					ME	G F	EDVE			
Disclosure Use this form for	or general r	report	and committ	tee ir	aformation,	must be	signed and s	abnitted alo	ng w	Amendment Yes Amendment ith other detailed forms.
Do not use this to the last th			aformation,		1 734					
a. Full Name <i>Coll</i>	MOTHIAGE	<u>m</u>	F. F. I.	<u>_</u>	1 RA		1100		اا ۔ ا	D Number
5/12/5 b. Mailing Address							berra			
b. Mailing Address	s (include Cr	ity, Stat	ie and Zip Cod	le)		<u>7 </u>			d. D	oste Filed
223 m									e, Pi	hone Number
Shelby	, NC	28	152						70	4-418-4546
2. Report Year	-			d/yy)	4. Period	End De	te (mm/dd/yy)	5. Treasure		
2018	19/15	7/17			12/31	/17		Hazel 1	w.	Thrift
6. Type of Com				_		юrt (c		type of repo	_	om one ćategory)
Candidate Cam PAC Independent Ex Legal Expense	xpenditure	=	erendum		nicipal Organizationa Thirty-five da Pre-primary		State/County Organizati Quarterly First	,	日	erendum Organizational Pre-referendum Final
				Ĭロ	Pre-election		Seco			Supplemental Final
7. Type of Fund	1 (if appl	licable,	check one)				Third	_		Annual
Booster Fund					Semi-annual		Fourt			Special
Building Fund				川	Mid Yea Year End		l		10	Special Report Name
Other:				片	Year End Final	,	Mid Year		Tire.	Special Report
8. Number of F	undraiser	s this	Report	-1=			Final	Later		
NONE		<u>, </u>		1			Special	1	ĺ	
11. Account Info	ormation					11. <u>Ac</u>	count Inform	nation		· · · · · · · · · · · · · · · · · · ·
a. Financial Institut							ncial Institution			
Alliance	Ban	Ka		<u></u>	4				_	
b. Ригроse			c. Account Co	ode		b. Purpo	ose		c. Ac	count Code
	_	1	BB	<u></u>					_	· <u></u> -
campaig.	N	,	d. Period Beg	in Ba	lance	}		1	d. Pe	eriod Begin Balance
, ,		!	\$ 100	,00	o !	ĺ			\$	
CERTIFICATION	ON		<u></u>	<u>'</u>		<u></u>				
Lecrtify that the	Committee	and tha	at no funds are	e com	mingled with	ı prohibit	ited or other nor	n-disclosed fu		22D-22M of Chapter 163 I further certify that this
Haze	rinted Name	The of Sign	ĭ / T		HOZU	L_//	U. Shri Appointed Treat	Ar turer	. ;	//////////////////////////////////////
FOR OFFICE U	JSE ONL			_				<u> </u>		
Date Receive	ed:	1-	16-18		Employ	jes: (ins.	→ 🗔	Norn	/ <u>Method</u> mal Mail istared Mail
Date Postma	rked:			_	Employ	/ee:	 	- 対 :	Hano	istered Mail d Delivered
Date Scanned	d:			_	Employ	/ee:		_ /凵	Elect	tronically Filed
Date Data En	ntered:				Employ	Jee:			Sign	er has not received

CRO-1000

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.

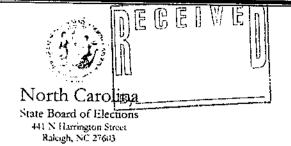


Amendment ☐ Yes

⅓ №

1. Committee Full Name (and Fund if applicable)	2. Type of		3. ID Number
Committee To Elect Clyde Liebetter	2017 YE Semilaha	i I	
Sheeift of Claveland County By Start of Election Cycle: January 1,		Total this	Total this
	-	Reporting Period	Election Cycle \$
4) Cash on Hand at Start		\$ 100.00	3
RECEIPTS	1200 1305)	· ·	\$
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 500,00	
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$ 2,000.00	\$
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 Organizations	(CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5. 6, 7. 8, 9,10,11a,11b,11c.	lld and tle)	\$ 2,500.00	\$
EXPENDITURES			
13) Disbursements		**************************************	
13a) Operating Expenditures	(CRO-1310)	\$ 780.75	\$
13b) Contributions to Candidates/Political Committees	(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)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15			\$
19) Cash on Hand at End (Add lines 4 and 12 together, then sub			\$
ADDITIONAL INFORMATION			The second secon
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$	MACHINE STATE
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)	\$	\$
	(CRO-2220)	\$	\$
27) 40 12 02 1 (03 12 12 12 12 12 12 12 12 12 12 12 12 12	(CRO-1215)	\$	\$

