Disclosure Re					Amendment Yes No
Use this form for ger	neral report and committee in to update information	nformation, must be	e signed and su	bmitted along with o	ther detailed forms.
1. Committee Infor	other and processing it, except the extreme process as model to accompany to the con-				
a. Full Name	c. ID Number				
Committee to Re-ele	SMCCS				
b. Mailing Address (incl		d. Date Filed			
403 W. Mountain St					10/26/2020
Kings Mountain, NC	2 28086				
4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -	e. Phone Number				
		anterior de la companya de la compa	and the same of th		704-739-0806
2. Report Year	3. Period Start Date (mm/d	ld/yy) 4. Period (mm/dd/yy)	End Date	5. Treasurer Full	
2020	07/10/20	10	0/17/20	David Brian Broo	ıks
6. Type of Committe		9. Type of Report	t (check or	nly one type of report	from one category)
Candidate Campa	- The state of the	Municipal		County	Referendum
PAC Independent	Referendum	Organizationa		Organizational	Organizational
Expenditure Legal Expense Fu	Joint Fundraiser	Thirty-five da	ry	Quarterly	Pre-referendum
	(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:		Mid Yea Year End		Semi-annual	40.5
LI Onici.		Final	"	Mid Year Year End	10. Special Report Name
8. Number of Fundr	sisers this Report	Special		Final	
	The state of the s			Special	
11. Account Informa	ation		11. Account		
a. Financial Institution F	The state of the s	No. of the Control of		titution Full Name	
Wells Fargo Bank			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
b. Purpose	c. Account Code		b. Purpose		c. Account Code
Campaign	A1				
	d. Period Begin Balance				d. Period Begin Balance
	\$ 492.00				s
CERTIFICATION					
I certify that the Com	mittee or Fund is in complia	ance with all applica	able provisions	of Article 22A, 22B	& 22D-22M of Chapter 163 of
the NC General Statut	tes and that no funds are cor	mmingled with proh	nibited or other i	non-disclosed funds.	I further certify that this report
is complete, true and c	correct and that I have been	trained by the NC S	State Board of F	Elections.)	
David Brian		<u> </u>	$=$ $\lambda \uparrow \rightarrow$		10/25/2020
FOR OFFICE USE ON	Printed Name of Signer	Ų'Si	ignature of Appoint	ted Treasurer	Date
Date Received:	10-210-20	Employee:	ม _์ ท		Delivery Method
Date Postmarked:		r=Employee=		-	Normal Mail Registered Mail
Date Scanned:		Employee:			Hand Delivered Electronically Filed
Date Data Entered	d:		2 6 2020		Signer has not received mandatory training
Please Note: This	form cannot be used to ame	end confilittee infor	mation such as	the committee addre	ss, treasurer, assistant treasurer,
	custodiar	n of books informati	ion, or account	information.	
	You must amend the Statem	ent of Organization	(CRO-2100A-	E) to make committe	e changes.

Amendment **Detailed Summary** 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 Committee to re-elect Shearra Miller 2020 Third Quarter **SMCCS** Total this Total this **Start of Election Cycle:** January 1, 2020 Reporting Period **Election Cycle** Cash on Hand at Start \$ 492.00 \$ RECEIPTS Aggregated Contributions from Individuals (CRO-1205) \$ 6) Contributions from Individuals (CRO-1210) 1,500.00 \$ 2,000.00 7) **Contributions from Political Party Committees** (CRO-1220) \$ 8) Contributions from Other Political Committees (CRO-1230) \$ 9) Loan Proceeds (CRO-1410) \$ \$ 50.00 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) \$ \$ 11d) Legal Expense Fund - Other Sources (CRO-1270) \$ \$ 11 e) Exempt Purchase Price Sales (CRO-1265) \$ \$ TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) \$

<u>EAFENDITURES</u>		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 1,750.00	\$ 1,750.00
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures (CRO-1315)	\$ 30.00	\$ 88.00
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 and 17)	\$	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 212.00	\$ 212.00
<u>ADDITIONAL INFORMATION</u>		
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$	

EXPENDITEDES

Outstanding Loans (incl. ones from other campaigns)

21)

\$

(CRO-1430)

		om Individuals dividual contributions	over \$5	F 0 or contributions u	Pg <u>1</u> of nder \$50 if form CR	RO 1205 is no	ot used	es 🛛 Ne	
		(and Fund if applica				2. ID Nun			
Committee to re-elect Shearra Miller						SMCCS			
3. Contr	ributor Informatio	ion		Add 🔲 R	Remove				
	me, Mailing Address	& Phone		b. Job Title/Profession	on	d. Commen	its		
	e city, state, & zip) RA MILLER			DIRECTOR					
	KA MILLEK ST MOUNTAIN S	STREET		c. Employer's Name/	/Specific Field	1			
				CLEVELAND C					
KINGS N	MOUNTAIN, NC	28086		COUNCIL				arai ai bisa.	
						e. Election S	Sum to Date		
						\$	2,000.00	ř.	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/dd/yy	/ yy)	k. Amount	<u> </u>	
	A1	Cash			8/21/20)20	\$	1,000.00	
	A1	Cash		· · · · · · · · · · · · · · · · · · ·	8/24/20	020	\$	500.00	
						,	\$		
3. Contri	ibutor Informatio	on '		Add 🔲 Re	emove		1	1.	
la file and a second	me, Mailing Address &	& Phone	Ne Sun	b. Job Title/Profession	Particular Section Section Control Con	d. Comments	is	<u> </u>	
(include	city, state, & zip)								
			I	c. Employer's Name/S	Specific Field	-			
			1	Co Esmproy	specine i ion				
			,				um to Date		
	* * * * * * * * * * * * * * * * * * *					\$: :		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Description	j. Date (mm/dd/yy)	уу)	k. Amount	a kalangan dan kalangan manggalangan dan kalangan	
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<u> </u>					\$	·	
							\$		
							\$		
And the second s	ibutor Informatio			Add 🔲 Re	emove				
	ne, Mailing Address &	દે Phone		b. Job Title/Profession		d. Comments	3	<u>e l'architecture de la company de la compan</u>	
(include c	city, state, & zip)					i			
	MEG	EUVEN		c. Employer's Name/S	Specific Field	i i			
	113					1997 - 1997 1997 - <u>1997 - 1997</u>			
	William UUT	26 2020					e. Election Sum to Date		
ere. Mirana digira t		Щ_				\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-Ki	ind Description	j. Date (mm/dd/yyy	y)	k. Amount		
		<u> </u>					\$		
							\$		
							\$		
	only this Page	Contraction of the contract of		1878. April		\$		1,500.00	
33.0	of ALL CRO-					\$		1,500.00	
(I his une	must be on line 6 of D	Detailed Summary Page CR	<i>(0-1100)</i>						

