

Disclosure Report Cover

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.

Amendment

☐ Yes ☒ No

1. Committee Information

a. Full Name

JULIE Whitfield For Clerk

c. ID Number

JK4V95

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

102 S. Spake Ave
Goldsboro NC 27534

d. Date Filed

01/26/24

e. Phone Number

919-759-9997

2. Report Year

2024

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

01/01/2024

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

06/30/2024

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

- ☐ Organizational
☐ Thirty-five day
☐ Pre-primary
☐ Pre-election
☐ Pre-runoff
☐ Semi-annual
☒ Mid Year
☐ Year End
☐ Final
☐ Special

State/County

- ☐ Organizational
☐ Quarterly
☐ First
☐ Second
☐ Third
☐ Fourth
☐ Semi-annual
☒ Mid Year
☐ Year End
☐ Final
☐ Special

Referendum

- ☐ Organizational
☐ Pre-referendum
☐ Final
☐ Supplemental Final
☐ Annual
☐ Special

10. Special Report Name

11. Account Information

a. Financial Institution Full Name

FIRST CITIZENS BANK

b. Purpose

Committee Funds

c. Account Code

1

d. Period Begin Balance

\$

11. Account Information

a. Financial Institution Full Name

WCBOE

b. Purpose

JUL 26 2024

BY

c. Account Code

d. Period Begin Balance

\$ 1558.39

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

Date

01/26/2024

FOR OFFICE USE ONLY

Date Received:

01/26/24

Employee:

JA

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

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

Amendment

☐ Yes

☒ No

JULIE WHITFIELD For Clerk		MID YEAR		JK1V95	
Start of Election Cycle: January 1, 2022		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 1558.39		\$	
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$ 1390.52	
6) Contributions from Individuals (CRO-1210)		\$		\$	
7) Contributions from Political Party Committees (CRO-1220)		\$ 400.00		\$ 18936.64	
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)		\$ 400 -		\$ 21552.41	
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 470.00		\$ 18942.33	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
13c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$		\$ 1121.69	
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)		\$ 470 -		\$	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1488.39		\$ 1488.39	
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

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Amendment

☐ Yes

☒ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

JULIE WHITFIELD FOR CLERK

JK1V95

KENN HUDSON
120 Meadowlark RD
Goldsboro NC 27534

Retired

c. Employer's Name/Specific Field

e. Election Sum to Date

\$ **100 -**

g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/> 1	CK		01/25/24	\$ 100 -
<input type="checkbox"/>				\$
<input type="checkbox"/>				\$

DEANE BEST
1108 GRANTHAM School RD
MT OLIVE NC 28365

Retired

c. Employer's Name/Specific Field

\$ **300 -**

g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/> 1	CK		3/17/24	\$ 300 -
<input type="checkbox"/>				\$
<input type="checkbox"/>				\$

b. Job Title/Profession		d. Comments
c. Employer's Name/Specific Field		
		e. Election Sum to Date
		\$

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"/>				\$

\$ **400 -**

\$ **400 -**

Disbursements

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Amendment
☐ Yes ☒ No

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

JULIE WHITFIELD FOR CLERK

JK7V95

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

a. Full Name, Mailing Address & Phone (include city, state, & zip) GRANTHAM VFD 3430 US Hwy 135 GORDON NC 27530	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" 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
1	CK	0	01/16/2024	\$ 300-	Donation / AD
				\$	

a. Full Name, Mailing Address & Phone (include city, state, & zip) OAKLAND VFD 617 OAKLAND Church RD PRINCETON NC 27569	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" 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
1	CK	0	03/09/2024	\$ 30-	EVENT DONATION
				\$	

a. Full Name, Mailing Address & Phone (include city, state, & zip) WAYNE CHRISTIAN School 1201 Patestown RD GORDON NC 27530	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" 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
1	CK	0		\$ 140 -	DONATION
				\$	

\$ 470 -

\$ 470 -

(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)

B* - Printing	D - To Another Candidate
E - Salaries	G - Political Party
J - Penalties	Q* - Donation to Legal Expense Fund
O* Other	

Outstanding Loans

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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.

a. Name, Address & Phone (Include city, state, & zip)		b. Job Title/Profession	d. Comments
JULIE WHITFIELD FOR CLERK BOBBY Whitfield 760 Corbett Hill Rd Mount OLIVE NC 28365		Maintenance Tech DUKE ENERGY	JK1V95 02/28/22
e. Rate %	f. Security Pledged	g. Original Loan Amount	h. Remaining Balance
		\$ 1225.25	\$ 1225.25
i. Name of Lending Institution		j. Loan Number	
a. Name, Address & Phone (Include city, state, & zip)		b. Job Title/Profession	d. Comments
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
			f. End Date (mm/dd/yyyy)
e. Rate %	f. Security Pledged	g. Original Loan Amount	h. Remaining Balance
		\$	\$
i. Name of Lending Institution		j. Loan Number	
a. Name, Address & Phone (Include city, state, & zip)		b. Job Title/Profession	d. Comments
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
			f. End Date (mm/dd/yyyy)
e. Rate %	f. Security Pledged	g. Original Loan Amount	h. Remaining Balance
		\$	\$
i. Name of Lending Institution		j. Loan Number	
		\$	\$
		\$	\$