la l	TE B	EIV	EM					
Loan Proceeds	(B	EE 14		,	1	Amendment	 4	
Use this form to report proceeds from a loan and loan	andore	are informat	Pell	01	f <u>(</u>	☐ Yes	⊠ No	
A loan proceeds statement must accompany each [4]	h that is	er s imormai from an indi	ividual					
1. Committee Full Name (and Fund if applicable)	H time	<u>ΠΟΙΙΙ 4Η ΙΝ</u>			1 2. i	D Number		
Committee to Elect Clyd	e Les	Shetter	She	1. ft.	ef.	7	-,	
3. Lender Information		Add 🔲	Remove	?	<u> </u>	~~		
a. Full Name, Mailing Address & Phone		b. Job Title/F	Profession		d. C	omments		
(include city, state, & zip)		Reti	—— . <u> </u>		f \-	<u>-</u>		
Jerry D. Led better						art Date (mm/d	ld/yyyy)	
Jerry D Ledbetter 2902 Dravo Rd.		c. Employer's	s Name/Sp	ecific Fie	[
Shelby NC 28152					<u>f. En</u>	d Date (mm/dd	/уууу) 	
. Rate h. Security Pledged	i. Accour	nt Code	j. Form of	Paymen		k. Amount		
kx %	†							
<u> </u>			Cash.	200	heck	\$2000	.00	
Full Name of Lending Institution					m. L	oan Number		
. Endorsers/Makers (The people who guarantee the loan	n.)				<u> </u>			
. Full Name, Mailing Address & Phone		b. Job Title/P	rofession		c. Employ	er's Name/Spec	cific Field	
(include city, state, & zip)	i				' '			
	}						i	
	ŀ	d. Percentage			e. Amount			
	F	o. I ci ci i i i i i i i i i i i i i i i i			_			
	ł			%	\$			
Full Name, Mailing Address & Phone		b. Job Title/Pr	ofession		c. Employ	er's Name/Spec	ific Field	
(include city, state, & zip)					. , , , , , , , , , , , , , , , , , , ,			
	Į							
	[
	ļ.	d. Percentage			e. Amount			
	Ī			%	\$			
E-UN								
Full Name, Mailing Address & Phone (include city, state, & zip)	I	o. Job Title/Pr	ofession		c. Employe	er's Name/Spec	ific Field	
(merode city, state, w zip)								
	-							
	ļ	l. Percentage			e. Amount			
				%	\$			
Full Name, Mailing Address & Phone		. Job Title/Pr	ofession		c. Employe	r's Name/Speci	ific Field	
(include city, state, & zip)	-							
	-			ŀ				
	A	. Percentage			e. Amount			
	۴			t·				
				%	\$			
Total of ALL CRO-1410 Pages This line must be on line 9 of Detailed Summary Page CRO-14	(AA)				\$ _	2000.00		



Kim Westbrook Strach Executive Director

Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

<u></u>		
Name of committee to rece	ive loan: <u>Sheriff</u> o	E Les Elect Clyd Ledbette & Cleveland County D. Ledbetter
Person or committee to ma	ike loan: <u>Jerry 4</u>	. Ledhetter
Date of loan to committee:	9/18/17	
 Name of lending institution 	•	source):
• Amount of loan: \$2,0	00,00	
Description (if in-kind loan		
Names of all parties response.	sible for payment of lo	an (guarantors):
Period of loan:		
Rate of interest of loan:	<u> </u>	
Security pledged for loan:		
(Person lending money to committee)	JERRY D A	EDBETER edge that all of the information
provided is complete, true, and that has an outstanding balance		rstand I may not forgive a loan
Lean De Albert	o any source.	9/18/17
Signature of Lender	Y 	Date Signed
Signature of Treasurer of Com		9/18/17 Date Signed
Signature of Treasurer of Com	mittee	Date Signed
CRO-6100	Loan Proceeds Statement	July 2014

