Disclosure Report Cover

Amendment

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 In | formation | | | | | | | | | |
|--|---------------|-----------|--|-------|--------------------------|--------------|-------|---------------------|--|--|
| a. Full Name | | | | | | | | | | c. ID Number |
| HENRY VINE | | | | | | | | | | 2-D4-2-ER |
| b. Mailing Addre | ss (include | City, S | tate and Zip | Coc | de) | | | | | d. Date Filed |
| 3450 ISLEY DI SNOW CAMP, | | 9 | | | | | | | | 11/04/2010 |
| 27.7.0 50.0000 (20.00000000000000000000000000000 | | | | | | | | | | e. Phone Number |
| | | | | | | | | | | (336) 227-1761 |
| 2. Report Year | 3. Period S | Start D | ate (mm/dd/y | y) | 4. Period | End Date | (mn | n/dd/yy) | 5. Treasur | er Full Name |
| 2010 | | 07/01/2 | | | | 10/16/201 | | | | ANDRETH |
| 6. Type of Comm | | | The second secon | 9. | Type of Re | port (chec | | | | ort from one category) |
| Candidate Cam | ıpaign | Par | - | Mu | ınicipal | | Sta | ate/Coun | ty | Referendum |
| PAC | | | ferendum | | Organizatio | | | Organiza | | ☐ Organizational |
| Independent E | | _ Join | int Fundraiser | _ | | | _ | Quarterl | | ☐ Pre-referendum |
| Legal Expense | Fund | | 1 | _ | Pre-primar | | | | | ☐ Final |
| 7 Tomo of Fund | (if appl | inable o | heck one) | 1- | Pre-election | | | 93,786 59 | | Supplemental Final |
| 7. Type of Fund Booster Fund | (i) uppn | cable, cr | neck onej | ш | Pre-runoff Semi-annua | | X | | | Annual |
| Building Fund | | | 1 | | Semi-annua Mid Ye | | ш | Four | 1000 | ☐ Special |
| _ Dunang runa | | | | H | Year E | 3000 | _ | Semi-ani | A STATE OF THE STA | |
| Other: | | | 1 | - | Final | na | 님 | | Year r End | 10. Special Report Name |
| 8. Number of Fu | ndraisers | this Re | port | _ | Special | | | 1000 | rena | |
| or runnor or run | | IIIS IN | port | _ | брески | | 片 | | | |
| | 2 | | | | | | - | Special | | |
| 11. Account Info | | | | | | 11. Accou | | | | |
| a. Financial Insti | | Name | | | | a. Financi | ial l | Institutio | n Full Nam | e |
| CAPITAL BAN | K | | | | | | | | | |
| b. Purpose | | | c. Account (| Code | e | b. Purpos | e | | | c. Account Code |
| CAMPAIGN RI | | & | | 100 | | | | | | |
| EXPENDITURI | ES | 1 | | | | | | | | |
| | | / | d. Period Be | egin | Balance | | | | | d. Period Begin Balance |
| | | 1 | \$ | - | 79.50 | | | | | \$ |
| CERTIFICATIO | N | | | | | | | | | |
| I certify that the | : Committee | or Fun | d is in compli | ance | with all ap | plicable pro | visi | ions of A | rticle 22A, 2 | 2B & 22D-22M of Chapter |
| 163 of the NC G | Jeneral Statu | utes and | that no funds | s are | commingled | d with proh | iibit | ed or othe | er non-disclo | sed funds. I further certify |
| that this report i | is complete, | true and | d correct and t | that | I have been | trained by | the | NC State | Board of El | ections. |
| | | | | | 1 | | | | | |
| PAULA | inted Name | of Signer | eth_ | | Paul | ature of Ap | boir | andre nted Treas | eth_ | 11/04/2010 Date |
| FOR OFFICE US | EONLY | | | | | | | | - | |
| Date Received | d: | 11 | -4-10 | | Employ | yee: | 10 | 6 | | very Method Normal Mail |
| Date Postmar | ked: | | | _ | Employ | yee: | | | | Registered Mail Hand Delivered |
| Date Scanned | 1: | | | _ | Employ | yee: | | | | Electronically Filed |
| Date Data Ent | tered: | | | | Employ | yee: | | | | Signer has not received mandatory training |
| Please Note | : This form | n canno | ot be used to | am | end comm | ittee inform | nati | ion such | | mittee address, treasurer, |
| | | | easurer, custo | | | | | | | |

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Amendment Yes 🛄 No

Detailed Summary
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 Re | | 3. 11 | D Number | |
|--|----------------|-----------------|----------------|----------------|--|
| HENRY VINES FOR COMMISSIONER | 2010 Third | | | 2-D4-2-ER | |
| Stort of Florida College | | Total this | - | Total this | |
| Start of Election Cycle: January 1, 2010 | | Reporting Perio | od_ | Election Cycle | |
| 4) Cash on Hand at Start | | \$ 79. | 50 | \$ 0.00 | |
| RECEIPTS | | | | | |
| 5) Aggregated Contributions from Individuals | (CRO-1205) | \$ 1,574. | 32 | \$ 1,574.32 | |
| 6) Contributions from Individuals | (CRO-1210) | \$ 4,230. | 00 | \$ 4,414.00 | |
| 7) Contributions from Political Party Committees | (CRO-1220) | \$ 500. | 00 | \$ 500.00 | |
| 8) Contributions from Other Political Committees | (CRO-1230) | \$ 75. | 00 | \$ 75.00 | |
| 9) Loan Proceeds | (CRO-1410) | \$ 1,400. | 00 | \$ 1,400.00 | |
| 10) Refunds/Reimbursements to the Committee | (CRO-1240) | \$ 0.0 | 00 | \$ 0.00 | |
| 11) Other Receipt Sources | | | | | |
| 11a) Interest on Bank Accounts | (CRO-1250) | <u></u> | - | \$ 0.00 | |
| 11b) Contributions from Not-For-Profit Organizations | (CRO-1250) | \$ 0.0 | 00 | \$ 0.00 | |
| 11c) Outside Sources of Income | (CRO-1250) | | -+ | \$ 0.00 | |
| 11d) Legal Expense Fund - Other Sources | (CRO-1270) | \$ 0.6 | 00 | \$ 0.00 | |
| 11e) Exempt Purchase Price Sales | (CRO-1265) | \$ 0.0 | 00 | \$ 0.00 | |
| 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c, | lld and lle) | \$ 7,779.3 | 32 | \$ 7,963.32 | |
| EXPENDITURES | | | | | |
| 13) Disbursements | | | | | |
| 13a) Operating Expenditures | (CRO-1310) | \$ 5,818.3 | 35 | \$ 5,818.35 | |
| 13b) Contributions to Candidates/Political Committees | (CRO-1310) | \$ 0.0 | +- | \$ 0.00 | |
| 13c) Coordinated Party Expenditures | (CRO-1310) | \$ 0.0 | 00 | \$ 0.00 | |
| (4) Aggregated Non-Media Expenditures | (CRO-1315) | \$ 115.8 | 30 | \$ 136.30 | |
| 15) Loan Repayments | (CRO-1420) | \$ 0.0 | 00 | \$ 0.00 | |
| 6) Refunds/Reimbursements from the Committee | (CRO-1320) | \$ 145.2 | 1 : | \$ 145.21 | |
| 7) In-Kind Contributions | (CRO-1510) | \$ 19.3 | - | \$ 103.32 | |
| (8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15 | , 16 and 17) | \$ 6,098.6 | - | \$ 6,203.18 | |
| (9) Cash on Hand at End (Add lines 4 and 12 together, then sub | tract line 18) | \$ 1,760.1 | | \$ 1,760.14 | |
| ADDITIONAL INFORMATION | | | | | |
| 0) Non-Monetary Gifts Given to Other Committees | (CRO-1330) | \$ 0.0 | 0 | | |
| 1) Outstanding Loans (incl. ones from other campaigns) | (CRO-1430) | \$ 1,400.0 | 0 | | |
| 2) Debts and Obligations owed by the Committee | (CRO-1610) | \$ 0.0 | 0 | | |
| 3) Debts and Obligations owed to the Committee | (CRO-1620) | \$ 0.0 | 0 | | |
| 4) Account Transfers Within the Committee | (CRO-1720) | \$ 0.0 | 0 | | |
| 5) Administrative Support | (CRO-1710) | \$ 0.0 | 0 \$ | 0.00 | |
| 6) Forgiven Loans | (CRO-1440) | \$ 0.0 | 0 \$ | 0.00 | |
| 7) 48-Hour Notice Reports Sum | (CRO-2220) | \$ 0.0 | 0 \$ | 0.00 | |
| 8) Contributions to be Refunded | (CRO-1215) | \$ 0.0 | 0 \$ | 0.00 | |
| CRO-1100 NC State Board | of Elections | | | August 2000 | |

