

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

JULIE WHITFIELD FOR CLERK

c. ID Number

JK1V95

b. Mailing Address (include City, State and Zip Code)

102 S. SPENCE AVE
GROESBORO NC 27534

d. Date Filed

7/12/2022

e. Phone Number

919-739-9997

2. Report Year

2022

3. Period Start Date (mm/dd/yy)

05/01/2022

4. Period End Date (mm/dd/yy)

06/30/2022

5. Treasurer Full Name

Jody H. BRIDGERS

6. Type of Committee (Check One)

- ☒ Candidate Campaign
☐ PAC
☐ Independent Expenditure
☐ Legal Expense Fund
☐ Party
☐ Referendum
☐ Joint Fundraiser

7. Type of Fund (if applicable, check one)

- ☐ Booster Fund
☐ Building Fund
☐ Other:

8. Number of Fundraisers this Report

9. Type of Report (check only one type of report from one category)

- | Municipal | State/County | Referendum |
|--|--|---|
| ☐ Organizational | ☐ Organizational | ☐ Organizational |
| ☐ Thirty-five day | ☐ Quarterly | ☐ Pre-referendum |
| ☐ Pre-primary | ☐ First | ☐ Final |
| ☐ Pre-election | ☒ Second | ☐ Supplemental Final |
| ☐ Pre-runoff | ☐ Third | ☐ Annual |
| ☐ Semi-annual | ☐ Fourth | ☐ Special |
| ☐ Mid Year | ☐ Semi-annual | |
| ☐ Year End | ☐ Mid Year | |
| ☐ Final | ☐ Year End | |
| ☐ Special | ☐ Final | |
| | ☐ Special | |

10. Special Report Name

RECEIVED
WAYNE CO OF ELECTIONS
JUL 12 2022

11. Account Information

a. Financial Institution Full Name

FIRST CITIZENS BANK

b. Purpose

Committee Funds

c. Account Code

1

d. Period Begin Balance

\$ 823.45

11. Account Information

a. Financial Institution Full Name

b. Purpose

c. Account Code

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.

Jody H. Bridgers

Printed Name of Signer

Signature of Appointed Treasurer

07/12/2022

Date

FOR OFFICE USE ONLY

Date Received:

Employee:

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
JULIE WHITEFIELD for Clerk		1022 Second Qtr	JK1195
Start of Election Cycle: January 1, 2022		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 823.45	\$ 0
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 254.82	\$ 524.82	
6) Contributions from Individuals (CRO-1210)	\$ 1897.81	\$ 7767.81	
7) Contributions from Political Party Committees (CRO-1220)	\$	\$	
8) Contributions from Other Political Committees (CRO-1230)	\$	\$	
9) Loan Proceeds (CRO-1410)	\$	\$ 1225.25	
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)	\$ 2152.63	\$ 9517.88	
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 1034.73	\$ 7290.75	
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$	
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$	
14) Aggregated Non-Media Expenditures (CRO-1315)	\$ 284.99	\$ 570.77	
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)	\$ 1319.72	\$ 7861.52	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 1656.36	\$ 1656.36	
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ 1225.25		
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)	\$	\$	

Contributions from Individuals

Pg 1 of 3 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	
JULIE WHITFIELD FOR CLERK					JK1V95	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) MELANIE Rodgers 209 EDGEBROOK DR GREENVILLE NC 27858				b. Job Title/Profession FLIGHT ATTENDANT c. Employer's Name/Specific Field Delta AIRLINES		d. Comments e. Election Sum to Date \$ 548.54
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	ONLINE		05/29/2022	\$ 99.27	
☐	1	ONLINE		06/02/2022	\$ 99.27	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) LUTHER TAYLOR 660 EDWARDS STAGE RD MT OLIVE NC 28365				b. Job Title/Profession RETIRED c. Employer's Name/Specific Field		d. Comments e. Election Sum to Date \$ 400 -
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	CHECK		05/24/2022	\$ 100.00	
☐	1	CHECK		05/24/2022	\$ 300.00	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) JUDY COX 3269 OLD GRANHAM RD GROSSBORO NC 27530				b. Job Title/Profession RETIRED c. Employer's Name/Specific Field		d. Comments e. Election Sum to Date \$ 100 -
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	CHECK		05/24/2022	\$ 100 -	
☐					\$	
☐					\$	
4. Total only this Page					\$ 698.54	
5. Total of ALL CRO-1210 Pages					\$ 1897.81	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

Pg 2 of 3 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	
JULIE WHITFIELD FOR CLERK						JK 1V95	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
WILLIE R JAYNER II 502 MANLEY GROSS Church Rd MT OLIVE NC 28365				RETIRED			
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 100 -	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	1	CHECK		05/24/2022	\$ 100 -		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
TONY JONES 1019 BREAZEALE AVE MT OLIVE NC 28365				Hardware			
				c. Employer's Name/Specific Field			
				SELF		e. Election Sum to Date	
						\$ 200 -	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	1	CHECK		05/24/2022	\$ 200 -		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
NITA JACKSON 1303 NINTH ST GROESBORO NC 27534				REAL ESTATE			
				c. Employer's Name/Specific Field			
				SELF		e. Election Sum to Date	
						\$ 500 -	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	1	CHECK		05/24/2022	\$ 500 -		
☐					\$		
☐					\$		
4. Total only this Page						\$ 800 -	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 1897.81	

