

Disclosure Report Cover

Amendment Yes No

RECEIVED

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

JUL 27 2023

GUILFORD COUNTY
BOARD OF ELECTIONS

1. Committee Information	
a. Full Name Elect Bettye Jenkins	c. ID Number HCZ019
b. Mailing Address (include City, State and Zip Code) P.O. Box 16502 Greensboro, N.C. 27416	d. Date Filed 7/15/2021
	e. Phone Number 336-549-2767

2. Report Year 2023	3. Period Start Date (mm/dd/yy) 01/01/2023	4. Period End Date (mm/dd/yy) 06/30/2023	5. Treasurer Full Name Teresa Lipscomb-Burney
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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	Municipal	State/County	Referendum
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Other:		<input checked="" type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
		<input type="checkbox"/> Year End	<input checked="" type="checkbox"/> Mid Year	10. Special Report Name
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

11. Account Information		11. Account Information	
a. Financial Institution Full Name Suntrust/Truist Bank		a. Financial Institution Full Name	
b. Purpose Campaign Funds	c. Account Code 457	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 3,010.26		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.

Bettye T. Jenkins
Printed Name of Signer

Bettye T. Jenkins
Signature of Appointed Treasurer

07/27/2023
Date

FOR OFFICE USE ONLY

Date Received: _____	Employee: _____	Delivery Method <input 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
Date Postmarked: _____	Employee: _____	
Date Scanned: _____	Employee: _____	
Date Data Entered: _____	Employee: _____	

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. Candidate Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
Elect Bettye Jenkins		Mid Year Semi Annual Report		HCZ019	
Start of Election Cycle: January 1, 2023			Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start			\$ 3,010.26		\$
5) Aggregated Contributions from Individuals (CRO-1205)			\$		\$
6) Contributions from Individuals (CRO-1210)			\$		\$
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)			\$		\$
13) Disbursements					
13a) Operating Expenditures (CRO-1310)			\$		\$
13b) Contributions to Candidates/Political Committees (CRO-1310)			\$		\$
13c) Coordinated Party Expenditures (CRO-1310)			\$		\$
14) Aggregated Non-Media Expenditures (CRO-1315)			\$		\$
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)			\$		\$
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)			\$ 3,010.26		\$
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-2220)			\$		\$
28) Contributions to be Refunded (CRO-1215)			\$		\$