

# 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			c. ID Number
RENITA THOMPkins LINVILLE COMMITTEE TO ELECT FOR CLERK OF SUPERIOR COURT			
b. Mailing Address (include City, State and Zip Code)			d. Date Filed
PO BOX 20802 WINSTON-SALEM, NC 27120-0802			12/12/2019
			e. Phone Number
			(336) 725-0998
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2020	10/29/2019	12/12/2019	SHAUN SOUTHERLAND
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 type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		<b>Municipal</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
		<b>State/County</b> <input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
7. Type of Fund (if applicable, check one)		10. Special Report Name	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:		RECEIVED 2019 DEC 16 PM 2:57	
8. Number of Fundraisers this Report			
0			
3. Account Information		3. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
BB&T			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
RECEIVING CAMPAIGN DONATIONS AND PAYING CAMPAIGN RELATED	RTL2020		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 0.00		\$
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			
Shaun Southerland Printed Name of Signer		[Signature] Signature of Appointed Treasurer	
		12/12/2019 Date	
FOR OFFICE USE ONLY			
Date Received:	<u>12/16/19</u>	Employee:	_____
Date Postmarked:	_____	Employee:	_____
Date Scanned:	_____	Employee:	_____
Date Data Entered:	_____	Employee:	_____
			Delivery Method <input checked="" type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> 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	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. Type of Report</b>		<b>3. ID Number</b>	
RENITA THOMPkins LINVILLE COMMITTEE TO ELECT FOR CLERK OF SUPERIOR COURT		2020 Organizational			
<b>Start of Election Cycle: January 1, 2017</b>			<b>Total this Reporting Period</b>		<b>Total this Election Cycle</b>
4) Cash on Hand at Start			\$ 0.00		\$ 0.00
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 0.00		\$ 0.00	
6) Contributions from Individuals (CRO-1210)		\$ 4,500.00		\$ 4,500.00	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00		\$ 0.00	
9) Loan Proceeds (CRO-1410)		\$ 3,162.50		\$ 3,162.50	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00		\$ 0.00	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00		\$ 0.00	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00		\$ 0.00	
11c) Outside Sources of Income (CRO-1250)		\$ 0.00		\$ 0.00	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00		\$ 0.00	
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00		\$ 0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 7,662.50		\$ 7,662.50	
<b>EXPENDITURES</b>					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 1,658.74		\$ 1,658.74	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00		\$ 0.00	
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00		\$ 0.00	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 0.00		\$ 0.00	
15) Loan Repayments (CRO-1420)		\$ 0.00		\$ 0.00	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00		\$ 0.00	
17) In-Kind Contributions (CRO-1510)		\$ 0.00		\$ 0.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1,658.74		\$ 1,658.74	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 6,003.76		\$ 6,003.76	
<b>ADDITIONAL INFORMATION</b>					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 3,162.50			
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 0.00			
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0.00			
24) Account Transfers Within the Committee (CRO-1720)		\$ 0.00			
25) Administrative Support (CRO-1710)		\$ 0.00		\$ 0.00	
26) Forgiven Loans (CRO-1440)		\$ 0.00		\$ 0.00	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0.00		\$ 0.00	
28) Contributions to be Refunded (CRO-1215)		\$ 0.00		\$ 0.00	

# Contributions from Individuals

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b> RENITA THOMPCKINS LINVILLE COMMITTEE TO ELECT FOR CLERK OF SUPERIOR COURT	<b>2. ID Number</b>
---	---------------------

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
KENNETH BABB 137 WARWICKE PL ADVANCE, NC 27006		LAWYER			
		<b>c. Employer's Name/Specific Field</b> R. KENNETH BABB LAW FIRM			
				<b>e. Election Sum to Date</b>	
				\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	RTL2020	Check		12/04/2019	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
DONALD BUIE 2010 KILDARE WOODS DR GREENSBORO, NC 27407		LAWYER			
		<b>c. Employer's Name/Specific Field</b> DONALD R BUIE ATTORNEY AT LAW			
				<b>e. Election Sum to Date</b>	
				\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	RTL2020	Money Order		12/03/2019	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
MICHAEL GRACE 225 FOX LAKE CT WINSTON SALEM, NC 27106		LAWYER			
		<b>c. Employer's Name/Specific Field</b> GRACE TISDALE & CLIFTON PA			
				<b>e. Election Sum to Date</b>	
				\$ 2,000.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	RTL2020	Check		12/06/2019	\$ 2,000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>					\$ 3,000.00
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 4,500.00

# Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
RENITA THOMPCKINS LINVILLE COMMITTEE TO ELECT FOR CLERK OF SUPERIOR COURT							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>		
JAMES LINVILLE 5080 RAMILLE RUN LN WINSTON SALEM, NC 27106			PASTOR				
			<b>c. Employer's Name/Specific Field</b>				
			PINEY GROVE BAPTIST CHURCH OF WINSTON SALEM, NC		<b>e. Election Sum to Date</b>		
					\$ 1,000.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	RTL2020	Money Order		12/10/2019	\$ 1,000.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>		
CEDRIC RUSSELL 1616 EAGLE CREST DR PFAFFTOWN, NC 27040			MORTICIAN				
			<b>c. Employer's Name/Specific Field</b>				
			RUSSEL FUNERAL HOME		<b>e. Election Sum to Date</b>		
					\$ 500.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	RTL2020	Check		11/12/2019	\$ 500.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 1,500.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 4,500.00	

