Disclosure Re	Amendment Yes No				
Use this form for gen	eral report and committee	information, must b	e signed and s	ubmitted along wit	th other detailed forms.
1. Committee Inform	to update information			Fide A Commence of the Commenc	
a. Full Name	пацоп .				
	tchins Cleveland County C	ommission or	<u></u>		c. ID Number
	county C	ommissioner			
	de City, State and Zip Code)				d. Date Filed
114 Camelot Ct King	gs Mountain NC 28086				12/04/2023
					e. Phone Number
					704-692-2966
2. Report Year	3. Period Start Date (mm/c	ld/yy) 4. Period (mm/dd/yy	End Date	5. Treasurer F	Full Name
2024	07/09/2024		28/2024	Christy Hutchi	ins
6. Type of Committe	e (Check One)	9. Type of Repor	(check c	inly one type of rer	oort from one category)
Candidate Campaig		Municipal		County	Referendum
PAC Independent	Referendum	Organizationa		Organizational	Organizational
Expenditure	Joint Fundraiser	Thirty-five da	y	Quarterly	Pre-referendum
Legal Expense Fun		·			
7. Type of Fund Booster Fund"	(if applicable, check one)	Pre-primary		First	Final
Building Fund		Pre-election Pre-runoff		Second	Supplemental Final
		Semi-annual		Third Fourth	Annual Special
		Mid Yea	r	Semi-annual	Special Special
Other:		Year End		Mid Year	10. Special Report Name
O New Year Committee		Final		Year End	
8. Number of Fundra	users this Report	Special		Final	
11. Account Informat	0			Special	
a. Financial Institution Ful				Information :	
Truist			a. Financial Ins	titution Full Name	
b. Purpose	c. Account Code		b. Purpose		c. Account Code
Campaign Finance	01		•		CLEVELAND COUNTY BO OCT 28 '24 PM2:08
	d. Period Begin Balance				d. Period Begin Balance
	\$ 5640.35		•		S
CERTIFICATION			1		y
I certify that the Comm	nittee or Fund is in complia	nce with all applica	ble provisions	of Article 22A, 22	B, & 22D-22M of Chapter 163 of
is complete, true and co	orrect and that I have been	trained by the NC-S	blyed or other tete Board of I	non-disclosed fund Elections	ds. I further certify that this report
Christy Hutch	ins		Mikli	incomons.	10/28/2024
	Printed Name of Signer	Si	gnature of Appoin	ted Treasurer	Date
FOR OFFICE USE ONI Date Received:	10/25/27	Employee:	T 5	er 2	Delivery Method
Date Postmarked:		Employee:			Normal Mail Registered Mail
Date Scanned:	. 1844 - 1944 - 1945 - 1946 - 1946 - 1946 - 1946 - 1946 - 1946 - 1946 - 1946 - 1946 - 1946 - 1946 - 1946 - 19 1946 - 1946 - 1946 - 1946 - 1946 - 1946 - 1946 - 1946 - 1946 - 1946 - 1946 - 1946 - 1946 - 1946 - 1946 - 1946	Employee:			Hand Delivered Electronically Filed
Date Data Entered:		Employee:			Signer has not received mandatory training
	orm cannot be used to ame custodian ou must amend the Statemo	nd committee information	on, or account	information.	lress, treasurer, assistant treasurer,

