

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	Cline for School Board			c. ID Number
b. Mailing Address (include City, State and Zip Code)	7150 Knightswood Drive Charlotte, North Carolina 28226			d. Date Filed
				January 14, 2022
				e. Phone Number
				704.517.9979

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2022	1/18/2022	12/31/2022	Susan S. Busbee

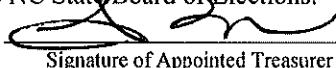
6. Type of Committee (Check One)	9. Type of Report (check only one type of report from one category)			
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent <input type="checkbox"/> Expenditure <input type="checkbox"/> Legal Expense Fund	<input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser	<input checked="" type="checkbox"/> Municipal <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	<input type="checkbox"/> State/County <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	Referendum
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"/> Other:				
8. Number of Fundraisers this Report				
0				

11. Account Information		11. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
Lisa Cline for School Board		5/3 Bank	
b. Purpose	c. Account Code	b. Purpose	c. Account Code
Election			A
d. Period Begin Balance		d. Period Begin Balance	
\$ 0		\$ 0	

CERTIFICATION

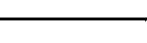
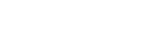
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct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

Susan Sneli Busbee
Printed Name of Signer


Signature of Appointed Treasurer

1-14-22
Date

FOR OFFICE USE ONLY

Date Received: <u>MECKLENBURG COUNTY</u>	Employee: 	Delivery Method
Date Postmarked: <u>JAN 14 2022</u>	Employee: 	<input type="checkbox"/> Normal Mail
Date Scanned: <u>BOARD OF ELECTIONS</u>	Employee: 	<input type="checkbox"/> Registered Mail
Date Data Entered: <u></u>	Employee: 	<input checked="" 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

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
<u>Cline for School Board</u>	<u>Organizational</u>	
Start of Election Cycle: <u>January 1, 2018</u>	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ <u>0.00</u>	\$ <u>0.00</u>
RECEIPTS		
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ <u></u>
6) Contributions from Individuals	(CRO-1210)	\$ <u>100.00</u>
7) Contributions from Political Party Committees	(CRO-1220)	\$ <u></u>
8) Contributions from Other Political Committees	(CRO-1230)	\$ <u></u>
9) Loan Proceeds	(CRO-1410)	\$ <u></u>
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$ <u></u>
11) Other Receipt Sources		
11a) Interest on Bank Accounts	(CRO-1250)	\$ <u></u>
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$ <u></u>
11c) Outside Sources of Income	(CRO-1250)	\$ <u></u>
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$ <u></u>
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$ <u></u>
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ <u>100.00</u>	\$ <u>100.00</u>
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures	(CRO-1310)	\$ <u></u>
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ <u></u>
13c) Coordinated Party Expenditures	(CRO-1310)	\$ <u></u>
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ <u></u>
15) Loan Repayments	(CRO-1420)	\$ <u></u>
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$ <u></u>
17) In-Kind Contributions	(CRO-1510)	\$ <u></u>
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ <u>0.00</u>	\$ <u>0.00</u>
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ <u>100.00</u>	\$ <u>100.00</u>
ADDITIONAL INFORMATION		
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ <u></u>
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ <u></u>
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$ <u></u>
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$ <u></u>
24) Account Transfers Within the Committee	(CRO-1720)	\$ <u></u>
25) Administrative Support	(CRO-1710)	\$ <u></u>
26) Forgiven Loans	(CRO-1440)	\$ <u></u>
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ <u></u>
28) Contributions to be Refunded	(CRO-1215)	\$ <u></u>

Contributions from Individuals

Pg ____ of ____ 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													
<i>Cline for School Board</i>																	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33.33%;">a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td style="width: 33.33%;">b. Job Title/Profession</td> <td style="width: 33.33%;">d. Comments</td> </tr> <tr> <td colspan="2"><i>hisa C. Cline 7150 Knightswood Dr Charlotte, NC 28226</i></td> <td><i>Retired</i></td> </tr> <tr> <td colspan="3">c. Employer's Name/Specific Field</td> </tr> <tr> <td colspan="3">e. Election Sum to Date <i>\$ 100.00</i></td> </tr> </table>						a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments	<i>hisa C. Cline 7150 Knightswood Dr Charlotte, NC 28226</i>		<i>Retired</i>	c. Employer's Name/Specific Field			e. Election Sum to Date <i>\$ 100.00</i>		
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e. Election Sum to Date <i>\$ 100.00</i>																	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount												
<input type="checkbox"/>	<i>A</i>	<i>cash</i>		<i>01/07/22</i>	<i>\$ 50.00</i>												
<input type="checkbox"/>	<i>A</i>	<i>cash</i>		<i>01/08/22</i>	<i>\$ 50.00</i>												
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<input type="checkbox"/>					<i>\$</i>												
<input type="checkbox"/>					<i>\$</i>												
<input type="checkbox"/>					<i>\$</i>												
4. Total only this Page <i>\$</i>																	
5. Total of ALL CRO-1210 Pages <i>\$</i> <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>																	