| Disclosure R | eport | 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 Infor | mation | | | | | |
|--|--|--------------------------|--|---|---|--|
| a. Full Name | | | | | | c. ID Number |
| Re-Elect Johnny Hu | utchins for Cleveland Count | y Com | missioner | | | |
| b. Mailing Address (incl | | | | d. Date Filed | | |
| 1436 Phifer Rd | - | | | | | |
| Kings Mountain NO | C 28086 | | | | | 01/27/20 |
| | | | | | | e. Phone Number |
| | | | | | | 704.692.2966 |
| 2. Report Year | 2. Davied Start Date (www. | | 4. Period E | nd Date | . T | |
| 2. Report 1 car | 3. Period Start Date (mm/ | dd/yy) | (mm/dd/yy) | | 5. Treasurer Fu | |
| 2020 | | | | | Christina Mae I | Hutchins |
| 6. Type of Committ | tee (Check One) | 9. Ty | pe of Report | (check or | aly one type of repa | ort from one category) |
| Candidate Campa | | Munic | | State/C | | Referendum |
| PAC | Referendum | | Organizational | | Organizational | Organizational |
| Independent Expenditure | Joint Fundraiser | | Thirty-five day | | Quarterly | Pre-referendum |
| Legal Expense Fu | und | | | | | |
| 7. Type of Fund | (if applicable, check one) | | Pre-primary | | First | Final |
| Booster Fund" | | | Pre-election | | Second | Supplemental Final |
| Building Fund | | | Pre-runoff | | Third | Annual |
| | | | Semi-annual | | Fourth | Special |
| Other: | | 님 | Mid Year Year End | | Semi-annual Mid Year | 10 Special Deport Name |
| Oulci. | | 님 | Final | | Year End | 10. Special Report Name |
| 8. Number of Fund | raisers this Report | 11 | Special | | Final | |
| Of I MANUE OF EACH | and the terms | _ | орески. | | Special | |
| 11. Account Inform | ation | | | 11. Account | • | |
| a. Financial Institution Full Name | | | | | titution Full Name | |
| | | | | | | |
| Suntrust Bank | | c. Account Code | | | | c. Account Code |
| b. Purpose | c. Account Code | | | b. Purpose | | Carrecount Code |
| b. Purpose Campaign | c. Account Code | <u> </u> | | b. I ur pose | | C Account cont |
| b. Purpose | 01 | | | b. 1 ur pose | | 4 |
| b. Purpose Campaign | | | | b. I dipose | | d. Period Begin Balance |
| b. Purpose Campaign | 01 | | | b. Turpose | | 4 |
| b. Purpose Campaign | d. Period Begin Balance | | | D. I urpose | | d. Period Begin Balance |
| b. Purpose Campaign Finance CERTIFICATION I certify that the Com | d. Period Begin Balance \$ 0.00 | e iance w | ith all applicab | ole provisions | | d. Period Begin Balance \$ \$, & 22D-22M of Chapter 163 of |
| b. Purpose Campaign Finance CERTIFICATION I certify that the Comthe NC General Statu | d. Period Begin Balance \$ 0.00 mmittee or Fund is in compliates and that no funds are constants. | iance w | ith all applicab | ole provisions | non-disclosed fund | d. Period Begin Balance |
| campaign Finance CERTIFICATION I certify that the Comthe NC General Status is complete, true and | d. Period Begin Balance \$ 0.00 mmittee or Fund is in compliates and that no funds are collected and that I have been | iance w | ith all applicab led with prohib d by the MC Sta | ole provisions bited or other ate Board of F | non-disclosed fund Elections | d. Period Begin Balance \$ B, & 22D-22M of Chapter 163 of its. L further certify that this report |
| b. Purpose Campaign Finance CERTIFICATION I certify that the Comthe NC General Statu | d. Period Begin Balance \$ 0.00 mmittee or Fund is in compliates and that no funds are collected and that I have been utchins | iance w | ith all applicab ded with prohib d by the NC Sta | ole provisions bited or other ate Board of E | non-disclosed fund Elections. Hutchin | d. Period Begin Balance \$ B, & 22D-22M of Chapter 163 of the state of |
| campaign Finance CERTIFICATION I certify that the Comthe NC General Statutis complete, true and Christina Hu | d. Period Begin Balance \$ 0.00 mmittee or Fund is in compliates and that no funds are collected and that I have been utchins Printed Name of Signer | iance w | ith all applicab ded with prohib d by the NC Sta | ole provisions bited or other ate Board of F | non-disclosed fund Elections. Hutchin | d. Period Begin Balance \$ B, & 22D-22M of Chapter 163 of its. L further certify that this report |
| CERTIFICATION I certify that the Comthe NC General Status is complete, true and Christina Hu FOR OFFICE USE O | d. Period Begin Balance \$ 0.00 mmittee or Fund is in compliates and that no funds are collected and that I have been utchins Printed Name of Signer | iance w | ith all applicab gled with prohib d by the NC Sta | ole provisions bited or other ate Board of E | non-disclosed fund Elections. Hutchin | d. Period Begin Balance \$ B, & 22D-22M of Chapter 163 of the state of |
| campaign Finance CERTIFICATION I certify that the Comthe NC General Statutis complete, true and Christina Hu | d. Period Begin Balance \$ 0.00 mmittee or Fund is in compliates and that no funds are collected and that I have been utchins Printed Name of Signer | iance w | ith all applicab ded with prohib d by the NC Sta | ole provisions bited or other ate Board of E | non-disclosed fund Elections. Hutchin | d. Period Begin Balance \$ B, & 22D-22M of Chapter 163 of its. I further certify that this report 101/27/20 Date Delivery Method Normal Mail |
