

Detailed Summary

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

Amendment
☒ Yes ☐ No

1. Committee Full Name (and Fund if applicable) KIM SIGMON FOR CLERK OF SUPERIOR COURT		2. Type of Report 2013 Organizational		3. ID Number CAT-000000-C-001	
Start of Election Cycle: January 1, 2013		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 0.00		\$ 0.00	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 0.00		\$ 0.00	
6) Contributions from Individuals (CRO-1210)		\$ 1,782.58		\$ 1,782.58	
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)		\$ 750.00		\$ 750.00	
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)		\$ 2,532.58		\$ 2,532.58	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 27.75		\$ 27.75	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 250.00		\$ 250.00	
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)		\$ 1,556.58		\$ 1,556.58	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1,834.33		\$ 1,834.33	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 698.25		\$ 698.25	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 750.00			
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

Pg 1 of 4

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) KIM SIGMON FOR CLERK OF SUPERIOR COURT					2. ID Number CAT-000000-C-001	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
TRACEY CLINE 1510 CARLIN DR CONOVER, NC 28613			TELECOMMUNICATOR			
			c. Employer's Name/Specific Field			
			911 EMERGENCY		e. Election Sum to Date	
					\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	A	Check		06/01/2013	\$ 25.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
BARBARA DEBSKI 1897 REDBERRY LANE CONOVER, NC 28613			MEDICAL TECHNOLOGIST			
			c. Employer's Name/Specific Field			
			HEALTHCARE		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	A	Check		06/02/2013	\$ 50.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
ROBERT HIBBITTS 2826 25TH ST NE HICKORY, NC 28601			RETIRED			
			c. Employer's Name/Specific Field			
			FINANCIAL CONSULTANT		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	A	Credit Card		06/02/2013	\$ 50.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 125.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1,782.58	

Contributions from Individuals

Pg 2 of 4

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	
KIM SIGMON FOR CLERK OF SUPERIOR COURT						CAT-000000-C-001	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ANTERICA HOFFMAN 3937 IDLEWOOD ACRES RD HICKORY, NC 28601				MEDICAL RECORDS			
				c. Employer's Name/Specific Field			
				HEALTHCARE			
						e. Election Sum to Date	
						\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	A	Check		06/01/2013		\$ 25.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ANGIE LACKEY 6355 MOUNTAINSIDE DR HICKORY, NC 28602				OWNER			
				c. Employer's Name/Specific Field			
				MANUFACTURING			
						e. Election Sum to Date	
						\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	A	Credit Card		06/04/2013		\$ 25.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
BETTY LEWIS 118 10TH AVE SE CONOVER, NC 28613				MANAGEMENT			
				c. Employer's Name/Specific Field			
				REAL ESTATE			
						e. Election Sum to Date	
						\$ 51.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	A	Credit Card		05/31/2013		\$ 1.00	
☐	A	Credit Card		05/31/2013		\$ 50.00	
☐						\$	
4. Total only this Page						\$ 101.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 1,782.58	

Contributions from Individuals

Pg 3 of 4

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	
KIM SIGMON FOR CLERK OF SUPERIOR COURT					CAT-000000-C-001	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
KIM SIGMON PO BOX 757 CONOVER, NC 28613			MAGISTRATE			
			c. Employer's Name/Specific Field			
			STATE OF NC			
					e. Election Sum to Date	
					\$ 1,556.58	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	A	In-Kind	CAMPAIGN PRINTING	05/28/2013	\$ 114.68	
☐	A	In-Kind	WATER/SUPPLIES/FESTIV AL BOOTH	05/31/2013	\$ 15.39	
☐	A	In-Kind	CAMPAIGN PRINTING/SUPPLIES	05/31/2013	\$ 24.61	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
KIM SIGMON PO BOX 757 CONOVER, NC 28613			MAGISTRATE			
			c. Employer's Name/Specific Field			
			STATE OF NC			
					e. Election Sum to Date	
					\$ 1,556.58	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	A	In-Kind	CAMPAIGN OFFICE SUPPLIES	05/31/2013	\$ 58.25	
☐	A	In-Kind	CAMPAIGN PRINTING AND SUPPLIES	05/31/2013	\$ 78.39	
☐	A	In-Kind	PRINTING	05/31/2013	\$ 181.10	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
KIM SIGMON PO BOX 757 CONOVER, NC 28613			MAGISTRATE			
			c. Employer's Name/Specific Field			
			STATE OF NC			
					e. Election Sum to Date	
					\$ 1,556.58	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	A	In-Kind	PRINTING	05/31/2013	\$ 724.12	
☐	A	In-Kind	WEBSITE DOMAIN	06/01/2013	\$ 13.95	
☐	A	In-Kind	WEBSITE DOMAIN	06/01/2013	\$ 14.95	
4. Total only this Page					\$ 1,225.44	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1,782.58	

