(if a	-	ble, check one)		Pre-primar		1 First		Final
"Booster Fund				10	Pre-election	· -	Second	1	Supplemental Final
☐ Building Fund				lä	Pre-runoff		Third		Annual
Presidential El	lection Y	Zear Ca	andidates Fund	-	Semi-annua	, =	Fourth		Special
■ NC Public Can					Mid Ye	_ _	Semi-annu		Special
I we rubble can	npaign i	manch	ing i und	믿	Year E		3 MC 137		10.0 110 17
Other:							_		10. Special Report Name
					Final			end	
8. Number of Fu	indrais	ers th	is Report		Special				l i
	0)					Special		
3. Account Infor							nt Informat		
a. Financial Insti						a. Financ	ial Instituti	on Full Nam	e
SHELBY SAVI	INGS B	BANK							
b. Purpose			c. Account Cod	e		b. Purpos	e		c. Account Code
CAMPAIGN				01					
			d. Period Begin		20		1	0 2020	d. Period Begin Balance
			d. Feriou Begin	Dalan	ce		JUL	0 2020	d. Period Begin Balance
			\$						\$
CERTIFICATIO								7-11-1	
I certify that the	he Com	mittee	or Fund is in co	mplianc	e with all a	applicable	provisions	of Article 2	2A, 22B & 22D-22M of
Chapter 163 of	f the N	C Gene	eral Statutes and	that no	funds are	comming	led with pro	hibited or o	ther non-disclosed
funds. I furthe	er certif	y that	this report is co	mplete,	true and c	orrect and	that I have	been traine	ed by the NC State Board
	0.4	_	1	1			1		a sy the five state Board
Donna	///	alove	Α	(XI	1111/	TIM 1600	10	07/09/2020
Pr	rinted Na	ime of	Signer		Sign	ature of Ap	pointed Trea	asurer	Date
FOR OFFICE US	SEONI	V		Proposition of the second		-	7		
OR OTTICE O	JE OIVI	-	710.7	7.		10	\cap	D-1	Second Marks 1
Date Receive	ed:	-	1-10.60	_	Emplo	yee:	1/	- 0	ivery Method Normal Mail
Date Postma	rked:				Emplo	yee:	+	W.L	Registered Mail Hand Delivered
-								A	Electronically Filed
Date Scanne	d:	-		_	Emplo	yee:			Electronically 1 lied
Date Data En	itered:	-		_	Emplo	yee:			Signer has not received mandatory training
	8	assista	cannot be used t ant treasurer, cus nd the Statement	todian	of books i	nformation	n, or accoun	nt informatio	

Amendment ☐ Yes X 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 Re		3.1	D Nun	
CAMPAIGN TO ELECT BETSY S. HARNAGE	Quarter		-LCBR90		
Start of Election Cycle: January 1,2017		tal this	Total this Election Cycle		
4) Cash on Hand at Start	\$	2,412.35	\$	1,563.60	
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	0.00	\$	170.00
6) Contributions from Individuals	(CRO-1210)	\$	0.00	\$	1,250.00
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	\$	1,000.00
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	c,11d and 11e)	\$	0.00	\$	2,420.00
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	175.00	\$	1,318.00
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	0.00	\$	70.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$	0.00	\$	0.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	10.00	\$	368.25
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)	\$	0.00	\$	0.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 13	5, 16 and 17)	\$	185.00	\$	1,756.25
(9) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18)	\$	2,227.35	\$	2,227.35
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00		
1) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	2,000.00		
2) Debts and Obligations owed by the Committee	(CRO-1610)	\$	0.00		
3) Debts and Obligations owed to the Committee	(CRO-1620)	\$	0.00		
4) 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
(8) Contributions to be Refunded	(CRO-1215)	\$	0.00	\$	0.00