Detailed Summary

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

Amer	dment	*******************************	
	Yes	\boxtimes	No

1. Committee Full Name (and Fund if applicable)	a to total monetar 2. Type of Repor		ormation.	2 ID X	
Re-Elect Johnny Hutchins for Cleveland County	Quarterly			3, <u>ID</u> N	umber
Commissioner					
Start of Election Cycle: January 1,	2024		Total this		Total this
4) Cash on Hand at Start		\$	Reporting Period 5640.35	\$	Election Cycle 17008.93
BECEPTS			3010.55	Ψ	17008.93
5) Aggregated Contributions from Individuals	(CRO-1205)	\$		\$	
6) Contributions from Individuals	(CRO-1210)	\$	750.00	\$	8088.98
7) Contributions from Political Party Committees	(CRO-1220)	\$		\$	3000.00
8) Contributions from Other Political Committees	(CRO-1230)	\$		\$	
9) Loan Proceeds	(CRO-1410)	\$	262.84	\$	659.31
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$		\$	003131
11) Other Receipt Sources					
11a) Interest on Bank Accounts	(CRO-1250)	\$		\$	
11b) Contributions from Not-for-Profit Organization	IS (CRO-1250)	\$		\$	
11c) Outside Sources of Income	(CRO-1250)	\$		\$L	VELAND COUNTY OCT 28'24 PM2:(
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$		\$	114.1 /O /4 PM/.1
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c,	11d and 11e)	\$	1012.84	\$	11748.29
ESPARATION DAVIS A CONTRACT OF THE					
13) Disbursements		bilima sida 11 le			the day of the delication of the second of t
13a) Operating Expenditures	(CRO-1310)	\$	1297.31	\$	3366.36
13b) Contributions to Candidates/Political Committe	es (CRO-1310)	\$		\$	200.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$	150.00	\$	4450.60
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$		\$	
15) Loan Repayments	(CRO-1420)	\$	262.84	\$	659.31
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$		\$	
17) In-Kind Contributions	(CRO-1510)	\$		\$	2138.98
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 1	16 and 17)	\$	1710.15	\$	10815.25
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract	ct line 18)	\$	4943.04	\$	n/a
AMDITHURALINGORNIATION					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$			
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	262.84		
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)	\$		\$	
CDO 1100					

Cont	ributions fro	m Individuals			Pg 1	.£ 2	Amendme	<u> </u>
		dividual contributions	over \$5	50 or contributions	under \$50 if form C	n <u>2</u> RO 1205 is r	Ye	s 🔀 No
1. Com	mittee Full Name	(and Fund if applica	ble)			2. ID Nu		
Re-Elec	t Johnny Hutchins	s for Cleveland County	/ Comn	n		100000000000000000000000000000000000000		
3. Conti	ributor Informat	ion	M	Add	Remove			
	me, Mailing Address	The Control of the Co		b. Job Title/Profess	to the same of	d. Comme	-to	A PARTY AND A PARTY
	e city, state, & zip)			Business Owner		u. Comme	iits.	
Dennis (·		
	rison Dr			c. Employer's Nam	e/Specific Field			
ings M	ountain NC 2808	6						
						e. Election	Sum to Date	
						\$	250.00	
Prior	g. Account Code	h. Form of Payment	i. In-	 Kind Description	j. Date (mm/dd/y	(VVV)	k. Amount	
		CK # 2790			10/09	· · · · · · · · · · · · · · · · · · ·		250.00
					10/09	// / 4	\$	250.00
<u> </u>							\$	
							\$	
	ibutor Informati	and the second s	Ø	Add I I	Remove			
Full Name, Mailing Address & Phone			b. Job Title/Professi	en an euro a meren resultant l'ille anna la la Tella Frente e	d. Commen	LEVELAME ts oat oa	COUNTY	
	city, state, & zip)			Business Owner	•		UU1 Zb	ZM PMZIO I
Betty Car	-							
	pendence Ct ountain NC 28086	•		c. Employer's Name	e/Specific Field			
rings ivi	ountain NC 20000	,				173		
						e. Election S	Sum to Date	<u> </u>
						\$	100.00	
Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
		CK #3326			10/04	/24	\$	100.00
							\$	
$\overline{\Box}$						·	\$	
 Confri	 butorInformation	On-		Add ∏ ≟ R	Remove			View Steel
CONTRACTOR OF THE SECOND	ne, Mailing Address	description of the property of the party and the property of the party	Y - KN - Y	b. Job Title/Professi	Committee of the Commit	d. Commen	ing samuel s For	
And the second	city, state, & zip)			Retired	UII	a. Commen	18 ₂₉ - 427, 4, 4, 4, 18	<u>n egysel hijde</u>
ay Robi				1				
	ingtowne Dr			c. Employer's Name.	/Specific Field	1		
ings Mo	ountain NC 28086	i						
						e. Election S	um to Date	
						\$	100.00	
Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
		CK #5988			10/02/	24	\$	100.00
							\$	
							\$	
Total	only this Pag	<u> </u>	l Mini	negot Service		\$		350.00
1. 7. M. of September 411	of ALL CRO					Ψ		220.00
/m: : ::						\$		750.00

