mediagning Ranart	Cover				Amendment Yes No
Disclosure Report Use this form for general re		nformation, must be	signed and sub	mitted along with	the state of the s
Oo not use this form to upd		·			
. Committee Information	r "e " e e e		A service of the	den sette i replace de	
. Full Name					c. ID Number
Lacey for Clerk					01
. Mailing Address (include City	y, State and Zip Code)				d. Date Filed
804 E Graham St					04/30/2022
Shelby NC 28150					e. Phone Number
•					704/473/5622
		anggan magalag sa sagan kacalaga sa		a le contracteur de la company de la compa	704/473/3022
. Report Year 3. Per	iod Start Date (mm/c	(d/yy) 4. Period (mm/dd/yy)	tended a threat to the first threat in the state of the s	5. Treasurer F	ull Name
2022	01/01/2022	04/3	30/2022	Johnnie Cline	Ingle
o. Type of Committee (Ch		9. Type of Report		ly one type of ren	ort from one category)
Candidate Campaign	Party	Municipal	State/C		Referendum
PAC	Referendum	Organizational	ı 🛛	Organizational	Organizational
Independent Expenditure	Joint Fundraiser	Thirty-five day	y	Quarterly	Pre-referendum
Legal Expense Fund					
The state of the s	olicable, check one)	Pre-primary		First	Final
"Booster Fund"		Pre-election Pre-runoff		Second Third	Supplemental Final Annual
Building Fund		Semi-annual		Fourth	Special
		Mid Yea	r	Semi-annual	— .
Other:		Year End	1 📗	Mid Year	10. Special Report Name
e e e estado e e en estado e e e e estado e e e e e e e e e e e e e e e e e e e		Final		Year End	
B. Number of Fundraiser	s this Report	Special		Final Special	CLEVELAND COUNTY B
11. Account Information			11. Account		MOU 2 22 AMO: 46
a. Financial Institution Full Na	ne		TANKS THE REAL PROPERTY AND ADDRESS OF THE PARTY AND ADDRESS.	titution Full Name	
Fidelity Bank					
o. Purpose	c. Account Code		b. Purpose		c. Account Code
Campaign Fin	0	1			
	d. Period Begin Balanc		1		d. Period Begin Balance
	1293 25	<u> </u>	1		
	\$ 1273.23	***			\$
CERTIFICATION					enja e izelopi e u temerni i di
					2B, & 22D-22M of Chapter 163 of
the NC General Statutes ar is complete, true and corre					nds. I further certify that this report
LACEY INGLE					05/02/2022
Prin	ted Name of Signer		Signature of Appoir	nted Treasure	Date
FOR OFFICE USE ONLY	~ 2 22	\			Dalisson Mathad
Date Received:	52-2z	Employee:	<u>(</u>	<u>(v)</u>	Delivery Method Normal Mail
Date Postmarked:		Employee:			Registered Mail
Date Pushindiked.		Employee:			Hand Delivered
Date Scanned:		Employee:			☐ Electronically Filed ☐ Signer has not received
~ with Committee.					mandatory training
Date Data Entered:		Employee:		and the second of the second o	and the second s

	Ameno	Jment			
Detailed Summary		Yes	\boxtimes	No	
Use this form to summarize all disclosure reporting forms and to total monetary information.					
	NOTES A SERVICE	64.500 (100.56)	Selfland a com	S. 1800 Sept. 1800	į

Use this form to summarize all disclosure reporting forms and to 1. Committee Full Name (and Fund if applicable) 2. Ty			mation.	3. ID N	umber
Lacey for Clerk	s electronelisted electrical	Her Agent Sources	CENTRAL CONTRACT CON	01	
Start of Election Cycle: January 1, 2	022		Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start		\$	1293.25	\$	
<u>raecibierts</u>				500	
5) Aggregated Contributions from Individuals	(CRO-1205)	\$		\$	
6) Contributions from Individuals	(CRO-1210)	\$	300.00	\$	4450.00
7) Contributions from Political Party Committees	(CRO-1220)	\$		\$	
8) Contributions from Other Political Committees	(CRO-1230)	\$		\$	
9) Loan Proceeds	(CRO-1410)	\$		\$	
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)	\$,	\$	CLEVELAND COU MAY 2 '22 AM
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$		\$	MHY Z ZZ AM
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d	and IIe)	\$	300.00	\$	4450.00
<u>LEXPREDITATIONS</u>				1019	
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	388.71	\$	3245.46
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, 16 a	ınd 17)	\$	388.71	\$	3245.46
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract li	ine 18)	\$	1204.54	\$	1204.54
NOJETE KONTEKONEJE I ENTRODEKANI ATEKONOMITEKOTOKA					
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-2200)	\$		\$	
28) Contributions to be Refunded	(CRO-1215)	\$		\$	

