Use this form for general report and committee information, must be signed and submitted along with other detailed form Do not use this form to update information	3
	5.
1. Committee Information	
a. Full Name c. ID Number	PS (THE MAN SERVICE) AND MESSES TOWN THE PER
Shearra Miller for City Council	
b. Mailing Address (include City, State and Zip Code) d. Date Filed	
403 West Mountain Street 01/1	1/2024
Kings Mountain, NC 28086 e. Phone Number	
	Section 19 to 19 t
4. Period End Date	
2. Report Year 3. Period Start Bate (mm/dd/yy) 3. 1 reasurer ruu (vaine	
2023 10/24/2023 12/31/2023 Randy C. Patterson	
6. Type of Committee (Check One). 9. Type of Report (check only one type of report from one category	y)
Candidate Campaign Party Municipal State/County Referendum PAC Referendum Organizational Organizational Organizational	mal
Independent	1
Expenditure Legal Expense Fund	
7. Type of Fund (if applicable, check one) Pre-primary First Final	
"Booster Fund" Pre-election Second Supplemen Building Fund Pre-runoff Third Annual	al Final
Semi-annual Fourth Special	
Mid Year Semi-annual	
Other: Year End Mid Year 10. Special Re	port Name
8. Number of Fundraisers this Report Special Final	
O Special	Comment of the Commen
11. Account Information a. Financial Institution Full Name a. Financial Institution Full Name	
a. Financial Institution Full Name Wells Fargo	
b. Purpose c. Account Code b. Purpose c. Account Cod	3
d. Period Begin Balance d. Period Begin	Balance
\$ 562.58 S CLEVE	LOND COUNT
CERTIFICATION	N 11"24 PM4:1
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Committee or Fund is a superior of the committee of th	
the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify the complete true and correct and that I have been trained by the NC State Board of Elections.	hat this report
is complete, true and correct and that I have been trained by the NC State Board of Elections. Randy C Patterson 01/11/2024	
Printed Name of Signer Signature of Appointed Treasurer Date	to me transcribe and detailed the property of the transcribe and the t
Date Received: O//11/2024 Employee: Sunn Bander Delivery Method	
Date Postmarked: Employee: Registered Hand Deliv	
Data Saamadi Employees	lly Filed
mandatory	not received training
Date Data Entered: Employee:	
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assurer, assurer custodian of books information, or account information.	stant treasurer,

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

Amendment

Detailed Summary

Detailed Summary				Ar	nendment Yes	⊠ N	
Use this form to summarize all disclosure reporting forms and	d to total monetary	infor	mation.		1 168	X N	<u> </u>
	2. Type of Report			3. ID 1	Number		
Shearra Miller for City Council							
Start of Election Cycle: January 1,	2023	Τ.	Total this		Tota		
4) Cash on Hand at Start		\$	Reporting Period 562.58	\$	Electio	n Cycle	-
RECEIPTS				1 4			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$		\$			
6) Contributions from Individuals	(CRO-1210)	\$	2350.00	\$			
7) Contributions from Political Party Committees	(CRO-1220)	\$		\$		· · · · · · · · · · · · · · · · · · ·	
8) Contributions from Other Political Committees	(CRO-1230)	\$		\$			-1
9) Loan Proceeds	(CRO-1410)	\$		\$			
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$		\$			1
11) Other Receipt Sources		1912 (O11) (T					
11a) Interest on Bank Accounts	(CRO-1250)	\$		\$			
11b) Contributions from Not-for-Profit Organization	ns <i>(CRO-1250)</i>	\$		\$			
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)	\$	2350.00	\$			
EXPENDITURES							
13) Disbursements		Te te said.	and the second second				
13a) Operating Expenditures	(CRO-1310)	\$	2912.58	\$			
13b) Contributions to Candidates/Political Committee	ees (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)	\$		\$ (LEVEL	ND COL	MFY BOE
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,	16 and 17)	\$	2912.28	\$	JA	11°24 P	W4:31
19) Cash on Hand at End (Add lines 4 and 12 together, then subtra	act line 18)	\$	0	\$			
ADDITIONAL INFORMATION							
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)	\$					A PAGE
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$					
24) Account Transfers Within the Committee	(CRO-1720)	\$					
25) Administrative Support	(CRO-1710)	\$		\$		A CONTRACTOR OF THE PROPERTY O	
26) Forgiven Loans	(CRO-1440)	\$		\$			1

(CRO-2220)

(CRO-1215)