Amendment

Cont	ributions fro	m Individuals			D_ 0		Amendmer		
		lividual contributions	over \$5	50 or contributions i	Pg <u>2</u> of under \$50 if form CR	20 1205 is n	of used	No No	
1. Com	mittee Full Name	(and Fund if applica	ble)			2. ID Nu			
Re-Elec	t Johnny Hutchins	for Cleveland County	Comn	n					
3. Conti	ributor Informati	on	×.	Add	Remove		The state of the s	in the state of the	
	me, Mailing Address	& Phone	1774 TALE - BA	b. Job Title/Profess	the property of the second state of the second seco	d. Commen	te		
	e city, state, & zip)			Business Owner		u. commen	its .		
	Yn Cheng								
	th Shore Dr ille NC 28021			c. Employer's Name	e/Specific Field				
Cherry	ine NC 28021								
						e. Election S	Sum to Date		
						\$	100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Description	j. Date (mm/dd/yy	уу)	k. Amount		
		CK #3554			10/07/	24	\$	100.00	
							\$		
							\$		
3. Contr	ibutor Informati	o n		Add 🗍 F	Remove	, and	EUEL AND	CONTRITUE	
a. Full Nar	ne, Mailing Address	& Phone	, 4 E-3	b. Job Title/Professi	THE PERSON AND PROPERTY OF THE PROPERTY OF		s OCT 28".	COUNTY BE	
(include	city, state, & zip)			Business Owner			and the state of the state of	L. B 1 1 1 Lan. " W. Lat	
David Br	•								
	ntry Club Acres			c. Employer's Name	/Specific Field				
Kings Me	ountain NC 28086				- Flority (6				
						e. Election S	um to Date		
						\$	100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Description	j. Date (mm/dd/yy	yy)	k. Amount		
		CK #7284			10/16/2	24	\$	100.00	
							\$		
							\$		
**************************************	ibutor Informatio	STREET, THE RESIDENCE OF THE PROPERTY OF THE PARTY OF THE		Add R	emove				
	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Comment	S		
Jason Fal	city, state, & zip)			Cleveland Count	У			·	
	Ledford Rd			c. Employer's Name/	Specific Field				
	ountain NC 28086			c. Employer s Ivanie,	Specific Field				
Ü						e. Election Si	um to Date	1.00	
						\$	100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Date (mm/dd/yyy	yy)	k. Amount	12/50/2005	
		CK# 1056			10/10/2	24	\$	100.00	
							\$		
							\$		
4. Total	only this Pag	e asanta ya mara				\$		300.00	
al the street was to be a street at the same	of ALL CRO	Caracher Commission Co	11						
A THE STATE		Detailed Summary Page C.	RO-1100			\$		750.00	