| | | | | Amendm | ent |
|----|---|----|---|--------|------|
| Pg | 3 | of | 8 | Yes | L No |

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

| | | (and Fund if applicab | le) | | | 2. | ID Number |
|---------------|--|--------------------------|-----------------|--------------|-------------------------|----------|----------------------|
| HENR | Y VINES FOR C | COMMISSIONER | | | | | 2-D4-2-ER |
| | tributor Informati | | | Add 🔲 | Remove | <u> </u> | |
| 1 | Name, Mailing Add | | | | e/Profession | d. | Comments |
| | ude city, state, & zi | ip) | | CEO FRE | EEMAN ELECTRIC | | |
| 506 OI | RANGE DRIVE | | | c. Employe | r's Name/Specific Field | 1 | |
| ELON | I, NC 27244 | | | FREEMA | N ELECTRIC |]_ | - 1 0 4- Page |
| | | | | | | | Dection Sum to Date |
| e Delar | 1 Account Code | T | 1 1 h. | <u></u> | | \$ | |
| | T | h. Form of Payment Cash | i. In-Kind Des | cription | j. Date (mm/dd/yyyy) |) | k. Amount |
| | 100 | | <u></u> | <u>-</u> | 09/14/2010 | | \$ 40.00 |
| | 100 | Check | | | 10/04/2010 | | \$ 530.00 |
| | | | | | | | \$ |
| | ributor Informatio | | | | Remove | | <u> </u> |
| | Name, Mailing Add ude city, state, & zi | | | | e/Profession | d. (| Comments |
| | Y M ISLEY | <u>ip)</u> | | FARMER | | | |
| | FPANISH OAK H | IILL RD. | ! | c. Employe | r's Name/Specific Field | 1 | |
| | / CAMP, NC 273 | | ! | RETIRED | | | |
| | | | ! | | | | Election Sum to Date |
| <u></u> | | | | | | \$ | 500.00 |
| | ļ | h. Form of Payment | i. In-Kind Desc | cription | j. Date (mm/dd/yyyy) | | k. Amount |
| | 100 | Check | | | 09/09/2010 | | \$ 500.00 |
| 0 | | | | · | | | \$ |
| | | | | | | | \$ |
| | ributor Informatio Name, Mailing Add | | | | Remove | · . , | |
| | Name, Mailing Add ide city, state, & zi | | + | b. Job Title | | d. C | Comments |
| | N ISLEY | P) | | RETIRED | | | |
| 1950 C | CALLIE LANE INGTON, NC 272 | 7715 | | c. Employer | r's Name/Specific Field | | |
| | , , | <i></i> | | İ | , | e. I | Dection Sum to Date |
| | | | | | 1 | \$ | 100.00 |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Desc | ription | j. Date (mm/dd/yyyy) | L | k. Amount |
| | 100 | Check | | | 10/04/2010 | | \$ 100.00 |
| | | | | | | | \$ |
| | | | | | | | \$ |
| | al only this Pag | | | | | \$ | 1,170.00 |
| 1 | al of ALL CRC | • | | | | \$ | 4,230.00 |
| (Inis v | ine must be on une o | 6 of Detailed Summary P | age CRO-1100) | | | • | 1,550.00 |

| In-Kind Contributions Use this form to report non-monetary contributions, d Use CRO-1215 if In-Kind Contributions were or w | onations, goods or se | g <u>l</u> of rvices provided in 7 days. | 1 to the cor | Amene Ye nmittee o | s No |
|---|-------------------------------|--|-----------------|--------------------------|-----------------------|
| 1. Committee Full Name (and Fund if applicable) | | | 2. ID | Number | ····· |
| HENRY VINES FOR COMMISSIONER | | | 2-D4- | 2-ER | |
| 3. Contributor Information | ☐ Add ☐ Re | emove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | b. Type of Co X Individual | ntributor | c. Con | ments | |
| Aggregated Individual Contribution | Candidate Party PAC Referendu | | d. Elec | tion Sur | n to Date /03, 3 ૣ |
| e. Description | | f. Date (mm/ | dd/yyyy) | g. Fair | Market Amount |
| ROLLS FOR FUNDRAISER | | 09/14/2 | 010 | \$ | 19.32 |
| | | | | \$ | |
| | | | | \$ | |
| 4. Total only this Page | | | \$ | <u> </u> | 19.32 |

CRO-1510

5. Total of ALL CRO-1510 Pages
(This line must be on line 17 of Detailed Summary Page CRO-1100) NC State Board of Elections

