Disalaguna Danant Cayan		nt
Disclosure Report Cover	☐ Yes	□ No
Use this form for general report and committee information, must be signed and submitted along w	ith other d	etailed forms.
Do not use this form to update information		

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1. Committee Information						
a. Full Name			<u> </u>			c. ID Number
Citizens to Elect Deb	Hardin County	y Commiss	ioner			
b. Mailing Address (include City, Stat	te and Zip Code)					d. Date Filed
518 Lee Drive						07/11/2022
Shelby NC 28152						e. Phone Number
,						7044609030
2. Report Year 3. Period Start	Doto (mm/dd/m)	1 Dorind	Cad Doto (a	743£25 7	Trongure	r Full Name
	172022			m/aa/yy)		
			0/2022			Hardin
6. Type of Committee (Check C					type of repo	ort from one category)
☐ Candidate Campaign ☐ Part☐ PAC ☐ Refe	ty Mu Terendum	unicipal Organizationa		te/County	^1	Referendum
	nt Fundraiser	Thirty-five da		Organization Quarterly	mai	Organizational Pre-referendum
Legal Expense Fund	Trunuraisci	Pre-primary	, —	Quarterly First		Final
Legal Expense I und		Pre-election		Secon	d	Supplemental Final
7. Type of Fund (if applicable,	check one)	Pre-runoff		Third	u	Annual
Booster Fund	AND THE PROPERTY OF THE PARTY O	Semi-annual	i	Fourth	1	Special
Building Fund		Mid Yea	ır —	Semi-annua		- openia
_		Year End		Mid Y		10. Special Report Name
Other:		Final		Year I	∃nd	
8. Number of Fundraisers this	Report	Special		Final		i
				Special		
11. Account Information			11. Accoun		ation	
a. Financial Institution Full Name	APPLICATION OF THE PROPERTY OF	APTIMENT PLANTS OF THE STATE OF	a. Financial I		and the same of the same of	\$\$\frac{368}{684} \$\text{\$\exititt{\$\text{\$\e
HomeTrust Bank						
b. Purpose	c. Account Code		b. Purpose			c. Account Code
			Di I di posc			t. Account Code
Campaign	1	!			ĺ	
	d. Period Begin Ba	alance				d. Period Begin Balance
	\$ 1290.25	4000 07				\$
CERTIFICATION	<u> </u>					Ψ
•						
I certify that the Committee or Fur	id is in compilance	3 With all appli	icable provisi	ons of Artic	cle 22A, 22H	& 22D-22M of Chapter 163
of the NC General Statutes and that report is complete, true and correct	tt 110 Iuiius aic coii t and that I have h	imingled with	. prominieu oi	l'Otner non-	-disclosed tu	nds. I further certify that this
report is complete, true and correc-	t and that I have or	Jeli dained by	IIIE INC State	V Poara oi r	nections.	
Deb Hardin		10	1 7	101	1	
Printed Name of Signo	er	- Vie	ntile of Appo	inted Treasu	rer	Date
FOR OFFICE USE ONLY		~	Editio of Asper	Intou xious		Date
					Deli	ivery Method
Date Received:		Employ	/ee:	<u> </u>		Normal Mail
Data Dasteraultade						Registered Mail
Date Postmarked:		_ Employee:				Hand Delivered
Date Scanned:	Employ		ovee:			Electronically Filed
						Ciaman has not received
Date Data Entered:	Employ				L	Signer has not received mandatory training
Please Note: This form car	nnot be used to a	amend comm	ittee inform	etion such		
	treasurer, custod					
			` intormatiot	1 At 90001		700