Loan Proceeds

Use this form to report proceeds from a loan and loan endorser's information

Amendment

☐ Yes ☑ No

A loan proceeds statement must accompany each load. Committee Full Name (and Fund if applicable) Re-Elect Johnny Hutchins for Cleveland County Co		School triangement to be some control and on the life	2. ID Num	ber
Re-Elect Johnny Flutchins for Cleveland County Co	mm			
3. Lender Information	Add			Remove
a. Full Name, Mailing Address & Phone	b. Job Title/Prof	ession	<u> </u>	d. Comments
(include city, state, & zip)	retired			postage
Buffy Murphey 114 Camelot Ct				
Kings Mountain NC 28086	c. Employer's Na	me/Specific Field		e. Start Date (mm/dd/yyyy)
	p.s.yer sitta	me/Specific T telu		09/24/24
				f. End Date (mm/dd/yyyy)
				10/28/24
. Rate h. Security Pledged	i. Account Code	j. Form of Payn	ent	k. Amount
0 %	01	ck #98		
Full Name of Lending Institution		CK #98	•	\$ 29.20
			m. Loan	Number
. Endorsers/Makers (The people who guarantee	the loan.)			
. Full Name, Mailing Address & Phone	b. Job Title/Pro	ofession	c. Emplo	yer's Name/Specific Med CUUNTY
(include city, state, & zip)				OCT 28"24 PM2:0
	d. Percentage		e Amou	
	d. Percentage		e. Amou	nt:
	d. Percentage	%	e. Amou	nt
	d. Percentage b. Job Title/Pro		\$	nt yer's Name/Specific Field
Full Name, Mailing Address & Phone (include city, state, & zip)	·		\$	
	·		\$	
Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Pro		\$	
	·		\$	yer's Name/Specific Field
	b. Job Title/Pro		\$ c. Emplo	yer's Name/Specific Field
(include city, state, & zip)	b. Job Title/Pro	ofession %	s c. Emplo	yer's Name/Specific Field
(include city, state, & zip) Full Name, Mailing Address & Phone	b. Job Title/Pro	ofession %	s c. Emplo	yer's Name/Specific Field
(include city, state, & zip) Full Name, Mailing Address & Phone	b. Job Title/Pro	ofession %	s c. Emplo	yer's Name/Specific Field
(include city, state, & zip) Full Name, Mailing Address & Phone	b. Job Title/Pro	ofession %	s c. Emplo	yer's Name/Specific Field
	b. Job Title/Pro	ofession %	s c. Emplo	yer's Name/Specific Field nt yer's Name/Specific Field
(include city, state, & zip) Full Name, Mailing Address & Phone	d. Percentage b. Job Title/Pro	% fession	e. Amour	yer's Name/Specific Field nt yer's Name/Specific Field
(include city, state, & zip) Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Pro d. Percentage b. Job Title/Pro d. Percentage	% fession	c. Emplo	yer's Name/Specific Field nt yer's Name/Specific Field
(include city, state, & zip) Full Name, Mailing Address & Phone (include city, state, & zip) Full Name, Mailing Address & Phone	d. Percentage b. Job Title/Pro	% fession	e. Amoun	yer's Name/Specific Field nt yer's Name/Specific Field
(include city, state, & zip) Full Name, Mailing Address & Phone (include city, state, & zip) Full Name, Mailing Address & Phone	b. Job Title/Pro d. Percentage b. Job Title/Pro d. Percentage	% fession	e. Amoun	yer's Name/Specific Field nt yer's Name/Specific Field
(include city, state, & zip) Full Name, Mailing Address & Phone (include city, state, & zip) Full Name, Mailing Address & Phone	b. Job Title/Pro d. Percentage b. Job Title/Pro d. Percentage	% fession	e. Amoun	yer's Name/Specific Field nt yer's Name/Specific Field
(include city, state, & zip) Full Name, Mailing Address & Phone (include city, state, & zip) Full Name, Mailing Address & Phone	d. Percentage b. Job Title/Pro d. Percentage b. Job Title/Pro	% fession	e. Amoun	yer's Name/Specific Field nt yer's Name/Specific Field
(include city, state, & zip) Full Name, Mailing Address & Phone (include city, state, & zip) Full Name, Mailing Address & Phone	b. Job Title/Pro d. Percentage b. Job Title/Pro d. Percentage	% fession	e. Amoun	yer's Name/Specific Field nt yer's Name/Specific Field tt
(include city, state, & zip) Full Name, Mailing Address & Phone	d. Percentage b. Job Title/Pro d. Percentage b. Job Title/Pro	% fession	c. Emplo	yer's Name/Specific Field nt yer's Name/Specific Field tt