\$

\$

27) 48-Hour Notice Reports Sum

Contributions to be Refunded

					Amei	ıdment		
Contributions from Individuals	Pg	_1	of	2		Yes	\boxtimes	No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 1. Committee Full Name (and Fund if applicable) 2. ID Number Shearra Miller for City Council 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Real Estate / Retired Teacher William & Laura McGill PO Box 88 c. Employer's Name/Specific Field Kings Mountain, NC e. Election Sum to Date 500.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check 10/27/2023 \$ 500.00 \$ \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Brinkley Financial David & Marie Brinkley 418 Country Club Acres c. Employer's Name/Specific Field Kings Mountain, NC 28086 e. Election Sum to Date 1500.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check 10/27/2023 \$ 1000.00 \$ 3. Contributor Information Add 🔲 : Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments CLEVELAND COUNTY BOD JAN 11'24 PM4 31 (include city, state, & zip) Director Shearra Miller 403 W. Mountain St. c. Employer's Name/Specific Field Kings Mountain, NC 28086 Cleveland County Arts Council e. Election Sum to Date 5900.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Card 10/30/2023 \$ 500.00 \$ \$ 4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

2000.00

\$

\$

					Amer	dment		
Contributions from Individuals	Pg	_2	of	2		Yes	\boxtimes	No
Use this form to report individual contributions over \$50 or contributions	under	\$50 if form	CRO	1205 is no	at used			

		(and Fund if applica		o or contributions unde	2 40 11 10 111	2. ID Nur		
Shearra	Miller for City Co	ouncil						
3. Conti	ibutor Informat	ion		Add 🔲 Ren	iove			
a. Full Na	me, Mailing Address	& Phone		b. Job Title/Profession		d. Commen	ts	25.5 Sec. 25 Sept 13.5 Areas.
(includ	e city, state, & zip)			Director				
Shearra	Miller							
403 W. I	Mountain St.			c. Employer's Name/Spe	cific Field			
Kings M	ountain, NC			Cleveland County A				
Ü	•			1		e. Election S	Sum to Date	
						\$	6100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In⊣	 Kind Description	j. Date (mm/dd/yy		k. Amoun	t e
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П							\$	
 3. Contr	 ibutor Informati	On		Add 🔲 Rem	ove			
rapadates a coaperation.	ne, Mailing Address	Constant Co	<u> </u>	b. Job Title/Profession	OVC.	d. Comment		
	city, state, & zip)	a i none		Director		u. Commen	3	
Shearrra								
	Mountain St.			c. Employer's Name/Spe	ai G a Field			
	ountain, NC 2808	6						1
17mgs ivi	ountain, IVC 2000			Cleveland County A	its Council	FI 42 C		
						e. Election S	um to Date	
						\$	6350.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Description	j. Date (mm/dd/yy	73)	k. Amount	
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							\$	
							\$	
3. Contr	buter Informati	On		Add Reme	ové			
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(include	city, state, & zip)					u. Comment		
			a secure de la company de la c					ŀ
				c. Employer's Name/Spec	ific Field	Į.	i fufi di	vo county
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						e. Election Si	articles in 100 to our officiency of crisis	
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t nis une	musi ve on une o of	Detailed Summary Page CI	<i>W-1100</i>	Language Committee Co				i

CRO-1210

	ents report expenditures coordinated party ex		ee for; operating ex	Pg penses,	1 of contributions to	<u>5</u> candida	Amendment Yes tte/political	⊠ N	Vo
1. Committee H	ull Name (and Fun for City Council						2. ID Number		
3. Type of Dish Operating I	ursement Red	Contributions to Ca	ndidates/Political Comm				l Party Expenditure	S	Ž,
4. Payee Information A. Full Name, Mail (include city, state, US Post Office	ing Address & Phone		Add b. Coordinated Com	nittee N	Remove ume	d. Co	mments		
OS FOSI Office			c. Level Registered (S	pecify)	County: Municipality:	e. Ele	ction Sum to Date		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yy	vv)	j. Amount	\$ k. Red	uired Remarks		3675
	Card	I	10/25/2023		\$510.00	Maili	er in the second contract and the second		63.555
				of the second of the	\$	Partital teatronic	vojavanu sautokinė obvininko (nassa voj	ets teoresians	obsect.
4. Payee Inform a. Full Name, Mail (include city, state, Wells Fargo	ing Address & Phone		Add b. Coordinated Common Comm		Remove me County: Municipality:		nments		

i. Date (mm/dd/yyyy)

b. Coordinated Committee Name

c. Level Registered (Specify)

Federal

i. Date (mm/dd/yyyy)

State

10/27/2023

* Codes require detailed explanation in required remarks field (k)

10/25/2023

j. Amount

\$10.00

County:

Municipality:

j. Amount

\$306.00

\$

k. Required Remarks

e. Election Sum to Date

826.00

CLEVELAND COUNTY BOE

k. Required Remarks 1 20 PMC ...

