	to update information							
1. Committee Infor	rmation							
a. Full Name						c. ID Number		
Citizens To Elect R	on Humphries							
b. Mailing Address (inc	lude City, State and Zip Code)					d. Date Filed		
913 Sharon Drive Kings Mountain, N	C 28086					7-	-2020	
						e. Phone Number		
						704-47	2-2764	
2. Report Year	3. Period Start Date (mm/d	ld/yy)	4. Period Er (mm/dd/yy)	End Date 5. Treasurer Fu		ull Name		
2020	2/152020		6-30-	2020	Ronald E. Hum	E. Humphries		
6. Type of Commit			pe of Report			ort from one category	)	
X Candidate Camp		Munic		State/C		Referendum		
□ PAC □ Independent	□ Referendum		Organizational		Organizational	☐ Organization	nal	
Independent Expenditure	☐ Joint Fundraiser		Thirty-five day		Quarterly	☐ Pre-reference	lum	
☐ Legal Expense F	und	_						
7. Type of Fund	(if applicable, check one)		Pre-primary		First	☐ Final		
□ "Booster Fund"			Pre-election		Second	Supplement	al Final	
☐ Building Fund			Pre-runoff Semi-annual		Third Fourth	Annual		
			Mid Year		Semi-annual	☐ Special		
□ Other:			Year End		Mid Year	10. Special Rep	nort Nama	
outer.			Final		Year End	10. Special Re	oort Name	
8. Number of Fund	raisers this Report		Special		Final			
	0	_	Special		Special			
11. Account Inform	ation		1		Information			
a. Financial Institution					titution Full Name			
SunTrust Bank								
b. Purpose	c. Account Code		1	b. Purpose		c. Account Code		
Campaign Finance		01						
	d. Period Begin Balanc	e				d. Period Begin	Balance	
	\$ 391.53					s		
CERTIFICATION		= 10 0						
I certify that the Cor NC General Statutes	nmittee or Fund is in complications and that no funds are commorrect and that I have been transpared.	ingled wi	th prohibited or the NC State Bo	other non-di pard of Election	sclosed funds. I fu ons.	rther certify that this	ter 163 of the report is	
FOR OFFICE USE O	Printed Name of Signer		Sigr	nature of Appoin	nted Treasurer	Date		
Date Received:	7/7/202	O	Employee:	7	3.P	Delivery Method  □ Normal Ma	il	
Date Postmarke	d:		Employee:		- O - D - D - D - D - D - D - D - D - D	Registered Hand Deliv	Mail	
Date Scanned:			Employee:			Electronica		
Date Data Enter			Employee:		JUL 07 7979	mandatory	training	

CRO-1000

NC State Board of Elections

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

## **Detailed Summary**

Amendment

☐ Yes X□ No

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

	1				
2020	Total this Reporting Period	Total this Election Cycle			
	\$ 391.53	\$			
(CRO-1205)	\$	\$			
(CRO-1210)	\$	\$			
(CRO-1220)	\$	\$			
(CRO-1230)	\$	\$			
(CRO-1410)	\$	\$			
(CRO-1240)	\$	\$			
(CRO-1250)	\$	\$			
(CRO-1250)	\$	\$			
(CRO-1250)	\$	\$			
(CRO-1270)	\$	\$			
(CRO-1265)	\$	\$			
nd 11e)	\$ 0.00	\$			
(CRO-1310)	\$ 75.00	\$			
(CRO-1310)	\$	\$			
(CRO-1310)	\$	\$			
(CRO-1315)	\$	\$			
(CRO-1420)	\$	\$			
(CRO-1320)	\$	\$			
(CRO-1510)	\$	\$			
nd 17)	\$ 75.00	\$			
<ul> <li>TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</li> <li>Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)</li> </ul>					
(CRO-1330)	\$				
(CRO-1430)	\$ 2000.00				
(CRO-1610)	\$				
23) Debts and Obligations owed To the Committee (CRO-1620)					
24) Account Transfers Within the Committee [ ] [ ] [ (CRO-1720)					
20 (CRO-1710)	\$	\$			
(CRO-1440)	\$	\$			
	1	7			
(CRO-2220)	\$	\$			
	(CRO-1205) (CRO-1210) (CRO-1220) (CRO-1230) (CRO-1230) (CRO-1240) (CRO-1250) (CRO-1250) (CRO-1250) (CRO-1250) (CRO-1265) and 11e) (CRO-1310) (CRO-1310) (CRO-1310) (CRO-1310) (CRO-1310) (CRO-1320)	Reporting Period   \$ 391.53			