December 2007

\$

19.32

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 In | formation | | | | | | |
|--------------------------------|--|---|---------------|--------------|-----------------------|--|--|
| a. Full Name | | | | | | | c. ID Number |
| HENRY VINE | S FOR COMMIS | SIONER | | | | | 2-D4-2-ER |
| b. Mailing Addre | ess (include City, | State and Zip | Code) | | | | d. Date Filed |
| 3450 ISLEY D SNOW CAMP | | | | | | | 10/23/2010 |
| | , 1.0 27313 | | | | | | e. Phone Number |
| | | | | | | | (336) 227-1761 |
| 2. Report Year | 3. Period Start I |)ate (mm/dd/y | y) 4. Period | End Date | (mm/dd/yy) | 5. Treasur | er Full Name |
| 2010 | 07/01 | /2010 | | 10/16/201 | 0 | PAULA L | ANDRETH |
| | nittee (Check One | | 9. Type of Re | port (chec | k only one | type of rep | ort from one category) |
| Candidate Can | - Deliver | arty | Municipal | | State/Cour | nty | Referendum |
| PAC | - | eferendum | Organization | | Organiz | | Organizational |
| Independent E | 1 bend | int Fundraiser | ☐ Thirty-five | , | Quarter | - | Pre-referendum |
| Legal Expense | Fund | | Pre-primar | - | Firs | st | ☐ Final |
| # 70 CE 1 | (:C 1: 11 | , | Pre-electio | | liminal . | ond | ☐ Supplemental Final |
| 7. Type of Fund Booster Fund | (if applicable, | check one) | Pre-runoff | | X Th | | ☐ Annual |
| ☐ Booster Fund ☐ Building Fund | | | Semi-annua | | For | | ☐ Special |
| Dunuing Fund | | | Mid Your E | | Sem i-an | | |
| Other: | | | Final | na | Green | l Year | 10. Special Report Name |
| | ndraisers this R | propt | Special | | Charles . | r End | |
| o. I uniber of Fu | | eport | Special | | least promp | | |
| | 2 | | | - | Special | | |
| 11. Account Info | | | | | unt Informa | The state of the s | |
| | tution Full Name | | | a. Financi | al Instituti | on Full Nam | e |
| CAPITAL BAN | IK | | | | | | |
| b. Purpose | | c. Account (| Code | b. Purpos | e | | c. Account Code |
| CAMPAIGN RESERVED TURE | | 1 | 100 | | | | |
| | | d. Period Be | gin Balance | | | | d. Period Begin Balance |
| | | \$ | 100.00 | | | | \$ |
| CERTIFICATIO | N | | | | | | |
| 163 of the NC C | e Committee or Fur General Statutes and is complete, true an | l that no funds | are commingle | d with proh | ibited or oth | er non-disclo | 2B & 22D-22M of Chapter used funds. I further certify ections. |
| PAULA | LAnd R inted Name of Signs | eth. | Paul Sign | ature of App | andre pointed Trea | surer | 10/23/2010 Date |
| FOR OFFICE US | EONLY | | | | | | |
| Date Receive | d: 10 | -25-10 | _ Emplo | yee: | JG | | ivery Method Normal Mail |
| Date Postmar | ked: | | _ Emplo | yee: | | | Registered Mail Hand Delivered |
| Date Scanned | i: | | _ Emplo | yee: | | | Electronically Filed |
| Date Data En | tered: | | _ Emplo | yee: | | | Signer has not received |
| Please Note | : This form cann | ot be used to | amend comm | ittee inform | nation such | | mandatory training mittee address, treasurer, |
| | | | | | | as the con | uddiess, measurer, |

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 CVD

Loan Proceeds Statement

The individual making a loan to the committee must provide the following information. Failure to provide all of the information requested could be a violation of campaign reporting disclosure laws.

| Name of committee to receive loan: |
|---|
| Henry Vines for Commissioner 2-DY-2-ER |
| Person lending money to committee (Lender): |
| Hery Vines Candidate • Date of loan to committee: 8-12-2010 |
| |
| Name of lending institution and account number (source): Person al. Check |
| • Amount of loan: 1400.00 |
| Names of all parties responsible for payment of loan (guarantors): 1/ / 40 |
| |
| • Period of loan: 8-12-2010 - (2-31-2010 |
| Rate of interest of loan: |
| • Security pledged for loan: <u>Unsecuped</u> |
| |
| I, <u>Henry Vive 5</u> , acknowledge that all of the information (Person lending money to committee) provided is complete, true, and accurate. I further understand I may not forgive a loan that has an outstanding balance to any source. |
| Henry Vines |
| Signature of Lender |
| Paula Landreth Signature of Treasurer of Committee |
| This form must be submitted with the disclosure report for which the loan is initially |

CRO-6100

disclosed.

Amendment ☐ Yes X No

Detailed Summary
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 Re | | _ | ID Number | |
|---|--------------------------|-----------------------------|-----|------------------------------|--|
| HENRY VINES FOR COMMISSIONER | 2010 Third (| Quarter | | 2-D4-2-ER | |
| Start of Election Cycle: January 1, 2010 | | Total this Reporting Per | iod | Total this Election Cycle | |
| 4) Cash on Hand at Start | | | .50 | \$ 0.00 | |
| RECEIPTS | | | | | |
| 5) Aggregated Contributions from Individuals | (CRO-1205) | \$ 1,574 | .32 | \$ 1,574.32 | |
| 6) Contributions from Individuals | (CRO-1210) | \$ 4,230 | .00 | \$ 4,414.00 | |
| 7) Contributions from Political Party Committees | (CRO-1220) | \$ 500 | .00 | \$ 500.00 | |
| 8) Contributions from Other Political Committees | (CRO-1230) | \$ 75 | .00 | \$ 75.00 | |
| 9) Loan Proceeds | (CRO-1410) | \$ 1,400 | .00 | \$ 1,400.00 | |
| 0) Refunds/Reimbursements to the Committee | (CRO-1240) | \$ 0 | .00 | \$ 0.00 | |
| 1) 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 | |
| 2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c, | 11d and 11e) | \$ 7,779 | .32 | \$ 7,963.32 | |
| <u>EXPENDITURES</u> | | Fig. 1 | | | |
| 3) Disbursements | | | | | |
| 13a) Operating Expenditures | (CRO-1310) | \$ 5,818 | .35 | \$ 5,818.35 | |
| 13b) Contributions to Candidates/Political Committees | (CRO-1310) | \$ 0 | .00 | \$ 0.00 | |
| 13c) Coordinated Party Expenditures | (CRO-1310) | \$ 0 | .00 | \$ 0.00 | |
| 4) Aggregated Non-Media Expenditures | (CRO-1315) | \$ 115 | .80 | \$ 136.30 | |
| 5) Loan Repayments | (CRO-1420) | \$ 0 | .00 | \$ 0.00 | |
| 6) Refunds/Reimbursements from the Committee | (CRO-1320) | \$ 145 | .21 | \$ 145.21 | |
| 7) In-Kind Contributions | (CRO-1510) | \$ 19 | .32 | \$ 103.32 | |
| 8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15 | | \$ 6,098 | 68 | \$ 6,203.18 | |
| 9) Cash on Hand at End (Add lines 4 and 12 together, then sub | tract line 18) | \$ 1,760 | 14 | \$ 1,760.14 | |
| ADDITIONAL INFORMATION | (CDO 1310) | | | No. 100 a serie a se sesso e | |
| 0) Non-Monetary Gifts Given to Other Committees | (CRO-1330) | | 00 | | |
| 1) Outstanding Loans (incl. ones from other campaigns) | (CRO-1430) | \$ 1,400 | | | |
| 2) Debts and Obligations owed by the Committee 3) Debts and Obligations and to the Committee | (CRO-1610) | | 00 | | |
| 3) Debts and Obligations owed to the Committee 4) Account Transfers Within the Committee | (CRO-1620) | | 00 | | |
| 4) Account Transfers Within the Committee 5) Administration Support | (CRO-1720) | | 00 | | |
| 5) Administrative Support 6) Forgiven Loans | (CRO-1710) | | 00 | \$ 0.00 | |
| o) Forgiven Loans 7) 48-Hour Notice Reports Sum | (CRO-1440) (CRO-2220) | | 00 | \$ 0.00 | |
| 8) Contributions to be Refunded | (CRO-2220) | | 00 | \$ 0.00 | |
| CRO-1100 NC State Board | · | \$ 0. | 00 | \$ 0.00 August 2008 | |