Loan Proceeds Use this form to report proceeds from a law as 11	Pg	<u>2</u> of	<u>2</u>	Yes No			
Use this form to report proceeds from a loan and loan end A loan proceeds statement must accompany each loan that	dorser's information at is from an individ	າາສ1					
1. Committee Full Name (and Fund if applicable)		the Author Contract of the Con	ID Number				
Re-Elect Johnny Hutchins for Cleveland County Comm							
3. Lender Information	Add		Rei	nove			
a. Full Name, Mailing Address & Phone	b. Job Title/Profession) See that milk crasses here then to	The state of the s	Comments			
(include city, state, & zip) Johnny Hutchins	retired		sig	nage			
1436 Phifer Rd	Ji		0.50	haut Data (may /33/			
Kings Mountain NC 28086	c. Employer's Name/S	pecific Field	C. Si	tart Date (mm/dd/yyyy)			
				09/05/24			
			f. Eı	nd Date (mm/dd/yyyy)			
			10/28/24				
	Account Code j.	Form of Paymer	t k. A	mount			
0 %	01 6	ck #115	\$	233.64			
. Full Name of Lending Institution			m. Loan Numb	per			
		•					
4. Endorsers/Makers (The people who guarantee the t	loan)	6 - 314 43					
i. Full Name, Mailing Address & Phone	b. Job Title/Professi	on	c. Employer's !	CLEUEL CND COUNTY			
(include city, state, & zip)							
	d. Percentage		e. Amount				
		%	\$				
. Full Name, Mailing Address & Phone	b. Job Title/Profession	on	c. Employer's Name/Specific Field				
(include city, state, & zip)	A.						
	d. Percentage		e. Amount				
		%	\$				
. Full Name, Mailing Address & Phone	b. Job Title/Profession	on a state of the	c. Employer's N	Name/Specific Field			
(include city, state, & zip)							
	d. Percentage		e. Amount				
		%	\$				
Full Name, Mailing Address & Phone	b. Job Title/Profession	n and the	c. Employer's N	ame/Specific Field			
(include city, state, & zip)							
	d. Percentage		e. Amount				
		%	\$				
. Total of ALL CRO-1410 Pages			740				
(This line must be an line 9 of Detailed Summary Page CPO 1100)			\$ 262.	84			