Detailed Summary
Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment

Yes No

1. Committee Full Name (and Fund if applicable)	2. Type of Report 3. ID Number					
Citizens to Elect Deb Hardin County Commissione	r Orga	nizational				
Start of Election Cycle: January 1, 2022		Total this Reporting Period	Total this Election Cycle			
4) Cash on Hand at Start		\$ 1290.25	\$ 4250.00			
<u>RECEIPTS</u>						
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0	\$ 4250.00			
6) Contributions from Individuals	(CRO-1210)	\$	\$			
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$			
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$			
9) Loan Proceeds	(CRO-1410)	\$	\$ 100.00			
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	\$			
11) Other Receipt Sources	1900 til det flesske skille skalle fless til det skelde skalle ste skille en en skalle en en skalle en en en e					
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	,11d and 11e)	\$ 0	\$ 4350.00			
EXPENDITURES						
13) Disbursements						
13a) Operating Expenditures	(CRO-1310)	\$ 864.00	\$ 3923.75			
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 100.00	\$ 100.00			
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, 1	5, 16 and 17)	\$ 964.00	\$ 4023.75			
19) Cash on Hand at End (Add lines 4 and 12 together, then sul	otract line 18)	\$ 326.25	\$ 326.25			
ADDITIONAL INFORMATION						
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)	\$				
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)	\$	\$			

Disbursen Use this form to		s from the commi	ittee for	operating ex	Pg apense	1 of	_	2 Amendment Yes No to candidate/political
committees and	d coordinated party e	expenditures		STANDER STANDERS	F		10.00	*
	Full Name (and Fur		N. 15 C. W. 10 . 15 . 15 . 15 . 15 . 15 . 15 . 15					2. ID Number
Citizens to	Elect Deb Hardin	County Comm	nissione	er _.				
3. Type of Disl		se use separate Ci	RO-131	0 forms for	each t	ype of Disl	burse	ement.)
Operating Exp		ontributions to Candid	lates/Politi				ordina	ited Party Expenditures
4. Payee Inform	mation Mailing Address & Pl	L		Add	Rem	CO - 水水杨香香香香香香香香香 (11) (T. z
(include city, state		lone		b. Coordinat	ied Con	mmittee Name	<u>.e</u>	d. Comments
Janet Whisnant 1338 Union Church Road Lawndale NC 28090				c. Level Registered (Specify) Federal County:				Graphic Arts Campaign Cards
				State	<u></u> !	Municipa	ality:	e. Election Sum to Date
<u></u> _								\$ 1699.56
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date ((mm/dd/yyyy)			k. R	equired Remarks
	check	В	05	5/04/2022	\$	50.00		Business Cards
					\$		\top	
4. Payee Inform	the state of the s			Add 🔲	Remo	ove	And and	
	lling Address & Phone		With the last of games and	All and the second seco	presidents.	nmittee Name	e	d. Comments
(include city, state, & zip) Community First Media 502 North Lafayette Street			c. Level Registered (S			County:		Increased Ad sizes
Shelby NC	, 20100			State		Municipa Municipa	lity:	e. Election Sum to Date \$ 1311.00
f. Account Code	g. Form of Payment	h. Purpose Code	Ti Data ((mm/dd/yyyy)	j. Amo		lı, D.	equired Remarks
II TACOUNIC COUC	Check	A		/06/2022	 -	57.00	†	KM Herald/Shelby Shop
			+		+		H	dir Florata/Offoloy Offop
4. Payee Inforn					 \$			Make on the South County of the Stringer of the County of
	nation ling Address & Phone		ياد	Add	Remo	entraction of the property of the		
(include city, stat				D. Courdinaid	ed Com	amittee Paine		d. Comments
Janet Whisnant 1338 Union Church Road Lawndale NC 28090			c. Level Regis		= '		Graphic Arts Yard Signs cards	
			ļ	State	L	Municipal	lity:	e. Election Sum to Date
			l					\$ 2151.56
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (1	mm/dd/yyyy)	j. Amo	ount	k. Re	equired Remarks
	Check	В	05/0	8/2022	\$ 452	2.00	Ya	rd signs/cards
					\$			
5. Total only th	is Page							\$ \$859.00
medical and the or bearing but as a	CRO-1310 Pages					Professional Control	\$2,595 \$540 555	4 4 6 6 6 7 8 8 8 9 9 9 9 9 9 9 9 9 9
(This line goes in (This line goes in	line 13a of Detailed Sun line 13b of Detailed Sun line 13c of Detailed Sum	nmary Page CRO-11	00 if Cont	trib to Candida	tes/Poli	'itical Comm) ditures)		\$ 964.00
College and world for some college of the Contract of the College	odes (List detailed							
A* - Media E - Salaries	B* - Printiı F* - Equipi	ng	C* - Fu	undraising itical Party	<u>, Compression</u>			ner Candidate g Public Office Expenses