| _ | 1 | _ |
|------|---|----|
| Page | • | of |

☐ Yes X No

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

| 1. Committe | e Full Name (and | Fund if applicable) | Trom mulviquals of a | | 2. ID Numbe | r |
|-------------------|---------------------------------------|-----------------------|--------------------------|------------------|-------------|-----------------|
| | NES FOR COMM | | | | ···· | 4-2 - ER |
| 3. Contribut | or Information | | | | | |
| a. Amend | · · · · · · · · · · · · · · · · · · · | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/y | yyyy) f. Am | ount |
| ☐ Add ☐ Remove | 100 | In-Kind | ROLLS FOR FUNDRAISER | 09/14/2010 | | 19.32 |
| ☐ Add ☐ Remove | 100 | Check | | 09/14/2010 | \$ | 25.00 |
| ☐ Add ☐ Remove | 100 | Check | | 09/28/2010 | \$ | 10.00 |
| ☐ Add ☐ Remove | 100 | Cash | | 10/04/2010 | \$ | 20.00 |
| ☐ Add☐ Remove | 100 | Check | | 10/04/2016 | \$ | 50.00 |
| Add Remove | 100 | Cash | | 09/14/2010 | \$ | 20.00 |
| Add Remove | 100 | Check | | 09/14/2010 | \$ | 20.00 |
| Remove | 100 | Cash | | 10/04/2010 | \$ | 15.00 |
| Remove | 100 | Cash | | 09/15/2010 | \$ | 50.00 |
| Remove | 100 | Cash | | 09/15/2010 | \$ | 50.00 |
| Remove | 100 | Check | | 10/01/2010 | \$ | 50.00 |
| Remove Add | 100 | Cash | | 10/04/2010 | \$ | 10.00 |
| Remove | 100 | Check | • | 09/02/2010 | \$ | 25.00 |
| Remove Add | 100 | Check | | 09/02/2010 | \$ | 25.00 |
| Remove Add | 100 | Check | | 09/14/2010 | \$ | 25.00 |
| Remove | 100 | Cash | | 09/14/2010 | \$ | 25.00 |
| Add Remove | 100 | Cash | | 10/04/2010 | \$ | 25.00 |
| Remove | 100 | Check | | 09/01/2010 | \$ | 50.00 |
| Remove Add | 100 | Cash | | 09/14/2010 | \$ | 20.00 |
| Remove Add | 100 | Check | | 09/06/2010 | \$ | 25.00 |
| Remove Add | 100 | Check | | 09/01/2010 | \$ | 50.00 |
| Remove Add | 100 | Cash | <u>-</u> | 09/01/2010 | \$ | 30.00 |
| Remove | 100 | Cash | | 10/04/2010 | \$ | 20.00 |
| | ly this Page | S Dogos | | | \$ | \$659.32 |
| (This line mu | ALL CRO-12(st be on line 5 of De | tailed Summary Page C | | ···· | \$ | \$1,574.32 |
| CRO-1205 | | NC | State Board of Elections | | | April 2007 |

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

Page 2 of

☐ Yes

| | | Fund if applicable) | | | 2. ID 1 | Number | |
|-------------------|-----------------------|------------------------------------|--------------------------|-----------------|---------|-----------|---------------------------------------|
| HENRY VI | NES FOR COMM | HISSIONER | | | | 2-D4-2-E | R |
| | tor Information | | | | | · | · · · · · · · · · · · · · · · · · · · |
| a. Amend | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd. | /уууу) | f. Amount | |
| ☐ Add ☐ Remove | 100 | Check | | 08/17/201 | 0 | \$ | 20.00 |
| ☐ Add ☐ Remove | 100 | Check | | 10/04/201 | 0 | \$ | 25.00 |
| ☐ Add ☐ Remove | 100 | Check | | 10/04/201 | 0 | \$ | 30.00 |
| ☐ Add ☐ Remove | 100 | Cash | | 09/14/201 | 0 | \$ | 40.00 |
| ☐ Add ☐ Remove | 100 | Check | | 10/11/201 | 0 | \$ | 40.00 |
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|)[1() V V | CAMI, NC 272 | 1 9 | | | | | | |
| | | | | | | e. El | ection Sum | to Date |
| Prior | a Account Code | h. Form of Payment | 7 | | | \$ | | 100.00 |
| • | 100 | Check | i. In-Kind Desc | ription | j. Date (mm/dd/yyyy) | ŀ | c. Amount | |
| | 100 | | | | 09/14/2010 | | \$ | 100.00 |
| | | | | | | _ | \$ | |
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| | l of ALL CRC | | | | | \$ | · | 420.00 |
| (This li RO-12 | ne must be on line 6 | of Detailed Summary P | age CRO-1100) | | | \$ | 4 | ,230.00 |

Contributions from Individuals Amendment 7_ of ☐ Yes Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used ■ No 1. Committee Full Name (and Fund if applicable) 2. ID Number HENRY VINES FOR COMMISSIONER 2-D4-2-ER 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) LEONORAH H STOUT 213 N. MELVILLE STREET c. Employer's Name/Specific Field GRAHAM, NC 27253 RETIRED 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 100 Check 09/13/2010 \$ 100.00 \$ \$ 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) RETIRED CHARLES SYDNOR 6707 BASS MOUNTAIN ROAD c. Employer's Name/Specific Field SNOW CAMP, NC 27349 e. Election Sum to Date 300.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 100 Check 10/02/2010 \$ 300.00 \$ \$ 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) **EDUCATOR** STEVE VANDELT

| 3457 ROGERS ROAD GRAHAM, NC 27253 | | | c. Employer | | e. | Ection Sum | to Date | |
|--------------------------------------|----------------------|--------------------------|----------------|---------------------------------------|----------------------|------------|-----------|----------|
| Prior | g. Account Code | h. Form of Payment | i. In-Kind Des | | | \$ | | 100.00 |
| | 100 | Check | 1. MMIIG DES | cription | j. Date (mm/dd/yyyy) | | k. Amount | |
| | | Gircer | | ··· | 08/17/2010 | | \$ | 100.00 |
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| | al of ALL CRO | | | | | | · | 500.00 |
| (This II | ne must be on line (| 6 of Detailed Summary Po | age CRO-1100) | | | \$ | i | 4,230.00 |