# Loan Proceeds

Pg 1 of 1

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report proceeds from a loan and loan endorser's information

A loan proceeds statement must accompany each loan that is from an individual

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2: ID Number</b>	
RENITA THOMPCKINS LINVILLE COMMITTEE TO ELECT FOR CLERK OF SUPE					
<b>3. Lender Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
RENITA THOMPCKINS LINVILLE 5080 RAMILLIE RUN WINSTON SALEM, NC 27106		CLERK OF COURT		loan was comprised of check and credit card	
		<b>c. Employer's Name/Specific Field</b>		<b>e. Start Date (mm/dd/yyyy)</b>	
		FORSYTH COUNTY		11/05/2019	
				<b>f. End Date (mm/dd/yyyy)</b>	
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Account Code</b>	<b>j. Form of Payment</b>	<b>k. Amount</b>	
%		RTL2020	Check	\$ 3,162.50	
<b>l. Full Name of Lending Institution</b>				<b>m. Loan Number</b>	
<b>4. Endorsers/Makers</b> <i>(The people who guarantee the loan.)</i>					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b>		<b>e. Amount</b>	
		%		\$	
<b>5. Total of ALL CRO-1410 Pages</b> <i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i>				\$ 3,162.50	

# Disbursements

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>
RENITA THOMPkins LINVILLE COMMITTEE TO ELECT FOR CLERK OF SUPERIOR COURT						
<b>3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)</b>						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
CYNTHIA DIXON MINISTRIES 1922 MARTIN LUTHER KING DR BOX F WINSTON SALEM, NC 27107						
				<b>c. Level Registered (Specify)</b>		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b>
						\$ 125.00
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
RTL2020	Check	A	11/25/2019	\$ 125.00	ADVERTISING IN A HANDBOOK	
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
HARLAND CLARKE 15955 LA CANTERA PARKWAY SAN ANTONIO, TX 78256						
				<b>c. Level Registered (Specify)</b>		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b>
						\$ 31.24
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
RTL2020	Electric Funds Tran	O	11/20/2019	\$ 31.24	CHECK FEES FOR CAMPAIGN	
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
SUM5 COMM/DAVIELIFE MAGAZINE PO BOX 2184 ADVANCE, NC 27006						
				<b>c. Level Registered (Specify)</b>		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b>
						\$ 1,502.50
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
RTL2020	Debit Card	O	12/10/2019	\$ 315.00	CREATED CAMPAIGN'S WEBSITE	
RTL2020	Debit Card	O	12/11/2019	\$ 62.50	DEVELOPMENT AND SUPPORT OF CAMPAIGN	
<b>5. Total only this Page</b>						\$ 533.74
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 1,658.74
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>						
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>						
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						
<b>7. Purpose Codes (List detailed expenditure code in (h.) above)</b>						
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

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
RENITA THOMPkins LINVILLE COMMITTEE TO ELECT FOR CLERK OF SUPERIOR COURT					
<b>3. Type of Disbursement: (Please use separate CRO-1310 forms for each type of Disbursement.)</b>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
SUM5 COMM/DAVIELIFE MAGAZINE PO BOX 2184 ADVANCE, NC 27006					
			<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 1,502.50
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
RTL2020	Debit Card	O	12/11/2019	\$ 1,125.00	CREATION OF CAMPAIGN WEBSITE
				\$	
<b>5. Total only this Page</b>					\$ 1,125.00
<b>6. Total of ALL CRO-1310 Pages</b>					\$ 1,658.74
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>					
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>					
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					
<b>7. Purpose Codes: (List detailed expenditure code in (h.) above)</b>					
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)					

# Outstanding Loans

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
RENITA THOMPkins LINVILLE COMMITTEE TO ELECT FOR CLERK OF SUPERIOR COURT			
<b>3. Lender Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>	<b>d. Comments</b>
RENITA THOMPkins LINVILLE 5080 RAMILLIE RUN WINSTON SALEM, NC 27106		CLERK OF COURT	loan was comprised of check and credit card
		<b>c. Employer's Name/Specific Field</b>	<b>e. Start Date (mm/dd/yyyy)</b>
		FORSYTH COUNTY	11/05/2019
			<b>f. End Date (mm/dd/yyyy)</b>
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Original Loan Amount</b>	<b>j. Remaining Loan Balance</b>
%		\$ 3,162.50	\$ 3,162.50
<b>k. Full Name of Lending Institution</b>			<b>l. Loan Number</b>
<b>4. Total only this Page</b>			\$ 3,162.50
<b>5. Total of ALL CRO-1430 Pages</b> <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>			\$ 3,162.50