| CERTIFICATION I certify that the Comthe NC General Status is complete, true and Christina Hu FOR OFFICE USE O | d. Period Begin Balance \$ 0.00 mmittee or Fund is in compliates and that no funds are collected and that I have been utchins Printed Name of Signer ONLY FEB 10 202 | iance w | ith all applicabeled with prohibited by the MC Starks | ole provisions bited or other ate Board of E | non-disclosed fund Elections. Hutchin | d. Period Begin Balance \$ B, & 22D-22M of Chapter 163 of Is. I further certify that this report 01/27/20 |
| Campaign Finance CERTIFICATION I certify that the Comthe NC General Statutis complete, true and Christina Hu FOR OFFICE USE O Date Received: | d. Period Begin Balance \$ 0.00 mmittee or Fund is in compliates and that no funds are collected and that I have been utchins Printed Name of Signer ONLY FEB 10 202 | iance w | ith all applicab gled with prohib d by the NC Sta | ole provisions bited or other ate Board of E | non-disclosed fund Elections. Hutchin | d. Period Begin Balance \$ B, & 22D-22M of Chapter 163 of Is. I further certify that this report Date Delivery Method Normal Mail Registered Mail Hand Delivered |
| Campaign Finance CERTIFICATION I certify that the Comthe NC General Statutis complete, true and Christina Hu FOR OFFICE USE O Date Received: | d. Period Begin Balance \$ 0.00 mmittee or Fund is in compliates and that no funds are collected and that I have been utchins Printed Name of Signer ONLY FEB 10 202 | iance w | ith all applicabeled with prohibited by the MC Starks | ole provisions bited or other ate Board of E | non-disclosed fund Elections. Hutchin | d. Period Begin Balance \$ B, & 22D-22M of Chapter 163 of its. I further certify that this report Delivery Method Normal Mail Registered Mail Hand Delivered Electronically Filed |
| Campaign Finance CERTIFICATION I certify that the Comthe NC General Statutis complete, true and Christina Hu FOR OFFICE USE O Date Received: Date Postmarked | d. Period Begin Balance \$ 0.00 mmittee or Fund is in compliantes and that no funds are concert and that I have been utchins Printed Name of Signer ONLY FEB 10 202 d: | iance w | ith all applicabeled with prohibited by the MC Standard Sign Employee: | ole provisions bited or other ate Board of E | non-disclosed fund Elections. Hutchin | d. Period Begin Balance \$ B, & 22D-22M of Chapter 163 of Is. I further certify that this report Delivery Method Normal Mail Registered Mail Hand Delivered |
| Campaign Finance CERTIFICATION I certify that the Comthe NC General Status is complete, true and Christina Hu FOR OFFICE USE O Date Received: Date Postmarked Date Scanned: Date Data Entere | d. Period Begin Balance \$ 0.00 mmittee or Fund is in compliates and that no funds are concorrect and that I have been utchins Printed Name of Signer ONLY FEB 10 202 d: ed: | iance womming in trained | ith all applicabeled with prohibed by the MC State Sign Employee: Employee: Employee: Employee: | ole provisions bited or other ate Board of E istina nature of Appoin | non-disclosed fund Elections. Tutchen ted Treasurer | d. Period Begin Balance \$ B, & 22D-22M of Chapter 163 of lists. I further certify that this report Date Delivery Method Normal Mail Registered Mail Hand Delivered Electronically Filed Signer has not received mandatory training |
| Campaign Finance CERTIFICATION I certify that the Comthe NC General Status is complete, true and Christina Hu FOR OFFICE USE O Date Received: Date Postmarked Date Scanned: Date Data Entere | d. Period Begin Balance \$ 0.00 mmittee or Fund is in compliantes and that no funds are conference and that I have been utchins Printed Name of Signer ONLY FEB 10 202 d: ed: s form cannot be used to am | iance womming in trained | ith all applicabiled with prohibiled by the MC Standard Signature Employee: Employee: Employee: Employee: Employee: | ole provisions bited or other ate Board of Extina nature of Appoin | non-disclosed fund Elections. Hutchin ted Treasurer the committee add | d. Period Begin Balance \$ B, & 22D-22M of Chapter 163 of is. I further certify that this report Delivery Method |
| Campaign Finance CERTIFICATION I certify that the Comthe NC General Status is complete, true and Christina Hu FOR OFFICE USE O Date Received: Date Postmarked Date Scanned: Date Data Entere | d. Period Begin Balance \$ 0.00 mmittee or Fund is in compliantes and that no funds are conference and that I have been utchins Printed Name of Signer ONLY FEB 10 202 d: ed: s form cannot be used to am | iance womming in trained | ith all applicabeled with prohibited by the MC Standard Signal Employee: Employee: Employee: Employee: Employee: Employee: | ple provisions bited or other ate Board of Final pattern of Appoin attire of Appoin attion such as on, or account | non-disclosed fund Elections. Hutchin ted Treasurer the committee addinformation. | d. Period Begin Balance \$ B, & 22D-22M of Chapter 163 of is. I further certify that this report Delivery Method Normal Mail Registered Mail Hand Delivered Electronically Filed Signer has not received mandatory training Iress, treasurer, assistant treasurer, |