			Amendment
Disbursements	Pg <u>1</u> 0	f <u>1</u>	☐ Yes □

1. Committee Full Name (and Fund if applicable)

X No Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

	i Name (and ru	nd if applicable)					Number	
AMPAIGN TO	ELECT BETS	Y S. HARNAGE				I -L	CBR90	
Type of Disbur	sement (Plea	se use separate CR	0-1310 forms	for eac	h type of Disbu	rsement.)		
Operating Exper		ontributions to Candida				THE RESIDENCE AND ADDRESS OF THE PARTY OF TH	y Expenditures	
Payee Informat	tion		☐ Add		Remove			
Full Name, Mail		Phone	THE RESERVE AND ADDRESS OF THE PARTY OF THE	ordinate	d Committee N	ame d. Co	mments	
nclude city, state								
LEVELAND C								
O BOX	001111 001		c. Lev	el Regis	tered (Specify)	.1111	1 0 2020	
HELBY, NC 28	8151		☐ Fe	ederal	X County	:	. 10 2020	
1,1.0 2			☐ St	ate	☐ Municip	pality: e. Ele	ction Sum to Date	
			Cleve	eland		•		
			I			, p	640.00	
		nt h. Purpose Code				k. Required	l Remarks	
01	Check	О	05/31/20	020	\$ 100.00	DUES		
					\$			
Payee Informat	ion		☐ Add		Remove			
Full Name, Mail		Phone	The Part of the Pa	b. Coordinated Committee Name d. Comment				
iclude city, state		Thone	3.00		o committee it	une uneo	mments	
CGOP	,р)							
ILLSBOROUG	HSTREET		c. Lev	el Regis	tered (Specify)	2		
ALEIGH, NC 2			- The second	ederal	County	:		
1221011,110	27001		X Sta	ate	☐ Municip	pality: e. Ee	ction Sum to Date	
							75.04	
						\$	75.00	
						1 D :		
Account Code g	. Form of Payme	nt h. Purpose Code	i. Date (mm/c	id/yyyy)	j. Amount	k. Required	Remarks	
Account Code g.	. Form of Payme Check	nt h. Purpose Code	06/15/20		j. Amount \$ 75.00		VENTION	
					\$ 75.00			
01	Check					2020 CON	VENTION	
Total only this	Check Page	0			\$ 75.00			
Total only this	Check Page	0			\$ 75.00	2020 CON	VENTION	
Total only this l	Check Page RO-1310 Pages	0	06/15/20	020	\$ 75.00	2020 CON \$	VENTION 175.00	
Total only this Total of ALL C	Check Page RO-1310 Page: line 13a of Details	0	06/15/20 0-1100 if Operati	020	\$ 75.00 \$	2020 CON \$	VENTION 175.00	
Total only this Total of ALL C (This line goes in the Company of	Check Page RO-1310 Pages line 13a of Details line 13b of Details	S ed Summary Page CRO	06/15/20 0-1100 if Operato 0-1100 if Contrib	020 ting Expension to Cand	\$ 75.00 \$ nses)	2020 CON \$	VENTION 175.00	
Total only this I Total of ALL C (This line goes in i (This line goes in i (This line goes in i	Check Page RO-1310 Pages line 13a of Details line 13b of Details line 13c of Details	S ed Summary Page CRO ed Summary Page CRO ed Summary Page CRO	06/15/20 0-1100 if Operati 0-1100 if Contrib	020 ting Expe to Cand nated Pa	\$ 75.00 \$ nses)	2020 CON \$	VENTION 175.00	
Total only this Total of ALL Control	Check Page RO-1310 Pages line 13a of Details line 13b of Details line 13c of Details	S ed Summary Page CRO ed Summary Page CRO ed Summary Page CRO ed Summary Page CRO ed expenditure code	06/15/20 0-1100 if Operato 0-1100 if Contrib 0-1100 if Coordid	020 ting Expension to Candinated Pair	\$ 75.00 \$ nses) lidates/Political Crty Expenditures)	2020 CON \$	175.00 175.00	
Total only this I Total of ALL C (This line goes in i (This line goes in i (This line goes in i	Check Page RO-1310 Pages line 13a of Details line 13b of Details line 13c of Details line 13c of Details List detail B* - Prin	s ed Summary Page CRO ed Summary Page CRO ed Summary Page CRO ed Summary Page CRO led expenditure code	06/15/20 0-1100 if Operati 0-1100 if Contrib	ing Expension to Candinated Parising	\$ 75.00 \$ nses) lidates/Political Crty Expenditures) D - To	2020 CON \$ Somm) \$	175.00 175.00 ndidate	
Total only this Total of ALL C (This line goes in I A - Media - Salaries	Check Page RO-1310 Pages line 13a of Details line 13b of Details line 13c of Details line 13c of Details	s ed Summary Page CRO ed Summary Page CRO ed Summary Page CRO ed expenditure code atting pment	0-1100 if Operation of Contribution of Contrib	one of the control of	\$ 75.00 \$ nses) idates/Political Crty Expenditures) D - To H* - H	2020 CON \$ Somm) Another Ca olding Publi	175.00 175.00 ndidate	
Total only this Total of ALL C (This line goes in a (This line	Check Page RO-1310 Pages line 13a of Details line 13b of Details line 13c of Details les (List detail B* - Prin F* - Equi	s ed Summary Page CRO ed Summary Page CRO ed Summary Page CRO ed expenditure code atting pment	0-1100 if Operation of Contribution (h.) above) C* - Fundrai	one of the control of	\$ 75.00 \$ nses) idates/Political Crty Expenditures) D - To H* - H	2020 CON \$ Somm) Another Ca olding Publi	175.00 175.00	