Contributions from Individuals

Pg 4 of 4

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	
KIM SIGMON FOR CLERK OF SUPERIOR COURT					CAT-000000-C-001	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
KIM SIGMON PO BOX 757 CONOVER, NC 28613			MAGISTRATE			
			c. Employer's Name/Specific Field			
			STATE OF NC			
					e. Election Sum to Date	
					\$ 1,556.58	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	A	In-Kind	WEBSITE/YEAR FEE	06/01/2013	\$ 149.00	
☐	A	In-Kind	PO BOX	06/03/2013	\$ 124.00	
☐	A	In-Kind	OFFICE SUPPLIES	06/04/2013	\$ 42.76	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
KIM SIGMON PO BOX 757 CONOVER, NC 28613			MAGISTRATE			
			c. Employer's Name/Specific Field			
			STATE OF NC			
					e. Election Sum to Date	
					\$ 1,556.58	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	A	In-Kind	CAMPAIGN MTG SUPPLIES	06/06/2013	\$ 15.38	
☐					\$	
☐					\$	
4. Total only this Page					\$ 331.14	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1,782.58	

Loan Proceeds

Pg 1 of 1

Amendment

☐ Yes ☒ 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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
KIM SIGMON FOR CLERK OF SUPERIOR COURT				CAT-000000-C-001	
3. Lender Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
KIM SIGMON PO BOX 757 CONOVER, NC 28613		MAGISTRATE			
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)	
		STATE OF NC		05/29/2013	
				f. End Date (mm/dd/yyyy)	
				01/01/2018	
g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment		k. Amount
0.000 %	NONE	A	Check		\$ 750.00
l. Full Name of Lending Institution					m. Loan Number
4. Endorsers/Makers <i>(The people who guarantee the loan.)</i>					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
		%		\$	
5. Total of ALL CRO-1410 Pages <i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i>					\$ 750.00

CRO-1410

NC State Board of Elections

April 2007

Disbursements

Amendment
Pg 1 of 1 ☐ 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) KIM SIGMON FOR CLERK OF SUPERIOR COURT					2. ID Number CAT-000000-C-001																	
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) CATAWBA COUNTY GOP 1985 TATE BLVD SE PO BOX 3175 HICKORY, NC 28602				b. Coordinated Committee Name c. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality: Catawba		d. Comments PAYMENT TOWARDS REAGAN DAY PICNIC (BAND) e. Election Sum to Date \$ 265.00																
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks																	
A	Check	G	05/30/2013	\$ 250.00																		
				\$																		
5. Total only this Page					\$ 250.00																	
6. Total of ALL CRO-1310 Pages <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>					\$ 250.00																	
7. Purpose Codes (List detailed expenditure code in (h.) above)																						
<table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">A* - Media</td> <td style="width: 25%;">B* - Printing</td> <td style="width: 25%;">C* - Fundraising</td> <td style="width: 25%;">D - To Another Candidate</td> </tr> <tr> <td>E - Salaries</td> <td>F* - Equipment</td> <td>G - Political Party</td> <td>H* - Holding Public Office Expenses</td> </tr> <tr> <td>I - Postage</td> <td>J - Penalties</td> <td>K* - Office Expenses</td> <td>Q* - Donation to Legal Expense Fund</td> </tr> <tr> <td colspan="4">O* Other</td> </tr> </table>							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			
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
Pg 1 of 2 ☒ 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	
KIM SIGMON FOR CLERK OF SUPERIOR COURT						CAT-000000-C-001	
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) CATAWBA COUNTY GOP 1985 TATE BLVD SE PO BOX 3175 HICKORY, NC 28602				b. Coordinated Committee Name c. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:		d. Comments e. Election Sum to Date \$ 265.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
A	Check	O	05/30/2013	\$ 15.00	BOOTH RENT		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) PAYPAL 2211 NORTH FIRST STREET SAN JOSE, CA 95131				b. Coordinated Committee Name c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		d. Comments e. Election Sum to Date \$ 2.78	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
A	Draft	O	06/02/2013	\$ 2.78	TRANSACTION FEE		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) SQUARE 901 MISSION ST SAN FRANCISCO, CA 94103				b. Coordinated Committee Name c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		d. Comments e. Election Sum to Date \$ 1.41	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
A	Draft	O	05/31/2013	\$ 1.41	TRANSACTION FEE		
				\$			
5. Total only this Page						\$ 19.19	
6. Total of ALL CRO-1310 Pages							
<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>						\$ 27.75	
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		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