FEB 1 0 1771 August 2008

Detailed Summary

Amendment

 \bowtie Yes

No

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 Report 3. ID Number Re-Elect Johnny Hutchins for Cleveland County Quarterly Commissioner **Total this** Start of Election Cycle: Total this January 1, 2020 Reporting Period **Election Cycle** Cash on Hand at Start \$ 0 \$ RECEIPTS 5) **Aggregated Contributions from Individuals** (CRO-1205) \$ \$ 6) **Contributions from Individuals** (CRO-1210) \$ 1550.00 \$ 7) **Contributions from Political Party Committees** (CRO-1220) \$ \$ **Contributions from Other Political Committees** 8) (CRO-1230) \$ \$ 9) **Loan Proceeds** (CRO-1410) \$ 678.30 \$ Refunds/Reimbursements To the Committee (CRO-1240) \$ \$ 11) Other Receipt Sources 11a) Interest on Bank Accounts (CRO-1250) \$ Contributions from Not-for-Profit Organizations 11b) (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, 11d and 11e) 2228.30 \$ **EXPENDITURES** 13) Disbursements 78.30 13a) Operating Expenditures (CRO-1310) \$ 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ 13c) Coordinated Party Expenditures (CRO-1310) \$ 14) Aggregated Non-Media Expenditures \$ (CRO-1315) \$ Loan Repayments 15) (CRO-1420) \$ \$ 16) Refunds/Reimbursements From the Committee (CRO-1320) \$ \$ 17) **In-Kind Contributions** (CRO-1510) \$ \$ TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) 278.30 18) \$ 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) \$ 950,00 ADDITIONAL INFORMATION 20) Non-Monetary Gifts Given to Other Committees (CRO-1330) \$ 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) \$ 678.30 **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) \$ **Forgiven Loans** \$ 26) (CRO-1440) \$ **48-Hour Notice Reports Sum** (CRO-2220)\$ \$ 28) Contributions to be Refunded (CRO-1215) \$