Service Fee

d. Comments

Postage

\$

H* - Holding Public Office Expenses

Q* - Donation to Legal Expense Fund

D - To Another Candidate

f. Account Code

g. Form of Payment

Auto Deduct

g. Form of Payment

B* - Printing

F* - Equipment

Card

5. Total only this Page

6. Total of ALL CRO-1310 Pages

a. Full Name, Mailing Address & Phone

(include city, state, & zip)
US Post Office

f. Account Code

A* - Media

E - Salaries

I - Postage

O* - Other

h. Purpose Code

4. Payee Information Add Remove

h. Purpose Code

(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

C* - Fundraising

K* - Office Expenses

G - Political Party

I

(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)

7. Purpose Codes (List detailed expenditure code in (h.) above)

Α

					Amei	ıdment		
Disbursements	Pg	<u>2</u>	of	<u>5</u>		Yes	\boxtimes	No
Ise this form to report expenditures from the committee for operating ext	nencec	contri	butions to	candida	te/nolit	ical		

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

		ind if applicable)			2. ID Number
	for City Council	arternan eki 200 adalah badan dari erran eki tendel			
					ent.)
Operating	THE CAR SHOULD BE AND ADDRESS OF THE PARTY O	Contributions to Ca	mdidates/Political Committees		ordinated Party Expenditures
4. Payee Infor	entre contrator transport de la companya de la comp	<u> </u>	Add b. Coordinated Committee	Remove	d. Comments
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(include city, state US Post Office					
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			State	Municipality:	e. Election Sum to Date
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				\$	
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(include city, state	2, & zip)		4		
Facebook			I In : 1/6 : 6		
			c. Level Registered (Specif		
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			State	Municipanty.	e. Election Sum to Date
					\$
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US Post Office	;				
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A* - Media	B* - Printing	C* - Fund		D - To Anothe	r Candidate
E - Salaries	F* - Equipmen	t G - Politic	eal Party	H* - Holding	Public Office Expenses
I - Postage O* - Other	J - Penalties	K* - Offic	ce Expenses	Q* - Donation	to Legal Expense Fund
terreter diversioner week Gas because them	re detailed explana	tion in required re	marks field (k)		

Disbursen	oonts				Amendment
		from the committe	P ee for; operating expens	g <u>3</u> of	5 Yes No
	d coordinated party ex		ee for, operating expens	ses, contributions to	o candidate/political
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	for City Council	to a transport (and G) East		4	2.4D Number
		ngo ngo gonnento C	RO-1310 forms for eac	L fores of Diskussa	
Operating			ndidates/Political Committees		Coordinated Party Expenditures
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				\$	
Total only th	ic Daga				, co.1.07
	is rage ، CRO-1310 Pages				\$ 621.37
	line 13a of Detailed Sum	mary Page CRO-1100	if Operating Expenses)		
			if Contrib to Candidates/Pol	itiant Counct	\$

(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

C* - Fundraising

G - Political Party

K* - Office Expenses

D - To Another Candidate

H* - Holding Public Office Expenses

Q* - Donation to Legal Expense Fund

7. Purpose Codes (List detailed expenditure code in (h.) above)

* Codex require detailed explanation in required remarks field (k)

B* - Printing

J - Penalties

F* - Equipment

A* - Media

E - Salaries

I - Postage

O* - Other

Disbursements Use this form to report expenditures from the committee for, operating	Pg expenses,	4 contril	of outions to		Amen	Yes	×	No
committees and coordinated party expenditures. 1. Committee Full Name (and Fund if applicable)		5 - Fig. 197			2. ID N	e de la composición	Y 20 (20)	anchesta.
Shearra Miller for City Council				155,050,000	2. 119 15	umber		
3. Type of Disbursement (Please use separate CRO-1310 forms)	or each t	ype of	Disburser	nent.)				
Operating Expenses Contributions to Candidates/Political Con	mittees		□ c	oordinated	i Party Exp	enditures		
4. Payee Information Add		Rem	ove					
a Fall Name Matter Addition of the				1		SAME WORK		MARKET 14.34