Pg 2 of 2 ^{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) KIM SIGMON FOR CLERK OF SUPERIOR COURT					2. ID Number CAT-000000-C-001	
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) USPS 201 1ST ST EAST CONOVER, NC 28613				b. Coordinated Committee Name		d. Comments
				c. Level Registered (Specify)		
				☐ Federal ☐ County: ☐ State ☐ Municipality:		
				e. Election Sum to Date		
				\$		8.56
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Debit Card	I	06/06/2013	\$ 8.56		
				\$		
5. Total only this Page					\$ 8.56	
6. Total of ALL CRO-1310 Pages <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>					\$ 27.75	
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	Q* - Donation to Legal Expense Fund			
O* Other						
* Codes require detailed explanation in required remarks field (k)						

In-Kind Contributions

Pg 1 of 2 Amendment ☒ Yes ☐ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
KIM SIGMON FOR CLERK OF SUPERIOR COURT		CAT-000000-C-001	
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
KIM SIGMON PO BOX 757 CONOVER, NC 28613		☒ Individual	
		☐ Candidate	
		☐ Party	
		☐ PAC	
		☐ Referendum	
		☐ Other Receipt Source	
		d. Election Sum to Date	
		\$ 1,556.58	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
CAMPAIGN PRINTING		05/28/2013	\$ 114.68
WATER/SUPPLIES/FESTIVAL BOOTH		05/31/2013	\$ 15.39
CAMPAIGN PRINTING/SUPPLIES		05/31/2013	\$ 24.61
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
KIM SIGMON PO BOX 757 CONOVER, NC 28613		☒ Individual	
		☐ Candidate	
		☐ Party	
		☐ PAC	
		☐ Referendum	
		☐ Other Receipt Source	
		d. Election Sum to Date	
		\$ 1,556.58	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
CAMPAIGN OFFICE SUPPLIES		05/31/2013	\$ 58.25
CAMPAIGN PRINTING AND SUPPLIES		05/31/2013	\$ 78.39
PRINTING		05/31/2013	\$ 181.10
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
KIM SIGMON PO BOX 757 CONOVER, NC 28613		☒ Individual	
		☐ Candidate	
		☐ Party	
		☐ PAC	
		☐ Referendum	
		☐ Other Receipt Source	
		d. Election Sum to Date	
		\$ 1,556.58	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
PRINTING		05/31/2013	\$ 724.12
WEBSITE DOMAIN		06/01/2013	\$ 13.95
WEBSITE DOMAIN		06/01/2013	\$ 14.95
4. Total only this Page			\$ 1,225.44
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$ 1,556.58

In-Kind Contributions

Pg 2 of 2 Amendment ☒ Yes ☐ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
KIM SIGMON FOR CLERK OF SUPERIOR COURT		CAT-000000-C-001	
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
KIM SIGMON PO BOX 757 CONOVER, NC 28613		☒ Individual	
		☐ Candidate	
		☐ Party	
		☐ PAC	
		☐ Referendum	
		☐ Other Receipt Source	
		d. Election Sum to Date	
		\$ 1,556.58	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
WEBSITE/YEAR FEE		06/01/2013	\$ 149.00
PO BOX		06/03/2013	\$ 124.00
OFFICE SUPPLIES		06/04/2013	\$ 42.76
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
KIM SIGMON PO BOX 757 CONOVER, NC 28613		☒ Individual	
		☐ Candidate	
		☐ Party	
		☐ PAC	
		☐ Referendum	
		☐ Other Receipt Source	
		d. Election Sum to Date	
		\$ 1,556.58	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
CAMPAIGN MTG SUPPLIES		06/06/2013	\$ 15.38
			\$
			\$
4. Total only this Page		\$ 331.14	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 1,556.58	