Contributions from Individuals Pg 8 of 8 Yes C

X 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 HENRY VINES FOR COMMISSIONER 2-D4-2-ER 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) SALES DANIEL VIA 5901 D COUNTRTY LANE c. Employer's Name/Specific Field SNOW CAMP, NC 27349 **CINTAS** e. Dection Sum to Date \$ 110.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 100 Check 10/14/2010 \$ 110.00 \$ \$ 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) RETIRED FLOSSIE VINES 2520 HYDE STREET c. Employer's Name/Specific Field BURLINGTON, NC 27217 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 100 Check 09/14/2010 \$ 100.00 \$ \$ 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) HOMEMAKER L G WHITE 207/A OAKE AVENUE c. Employer's Name/Specific Field PIKESVILLE, MD 21208 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 100 Check 09/14/2010 \$ 100.00 \$ \$ 4. Total only this Page \$ 310.00 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) \$ 4,230.00

| Contributi | ions from Polit | tical Party Committees | n 1 . | , | Amendme | ent |
|--------------------------------------|--|-----------------------------|----------------|-------------|-------------|------------|
| MIND 101111 | to report couttibility | ns from a political party | Pg 1 of | | ☐ Yes | No No |
| 1. Committee F | ull Name (and Fund if | annicable) | | | | |
| HENRY VINE | S FOR COMMISSION | NED | | 2. ID | Number | |
| | | NLK | | | 2-D4-2- | ER |
| 3. Contributor I | | □ Add □ F | | | | |
| a. Full Name, Ma | iling Address & Phone | e Add LJ R | Remove | | | |
| (include city, s | tate, & zip) | | | b. Co | mments | |
| DEMOCRATION P.O. BOX 1815 BURLINGTON | | MANCE COUNTY | | | | |
| | | | | c. He | tion Sum to | Date |
| d. Account Code | c E. CD | | | \$ | | 500.00 |
| 100 | e. Form of Payment | f. In-Kind Description | g. Date (mm/de | l/yyyy) | h. Amount | |
| 100 | Check | | 08/30/20 | | \$ | 500.00 |
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| 4 (5) () | | | | | \$ | |
| 4. Total only t | | | | ď | | 500.00 |
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| CRO-1220 | and roj petuneu Sul | | | Ъ | | 500.00 |
| | | NC State Board of Elections | | | | April 2007 |

| Contribut | tions from Othe | er Political C |]ommittees | D | 1 | Amendm | |
|------------------|---|--------------------|--------------------|--------------------------|--|--------------|------------|
| Use this form t | o report contributions | from other candida | ite, referendum o | rg 01 rPAC committees | <u></u> - | ☐ Yes | X No |
| 1. Committee | Full Name (and Fund if | applicable) | , | 1770 Containtices | 2 1 | D Number | |
| HENRY VIN | ES FOR COMMISSIO | NER | | | | 2-D4-2 | |
| 3. Contributor | | | Add 🔲 | Remove | <u> </u> | | |
| | lailing Address & Phon | e | b. Type of Com | mittee | d. (| Comments | |
| (include city, | state, & zip) | | ■ Candidate | PAC | | | |
| RONALD L P | ARRISH CAMPAIGN | | Referendum | | | | |
| 211 E. ELM S | | | c. Level Registe | red (Specify) | 1 | | |
| GRAHAM, N | C 27253 | | Federal | 🕅 County: | 1 | | |
| | | | ☐ State | ☐ Municipality: | e. E | lection Sur | n to Date |
| | | | Alamance | | \$ | | 75.00 |
| f. Account Code | g. Form of Payment | h. In-Kind Descri | ption | i. Date (mm/dd/y | ууу) | j. Amount | |
| 100 | Check | | | 09/14/2010 | | \$ | 50.00 |
| 100 | Check | | | 10/02/2010 | | \$ | 25.00 |
| | | | | | | \$ | |
| 4. Total only th | is Page | | | | \$ | .1 | \$75.00 |
| | CRO-1230 Pages be on line 8 of Detailed St | ımmary Page CRO-1 | 100) | | \$ | | \$75.00 |
| CRO-1230 | | | Board of Elections | | - | | April 2007 |

| Loan Proceeds | | | | . 1 | . 1 | | Amendme | |
|--|-----------------|-------------|--------------|---------------------------------------|-------------|--------------------------|---------------------------------------|-------------|
| Use this form to report proceeds from | na loan an | d loan e | undomo-l- | Pg 1 | of <u>1</u> | _ | ☐ Yes | X No |
| A loan proceeds statement must acc | ompany ea | ch Ioan | that is from | inioimation manindividua | .1 | | | |
| 1. Committee Full Name (and Fund i | fapolicable | e) | that is iro | man mulvidua | | 12 H | Number | |
| HENRY VINES FOR COMMISSIONER | | | | | | · - | | <u> </u> |
| | | | | | | [2-D | 4-2-ER | |
| 3. Lender Information | | | Add 🔲 | Remove | | | | |
| a. Full Name, Mailing Address & Phon | 1e | | b. Job Titl | e/Profession | <u></u> - | d. Co | mments | |
| (include city, state, & zip) | <u> </u> | | FARM | | | 1 | | <u> </u> |
| WILLIAM H VINES JR | | | | | | | | |
| 3450 ISLEY DRIVE | | | | | | e. St | art Date (1 | mm/dd/yyyy) |
| SNOW CAMP, NC 27349 | | | c. Employe | r's Name/Spec | ific Field | | 08/12/ | |
| | | | SELF | | | | | |
| | | | | | | f. End Date (mm/dd/yyyy) | | |
| | | | | | | İ | 12/31/ | 2010 |
| g. Rate h. Security Pledged | | i. Acco | unt Code | j. Form of Pay | mant | 12- | A | |
| 0.000% CASH ADVANCE UNS | ECURED | | 100 | | eck | - K | . Amount | |
| | | | 100 | Cn | eck | | \$ | 1,400.00 |
| 1. Full Name of Lending Institution | | | | | · | m. Lo | an Numb | er |
| | | | | · · · · · · · · · · · · · · · · · · · | | | | |
| A.E. J. (D.C.) | | | | | | 1 | | |
| 4. Endorsers/Makers (The people who | | e loan.) | | | | | | |
| a. Full Name, Mailing Address & Phon | e | | b. Job Title | /Profession | c. Employ | er's N | ım e/Speci | fic Field |
| (include city, state, & zip) | | | | | | | | |
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NC State Board of Elections

April 2007

CRO-1410

| Disbursements |
|---------------|
|---------------|

| | | | Amendm | ent | |
|----|--------|---|--------|-----|----|
| Pg | of | 3 | ☐ Yes | X | No |