Loan Proceeds

Amendment

Disburser	nents		_	,	Amendment				
Use this form	to report expenditure	s from the commi	Pg ttee for; operating expenses	1 of	2 Yes No				
committees an	d coordinated party	expenditures.	tice for, operating expenses	s, contributions to	o candidate/political				
1. Committee	Full Name (and Fu	nd if applicable)			2. ID Number				
Re-Elect John	ny Hutchins for Clev	eland County Cor	nm		2. ID Number				
3. Type of Dis	bursement <u>(Ple</u>	ease use separate (CRO-1310 forms for each	type of Disburse	ment 1				
Operating	Expenses	Contributions to Ca	andidates/Political Committees		Coordinated Party Expenditures				
4. Payee Infor	2000		Add	Remove					
	iling Address & Phone		b. Coordinated Committee N	lame	d. Comments				
(include city, state	e, & zip)				billboard				
Go Big Print PO Box 248									
Shelby NC 28	151		c. Level Registered (Specify)		<u>:</u>				
Silciby NC 26	131		Federal 🖂	County:					
			State	Municipality:	e. Election Sum to Date				
					\$				
f. Account Code	g. Form of Payment	h. Purpose Code	: Dots (/17/						
		an a di pose code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks				
01	ck #112	В	08/28/24	\$300.00	billboard				
				\$					
4. Payee Inform	mation		Add	Remove					
	ling Address & Phone		b. Coordinated Committee N		d. Comments				
(include city, state, & zip)					banners/signs				
Go Big Print									
PO Box 248	~ 1		c. Level Registered (Specify)		_				
Shelby NC 281	.51		Federal 🖂	County:					
			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				
01	ck #110	В	09/11/24	\$528.44	banners/signs				
				\$					
4. Payee Inform	nation		Add -						
	ing Address & Phone	1977 C	b. Coordinated Committee Na		d. Comments				
(include city, state,	化铁铁矿 化甲烷甲基甲基 化氯化物 医二甲基磺基酚基				t-shirts				
Dale Advertisin	ıg								
2523 Taylor Rd			c. Level Registered (Specify)						
Shelby NC 281	52		Federal 🖂	County:	CLEVELAND COUNTY BOE				
			State	Municipality:	e. Election Sum to Date ZIFMZ. U.				
					\$				
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks				
01	ck #114	В	10/25/24	\$52.31	t-shirts				
e				\$	<i>x</i>				
5. Total only th	is rage CRO=1310 Pages		Continue to the second	125 FEB 1 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	\$ 880.75				
	line 13a of Detailed Sun	mary Page CRO-1100	if Onerging Evnences		· I				
			if Contrib to Candidates/Politica	al Comm)	\$ 1297.31				
(This line goes in	line 13c of Detailed Sum	mary Page CRO-1100	if Coordinated Party Expenditu	res)					
	es (List detailed ex								
A* - Media	B* - Printing	C* - Fund	raising	D - To Anoth	er Candidate				
E - Salaries	F* - Equipment				g Public Office Expenses				
I - Postage O* - Other	J - Penalties	K* - Offic	e Expenses	Q* - Donatio	on to Legal Expense Fund				
терия берети при выстрои обращения в при в него	e detailed explanati	on in required re	marks field (k)						

D. I					Amendm	ent		
Disbursements	Pg	2	of		☐ Y		\boxtimes	No
Use this form to report expenditures from the committee for; operating ex	xpenses,	cont	ributions to	can	didate/political		,	*********
committees and coordinated party expenditures.					•			

	Full Name (and Fund) The Hutchins for Clev				9.24. 11.175	2. D Number
					2 5 :1	ment:)
Operating	Fynenses	Contributions to Ca	ndidetes/Delitical C	s for each		
4. Payee Inform		Contributions to Ca	1 3 5 7 N 3 5 5 5 B	ommuees		Coordinated Party Expenditures
	ling Address & Phone		b. Coordinated	Committee 1	Remove	
(include city, state			b. Coordinated	Committee	Name	d. Comments
Dale Advertising			-			t-shirts
2523 Taylor Ro	_		- T 1 Th 1 d	1/0 10		_
_			c. Level Register			<u> </u>
Shelby NC 281	132		Federal		County:	
			State	L	Municipality:	e. Election Sum to Date
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i Data (mm/	dd (mww)		
M Account Code		, possiones	i. Date (mm/	uu/yyyy)	j. Amount	k. Required Remarks
01	ck # 113	В	10/15/24	10/15/24 \$153.72		t-shirts
					\$	
4. Payee Inform	nation		Add		Remove	
a. Full Name, Mail	ling Address & Phone		b. Coordinated	Committee N		d. Comments
(include city, state,	, & zip)					postage
Buffy Murphey	/					1
114 Camelot C	t		c. Level Register	ed (Specify)		
Kings Mtn NC 28086			Federal	Ø	County:	-
_			State		Municipality:	e. Election Sum to Date
					1	\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/c	ld/www)	j. Amount	k. Required Remarks
			ii Date (iiiii)	zurjjjj)	j. Amount	postage
01	ck #98	I	10/28/24		\$29.20	postage
					\$	
4. Payee Inforn	nation		Add		Remove	
a. Full Name, Mail	ing Address & Phone		b. Coordinated (Committee N	ame	d. Comments
(include city, state,						signage
Johnny Hutchin						
1436 Phifer Rd			c. Level Register	ed (Specify)	The William Control	AL THEORY MARK PLACE IN THE BOTH
Kings Mtn NC	28086		Federal	\boxtimes	County:	CLEVELAND COUNTY BOE
			☐ State		Municipality:	e. Election Sum to Date
						\$
6 4	Landa Company	h Purnaga Coda			T	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/d	ia/yyyy)	j. Amount	k. Required Remarks
01	ck #115	K	10/28/24		\$233.64	
					\$	
5. Total only th		Establish Color			VOTA 12 Z. S. S. S.	\$ 416.56
	CRO-1310 Pages			este e production de la company de la co		· · · · · · · · · · · · · · · · · · ·
(This line goes in	line 13a of Detailed Sun	nmary Page CRO-110	if Operating Expe	nses)		\$ 1207.21
(This line goes in	line 13b of Detailed Sun	nmary Page CRO-1100	if Contrib to Cana	lidates/Politic	cal Comm)	\$ 1297.31
41 F 26 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2	line 13c of Detailed Sun			rty Expenditt	ires)	
	es (List detailed ex			Transfer Monthly	The second	A Marie Company of the Company of th
A* - Media E - Salaries I - Postage	B* - Printing F* - Equipment J - Penalties				H* - Holdin	ner Candidate g Public Office Expenses on to Legal Expense Fund
O* - Other * Codes requir	e detailed explanat	ion in required re	marks field (k)			