Contributions from Individuals

Pg 3 of 3 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>JULIE WHITEFIELD For Clerk</u>					2. ID Number <u>JK1V95</u>	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>BETTY BRITT</u> <u>3070 DOBBSVILLE RD</u> <u>MT OLIVE NC 28365</u>				b. Job Title/Profession <u>RETIRED</u>		d. Comments
				c. Employer's Name/Specific Field		e. Election Sum to Date
						\$ <u>100 -</u>
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>CHECK</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>05/24/2022</u>	k. Amount \$ <u>100 -</u>	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>DEANE BEST</u> <u>1108 GRANTON SCHOOL RD</u> <u>MT OLIVE NC 28365</u>				b. Job Title/Profession		d. Comments
				c. Employer's Name/Specific Field		e. Election Sum to Date
						\$ <u>200 -</u>
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>CHECK</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>05/24/2022</u>	k. Amount \$ <u>200 -</u>	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>GEOFF HULSE</u> <u>1513 E MULBERRY ST</u> <u>STONDSBORO NC 27530</u>				b. Job Title/Profession <u>ATTORNEY</u>		d. Comments
				c. Employer's Name/Specific Field <u>SELF</u>		e. Election Sum to Date
						\$ <u>199.27</u>
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>ONLINE</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>06/16/2022</u>	k. Amount \$ <u>99.27</u>	
☐					\$	
☐					\$	
4. Total only this Page					\$ <u>399.27</u>	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ <u>1897.81</u>	

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☐ Yes ☒ No

April 2007

Disbursements

Pg 1 of 1 Amendment ☐ Yes ☒ No

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) JULIE WHITFIELD for Clerk						2. ID Number JK1V95	
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) GRAPHIX Printing 601 N JAMES ST Goldsboro NC 27530				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 965.80	
f. Account Code 1	g. Form of Payment CHECK	h. Purpose Code B	i. Date (mm/dd/yyyy) 05/03/2022	j. Amount \$ 443.00	k. Required Remarks T-SHIRTS		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) St Johns Church 1926 NC 111 Hwy Goldsboro NC 275				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 90.00	
f. Account Code 1	g. Form of Payment Check	h. Purpose Code C	i. Date (mm/dd/yyyy) 05/11/2022	j. Amount \$ 90.00	k. Required Remarks BENEFIT TICKETS		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Accu Copy 322 N JOHN ST Goldsboro NC 27530				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ 606.35	
f. Account Code 1	g. Form of Payment Debit	h. Purpose Code B	i. Date (mm/dd/yyyy) 06/24/2022	j. Amount \$ 501.73	k. Required Remarks BUSINESS CARDS		
5. Total only this Page						\$ 1034.73	
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)						\$ 1034.73	
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)							

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. Committee Full Name (and Fund if applicable) JULIE WHITFIELD FOR CLERK					2. ID Number JK1V95	
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
☐ Add	1	CHECK	C	05/16/2022	\$ 14.00	BENEFIT TICKETS
☐ Remove						
☐ Add	1	CHECK	C	05/19/2022	\$ 30.00	BENEFIT TICKETS
☐ Remove						
☐ Add	1	CHECK	C	05/31/2022	\$ 50.00	BENEFIT TICKETS
☐ Remove						
☐ Add	1	DEBIT	C	05/17/2022	\$ 6.99	WEB HOSTING
☐ Remove						
☐ Add	1	DEBIT	C	05/18/2022	\$ 35.00	WEB HOSTING
☐ Remove						
☐ Add	1	DEBIT	K	05/31/2022	\$ 6.50	BANK FEES
☐ Remove						
☐ Add	1	CHECK	C	06/06/2022	\$ 50.00	BENEFIT TICKETS
☐ Remove						
☐ Add	1	CHECK	C	06/13/2022	\$ 50.00	BENEFIT TICKETS
☐ Remove						
☐ Add	1	DEBIT	C	06/21/2022	\$ 35.00	WEB HOSTING
☐ Remove						
☐ Add	1	DEBIT	K	06/30/2022	\$ 1.00	BANK FEES
☐ Remove						
☐ Add	1	DEBIT	K	6/30/2022	\$ 6.50	BANK FEES
☐ Remove						
☐ Add					\$	
☐ Remove					\$	
☐ Add					\$	
☐ Remove					\$	
☐ Add					\$	
☐ Remove					\$	
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☐ Remove					\$	
☐ Add					\$	
☐ Remove					\$	
☐ Add					\$	
☐ Remove					\$	
☐ Add					\$	
☐ Remove					\$	
4. Total only this Page					\$ 284.99	
5. Total of ALL CRO-1315 Pages					\$ 284.99	
(This line must be on line 14 of Detailed Summary Page CRO-1100)						
6. Purpose Codes (List detailed expenditure code in (d) above)						
E - Salaries B* - Printing C* - Fundraising D - To Another Candidate I - Postage F* - Equipment G - Political Party H* - Holding Public Office Expenses O* - Other J - Penalties K* - Office Expenses Q* - Donations to Legal Expense Fund						
* Codes require detailed explanation in required remarks field (g)						

Outstanding Loans

Pg 1 of 1

Amendment

☐ Yes ☒ No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

JULIE WHITFIELD FOR CLERK			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
BOBBY WHITFIELD 760 CORBETT HILL ROAD MOUNT OLIVE, NC 28365		MAINTENANCE TECH	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		DUKE ENERGY	02/28/2022
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 1,225.25	\$ 1,225.25
k. Full Name of Lending Institution			l. Loan Number
			\$ 1,225.25
			\$ 1,225.25

CRO-1430

NC State Board of Elections

December 2007