Disaloguro D	anant Carran				Amendment	
Disclosure R					Yes	No
Use this form for go	eneral report and committee	information, must b	e signed and si	ubmitted along wit	h other detailed forms.	
	n to update information					
1. Committee Info	rmation					
a. Full Name	Intohine for Classic Land				c. ID Number	
Re-Elect Johnny H	lutchins for Cleveland Coun	ty Commissioner				
b. Mailing Address (in	clude City, State and Zip Code)					
1436 Phifer Rd	orace engy, state and zip code)				d. Date Filed	
Kings Mountain N	07/09/20					
	e. Phone Number					
			MUL	9 2020		
					704.692.296	66
2. Report Year	3. Period Start Date (mm/	uu/vvi	End Date	5. Treasurer I	Full Name	
•		(mm/dd/yy)	)			
2020	02/25/20	06	6/30/20	Christina Mae	Hutchins	
6. Type of Commit	ttee (Check One)	9. Type of Repor	+ (al-a-l-			
Candidate Camp		Municipal Municipal	CONTRACTOR DESCRIPTION	onty one type of rep County	port from one category)	
PAC	Referendum	Organizationa		Organizational	Referendum Organizational	
Independent	Joint Fundraiser	Thirty-five da				
Expenditure Legal Expense I		Timity-five da	ay	Quarterly	Pre-referendum	
7. Type of Fund	(if applicable, check one)	Pre-primary		First	First	
"Booster Fund"	(y appricable, check one)	Pre-election		Second	Final  Symplemental Final	
Building Fund		Pre-runoff		Third	Supplemental Final Annual	0
		Semi-annual	1	Fourth	Special	
		Mid Yea	ar _	Semi-annual		
Other:		Year En	d 🔲	Mid Year	10. Special Report N	lame
	Final	Year End				
8. Number of Fund	Iraisers this Report	Special		Final		
				Special		
11. Account Inforn	nation		11. Account	Information		
a. Financial Institution	Full Name		a. Financial In	stitution Full Name		
Suntrust Bank						
b. Purpose	c. Account Code		b. Purpose		c. Account Code	
Campaign 01		1				
Finance	d. Period Begin Balance					
	d. I ci lod Begin Balance				d. Period Begin Balance	
	\$ 1747.81				\$	
CERTIFICATION			1			
	nmittee or Fund is in compli	iance with all annlice	able provisions	of Article 22 A 2	DR & 22D 22M of Chapter	162 of
the NC General Stat	utes and that no funds are co	ommingled with prob	nibited or other	non-disclosed fun	ds I further certify that this	report
is complete, true and	d correct and that I have been	n trained by the NC	State Board of	Elections.	as. Francis certify that this	report
Christina H			Atturch	in	07/09/20	
nor distilling	Printed Name of Signer	S	signature of Appoi	nted Treasurer	Date	
FOR OFFICE USE O	ONLY		>	0		
Date Received:	7.9.200	Employee:	61	}	Delivery Method	
					☐ Normal Mail ☐ Registered Mail	
Date Postmarke	d:	Employee:		- 674,	Hand Delivered	

**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.

Electronically Filed

Signer has not received mandatory training

1d Grand CO in COROLINA TO A

Employee:

Employee:

Date Scanned:

Date Data Entered:

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

1 Committee Full Name (and Fundame 12 11)	2. Type of Report		
1. Committee Full Name (and Fund if applicable)  De Elect Johnny Hutching for Claydond County		3. ID Number	
Re-Elect Johnny Hutchins for Cleveland County Commissioner			
		Total this	Total this
Start of Election Cycle: January 1,		Reporting Period	127 - 1
4) Cash on Hand at Start	\$ 1747.81	\$ 3697.81	
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 500.00	\$ 3745.00
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	9 2020 <sup>(CRO-1230)</sup>	\$	\$
9) Loan Proceeds JUL	(CRO-1410)	\$	\$ 1597.19
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 Organization	ons (CRO-1250)	\$	\$
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, 11c)	c, 11d and 11e)	\$ 500.00	\$ 5342.19
<u>EXPENDITURES</u>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 31.95	\$ 1229.14
13b) Contributions to Candidates/Political Commit	ttees (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 305.21	\$ 605.21
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$ 1597.19
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 13		\$ 337.16	\$ 3431.54
19) Cash on Hand at End (Add lines 4 and 12 together, then sub-	tract line 18)	\$ 1910.65	\$ 5608.46
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaign	ns) (CRO-1430)	\$	
22) Debts and Obligations owed By the Committee	\$		
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$	
24) Account Transfers Within the Committee	(CRO-1720)	\$	
25) Administrative Support	\$	\$	
26) Forgiven Loans	(CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$