**Disbursements** 

Pg		Amendment					
	 of						
			Ves	X	N		

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	if applicable)							2. ID Number
	Γο Elect Ron Hu									
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)										
X Operating E			Contributions to Car				10001			d Party Expenditures
4. Payee Inform	nation			Ad			Ren			
a. Full Name, Maili		ne		_	Coordinated C			1010	I d Co	mments
(include city, state,				-	oor amateu C	ommittee 14	anic		u. co	minents
	.,			1						
SunTruct	Rank			. 1	ID1-4	1 (0 - 10)			-	
SunTrust Bank PO Box 305183				c. Level Registered (Specify)				-		
	TN 37230-5183	,			Federal			inty:		
INASIIVIIIE	11N 3723U-3103	)		☐ State ☐ Municipality:				e. Ele	ction Sum to Date	
				1					\$	
64	E an		L D C L	_			Τ.		_	
f. Account Code	g. Form of Paymo	ent	h. Purpose Code	-	i. Date (mm/d		j. An	nount		quired Remarks
01	Debit		0		2-28-20 th	ru	\$	75.00		Maintenance Fees
				$\rightarrow$	6-30-20		-	70.00	-	
							\$			
1.5							\$			
4. Payee Inform				Ad			Rem	iove		
a. Full Name, Maili		1e		b. (	Coordinated C	ommittee Na	ame		d. Co	mments
(include city, state,	& zip)									
										2
				c. L	evel Registere	d (Specify)				
					Federal		Cou	inty:	7	
					State		Mu	nicipality:	e. Ele	ction Sum to Date
				1					\$	
f. Account Code	g. Form of Payme	ent	h. Purpose Code		i. Date (mm/de	d/yyyy)	j. An	ount	k. Red	quired Remarks
										•
							\$			
							1.		$\vdash$	
							\$			
4. Payee Inform	ation			Ad	d		Rem	iove		CONTRACTOR SERVICE
a. Full Name, Maili	ng Address & Phon	ie		b. 0	Coordinated C	ommittee Na			d. Cor	mments
(include city, state,	& zip)								1	
				1						
			c. Level Registered (Specify)				-			
					Federal		Con		-	
								inty:	FIL	
					State		Mui	nicipality:	e. Elec	ction Sum to Date
									\$	
f. Account Code	g. Form of Payme	I	h. Purpose Code	1	D + ( /1	1/>	T		1. 5	
i. Account Code	g. rorm of rayme	ant 1	n. Turpose Code	- 1'	i. Date (mm/do	г/уууу)	j. Am	iount	k. Rec	quired Remarks
							\$			
				+			+		+	
							\$			
5. Total only thi	s Page								\$	75.00
6. Total of ALL		es								75.00
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)										
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)							\$	75.00		
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)										
7. Purpose Code	NAME AND ADDRESS OF TAXABLE PARTY.		THE RESERVE AND ADDRESS OF THE PARTY OF THE	designation from the latest section 1	manufacture de la constitución d	-				
A* - Media	B* - Printing		C* - Fund			020		D - To Anothe	er Candi	idate
E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Exp										
I - Postage	J - Penalties		K* - Offic							gal Expense Fund
O* - Other				2v	BP			NAME OF TAXABLE PARTY.		
* Codes require	e detailed expla	nation	n in required re	mar	ks field (k)		-			