Disbursen			Pį	z 1 of	Amendment 1 Yes 🔀 No
Use this form to	o report expenditure: I coordinated party e	s from the commit	tee for; operating expens	es, contributions to	o candidate/political
	Full Name (and Fu				
Re-Elect John	ny Hutchins for Clev	eland County Con	om	18 38 38 38 38 38 38 38 38 38 38 38 38 38	2. ID Number
3. Type of Disl	oursement (Ple	ase use separate (RO-1310 forms for eac	h typa of Diskursa	
Operating 1	Expenses	Contributions to Ca	indidates/Political Committees		Coordinated Party Expenditures
4. Payee Infori	mation		Add	Remove	
a. Full Name, Mai	ling Address & Phone		b. Coordinated Committee		d. Comments
(include city, state	, & zip)		Gordon / Hutchins		Party Expenditu
Kevin Gordon					, and a second
			c. Level Registered (Specif	y)	
•			Federal X	County:	
			Municipality:	e. Election Sum to Date	
	4 · · · · · · · · · · · · · · · · · · ·	T			\$
. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01 ck #109		D	08/24/24	\$150.00	Party Expenditu
				\$	
Dovido Inform	nation		Add	Remove	
			c. Level Registered (Specify Federal State	County: Municipality:	CLEVELAND COUNTY OCT 28 '24 PM2:05 e. Election Sum to Date
					\$
Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	
	,		i. Date (mm/dd/yyyy)	J. Amount	k. Required Remarks
				\$	
				\$	
. Payee Inform	iation		Add T	Remove	
. Full Name, Maili	ng Address & Phone		b. Coordinated Committee		d. Comments
nclude city, state,	& zip)				
			c. Level Registered (Specify)	<u>:</u> _
			Federal	County:	
			State	Municipality:	e. Election Sum to Date
					\$
Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	

Loan Repayments Use this form to report payments on an existing loan.	Pg	1	of	1	Ame	ndment Yes	\boxtimes	No
1. Committee Full Name (and Fund if applicable) Re-Elect Johnny Hutchins for Cleveland County Comm			1	2. ID	Numb	er 🚉		
3. Lender Information Add R	emove	3			at root car Sparroom			(##1 T.W)