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

| | full Name (and Fund | | | | | | | 2. ID Nu | |
|---------------------|--|------------------------|---------------|---------------------------------------|-----------------------|--|---------------|--|---|
| HENRY VINE | ES FOR COMMISSION | ONER | | | | | | | -2-ER |
| 3. Type of Disbu | | use separate CR(| O-1310 | forms for eac | h tvpe | of Disbi | reemi | ont) | |
| Operating Exp | | tributions to Candidat | ites/Polit | ical Committees | <u></u> | | | | Expenditures |
| 4. Payee Inform | | | | Add 🔲 | Remo | | | | Apontaria 55 |
| a. Full Name, Ma | ailing Address & Pho | ione | | b. Coordinate | | | a m e | d. Comm | ents |
| (include city, sta | | | | | | | | + | |
| ALAMANCE N | NEWS | | , | | | | | İ | |
| BURLINGTON | J, NC 27215 | | ! | c. Level Regis | tered (| | | 1 | |
| | | | ; | ☐ Federal | | County: | | 1 | |
| | | | ! | ☐ State | | Municip | pality: | e. Electio | on Sum to Date |
| | | | I | | | | | \$ | 325.00 |
| | g. Form of Payment | h. Purpose Code | i. Date | (mm/dd/yyyy) | j. Am c | ount | k. Re | quired Re | marks |
| 100 | Check | A | | 9/17/2010 | 1 | 325.00 | + | VSPAPE | |
| | L | | | | \$ | | | | - · · · · · · · · · · · · · · · · · · · |
| 4. Payee Informa | | | | Add 🔲 | Remov | ve | | | |
| | ailing Address & Pho | one | | b. Coordinated | | | ame | d. Comm | ents |
| (include city, stat | | | | <u> </u> | | | - | | |
| HARRIS TEETI | | | | | | | | | |
| CHURCH STRE | | | ļ | c. Level Regist | | | | 1 | |
| BURLINGTON | , NC 27215 | | 1 | Federal | _ D | County: | | | |
| İ | | | 1 | ☐ State | <u></u> L_ | Municip | ality: | e. Dection | n Sum to Date |
| | | | 1 | l | | | ł | \$ | 55.41 |
| | g. Form of Payment | h. Purpose Code | i. Date | (mm/dd/yyyy) | j. Am o | unt | k. Re | quired Re | |
| 100 | | С | | | \$ | 55.41 | | PS - HOT | |
| | | | | | \$ | | 1 | IONADE | |
| 4. Payee Informa | ation | | | | Remov | | | | |
| | ailing Address & Pho | one | | b. Coordinated | | - | me | d. Comme | ~ m fe |
| (include city, stat | • | | } | D. C. C. C. | 100 | micc | - | u. Com | |
| MEBANE ENTE | | | | ı | | |] | | |
| MEBANE, NC | | | | c. Level Regist | ered (S | pe cify) | | | |
| | | | | Federal | | County: | | i | |
| | | |]' | State | | Municipa | ality: | e. Dection | n Sum to Date |
| | | | | | - - | | | \$ | 153.90 |
| i. Account Code | g. Form of Payment | h. Purpose Code | i. Date | (mm/dd/yyyy) | j. Amou | unt | k. Rec | quired Rer | |
| 100 | | A | | | | | | SPAPER | |
| | | | <u>.</u> | | \$ | - | | | 7100 |
| 5. Total only this | Page | | | | Ψ | | | dt . | 524.21 |
| 6. Total of ALL C | | | | | | | | <u>\$</u> | 534.31 |
| | i line 13a of Detailed Su | Dana CRO | 1100 161 | ^ - Fonds | | | | | |
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| | des (List detailed e | | | | | | | | |
| A* - Media | B* - Printing | | | ındraising | | D - To / | A noth | er Candid | ate |
| E - Salaries | F* - Equipmen | - | | itical Party | | | | | ffice Expenses |
| - Postage | J - Penalties | | | ffice Expenses | | | | | Expense Fund |
| O* Other | | | | _ | | V | ****** | I to Lag | Expense a una |
| * Codes require | detailed explanation | in required rems | arks fie | :ld(k) | | | | | |

| Disbursements | |
|----------------------|--|
|----------------------|--|

| | | | | Amendmer | ıt |
|---|---|----|---|----------|----|
| ! | 2 | of | 3 | □ Ves | X |

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

| 1. Committee I | Full Name (and Fu | nd if applicable) | | | | | 2. ID Number |
|------------------------|----------------------------|--|--|--------------------------------|--------------------|----------|---|
| HENRY VINI | ES FOR COMMIS | SIONER | | | | | 2-D4-2-ER |
| 3. Type of Disb | angoment (Place | | | | | | |
| Operating Ex | | se use separate Cl ontributions to Candid | (O-131 | <u>0 forms for eac</u> | | | |
| 4. Payee Inform | | ontributions to Candit | | | | ordina | ted Party Expenditures |
| | ailing Address & | Phone | | | Remove | - | T |
| (include city, st | | Thone | | o. Coordinate | ed Committee 1 | Vam e | d. Comments |
| SAM'S CLUB | ,ру | | — – | -{ | | | |
| WENDOVER | AVE | | | c. Level Regis | stered (Specify) | | - |
| GREENSBOR | O, NC 27408 | | | ☐ Federal | Count | | . |
| | | | | ☐ State | ☐ Munic | ipality: | e. Election Sum to Date |
| ! | | | | | - | | |
| f. Account Code | g Form of Payme | nt h. Purpose Code | | <u> </u> | | , | 110.51 |
| 100 | Check | C | | e (mm/dd/yyyy) | 1 | | quired Remarks |
| | Circex | - L | _ · | 09/13/2010 | \$ 116.51 | FOC | DD - SUPPLIES |
| | | | | | \$ | | |
| 4. Payee Inform | | | | Add 🗆 | Remove | <u> </u> | |
| | ailing Address & 1 | Phone | | b. Coordinate | d Committee N | ame | d. Comments |
| (include city, sta | | | | | | | |
| | ORPORATION | | | | | | |
| BURLINGTON | I, NC | | | | tered (Specify) | | |
| | | | | ☐ Federal | County | | |
| | | | | ☐ State | LI Munici | pality: | e. Election Sum to Date |
| | | | | ! | | | \$ 2,013.50 |
| f. Account Code | g. Form of Paymer | t h. Purpose Code | i. Date | (mm/dd/yyyy) | i. Amount | k Red | quired Remarks |
| 100 | Check | В | 1 | 9/24/2010 | \$ 2,013.50 | MAI | ····· |
| | - | | | 272 172010 | | IVIAII | LEK |
| 4 D 1 C | 41 | | <u> </u> | | \$ | | |
| 4. Payee Informs | iling Address & P | | | | Remove | | |
| include city, stat | | none | | b. Coordinated | d Committee Na | ıme | d. Comments |
| TIMES NEWS | ic, & zip) | | | ļ | | | |
| P. O. BOX 481 | | | | c. Level Regist | ered (Specifu) | | |
| BURLINGTON | NC 27215 | | | Federal | County: | | |
| | , | | | State | | [[| e. Dection Sum to Date |
| | | | | | | | - |
| | | т | | | | | \$ 1,065.82 |
| | | t h. Purpose Code | i. Date | (mm/dd/yyyy) | j. Amount | k. Req | uired Remarks |
| 100 | Check | Α | 10 | 0/13/2010 | \$ 1,065.82 | NEW | SPAPER/ONLINE |
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| . Total only this | Раде | | | | | | |
| | CRO-1310 Pages | | | | | | \$ 3,195.83 |
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| (This line goes in | line 13h of Detailed | Summary Page CRO- Summary Page CRO- | 1100 if | Operating Expens | ses) | | \$ 5,818.35 |
| (This line goes in | line 13c of Detailed | Summary Page CRO- Summary Page CRO- | 1100 ij (1100 if i | Contrib to Candid | dates/Political Ca | mm) | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| | | | | | y Expenditures) | | · · · · · · · · · · · · · · · · · · · |
| * - Media | | l expenditure code | | | | | |
| - Vietna - Salaries | B* - Printi F* - Equipa | 0 | | Indraising | | | er Candidate |
| - Postage | J - Penalti | | | itical Party ffice Expenses | H* - Ho | lding I | Public Office Expenses |
| * Other | - Tomath | -~ | . · U | mee expenses | Q* - Da | nation | to Legal Expense Fund |
| Codes require | detailed explanatio | on in required rem | arke fi | 라라(사) | | | Ţ. |

