

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	
JOSEPH (JODY) INGLEDIE FOR MAYOR				
b. Mailing Address (include City, State and Zip Code)			d. Date Filed	
341 VIC COURT HIDDENITE, NC 28636			10/03/2013	
			e. Phone Number	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name	
2013	08/28/2013	09/23/2013	TIM KEEVER	
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
☒ Candidate Campaign ☐ Party ☐ Joint Fundraiser ☐ PAC ☐ Referendum ☐ Legal Expense Fund		Municipal State/County Referendum ☐ Organizational ☐ Organizational ☐ Thirty-five day ☐ Quarterly ☒ Pre-primary ☐ First ☐ Pre-election ☐ Second ☐ Pre-runoff ☐ Third ☐ Semi-annual ☐ Fourth ☐ Mid Year ☐ Semi-annual ☐ Year End ☐ Mid Year ☐ Final ☐ Year End ☐ Special ☐ Final ☐ ☐ Special		
7. Type of Fund (if applicable, check one)		10. Special Report Name		
☐ "Booster Fund" ☐ Building Fund ☐ Presidential Election Year Candidates Fund ☐ NC Public Campaign Financing Fund ☐ Other:				
8. Number of Fundraisers this Report				
0				
3. Account Information			3. Account Information	
a. Financial Institution Full Name			a. Financial Institution Full Name	
TAYLORSVILLE SAVINGS BANK				
b. Purpose	c. Account Code	b. Purpose	c. Account Code	
CAMPAIGN FINANCE	JODY			
	d. Period Begin Balance		d. Period Begin Balance	
	\$ 3,287.39		\$	
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				
<u>Timothy H. KEEVER</u>		<u>Timothy H. Kever</u>		<u>10/03/2013</u>
Printed Name of Signer		Signature of Appointed Treasurer		Date
FOR OFFICE USE ONLY				
Date Received:	Employee:	Delivery Method		
Date Postmarked:	Employee:	☐ Normal Mail		
Date Scanned:	Employee:	☐ Registered Mail		
Date Data Entered:	Employee:	☐ 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	
JOSEPH (JODY) INGLEFIELD FOR MAYOR		2013 Pre-Primary			
Start of Election Cycle: January 1, 2013		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 3,287.39		\$ 0.00	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 0.00		\$ 0.00	
6) Contributions from Individuals (CRO-1210)		\$ 800.00		\$ 3,300.00	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00		\$ 2,437.39	
9) Loan Proceeds (CRO-1410)		\$ 0.00		\$ 0.00	
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)		\$ 800.00		\$ 5,737.39	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 0.00		\$ 150.00	
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		\$ 1,500.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 0.00		\$ 1,650.00	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 4,087.39		\$ 4,087.39	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0.00			
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

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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

1. Committee Full Name (and Fund if applicable) JOSEPH (JODY) INGLEFIELD FOR MAYOR					2. ID Number	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) ELENOR BARNHARDT 3335 WILLOW OAK RD CHARLOTTE, NC 28209			b. Job Title/Profession HOMEMAKER		d. Comments	
			c. Employer's Name/Specific Field HOMEMAKER		e. Election Sum to Date \$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	JODY	Check		08/29/2013	\$ 200.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) KATHERINE LEVESQUE 4407 SHADETREE CT RALEIGH, NC 27613			b. Job Title/Profession DATA MANAGER		d. Comments	
			c. Employer's Name/Specific Field GLAXO PHARMA		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	
☐	JODY	Check		09/18/2013	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) CHARLOTTE WILLIAMS 4320 3RD ST NW HICKORY, NC 28601			b. Job Title/Profession DEAN/ PROF		d. Comments	
			c. Employer's Name/Specific Field LENOIR RHYNE UNIVERSITY		e. Election Sum to Date \$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	JODY	Check		09/23/2013	\$ 500.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 800.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 800.00	