Amendment

Yes

 $\boxtimes$ 

No

		m Individuals	¢.5.	P <sub>1</sub>			Yes No
Market Street,		ividual contributions of (and Fund if applica		or contributions un	der \$50 II form C	2. ID Nun	
		for Cleveland County		nissioner		2. 11) 1401	ilbei
	ibutor Informati		$\boxtimes$		emove		
	me, Mailing Address			b. Job Title/Profession		d. Commen	ts
	city, state, & zip)			•			
	d Mary Beam			retired			
Shelby N	ntry Club Acres			c. Employer's Name/S	Specific Field		
Shelby IV	20130				- 0 - 0000	e. Election S	Sum to Date
				JUL	0 9 2020	\$	500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/	уууу)	k. Amount
		check #104		2	03/04	1/20	\$ 500.00
							\$
				-			\$
3. Contri	ibutor Informatio	on		Add Re	emove		
	ne, Mailing Address	& Phone		b. Job Title/Profession	1	d. Comment	S
(include	city, state, & zip)						
-				c. Employer's Name/S	specific Field		
					e. Election Sum to Date		
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount
		ı					\$
				*			\$
		,					\$
	butor Informatio			Add Re	emove		
	ne, Mailing Address	& Phone		b. Job Title/Profession	1	d. Comment	S
(include	city, state, & zip)						
				c. Employer's Name/S	pecific Field		
						e. Election S	um to Date
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount
							\$
			,				\$
		· ·					\$
4. Total	only this Pag	e				\$	500.00
5. Total	of ALL CRO	-1210 Pages				\$	500.00
(This line	must be on line 6 of	Detailed Summary Page C	RO-1100	))		Φ	500,00

Amendment

## **Disbursements**

Amendment Yes

No

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

1. Committee Full Name (and Fund if applicable)  Re-Elect Johnny Hutchins for Cleveland County Comm						
3. Type of Disbu		ise use separate C	CRO-1310 forms for each t			
Operating E		Contributions to Car	andidates/Political Committees		oordinated Party Expenditures	
4. Payee Inform			Add	Remove		
a. Full Name, Maili	ing Address & Phone		b. Coordinated Committee Na	ame	d. Comments	
(include city, state,	& zip)			9 2020	Bank Fees	
Suntrust Bank				9 2020	1/31 - 05/29	
700 W King St			c. Level Registered (Specify)		paper stmt fees	
Kings Mountain	1 NC 28086		Federal 🖂	County:	\$3.00 monthly	
			State	Municipality:	e. Election Sum to Date	
				1		
					\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy) j. Amount		k. Required Remarks	
	L L des Ω		05/00/0000	015.00	5 months of	
J	bank draft	O	05/29/2020	\$15.00	\$3 fees	
					ψ5 1005	
				\$		
4. Payee Inform	ation		Add	Remove		
a. Full Name, Maili	ing Address & Phone		b. Coordinated Committee Na	ame	d. Comments	
(include city, state,					Bank Fee	
Suntrust Bank			1		Check order	
700 W King St			c. Level Registered (Specify)		Check order	
-	NC 20006			Country	4	
Kings Mountain	INC 28080			County:	n	
			State	Municipality:	e. Election Sum to Date	
					\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	bank draft	О	2/19/2020	\$16.95	checks ordered	
				\$		
4. Payee Inform	ation		Add	Remove		
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Na	ame	d. Comments	
(include city, state, &	& zip)				poll volunteer	
SubStation 2	1				food	
611 S Lafayette	St #5807	!	c. Level Registered (Specify)			
Shelby NC 2815		!	Federal S	County:		
Shelby INC 2015	70	!		Municipality:	e. Election Sum to Date	
		!	State	Municipanty.	e. Election Sum to Date	
					\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	Chook		03/03/20	\$305.21	food for poll	
	Check	О		\$303.21	volunteers	
				\$		
5 Tatal only thi	- Dans			]	¢ 227.16	
5. Total only this					\$ 337.16	
	CRO-1310 Pages	P CPO 110	o'cotiEmanage			
	line 13a of Detailed Sum	\$ 337.16				
	line 13b of Detailed Sum					
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						
7. 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 Exp						
I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund O* - Other						
O" - Other						