Use th	is form to report	from Individus	ons over \$50 or	[n] Ps		RΩ			
_		me (and Fund if ap	•-	D		2. ID Number			
Committee To Elect Clyde Leibetter Then The action C						1			
3. Con	tributor Inforn								
	Name, Mailing Add			b. Job Title/Profession			d. Comments		
	de city, state, & zip			Sales					
Leila Church				c. Employer's Na	me/Specific Field				
13.	06 Mt. S	Sinai Ch. F	(d	A			- F1		
Sh	elby NC	28152	00	AVON		\$ 500,00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descri	ption	j. Date (mm/dd/yy	yy)	k. Amount		
							\$		
							\$		
				·			\$		
3. Cont	ributor Inform	ation		Add Rer	nove				
	ame, Mailing Addr			b. Job Title/Profession		d. Comments			
(includ	le city, state, & zip)	<u></u>		ł					
c. Employer's Name/Specific				ne/Specific Field	i				
							ection Sum to Date		
						\$			
. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	y)	k. Amount		
							\$		
							\$		
							\$		
3. Cont	ributor Inform	etion		Add 🗀 Ren	nove		· · · · · · · · · · · · · · · · · · ·		
	ame, Mailing Addre	ess & Phone		b. Job Title/Profes	sion	d. Comments			
(inciua	e city, state, & zip)								
				c. Employer's Nam	e/Specific Field				
				•		e. Ek	ection Sum to Date		
				•		\$			
. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	y)	k. Amount		
							\$		
					•		\$		
				· · · · · · · · · · · · · · · · · · ·			\$		
	ıl only this Pa					\$ 500,00			
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summers Page (P.O. 1100)							\$		

) E C	BEIV			. <u>A</u>	mendment
Disburseme	ents				Pg II	of		Yes No
Use this form to r	eport expenditures	from the committee	te for op	erating expe	nses, cor	ntrabutio	ns to can	шатегрописа
committees and c	oordinated party en Il Name (and Fun	<u> (penditures </u>						Number
				<u> </u>	01.	15.31	<u> </u>	
omn + Hae	To Gleet C	lyde Led be	Her -	her.ff.9	CHU	of Diehu	reament	1
3. Type of Disbu		use separate CRI	<i>J=1310</i> av/Politic:	<i>Jorms for ea</i> J. Committees	ch type	Coord	inated Part	y Expenditures
Operating Expents 4. Payee Inform		ntributions to Candidae	_		Remove			
a. Payee inform	iling Address & Pl	none		b. Coordinate	l Committ	ee Name	d. Cor	nments
industriated a	e sin)							
Cleveland	d County la + marion	FIRE.	ļ	c. Level Regist		cify) County:		
1751 Eas	+ Marion	Jacet	1	State			ty: e. Elec	ction Sum to Date
Shelbyi	NC 28152	-4040					\$	
704.48	7.0651		i Data (-	nm/dd/yyyy)	i. Amount	- 11	k. Require	d Remarks
f. Account Code	g. Form of Payment	h. Purpose Code		12017				
	Check	- 	29/19	12011.	\$ \$			
		<u></u>		Add 1 3	s Remove			
4. Payee Inform	ation	<u> </u>		b. Coordinate		tee Name	d. Co	mments
a. Full Name, Maili (include city, stat	ng Address & Phone						1	
(include city, state	En Boassicols							
Screen +	mpressions ristopher	Rd.		c. Level Regis		cify) County:		
251 011	NC 2815.	?		State	=	Municipal	ity: e. Ele	ction Sum to Date
				<u> </u>			\$	
704-42	34.1891		<u> </u>		- A	. 	k Remire	d Remarks
f. Account Code	g. Form of Payment	h. Purpose Code			j. Amount		ID Itoq	
	check	<u> </u>	09/26	12017	* / 10.	13		
					\$			<u></u>
4. Payee Inforn	nation			Add 🔲	Remove		12.00	
a. Fuil Name, Mail	ing Address & Phone			b. Coordinate	d Commit	tee Name	a. Co	nunents
(include city, stat	te, & zip)			1				
				c. Level Regi				
				Federal		County:	in a Fi	ection Sum to Date
				State	<u> </u>	Municipa	-	CONTRACTOR DATE
				}			\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i, Date (mm/dd/yyyy)	j. Amoun	t	k. Requir	ed Remarks
<u>2.5. 2.5.</u> –					s			
<u> </u>					\$		<u> </u>	
5. Total only th	is Page		1				\$	780.75
	CRO-1310 Page	<u> </u>				- , - -		-
	D 12 - of Detailed	ummara Page CRO-LI	t00 if Ope	erating Expens	es)		\$	780.75
mer to the common for	. time 12h of Detailed S	ummary Page CRO-Li	100 ij Cor	urib to Canaia	MENL bind	cal Comm	,	10011
(This line goes in	line 13c of Detailed S	ummary Page CRO-11	100 y Coo	rainalea Furiy	Expenditi	ures)		
	odes (List detail	ed expenditure cod	e in (h.)	above) undraising		D - To	Another	Candidate
A* - Media	B* - Prir F* - Equ		_	undraising litical Party		H* - H	olding P	ublic Office Expenses
E - Salaries I - Postage	J - Pena			Office Exper		Q* - D	onation (to Legal Expense Fun
O* Other								
* Codes requi	re detailed explan	ation in required	remark	s field (k) ard of Elections		-		December 20
CRO-1310		NC	State Bo	TIG OF ELECTRONS	,			