Contributions from Individuals

committees and	d coordinated party e	expenditures.	tee for, operating expenses,	, contributions to	candidate/political
1. Committee	Full Name (and Fur	nd if applicable)			2. ID Number
Committee to	re-elect Shearra Mille	SMCCS			
3. Type of Dis	bursement (Ple	<u>ase use separate C</u>	CRO-1310 forms for each t		
	g Expenses	Contributions to Car	andidates/Political Committees		oordinated Party Expenditures
4. Payee Infor			Add	Remove	
a. Full Name, Mai (include city, state	niling Address & Phone		b. Coordinated Committee N	ame	d. Comments
JustYardSigns			1		
	,001		c. Level Registered (Specify)		
			Federal	County:	
			State	Municipality:	e. Election Sum to Date
					\$ 1,605.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A1	Debit Card	A	8/26/2020	\$1,299.00	Campaign Signs
A1	Debit Card	A	9/23/2020	\$306.00	Campaign Signs
4. Payee Inform	mation		Add	Remove	
	iling Address & Phone		b. Coordinated Committee Na		d. Comments
(include city, state					
NC Vote Build	er	!			
			c. Level Registered (Specify)		
			Federal State	County:	
		, e	State	Municipality:	e. Election Sum to Date
				· · · · · · · · · · · · · · · · · · ·	\$ 145.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A1	Debit Card	A	9/28/2020	\$145.00	Database Inform
				\$	
4. Payee Inform			Add	Remove	
그는 어떤 사람들이 되는 사람은 얼마나 된	ling Address & Phone		b. Coordinated Committee Na		d. Comments
(include city, state,	& zip)				
	ALENTE L'OUTE BOUCH SOURCE DONNE SOURCE SE SE SENS SOURCE SE SE SE SENS SOURCE SE S	***************************************		andra de la companya	
	MEGEIVI	EM	c. Level Registered (Specify)		
A Commence of Comm	3		Federal State	County: Municipality:	The state of the s
the foreign	OCT 26 2020			Withhelpancy.	e. Election Sum to Date
L	Ц	<u> </u>	entre de la companya de la companya La companya de la co		\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
L	,			\$	
- Table 1				\$	
5. Total only thi 6. Total of ALL	is Page CRO-1310 Pages				\$ 1,750.00
	line 13a of Detailed Summ	marv Page CRO-1100	if Oneratina Evnenses)		
(This line goes in	line 13b of Detailed Sum	\$ 1,750.00			
(This line goes in	line 13c of Detailed Summ				
7. Purpose Code	es (List detailed exp	oenditure code in (h	h.) above)		
A* - Media E - Salaries I - Postage	B* - Printing F* - Equipment J - Penalties	C* - Fundr	raising il Party	D - To Another H* - Holding I Q* - Donation	r Candidate Public Office Expenses 1 to Legal Expense Fund
O* - Other * Codes require	e detailed explanatio	on in required rec	marks field (() :		

Disbursements

Amendment

No

Aggregated	Non-Media	Expenditures

Page __1_ of __1_

Amendment
☐ Yes ☑ No

Optional form used to report NC Non-Media Expenditures of \$50 or less.

1. Commit	tee Full Name (a	nd Fund if applical	2. ID Number				
COMMITTEE TO RE-ELECT SHEARRA MILLER					SMCCS		
3. Payee Information							
The second secon	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks	
Add Remove	A1	AUTO DEDUCT	О	07/27/2020	\$ 10.00	MONTHLY SERVICE FEE	
Add Remove	A1	AUTO DEDUCT	0	08/27/2020	\$ 10.00	MONTHLY SERVICE FEE	
☐ Add ☐ Remove	A1	AUTO DEDUCT	0	09/28/2020	\$ 10.00	MONTHLY SERVICE FEE	
☐ Add ☐ Remove					\$		
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Remove	Property of the Park of the Pa				\$		
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Remove Add		OCT 26 2020			Ψ		
Remove		001 2 8 2020	ا الا		\$		
Add Remove					\$		
Add	<u>By_</u>				Ψ		
Remove					\$		
. Total only this Page \$ 30.00							
. Total of ALL CRO-1315 Pages							
(This line must be on line 14 of Detailed Summary Page CRO-1100) Springers Contact Contact Summary Page CRO-1100)							
Purpose Codes (List detailed expenditure code in (d) above) B* - Printing C* - Fundraising D - To Another Candidate							
E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses							
1-Postage J - Penalties K* - Office Expenses Q* - Donations to Legal Expense Fund O* - Other							
O* - Other							
* Codes require detailed explanation in required remarks field (g) RO-1315 NC State Board of Elections							