

Disclosure Report Cover

Use this form for general report and committee information, must be submitted along with other detailed forms.
Do not use this form to update information

COPY

Amendment

☐ Yes☒ No

1. Committee Information

a. Full Name

CLAUDIA SHIVERS FOR CITY COUNCIL MEMBER - CITY OF WINSTON
SALEM

c. ID Number

9CQB91

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

d. Date Filed

10/26/2009

e. Phone Number

336-529-6018

2. Report Year

2009

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

09/02/09

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

10/19/09

5. Treasurer Full Name

SHELLEY T. PHILLIPS

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:

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

8. Number of Fundraisers this Report

1

10. Special Report Name

11. Account Information

a. Financial Institution Full Name

SOUTHERN COMMUNITY BANK AND TR

b. Purpose

CAMPAIGN
CONTRIBUTION
RECORDKEEPIN

c. Account Code

10001

d. Period Begin Balance

\$ 90.68

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.

SHELLEY T. PHILLIPS

Printed Name of Signer

Signature of Appointed Treasurer

10/26/2009

Date

FOR OFFICE USE ONLY

Date Received:

10/28/09

Employee:

JUDY SPEARS

Date Postmarked:

Employee:

Date Scanned:

Employee:

Date Data Entered:

Employee:

Delivery Method

- ☐ Normal Mail
☐ Registered Mail
☒ Hand Delivered
☐ Electronically Filed
☐ 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	
CLAUDIA SHIVERS FOR CITY COUNCIL - CITY OF WINSTON SALEM		2009 PRE-ELECTION		9CQB91	
Start of Election Cycle:		January 1,		2009	
		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 90.68		\$ 0	
RECEIPTS					
5) Aggregated Contributions from Individuals		(CRO-1205)	\$ 150.00	\$ 340.00	
6) Contributions from Individuals		(CRO-1210)	\$ 200.00	\$ 2131.00	
7) Contributions from Political Party Committees		(CRO-1220)	\$	\$	
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)	\$	\$	
11 e) Exempt Purchase Price Sales		(CRO-1265)	\$	\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)			\$ 350.00	\$ 2471.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures		(CRO-1310)	\$ 850.00	\$ 2217.23	
13b) Contributions to Candidates/Political Committees		(CRO-1310)	\$	\$	
13c) Coordinated Party Expenditures		(CRO-1310)	\$	\$	
14) Aggregated Non-Media Expenditures		(CRO-1315)	\$ 137.20	\$ 789.29	
15) Loan Repayments		(CRO-1420)	\$	\$	
16) Refunds/Reimbursements From the Committee		(CRO-1320)	\$	\$	
17) In-Kind Contributions		(CRO-1510)	\$	\$ 11.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)			\$ 987.20	\$ 3017.52	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)			\$ -546.52	\$ -546.52	
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-2200)	\$	\$	
28) Contributions to be Refunded		(CRO-1215)	\$	\$	

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

1 of 1

Amendment
☐ **Yes** ☒ **No**

1. Committee Full Name (and Fund if applicable)					2. ID Number	
CLAUDIA SHIVERS FOR CITY COUNCIL MEMBER - CITY OF WINSTON SALEM					9CQB91	
3. Contributor Information						
a. Amend		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐	Add	10001	CHECK		09/17/2009	\$ 50.00
☐	Remove					
☐	Add	10001	CHECK		10/02/2009	\$ 50.00
☐	Remove					
☐	Add	10001	CHECK		10/09/2009	\$ 25.00
☐	Remove					
☐	Add	10001	CHECK		10/12/2009	\$ 25.00
☐	Remove					
☐	Add					\$
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☐	Remove					\$
4. Total only this Page					\$ 150.00	
5. Total of ALL CRO-1205 Pages					\$ 150.00	
(This line must be on line 5 of Detailed Summary Page CRO-1109)						

Contributions from Individuals

Pg 1 of 1 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	
Claudia Shivers For City Council Member - City of Winston Salem					9CQB91	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) GT SINK 1522 HAS LANE WINSTON SALEM, NC 27101			b. Job Title/Profession		d. Comments	
			RETIRED			
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
				\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	10001	CHECK		10/08/2009	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) JACK D. DAVIS 5630 OLD RURAL HALL ROAD WINSTON SALEM, NC 27105			b. Job Title/Profession		d. Comments	
			RETIRED			
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
				\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	10001	CHECK		10/13/2009	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
			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	
☐					\$	
☐					\$	
☐					\$	
4. Total only this Page					\$ 200.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 200.00	

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)					2. ID Number	
CLAUDIA SHIVERS FOR CITY COUNCIL MEMBER - CITY OF					9CQB91	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
☒ 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) BYRON NELSON III 390 CASSELL STREET WINSTON SALEM, NC 27107			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
					\$ 150.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
10001	CHECK	B	09/22/2009	\$150.00	SUPPLIES	
				\$		
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) FAIRWAY OUTDOOR ADVERTISING 1920 WEST LEE STREET GREENSBORO, NC 27403			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
					\$ 600.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
10001	CHECK	B	10/06/2009	\$600.00	ADVERTISING EXP	
				\$		
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) SHELLEY PHILLIPS 2573 US HWY 158E MOCKSVILLE, NC 27028			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
					\$ 100.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
10001	CHECK	K	10/09/2009	\$100.00	OFFICE SUPPLIES	
				\$		
5. Total only this Page					\$ 850.00	
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)					\$ 850.00	
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 O* - Other						
* Codes require detailed explanation in required remarks field (k)						

Optional form used to report NC Non-Media Expenditures of \$50 or less.

Page 1 of 1 ☐ Yes ☒ No

2. ID Number

Claudia Shivers For City Council Member- City of Westfield 9CQ B91

a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount
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[illegible]

4. Total only this Page	\$ 137.20
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5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>	\$ 137.20
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E - Salaries	B - Printing	C - Fundraising	D - To Another Candidate
I - Postage	F - Equipment	G - Political Party	H - Holding Public Office Expenses
	J - Penalties	K - Office Expenses	O - Other

December 2007