Disbursements

| 2 is buildenichte | Pg | 3 | ot | خ | LJ Yes | LXI N |
|--|--------|----------|--------|----------|-----------|----------|
| Use this form to report expenditures from the committee for operating ex | penses | . contri | butio: | ns to ca | ndidate/n | olitical |
| committees and coordinated party expenditures | • | | | | | |

| 1. Committee F | Full Name (and Fun- | d if applicable) | | | | | | 2. ID Num | her |
|-----------------------------|------------------------|---|------------|------------------|---------|-----------------|----------|------------------|-------------|
| | ES FOR COMMISS | | | | - | | | 2-D4-2 | |
| 3. Type of Disb | ursement (Pleas | e use separate CR | O-1310 | forms for eac | h ty | ne of Disbu | rseme | ent.) | |
| X Operating Ex | | ntributions to Candida | tes/Polit | ical Committees | ; | | | ed Party Exp | enditures |
| 4. Payee Inforn | nation | | | Add 🔲 | Re | move | | | |
| a. Full Name, M | failing Address & P | hone | | b. Coordinate | | | am e | d. Commer | nts |
| (include city, st | ate, & zip) | | | | | | | | |
| UNITED STA | TES POST OFFICI | ======================================= | | | | | | | |
| ALAMANCE, | NC 27201-9800 | | | c. Level Regis | tere | | | 1 | |
| | | | | Federal | | County | | | · <u></u> |
| | | | | ☐ State | | Municip | ality: | e. Hection | Sum to Date |
| | | | | | | | | \$ | 132.00 |
| | g. Form of Paymen | t h. Purpose Code | i. Date | (mm/dd/yyyy) | j. A | mount | k. Re | quired Rem | arks |
| 100 | Check | I | 08 | 8/31/2010 | \$ | 132.00 | | | |
| | | | | - | \$ | - | | | ···· |
| 4. Payee Inform | | | | Add 🔲 | Rer | nove | <u> </u> | | |
| a. Full Name, M | ailing Address & P | hone | | b. Coordinate | | | am e | d. Commer | its |
| (include city, sta | | | | - 11 11 | | | - | | |
| VAN'S ADVE | RTISING | | | | | | | | |
| 3264 VAN DRI | IVE | | | c. Level Regis | tere | | | | |
| | | | | County: | | | | | |
| | | | | ☐ State | | ☐ Municip | ality: | e. Dection | Sum to Date |
| | | | | | | | | \$ | 1,686.21 |
| f. Account Code | g. Form of Paymen | h. Purpose Code | i. Date | (mm/dd/yyyy) | j. A | mount | k. Re | quired Rem | |
| 100 | Check | В | | 9/02/2010 | \$ | 1,234.49 | | NS & BUM | |
| 100 | Check | В | 09 | 0/17/2010 | \$ | 451.72 | RUL | KERS ERS-PENC | CILS-POSTC |
| | | | · | | <u></u> | | | S-BUSCAI | |
| 4. Payee Inform | | | | Add 🔲 | | nove | | | |
| | ailing Address & Pl | ione | | b. Coordinatee | l Co | mmittee Na | те | d. Commen | ts |
| (include city, sta | | | | | | | | | |
| | IARCOAL STEAK | | | | | | | | |
| | M HOPEDALE ROA | 4D | | c. Level Regist | | | | | |
| BURLINGTON | | | | Federal | | County: | | | |
| (336) 227-1448 | | | | ☐ State | | Municip | ality: | e. Dection | Sum to Date |
| | | | | | | | | \$ | 270.00 |
| Account Code | g. Form of Payment | h. Purpose Code | i. Date | (mm/dd/yyyy) | j. Ai | mount | k. Red | quired Rem | arks |
| 100 | Check | С | 10 | /04/2010 | \$ | | - | OND FUNI | |
| | | | - | | \$ | | | | |
| 5. Total only this | s Page | | - | | | | | \$ | 2,088.21 |
| . Total of ALL | CRO-1310 Pages | | | | | | | | 2,000.21 |
| | n line 13a of Detailed | Summary Page CRO- | .1100 if c | Operating Expen | ises) | | | | |
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| (This line goes in | n line 13c of Detailed | Summary Page CRO- | 1100 if (| Coordinated Par | ty Ex | penditures) | | | |
| . Purpose Co | odes (List detailed | expenditure code | in (h.) a | bove) | | | | | ····- |
| A* - Media | B* - Printi | ng | C* - Fข | ındraising | | D - To A | Anoth | er Candida | te |
| E - Salaries | F* - Equipa | ient | G - Poli | itical Party | | H* - Ho | lding | Public Offi | ce Expenses |
| - Postage | J - Penaltie | es : | K* - O | ffice Expenses | | | | | xpense Fund |
|)* Other * Codos vocuino | a detailed evalenction | | , - | 1143 | | | | | |
| . I WUDD LOUMER | i natallan avnianah) | m in rodhirod rom | awle fie | ald (lz) | | | | | |

| Aggregated | l Non-Media | Expenditures |
|------------|-------------|---------------------|
|------------|-------------|---------------------|

| | rage 1 of 1 Yes XI No | | | | | | | | | |
|---|--|-------------|----------------------|------------|--------|---------------------|-----------------------------------|--|--|--|
| Optional form used to report NC Non-Media Expenditures of \$50 or less. | | | | | | | | | | |
| 1. Committee Full Name (and Fund if applicable) | | | | | | 2. lD Number | | | | |
| HENRY VINES FOR COMMISSIONER | | | | | | 2-D4-2-ER | | | | |
| | . Payee Information | | | | | | | | | |
| | b. Account Code c. Form of Payment d. Purpose Code e. Date (mm/c | | e. Date (mm/dd/yyyy) | f. Amou | unt | g. Required Remarks | | | | |
| ☐ Add ☐ Remove | 100 | Draft | К | 08/24/2010 | \$ | 18.50 | CHECKS AND DEP SLIPS | | | |
| ☐ Add☐ Remove | 100 | Check | В | 09/16/2010 | \$ | 25.86 | HANDOUTS | | | |
| ☐ Add ☐ Remove | | Check | В | 09/19/2010 | \$ | 32.33 | HANDOUTS | | | |
| Add Remove | | Check | С | 09/23/2010 | \$ | 10.66 | FOOD | | | |
| Add Remove | 100 | Check | 0 | 09/24/2010 | \$ | | BOOTH AT PLAID DAY | | | |
| Add Remove | 100 | Check | С | 09/01/2010 | \$ | 7.62 | PAPER PRODUCTS | | | |
| ☐ Add ☐ Remove | l | Check | С | 09/01/2010 | \$ | | PLATES,NAPKINS, PAPER PRODUCTS | | | |
| 4. Total or | nly this Page | | | | \$ | \$ 115.80 | | | | |
| 5. Total of ALL CRO-1315 Pages (This line must be on line 14 of Detailed Summary Page CRO-1100) | | | | | | | 115.80 | | | |
| 6. Purpose Codes (List detailed expenditure code in (d) above) | | | | | | | | | | |
| B* - Printing C* - Fundraising D - To Another Candidate | | | | | | | | | | |
| E - Salari | | - Equipment | G - Political | Party H*- | Holdir | ng Publ | ic Office Expenses | | | |
| I - Postag | ge J - I | Penalties | K* - Office | | | | Legal Expense Fund | | | |