O* Other

I - Postage

J - Penalties

K* - Office Expenses

Q* - Donation to Legal Expense Fund

	to report expenditures d coordinated party ex		ice for operating ex	penses, contitue	ions to candidate/pontical
	Full Name (and Fun				2. ID Number
Citizens to I	Elect Deb Hardin (County Commis	ssioner		
3. Type of Disl	bursement (Pleas	se use separate C	RO-1310 forms for	each type of Disl	bursement.)
Operating Exp	Control of the Contro	A STATE OF THE PARTY OF THE PAR	dates/Political Committee		ordinated Party Expenditures
4. Payee Infor			Add 🔲	Remove	
An artist of the second of the	Mailing Address & Pl	hone	200 - 100 -	ted Committee Name	e d. Comments
(include city, state					
Cleveland County GOP Post Office Box 1236 Shelby NC 28151		Federal	= ′		
<u></u> ,			State	Municipa Municipa	ality: e. Election Sum to Date
			'		\$ 100.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	check	G	06/17/2022	\$ 100.00	membership dues
				\$	
4. Payee Inform	mation		Add □	Remove	
is provided that the notes the contract of the children is expected.	iling Address & Phone	Section of the sectio	Service Control of the Control of th	ted Committee Name	e d. Comments
(include city, sta				Au Comment	U4 CVAMBANAAN
					14 (1) Oleman
HomeTrust				istered (Specify)	Monthly Charge
224 E Warr			Federal		
Shelby NC	28150		State	Municipa Municipa	ality: e. Election Sum to Date
					\$ 21.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	draft	0	06/15/2022	\$ 5.00	Mthly Analysis Charge
		†		\$	Withing 7 than your July 3
4 Deves Inform					
4. Payee Inform a. Full Name. Mail	mation ling Address & Phone		Add D	Remove	
a. Full Name, Mail (include city, sta			D. Coorumar	ted Committee Name	e d. Comments
(000-0	ity to inp,	<u> </u>			
			c. Level Reg	istered (Specify)	7.
I			Federal	County:	
			☐ State	Municipal	e. Election Sum to Date
					\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	T	
li Ilbovian -	g. roam or a aj	in I di poss con	1. Date (nimum yyyy,		k. Required Remarks
		 '		\$	
		the other \$2000 applies		\$	
5. Total only th			er en		\$ 105.00
Standard Company of the Standard Standard	L CRO-1310 Pages			13.48344119-195-195-195-195-195-195-195-195-195-	
(This line goes in	ı line 13a of Detailed Sum	nmary Page CRO-11	00 if Operating Expens	es)	\$ 964.00
(This line goes in	line 13b of Detailed Sum	nmary Page CRO-110	00 if Contrib to Candida	ates/Political Comm)	, J JUT.UU
to the control of a figure of the control of a first of the con-	ı line 13c of Detailed Sum			Expenditures)_	and the second s
7. Purpose Co	odes (List detailed			F. S. S. S. See Section	
A* - Media	B* - Printin	•	C* - Fundraising		Another Candidate
E - Salaries	F* - Equip J - Penaltic		G - Political Party		olding Public Office Expenses
	•	- ^ -	1/ × 1 *******	* *** I \ a.	
I - Postage O* Other	J - renam	ies	K* - Office Expen	ises Q* - Do	onation to Legal Expense Fund

Disbursements

Amendment

☐ Yes