Re-Elect Johnny Hutchins	for Cleveland County Comm			2. ID Number	
3. Lender Information		⊠ Add ″	Remove		
a. Full Name, Mailing Address	& Phone	ZY YUU	Kemove	b. Comments	
(include city, state, & zip)	postage				
Buffy Murphey					
114 Camelot Ct Kings Mtn NC 28086	c. Original Loan Date				
1111150 17111 110 20000				09/24/24	
				d. Original Loan Amount	
				\$ 29.20	
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$ 0	01	ck #98	10/28/24	\$ 29.20	
\$				\$	
3. Lender Information		Add	Remove		
a. Full Name, Mailing Address &	k Phone		- Cinove	b. Comments	
(include city, state, & zip)					
Johnny Hutchins		-		- CLEVELAND COUNTY BOY 	
1436 Phifer Rd				c. Original Loan Date	
Kings Mtn NC 28086				09/05/24	
				d. Original Loan Amount	
				\$ 233.64	
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
5 0	01	ck #115	10/28/24	\$ 233.64	
В				\$	
3. Lender Information		Add	Remove		
. Full Name, Mailing Address &	Phone			b. Comments	
(include city, state, & zip)					
				c. Original Loan Date	
	d. Original Loan Amount				
	7			\$	
. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
				\$	
;				\$	
. Total only this Page			I	\$ 262.84	
5. Total of ALL CRO-	1420 Pages		100 (100 (100 (100 (100 (100 (100 (100	ф <u>Осо</u> О	
	Detailed Summary Page (CRO-1100)			\$ 262.84	

Outstanding Loans

				Ame	Amendment		
Pg	1	of	<u>1</u>		Yes	\boxtimes	No

CATHI	a taw	n to wan aut au.	 loans received during		

1. Committee Full N	ame (and Fund if applicable) - 1		2. ID Number	
Re-Elect Johnny Hut	chins for Cleveland County C	omm			
3. Lender Information	on A	dd = = =	Remove		
a. Full Name, Mailing Ad	d Comments				
(include city, state, & zip)			Title/Profession	d. Comments	
Buffy Hutchins		1	-	postage	
114 Camelot Ct				e. Start Date (mm/dd/yyyy)	
Kings Mountain NC 28086			oyer's Name/Specific Field	09/24/24	
				f. End Date (mm/dd/yyyy)	
				10/28/24	
g. Rate	h. Security Pledged		i. Original Loan Amount	j. Remaining Loan Balance	
0 %	0 % \$ 29.20		\$ 29.20	\$ 29.20	
k. Full Name of Lending I	nstitution			l. Loan Number	
	•			CLEVELAND COU OCT 28 '24 PM	
3. Lender Informatio	the second secon	d (Remove		
a. Full Name, Mailing Add			itle/Profession	d. Comments	
(include city, state, & zij Johnny Hutchins		Retire	d/Commissioner	signage	
1436 Phifer Rd	•	İ			
Kings Mtn NC 28086		c Emple	over's Nema/Specific Field	e. Start Date (mm/dd/yyyy)	
		c. Employer's Name/Specific Field		09/05/24	
				f. End Date (mm/dd/yyyy)	
				10/28/24	
g. Rate	h. Security Pledged		i. Original Loan Amount	j. Remaining Loan Balance	
0 %			\$ 233.64	\$ 233.64	
k. Full Name of Lending In	stitution			l. Loan Number	
3. Lender Informatio	n . Add	d -	Remove		
a. Full Name, Mailing Add	ress & Phone		tle/Profession	d. Comments	
(include city, state, & zip)				
		a Emplo	yer's Name/Specific Field	e. Start Date (mm/dd/yyyy)	
		c. Emplo	yer 3 Name/Specific Field		
				f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged		i. Original Loan Amount	j. Remaining Loan Balance	
%			\$	\$	
k. Full Name of Lending Institution				l. Loan Number	
		<u> </u>		Sour Manuel	
4. Total only this Page				\$ 262.84	
5. Total of ALL CRO					
	21 of Detailed Summary Page CRO-	1100)		\$ 262.84	