CRO-1315

O* - Other

* Codes require detailed explanation in required remarks field (g)

RO-1315

NC State Board of Elections

December 2009

| Refunds/Reimbursements From the Committee Pg 1 of | | | | | | Amendment | | | |
|---|------------------------------|-----------------|-----------------------|----------------------|--------------------|-----------------|---------------------------|---------------------------------------|--|
| Use this form to | report re | funds/reimbum | rioni the Co | mantice Pg | g of | <u>-</u> | ☐ Yes | X No | |
| 1. Committee Fu | Il Name | (and Fund if an | ements, including c | ontributions retu | med to the contrib | | | | |
| | | | | | | | 2. ID Number 2-D4-2-ER | | |
| HENKI VINES | HENRY VINES FOR COMMISSIONER | | | | | | | | |
| 3. Payee Informa | | | | Add Re | emove | <u> </u> | | | |
| a. Full Name, Mai | | | | d. Type of Committee | | | g. Comments | | |
| (include city, st | tate, & zi | ip) | | ☐ Candidate | ☐ PAC | | | · · · · · · · · · · · · · · · · · · · | |
| SHAVON VIA | | | | Referendum | □ Party | | | | |
| 5901 D COUNT | RY LA | NE | | e. Level Registe | red (Specify) | h. C | riginal F | Receipt Date | |
| SNOW CAMP, 1 | NC 273 | 49 | | ☐ Federal | ıl 🔲 County: | | 09/24/2010 | | |
| (336) 227-0227 | | | | State | ■ Municipality: | 07/24/2010 | | | |
| | | | | | | i. 0 | riginal R | eceipt Amount | |
| | | | | | | \$ | | 0.00 | |
| b. Job Title/Profes | sion | c. Employer's l | Name/Specific Field | f. Purpose Code | | | j. Election Sum to Date | | |
| PHOTOGRAPHY | | SELF | | P | | - | | (145.31) | |
| | | <u> </u> | | | | \$ | | (145.21) | |
| k. Account Code | l. Form | of Payment | m. Required Remar | ks | n. Date (mm/dd/y | yyyy) o. Amount | | | |
| 100 | Check | | VARIOUS | 09/24/2010 | | \$ | 145.21 | | |
| 4. Total only this | Page | | · | | | \$ | 1 | 145.21 | |
| 5. Total of ALL C | | | | | | • | | | |
| | | | mmary Page CRO-110 | | | \$ | | 145.21 | |
| 6. Purpose Cod | les (List | detailed disbur | sement code in (f) al | oove) | | | | | |
| L-Returned to | | | Overpayment for Ser | vice | N - Exceed | ed C | ontibutio | n Limit | |
| P* - Reimburs | | In-Kinc O* (| Other | | | | | | |
| | e detaile | d explanation i | n required remarks | field (m) | | | | | |
| CRO-1320 | | | NC State Boa | rd of Elections | | | | July 2007 | |

| T T7' 1.6' ('1 (' | | | | | | Amendment | | |
|--|---------------------------------|--------------|-------------|----------------|------------------------|--------------|--------------|--|
| In-Kind Contributions | | | | | 1 | ☐ Yes | No No | |
| Use this form to report non-monetary contributions, do | nations, god | ds or ser | vices pro | ovided | to the cor | nmittee or t | fund. | |
| Use CRO-1215 if In-Kind Contributions were or will | l be refund | ed withi | n 7 day: | S. | | | | |
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID I | Yumber | | |
| HENRY VINES FOR COMMISSIONER | | | | 2-D4-2-ER | | | | |
| 3. Contributor Information | ☐ Add | ☐ Re | move | | <u> </u> | | | |
| a. Full Name, Mailing Address & Phone | b. Typ | e of Cor | Contributor | | c. Con | c. Comments | | |
| (include city, state, & zip) | X In | ☑ Individual | | | | | | |
| Aggregated Individual Contribution | C | andidate | | | | | | |
| | □ P | arty | | | | | | |
| | □ P. | AC | | | 1 | | | |
| | Referendum Other Receipt Source | | | | d. Hection Sum to Date | | | |
| | | | | Receipt Source | | \$ | | |
| e. Description | | | f. Date | (mm/d | d/yyyy) | g. Fair M | arket Amount | |
| ROLLS FOR FUNDRAISER | | * | 09 | 9/14/20 | 010 | \$ | 19.32 | |
| | | | | | • • | \$ | | |
| | | | | | | \$ | | |
| 4. Total only this Page | | • | | | \$ | · | 19.32 | |

NC State Board of Elections

\$

19.32

December 2007

5. Total of ALL CRO-1510 Pages
(This line must be on line 17 of Detailed Summary Page CRO-1100)

CRO-1510

| Outstanding | Loans |
|-------------|-------|
|-------------|-------|

| | | | | Amendment | | | | | |
|----|---|----|----|-----------|-----|--|--|--|--|
| Pg | 1 | of | _1 | ☐ Yes | No. | | | | |

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

| 1. Commi | ttee Full Name (and Fund if applicable | e) | , , , , , , , , , , , , , , , , , , , | | 2. ID Num | ber | | |
|-------------------------------------|--|---------------|---|---------------|------------|--|--|--|
| HENRY VINES FOR COMMISSIONER | | | | | | 2-D4-2-ER | | |
| 3. Lender | Information | Ad | ld 🔲 Re | move | <u></u> | | | |
| | me, Mailing Address & Phone | b | c. Employer's Name/Specific Field SELF | | | d. Comments | | |
| | e city, state, & zip) M H VINES JR | FA | | | | | | |
| | EY DRIVE | | | | | e. Start Date (mm/dd/yyyy) 08/12/2010 f. End Date (mm/dd/yyyy) | | |
| SNOW C | CAMP, NC 27349 | c. E | | | | | | |
| İ | | SE | | | | | | |
| | | | | | | | | |
| | | | | | 1 | 2/31/2010 | | |
| g. Rate | h. Security Pledged | · | i. Origina | l Loan Amount | j. Remaini | ng Loan Balance | | |
| 0.00% | CASH ADVANCE UNSECURED |) | \$ | 1,400.00 | \$ | 1,400.00 | | |
| k. Full Name of Lending Institution | | | | | | I. Loan Number | | |
| | | | | | | | | |
| 4. Total | only this Page | | | | \$ | 1,400.00 | | |
| | of ALL CRO-1430 Pages must be on line 21 of Detailed Summary 1 | Page CRO-11 | 00) | | \$ | 1,400.00 | | |
| CRO-1430 | 9 N | C State Board | l of Election | S | | December 2007 | | |