| | | m Individuals | | | | Pg | _1 | f <u>1</u> | Amendm | ent es 🛭 No |
|-------------------------------|--|--------------------------|-----------------------------------|-----------------------------------|------------|-------------|-------------------------|---|---------------|---|
| Use this | form to report ind | ividual contributions | over \$5 | 0 or cont | tribution | ns und | er \$50 if form CI | THE RESERVE OF THE PERSON NAMED IN COLUMN 1 | | |
| | | (and Fund if applica | | | | | | 2. ID N | umber | |
| | | for Cleveland County | Comm | issioner | 114 | | | | | |
| | ributor Informati | | | Add | | | nove | | | |
| | me, Mailing Address e city, state, & zip) | & Phone | | b. Job | Title/Pro | fession | | d. Comm | ents | |
| | LeGrand | | | Keine | eu | | | | | |
| PO Box 727 Shelby NC 28151 | | | c. Employer's Name/Specific Field | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | n Sum to Date | |
| | | | Tie Dereke specie | | | | | \$ | 1,000.00 |) |
| f. Prior | g. Account Code | h. Form of Payment | i. In-l | Kind Descr | ription | | j. Date (mm/dd/y | ууу) | k. Amour | t |
| | | CK 5166 | | 1 | | | 1/16/ | 20 | \$ | 1,000.00 |
| | | | | | | | | | \$ | |
| | | 10 | | | | | | | \$ | |
| 3. Contr | ibutor Informatio | on . | | Add | | Ren | nove | | | |
| | ne, Mailing Address d | & Phone | | b. Job T | Title/Prof | ession | | d. Comme | ents | |
| | city, state, & zip) Holbrook | | | Retire | ed | | | | | |
| 201 Troo | | | | c. Empl | over's N | ame/Sne | ecific Field | | | |
| Shelby N | | | | C Zap | ojer ora | шеор | cente i text | | | |
| • | | | | | | | e. Election Sum to Date | | | |
| | | | | | | | | \$ | 500.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-k | Cind Descr | iption | | j. Date (mm/dd/y | yyy) | k. Amoun | t |
| | | CK 1733 | | | | | 1/20/2 | 20 | \$ | 500.00 |
| | | | | | | | | | \$ | |
| | 7 | | | | = | | | | \$ | *************************************** |
| 3. Contri | butor Informatio | n | | Add | | Rem | love | | | |
| | ne, Mailing Address & | è Phone | | b. Job T | | ession | | d. Comme | nts | |
| Douglas (| city, state, & zip) G Bridges | | | Retired | d | | | | | |
| - | iter Valley Rd | | | c. Employer's Name/Specific Field | | cific Field | | | | |
| Shelby No | C 28150 | | | 2 | | | | | | |
| | | | | | | | | e. Election | Sum to Date | |
| | | | _ | | | | | \$ | 50.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-K | ind Descri | iption | | j. Date (mm/dd/yy | уу) | k. Amount | |
| Ш | | CK 10668 | | | | | 1/16/2 | 20 | \$ | 50.00 |
| | | | | | | | | | \$ | |
| | | | | | | | / | | \$ | |
| | only this Page | | | | | | | \$ | | 1550.00 |
| | of ALL CRO- | | | | | | | \$ | | 1550.00 |
| | | Detailed Summary Page Cl | | | | | | | | |
| CRO-121 | U | | | NC State E | soard of I | elections | S | a many many many many many many many man | n nn ra r | April 2007 |