	Full Name (and Fur for City Council	nd if applicable)				2. ID Number
	oursement (Ple	ase use separate C	RO-1310 forms for	each f	vne of Dishursen	(ent)
Operating 1			ndidates/Political Comm			ordinated Party Expenditures
4. Payee Inform	nation		Add		Remove	
a. Full Name, Mail	ing Address & Phone		b. Coordinated Com	mittee N		d. Comments
include city, state,						
Shelby Shopper	r/KM Hearld					
			c. Level Registered (Specify)		
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			State		Municipality:	e. Election Sum to Date
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Č			c. Level Registered (S	pecify)		
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			State		Municipality:	e. Election Sum to Date
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					\$	
. Payee Inform	ation		Add		Remove	
Full Name, Maili	ng Address & Phone		b. Coordinated Comn	uittee Na		d. Comments
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Westmoreland F	Printing					
			c. Level Registered (S	pecify)		
			Federal	H	County:	
			State	Щ_	Municipality:	e. Election Sum to Date
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Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yy)	/v)	j. Amount	k. Required Remarks
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					\$	
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Total only thi	s Page CRO-1310 Pages	and the second second	Van de State			\$ 768.74
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	line 13b of Detailed Sun			s/Politica	ıl Commi	\$
(This line goes in	line 13c of Detailed Sum	ımary Page CRO-1100	if Coordinated Party Ex	penditur	es)	
	s (List detailed exp	oenditure code in (l	n.) above)			
				term of a contract of account		and the second s
.* - Media	B* - Printing	C* - Fund			D - To Anothe	
x* - Media L - Salaries - Postage	B* - Printing F* - Equipment J - Penalties		al Party		H* - Holding	r Candidate Public Office Expenses 1 to Legal Expense Fund

Disbursem	ents		_		Amendment
		s from the committe	Pg ee for, operating expens	g <u>5</u> of	5 Yes No
ommittees and	coordinated party e	xpenditures.	or, operating expens	cs, contributions to	Candidate/pontical
	full Name (and Fu)				2: ID Number
	for City Council				
. Type of Dish	ursement <i>(Ple</i>	ase use separate C	RO-1310 forms for eac	h type of Disburse	ment)
Operating 1			didates/Political Committees		Coordinated Party Expenditures
. Payee Inform	nation		Add	Remove	
. Full Name, Mail	ing Address & Phone		b. Coordinated Committee	e Name	d. Comments
include city, state.	& zip)				
Wells Fargo					
			c. Level Registered (Specif	-	
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Parker State of Almanda America	Company of the control of the contro				
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run Name, Mam nclude city, state,	ng Address & Phone	ŀ	b. Coordinated Committee	Name	d. Comments
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Total only thi	s Page				\$ 195.68
	CRO-1310 Pages				\$ 195.68
	line 13a of Detailed Sun	mary Page CRO-1100	if Operating Expenses)		g 2912.58
			if Contrib to Candidates/Poli	tical Comm)	\$ 2712.38

(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

C* - Fundraising

G - Political Party

K* - Office Expenses

* Codes require detailed explanation in required remarks field (k).

D - To Another Candidate

H* - Holding Public Office Expenses

Q* - Donation to Legal Expense Fund

7. Purpose Codes (List detailed expenditure code in (h.) above)

B* - Printing

J - Penalties

F* - Equipment

A* - Media

E - Salaries

I - Postage

O* - Other



Certification to Close Committee

This Certification is used to express the intent to close the committee after all funds have been properly disbursed.

This Certification is filed at the Board of Elections office where the committee's campaign reports

FILED BY: Committee Name: Treasurer Name: Treasurer Address: (include city, state, & zip)	Shearra Miller for City Council Randy C Patterson 408 5cotland Dr. Kings Mountain, NC 28086
Treasurer Phone:	CLEVELAND COUNTY BD JAN 11'24 PM4:31
Loonie, at a st	

I certify that the above mentioned Committee intends to close and cease existence. Upon signing this certification, I declare that all funds have been distributed and reported (if required). In addition, no contributions will be accepted or disbursements made after the "Final Report" is filed or this form is signed. If the Committee at any future time intends to accept or spend funds in support or opposition of any candidate or ballot issue, a new political committee must be formed and registered with the Board of Elections before such activities may commence.

Committees that have filed under the \$1,000 threshold will only be required to sign this Certification. No "Final Report" will be required for committees meeting this criterion. Any Committee that did not file under the \$1,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

0|-11-2024 Date Signed

Clandy C Path