Contrib	butions from	Individuals	<u></u> ተረሰ	Pg	of CP (1205 is not	nsed		
Use this fo	rm to report indivi	idual contributions ov	er \$50	or contributions unde	r \$50 II IOIIII CRC	2. ID Numl	net		
1. Commi	ttee Full Name (a	nd Fund if applicab	ie)			26 (ID) (NUIII)			
acey for	Clerk								
3. Contril	outor Information	le de la companya de	X .	Add 🖟 🔲 🚁 Ren	nove:				
COLUMN TO SECURE AND ASSESSMENT	e, Mailing Address &			b. Job Title/Profession		d. Comments			
	ity, state, & zip)			Retired - school tea	cher				
Sue Hamr			-	c. Employer's Name/Sp	asifia Field				
104 Kester Dr				Retired school teacher					
Cherryviii	Cherryville, NC 28021			Notified Serious source		e. Election Sum to Date			
						\$	300.00		
			T		1 D. 4. (/44/	<u> </u>	k. Amount		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy				
	01	CHECK			02/14/20	022	\$ 300.00		
П							\$		
							\$		
	ADTRACT CONTRACTOR				107.00		LÊVELAND COUNTY BO		
	butor Informatio ic, Mailing Address &			Add Rei		d. Comment			
the state of the s	ie, Mailing Address & city, state, & zip)	Fhone		b. gob Title/11 diession					
(include)	,	<u></u>							
				c. Employer's Name/S ₁	pecific Field	1			
						a Flaction S	um to Date		
							um to pate the service also service		
						\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Date (mm/dd/yy	уу)	k. Amount		
							\$		
							\$		
(New Annual Control of the Control o	RESERVE WANTE IN ANALYSIS IN SAFAHIT CONTROL OF THE TANK		\$10.00	medicines : Principality (accupate during g		asiand samening of the	\$		
The property of the contract o		ings and wells		·~····		1			
A second control of the control o	ne, Mailing Address & city, state, & zip)	& Phone		b. Job Title/Profession		d. Comment			
(meinae	city, state, & zip)	- The American Control of the Contro							
				c. Employer's Name/S	pecific Field				
						a Flastian C	Land to Data to		
						e. Election S	um to Date		
						\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount		
							\$		
							\$		
							\$		
4. Tota	l only this Pag	eye			and the second	\$	300.00		
	LofALL CRO	-1210 Pages. Detailed Summary Page				\$	300.00		
Ta (Inis lin	e musi de on une 0,05	Detuties Summary Fage (-NU-110	少人和一种的影響自然是自然的					

Amendment

•							Amendment		
Disbursements				Pg	<u>1</u>	of <u>1</u>	Yes Yes	\boxtimes	No
	114 C	.1	• •		, -	1 4	1-4-/1:4:1		

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

1. Committee F	ull Name (and Fund	l if applicable)		de la le		2. ID Number-
Lacey For Clerk				ALCONOMIC TOPONO	and the second consequence of the second con	01
	ursement <u>(Plea</u>					
Operating E	xpenses		didates/Political Comm			ordinated Party Expenditures
4. Payee Inform	ration		Add	-	Remove	
a. Full Name, Maili	ing Address & Phone		b. Coordinated Com	mittee Na	ime	d. Comments
(include city, state,	& zip)	·				
Victorian Rose						<u> </u>
212 S. Lafayette		•	c. Level Registered (_
Shelby NC 281	50		Federal Federal	\boxtimes	County:	ALTURI AND COUNTY DE
			State	Ц	Municipality:	e. Election Sin EVELLAND COUNTY BOMAY 2"22 AM 9:46
						\$ 58.71 MHT Z ZZ HMJ-10
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/y	ууу)	j. Amount	k. Required Remarks
01	CHECK	О	01/28/2022		\$58.71	pictures
-	CILCK	0	01/20/2022		Ψ50.71	·
					\$	
4. Payee Inforn	nation/		Add		Remove	
	ing Address & Phone		b. Coordinated Com	mittee Na	ıme	d. Comments
(include city, state,	-					
E-Z STORAGE	E					STOARAGE BLDG
PO BOX 309			c. Level Registered (Specify)		<u> </u>
BOILING SPR	INGS NC 28017		Federal		County:	
			State		Municipality:	e. Election Sum to Date
						\$ 330.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/y	ууу)	j. Amount	k. Required Remarks
01	CHECK	0	04/28/22		\$330.00	STORAGE BLDG
					\$	
A Book Took	nation		Add		Remove	
			b. Coordinated Com			d. Comments
	ing Address & Phone		b. Coordinated Com	BILLICE IN	ame	u. Comments
(include city, state,	& zip)	· · · · · · · · · · · · · · · · · · ·	-			
			c. Level Registered (Specify	The state of the s	1
			Federal	Specify	County:	
			State		Municipality:	e. Election Sum to Date
			State		winicipality.	C. Diction Sum to Date
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/y	ууу)	j. Amount	k. Required Remarks
					\$	
					\$	
				alosari dan deram	ļ ^Ψ	
5. Total only th	is Page CRO-1310 Pages			1.5 - 1.5 (A)		\$ 388.71
	line 13a of Detailed Sun	nmary Page CRO-110	0 if Operating Expense	s)		0005
	ı line 13b of Detailed Sun	\$ 388.71				
	line 13c of Detailed Sun					
the state of the s	les (List detailed ex					
A* - Media	B* - Printing	C* - Fund		and the state of t	D - To Anoth	ner Candidate
E - Salaries	F* - Equipment	G - Politic	cal Party		H* - Holding	g Public Office Expenses
I - Postage	J - Penalties	K* - Offi	ce Expenses		Q* - Donatio	on to Legal Expense Fund
O* - Other						
codes requi	re detailed explanat	ion in required r	emarks Heid (k) 🗄		raffesti kalendari eta	