

Disclosure Report 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 Information

a. Full Name Committee to Elect Coleman Hunt		c. ID Number
b. Mailing Address (include City, State and Zip Code) 101 Country Creek Dr. Kings Mtn. NC 28086		d. Date Filed
		e. Phone Number

2. Report Year 2022	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name Coleman Hunt
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6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input checked="" type="checkbox"/> Organizational	<input checked="" type="checkbox"/> Organizational	<input type="checkbox"/> Referendum
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Booster Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Other:		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
8. Number of Fundraisers this Report		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
		<input type="checkbox"/> Special	<input type="checkbox"/> Special	
				10. Special Report Name
				CLEVELAND COUNTY BOE
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11. Account Information		11. Account Information	
a. Financial Institution Full Name Fidelity Bank		a. Financial Institution Full Name	
b. Purpose	c. Account Code	b. Purpose	c. Account Code
d. Period Begin Balance		d. Period Begin Balance	
\$		\$	

CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

Coleman Hunt **Coleman Hunt** _____
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: **10-31-22** Employee: **CD** Delivery Method
 Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed

Date Postmarked: _____ Employee: _____
 Date Scanned: _____ Employee: _____
 Date Data Entered: _____ Employee: _____
 Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.
 You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

Amendment
 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 elect Coleman Hunt			
Start of Election Cycle: January 1, 2022		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 2,149	\$
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		207.73	\$
6) Contributions from Individuals (CRO-1210)		989	\$
7) Contributions from Political Party Committees (CRO-1220)		855.62	\$
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)			\$
11d) Legal Expense Fund - Other Sources (CRO-1270)			\$
11e) Exempt Purchase Price Sales (CRO-1265)			\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 2,052.35	\$
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		3,147.59	\$
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 and 17)		\$ 3,147.59	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1,053.76	\$
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)			
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-2220)			\$
28) Contributions to be Refunded (CRO-1215)			\$

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Aggregated Contributions from Individuals

Page ____ of ____ Amendment Yes No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable) Committee to Elect Coleman Hunt	2. ID Number
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3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add		Cash		10-2-2022	\$ 50.00
<input type="checkbox"/> Remove		Cash		10-2-2022	\$ 10.00
<input type="checkbox"/> Add		ActBlue		9-8-22	\$ 24.62
<input type="checkbox"/> Remove		ActBlue		9-9-22	\$ 49.25
<input type="checkbox"/> Add		ActBlue		9-13-22	\$ 24.62
<input type="checkbox"/> Remove		ActBlue		9-7-22	\$ 24.62
<input type="checkbox"/> Add		ActBlue		10-25-22	\$ 24.62
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
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<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$

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4. Total only this Page	\$ 207.73
5. Total of ALL CRO-1205 Pages	\$ 207.73

(This line must be on line 5 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Page 1 of 4 Amendment Yes 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	
Committee to Elect Coleman Hunt							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Steve Moffitt 166 Northshore Dr. Cherryville, NC 28021 704 473-6436				Retired			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		check		9-7-22	\$100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
John Seavright P.O. Box 505 Boiling Springs, NC 28017						CLEVELAND COUNTY BOE OCT 31 '22 AM 9:29	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		check		10-12-22	\$100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 200.00	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>						\$	

Contributions from Individuals

Page 2 of 4 Amendment Yes 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) Committee to Elect Coleman Hunt	2. ID Number
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3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Carl Hughes 738 Sumner St. Shelby, NC 28150			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field		e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		10-18-22	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	

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3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Andrew Hopper 1317 MDON Shadow Ln. Shelby, NC 28150			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field HOPPER'S FIREARMS TRAINING		e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		ActBlue		9-7-22	\$ 98.50	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) DONNA Ketrón 136 Eagles Terrace Shelby, NC 28150			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field		e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		ActBlue		9-7-22	\$ 98.50	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	

4. Total only this Page	\$ 297.00
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>	\$

Contributions from Individuals

Page 3 of 4 Amendment Yes 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) <u>Committee to Elect Coleman Hunt</u>						2. ID Number	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Andre Butler</u> <u>10115 Maddy Lane</u> <u>Glen Allen, VA 23060</u>				b. Job Title/Profession		d. Comments	
				c. Employer's Name/Specific Field <u>Whitehurst</u> <u>Transport</u>		e. Election Sum to Date <u>\$</u>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		<u>ActBlue</u>		<u>9-8-22</u>	<u>\$ 98.50</u>		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Will Mabry</u> <u>1448 New Prospect Ch Rd</u> <u>Shelby, NC 28150</u>				b. Job Title/Profession		d. Comments	
				c. Employer's Name/Specific Field <u>Civil</u>		e. Election Sum to Date <u>\$</u>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		<u>ActBlue</u>		<u>9-8-22</u>	<u>\$ 98.50</u>		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Darvin Griffin</u> <u>1575 Timberlake Dr,</u> <u>Shelby, NC 28150</u>				b. Job Title/Profession		d. Comments	
				c. Employer's Name/Specific Field <u>UNC Charlotte</u>		e. Election Sum to Date <u>\$</u>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		<u>ActBlue</u>		<u>9-16-22</u>	<u>\$ 98.50</u>		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page					\$ <u>295.50</u>		
5. Total of ALL CRO-1210 Pages					\$		
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