Amendment

Outstanding Loans

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

| 1. Committee Full Na | ame (and Fund if applicable | :) | | 2. ID Number |
|-----------------------------|---|---------------------|----------------------------|----------------------------|
| Re-Elect Johnny Huto | FEB 2 5 2020 | | | |
| 3. Lender Information | on 🛛 A | dd | Remove | |
| a. Full Name, Mailing Add | | b. Job T | Title/Profession | d. Comments |
| (include city, state, & zi | p) | Comm | nissioner | registration |
| Johnny Hutchins | | | | fee |
| 1436 Phifer Rd | | | | e. Start Date (mm/dd/yyyy) |
| Kings Mountain NC 2 | 28086 | c. Emplo | oyer's Name/Specific Field | 12/2/19 |
| | | | | f. End Date (mm/dd/yyyy) |
| | | | | 01/27/20 |
| g. Rate | h. Security Pledged | | i. Original Loan Amount | j. Remaining Loan Balance |
| 0 % | | | \$ 97.00 | \$ 97.00 |
| k. Full Name of Lending I | nstitution | | | l. Loan Number |
| - | | | | |
| | | | | |
| 3. Lender Informatio | on 🔲 Ad | dd | Remove | |
| a. Full Name, Mailing Add | lress & Phone | | itle/Profession | d. Comments |
| (include city, state, & zi | p) | Comm | nissioner | deposit to fund |
| Johnny Hutchins | | | | campaign |
| 1436 Phifer Rd | | | | e. Start Date (mm/dd/yyyy) |
| Kings Mountain NC 2 | 28086 | c. Emplo | oyer's Name/Specific Field | 12/13/19 |
| | | | | f. End Date (mm/dd/yyyy) |
| | | | | 01/27/20 |
| g. Rate | h. Security Pledged | | i. Original Loan Amount | j. Remaining Loan Balance |
| 0 % | 0 % | | \$ 400.00 | \$ 497.00 |
| k. Full Name of Lending In | nstitution | | | l. Loan Number |
| | | | | |
| | | | | |
| 3. Lender Informatio | rakish mengangan kengan ang kengangan pengangan pengangan pengangan pengangan pengangan pengangan pengangan pe Pengangan pengangan | | Remove | |
| a. Full Name, Mailing Add | | | itle/Profession | d. Comments |
| (include city, state, & zij | p) | Comm | nissioner | Tractor Supply |
| Johnny Hutchins | | | | Signage Hardwar |
| 1436 Phifer Rd | 2000 | Fmal | N/C'Go Field | e. Start Date (mm/dd/yyyy) |
| Kings Mountain NC 2 | 18086 | c. Empio | oyer's Name/Specific Field | 1/17/20 |
| | | | | f. End Date (mm/dd/yyyy) |
| | | | | 1/27/20 |
| g. Rate | h. Security Pledged | | i. Original Loan Amount | j. Remaining Loan Balance |
| 0 % | | | \$ 85.22 | \$ 582.22 |
| k. Full Name of Lending I | nstitution | | | l. Loan Number |
| | | | | |
| 4. Total only this Pag | I C | 1,007 PA-2007 S | | \$ 582.22 |
| 5. Total of ALL CRO | | 是是在1000年100日 100日 A | | |
| | e 21 of Detailed Summary Page CR | O-1100) | | \$ 678.30 |

| On | teta | nd | inσ | Loans |
|------------|------|------|-----|-------|
| V u | isia | IIU. | ш | Luans |

| | | | Amendment | | | | |
|----|----------|----|-----------|-------------|-----|--|----|
| Pg | <u>2</u> | of | <u>2</u> | \boxtimes | Yes | | No |

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

| 1. Committee Full Name (and Fund if applicable) 2. ID Number | | | | | 2. ID Number |
|--|--|--------------------------|--|----------------------------|---|
| Re-Elect Johnny Hute | | | | | |
| | | | | — . | |
| 3. Lender Information | distribution in the control of the c | Ad | Marine State State of the State | Remove | T |
| a. Full Name, Mailing Add | | | | itle/Profession | d. Comments |
| (include city, state, & zi | P) | | Comm | issioner - 2 5 2020 | Westmoreland |
| Johnny Hutchins 1436 Phifer Rd | | FEB 2 5 2020 | | | Business Cards |
| Kings Mountain NC 28086 | | | a Emple | oyer's Name/Specific Field | e. Start Date (mm/dd/yyyy) |
| | | | c. Empi | byer's Name/Specific Field | 1/13/20 |
| | | | - | | f. End Date (mm/dd/yyyy) |
| | | | | | |
| | | | | | 01/27/20 |
| g. Rate | h. Security Pledged | | | i. Original Loan Amount | j. Remaining Loan Balance |
| 0 % | / | | | \$ 96.08 | \$ 96.08 |
| k. Full Name of Lending I | nstitution | | | | l. Loan Number |
| | | | | 1 | |
| | | | | - Andrews | |
| 3. Lender Information | | Ad | ld | Remove | |
| a. Full Name, Mailing Add | | | b. Job T | itle/Profession | d. Comments |
| (include city, state, & zi | р) | | | | |
| | | | | | |
| | | | F 1 | 1 N 6 16 E 11 | e. Start Date (mm/dd/yyyy) |
| | | | c. Emplo | yer's Name/Specific Field | |
| | | | | | f. End Date (mm/dd/yyyy) |
| | | | | | 1. End Date (mm/dd/yyyy) |
| | | | | | , |
| g. Rate | h. Security Pledged | | | i. Original Loan Amount | j. Remaining Loan Balance |
| % | | | | \$ | \$ |
| k. Full Name of Lending I | nstitution | | | | l. Loan Number |
| | | | | | |
| | | | | | |
| 3. Lender Informatio | n | Ad | ld | Remove | antaga ya malami saketa maraki maji ya api ya kata kata ya kata ya kata kata kata |
| a. Full Name, Mailing Add | ress & Phone | | b. Job Ti | itle/Profession | d. Comments |
| (include city, state, & zi | p) | | | | |
| | | | | | |
| | | | | | e. Start Date (mm/dd/yyyy) |
| | | | c. Emplo | yer's Name/Specific Field | |
| | | | | | 6 E- J D-4- (/JJ/) |
| | | | | | f. End Date (mm/dd/yyyy) |
| | | | | | |
| g. Rate | h. Security Pledged | | | i. Original Loan Amount | j. Remaining Loan Balance |
| % | | | | \$ | \$ |
| | | | | | l. Loan Number |
| k. Full Name of Lending I | 15utuuvii | | | | 1. Loan (valide) |
| | | | | | |
| 4. Total only this Pag | e | | 4180000000000000 | | \$ 96.08 |
| 5. Total of ALL CRO | | AND STATE OF THE SAME OF | oracination | | 10.000 |
| (This line must be on line | \$ 678.30 | | | | |