Aggregated	l Non-Media	Expenditures
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Page 1 of 1 Yes No

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

		d Fund if applicable)				2. ID	Number		
CAMPAIG	N TO ELECT B	ETSY S. HARNAG	E					-LCBR90	
. Payee Inf	formation								
. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd	Ууууу)	f. Am	ount	g. Required Re	marks
Add Remove	01	Check	0	03/18/202	20	\$	10.00	CONVENTIO	N
. Total o	nly this Page					\$			10.00
	f ALL CRO-1 nust be on line 14 o	315 Pages f Detailed Summary Pa	age CRO-1100)			\$	JUL	1 0 2020	10.00
. Purpos	e Codes (List	detailed expenditu	re code in (d) a	bove)					
	B*	- Printing	C* - Fundr	aising	D - '	Γο Αι	nother Ca	indidate	
E - Salar	ries F*	- Equipment	G - Political	Party	H* -	Hol	ding Pub	olic Office Exp	enses
I - Posta	ge J-	Penalties	K* - Office	Expenses	Q* -	Don	ations to	Legal Exper	ise Fun
1 - I Usta	her								

CRO-1315

NC State Board of Elections

December 2009

Outstanding Loans

				Am	en dm e	ent		
Pg	1	of	1		Yes	X	No	

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

a. Full Name, Mailing Address & Phone b. J		-LCBR90		
a. Full Name, Mailing Address & Phone b. J				
(include city, state, & zip)	ob Title/Profession	d. Comments		
BETSY S HARNAGE	EGISTER OF DEEDS			
1501 LACKEY ST		e. Start Date (mm/dd/yyyy)		
SHELBY, NC 28152	imployer's Name/Specific Field	12/15/2015		
	LEVELAND COUNTY			
JUL 10 2020		f. End Date (mm/dd/yyyy)		
OUL 10		12/31/2020		
g. Rate h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance		
0.00%	\$ 700.00	\$ 700.00		
k. Full Name of Lending Institution		I. Loan Number		
3. Lender Information	d Remove			
a. Full Name, Mailing Address & Phone b. J	ob Title/Profession	d. Comments		
	EGISTER OF DEEDS			
BETSY S HARNAGE 1501 LACKEY ST		e. Start Date (mm/dd/yyyy)		
	imployer's Name/Specific Field	01/03/2016		
SHEED1, NC 20132	EVELAND COUNTY	01/03/2010		
		f. End Date (mm/dd/yyyy)		
		12/31/2020		
g. Rate h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance		
%	\$ 300.00	\$ 300.00		
k. Full Name of Lending Institution		1. Loan Number		
3. Lender Information	d Remove			
a. Full Name, Mailing Address & Phone b. J	ob Title/Profession	d. Comments		
	EGISTER OF DEEDS			
BETSY S HARNAGE 1501 LACKEY ST		e. Start Date (mm/dd/yyyy)		
SHELBY, NC 28152	mployer's Name/Specific Field	11/03/2019		
	EVELAND COUNTY			
		f. End Date (mm/dd/yyyy)		
		12/31/2023		
g. Rate h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance		
%	\$ 1,000.00	\$ 1,000.00		
k. Full Name of Lending Institution		l. Loan Number		
4. Total only this Page		\$ 2,000.00		
5. Total of ALL CRO-1430 Pages (This line must be on line 21 of Detailed Summary Page CRO-11	00)	\$ 2,000.00		