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Contributions from Individuals

Page 4 of 4 Amendment Yes 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	
Committee to Elect Coleman Hunt							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ALAN Sewell 80 GANDER LN. ROCKY POINT, NC 28457							
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$	
1. Prior	2. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		Act Blue		9-16-22	\$ 98.50		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
HAZELINE Smith 1100 Hemlock Dr. Shelby, NC 28150						CLEVELAND COUNTY BOE OCT 31 '22 AM 9:30	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				Retired		\$	
1. Prior	2. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		Act Blue		9-22-22	\$ 98.50		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$	
1. Prior	2. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 197.00	
5. Total of ALL CRO-1210 Pages						\$ 989.00	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1190)</small>							

Contributions from Political Party Committees

Amendment Pg ____ of ____ Yes No

Use this form to report contributions from a political party

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to Elect Coleman Hunt						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)					b. Comments	
Cleveland County Democratic Party 2346 Sheriff Allen Rd. Shelby, NC 28152						
					c. Election Sum to Date	
					\$	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount		
	check		9-27-22	\$ 855.62		
				\$		
				\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)					b. Comments	
					CLEVELAND COUNTY BO OCT 31 '22 AM9:30	
					c. Election Sum to Date	
					\$	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount		
				\$		
				\$		
				\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)					b. Comments	
					c. Election Sum to Date	
					\$	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount		
				\$		
				\$		
				\$		
4. Total only this Page					\$ 855.62	
5. Total of ALL CRO-1220 Pages <small>(This line must be on line 7 of Detailed Summary Page CRO-1100)</small>					\$ 855.62	

Disbursements

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

1. Committee Full Name (and Fund if applicable) Committee to Elect Coleman Hunt	2. ID Number
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3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)
 Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Creative Business Essentials LLC 805 MCGOWAN RD, Shelby, NC 28150 980 295-2453	b. Coordinated Committee Name	d. Comments
c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
		\$

f. Account Code	g. Form of Payment check	h. Purpose Code B	i. Date (mm/dd/yyyy) 9-7-2022	j. Amount \$ 741.91	k. Required Remarks CAMPAIGN SIGNS
				\$	

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) WALGREENS 2975 UNION RD, GASTONIA, NC 28054 704 867-6957	b. Coordinated Committee Name	d. Comments
c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
		\$

f. Account Code	g. Form of Payment check	h. Purpose Code B	i. Date (mm/dd/yyyy) 9-19-2022	j. Amount \$ 123.05	k. Required Remarks CAMPAIGN POST CARDS
				\$	

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Creative Business Essentials 805 MCGOWAN RD, Shelby, NC 28150 980 295-2453	b. Coordinated Committee Name	d. Comments
c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
		\$

f. Account Code	g. Form of Payment check	h. Purpose Code B	i. Date (mm/dd/yyyy) 9-26-2022	j. Amount \$ 588.19	k. Required Remarks CAMPAIGN SIGNS
				\$	

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5. Total only this Page \$ 1,453.15

6. Total of ALL CRO-1310 Pages
 (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)
 (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)
\$ 3,147.59

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

A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund
O* Other			

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

Disbursements

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

1. Committee Full Name (and Fund if applicable) Committee to Elect Coleman Hunt						2. ID Number
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) <input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip): Creative Business Essentials 805 McGowan Rd. Shelby, NC 28150 980 295-2453				b. Coordinated Committee Name		d. Comments
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	CHECK	B	10-19-2022	\$ 376.34	Palm Cards	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip): Bradley's Screen Printing 2512 W. Dixon Blvd. Shelby, NC 28152 704 484-2077				b. Coordinated Committee Name		d. Comments
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	CHECK	B	10-24-2022	\$ 1,048.10	CAMPAIGN T-Shirts	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip): G7 media LLC 109 Cameron Dr. Kings Mt., NC 28086 704 477-9125				b. Coordinated Committee Name		d. Comments
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	CHECK	A	10-26-22	\$ 270.00	CAMPAIGN VIDEO	
5. Total only this Page						\$ 1,694.44
6. Total of ALL CRO-1310 Pages						\$
7. Purpose Codes (List detailed expenditure code in (h.) above)						
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate			
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses			
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund			
O* Other						
* Codes require detailed explanation in required remarks field (k)						

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