| Disbursements | P |
|---|---|
| Use this form to report expenditures from the committee | for operating expenses, contributions to candidate/political |
| | of change expenses, contributions to candidate/pointical |
| 1. Committee Full Name (and Fund if applicable) | 2. ID Number |
| Cl-Elect Sonny thinks | So CI I I I |
| 3. Type of Disbursement (Please use separate CRO) | |
| Operating Expenses Contributions to Candidates | 1310 forms for each type of Disbursement.) |
| 4. Payee Information | |
| 1. Full Name, Mailing Address & Phone | K L C L C L C L C L C L C L C L C L C L |
| (include city, state, & zip) | b. Coordinated Committee Name d. Comments |
| Goard of Commissioners | 0 5 0000 |
| 10 Box 1299 | c. Level Registered (Specify) FEB 2 5 2020 |
| | Federal County: |
| Shelly NZ 2015D | State Municipality: e. Election Sum to Date |
| | 5 97,00 |
| t. Account Code g. Form of Payment h. Purpose Code i. Da | ite (mm/dd/yyyy) j. Amount k. Required Remarks |
| | -2-19 597.00 Campaign registraturited |
| Lean Digitalis | 5 Company 11 Sistraturated |
| 4. Payee Information | |
| a. Full Name, Mailing Address & Phone | b. Coordinated Committee Name d. Comments |
| (include city, state, & zip) | b. Coordinated Committee Name d. Comments |
| Tracker Suroly | . , |
| 1665 & Dixon Blood | c. Level Registered (Specify) |
| Tractor Supply 1665 EDHONIAND Shelly NC 38152 | Federal County: |
| | State Municipality: e. Election Sum to Date |
| | s 85.2L |
| f. Account Code g. Form of Payment h. Purpose Code i. Date | (mm/dd/yyyy) j. Amount k. Required Remarks |
| John John John John John John John John | 7/20 585.22 Signage hardware |
| Loan | 11/20 85 EZ Sejruge Miranouch |
| | 5 |
| 4. Payee Information | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | b. Coordinated Committee Name d. Comments |
| | |
| Westmorland Princes | c. Level Registered (Specify) |
| 2020 Elikon Blog | Federal County |
| 2020 Elikon Blod Shelly NZ 28152 | State Municipality: e. Election Sum to Date |
| | 5 96.08 |
| Account Code 4. Form of Payment h. Purgose Code i. Date (| |
| angrituiza 2 | mm/dd/yyyy) J. Amount k. Required Remarks 5 96.08 6 USINGS COLOS |
| Loan | |
| | 5 |
| . Total only this Page | 15 278.30 |
| . Total of ALL CRO-1310 Pages | |
| (This line goes in line 13a of Detailed Summary Page CRO-1100 if Open | rating Expenses |
| (This line goes in line 13h of Detailed Summary Page CRO-1190 if Cont | rib to Candidates/Political Comm |
| (This line goes in line 13c of Detailed Summars Page CRO-1100 if Coor | |
| Purpose Codes (List detailed expenditure code in (h.) a *-Media B*-Printing C*-Fu | |
| e Ta | ndraising D - To Another Candidate |
| G 10h | tical Party H* - Holding Public Office Expenses fice Expenses Q* - Donation to Legal Expense Fund |
| * Other | fice Expenses Q* - Donation to Legal Expense Fund |
| Codes require detailed explanation in required remarks | ñeld (k) |