

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 KEEP JOHNSON CLERK | c. ID Number ALA-X8N7V0-C-001 |
| b. Mailing Address (include City, State and Zip Code) POST OFFICE BOX 1386 GRAHAM, NC 27253 | d. Date Filed 10/25/2010 |
| | e. Phone Number (919) 563-2117 |

| | | | |
|-------------------------------|--|--|---|
| 2. Report Year 2010 | 3. Period Start Date (mm/dd/yy) 07/01/2010 | 4. Period End Date (mm/dd/yy) 10/16/2010 | 5. Treasurer Full Name KATHERINE S LANDES |
|-------------------------------|--|--|---|

| | | | | |
|--|---|--|---|---|
| 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 |
| | | <input type="checkbox"/> Pre-election | <input type="checkbox"/> Second | <input type="checkbox"/> Supplemental Final |
| | | <input type="checkbox"/> Pre-runoff | <input checked="" type="checkbox"/> Third | <input type="checkbox"/> Annual |
| | | Semi-annual | <input type="checkbox"/> Fourth | <input type="checkbox"/> Special |
| | | <input type="checkbox"/> Mid Year | Semi-annual | |
| | | <input type="checkbox"/> Year End | <input type="checkbox"/> Mid Year | |
| | | <input type="checkbox"/> Final | <input type="checkbox"/> Year End | |
| | | <input type="checkbox"/> Special | <input type="checkbox"/> Final | |
| | | | <input type="checkbox"/> Special | |
| 7. Type of Fund (if applicable, check one) | | 10. Special Report Name | | |
| <input type="checkbox"/> Booster Fund | | | | |
| <input type="checkbox"/> Building Fund | | | | |
| <input type="checkbox"/> Other: | | | | |
| 8. Number of Fundraisers this Report 2 | | | | |

| | | | |
|---|--|------------------------------------|-------------------------------|
| 11. Account Information | | 11. Account Information | |
| a. Financial Institution Full Name WACHOVIA BANK, N.A. | | a. Financial Institution Full Name | |
| b. Purpose CAMPAIGN ACCOUNT | c. Account Code 1 | b. Purpose | c. Account Code |
| | d. Period Begin Balance \$ 6,098.12 | | 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.

Katherine S Landes Katherine S Landes 10/25/2010
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: 10-25-10 Employee: JG Delivery Method
 Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed

Date Postmarked: _____ Employee: _____
 Date Scanned: _____ Employee: _____
 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-F) 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 | |
|--|--------------------|-----------------------------|---------------------------|
| KEEP JOHNSON CLERK | 2010 Third Quarter | ALA-X8N7V0-C-001 | |
| Start of Election Cycle: January 1, <u>2007</u> | | Total this Reporting Period | Total this Election Cycle |
| 4) Cash on Hand at Start | | \$ 6,098.12 | \$ 0.00 |
| RECEIPTS | | | |
| 5) Aggregated Contributions from Individuals | (CRO-1205) | \$ 4,030.00 | \$ 5,975.00 |
| 6) Contributions from Individuals | (CRO-1210) | \$ 9,014.00 | \$ 20,074.78 |
| 7) Contributions from Political Party Committees | (CRO-1220) | \$ 600.00 | \$ 600.00 |
| 8) Contributions from Other Political Committees | (CRO-1230) | \$ 50.00 | \$ 650.00 |
| 9) Loan Proceeds | (CRO-1410) | \$ 0.00 | \$ 5,000.00 |
| 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) | | \$ 13,694.00 | \$ 32,299.78 |
| EXPENDITURES | | | |
| 13) Disbursements | | | |
| 13a) Operating Expenditures | (CRO-1310) | \$ 17,093.81 | \$ 28,470.69 |
| 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) | \$ 66.00 | \$ 86.00 |
| 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) | \$ 699.00 | \$ 1,809.78 |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) | | \$ 17,858.81 | \$ 30,366.47 |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) | | \$ 1,933.31 | \$ 1,933.31 |
| ADDITIONAL INFORMATION | | | |
| 20) Non-Monetary Gifts Given to Other Committees | (CRO-1330) | \$ 0.00 | |
| 21) Outstanding Loans (incl. ones from other campaigns) | (CRO-1430) | \$ 5,000.00 | |
| 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 |

Aggregated Contributions from Individuals

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

| 1. Committee Full Name (and Fund if applicable) | | | | 2. ID Number | |
|---|-----------------|--------------------|------------------------|----------------------|-------------|
| KEEP JOHNSON CLERK | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information | | | | | |
| a. Amend | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 09/28/2010 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/14/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/14/2010 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 09/09/2010 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/18/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 07/02/2010 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/02/2010 | \$ 50.00 |
| 4. Total only this Page | | | | | \$ 395.00 |
| 5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 4,030.00 |

Aggregated Contributions from Individuals

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

| 1. Committee Full Name (and Fund if applicable) | | | | 2. ID Number | |
|--|-----------------|--------------------|------------------------|----------------------|------------|
| KEEP JOHNSON CLERK | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information | | | | | |
| a. Amend | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/21/2010 | \$ 30.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 09/20/2010 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 10/02/2010 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 50.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/21/2010 | \$ 35.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/17/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/17/2010 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 15.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| 4. Total only this Page | | | | \$ | \$445.00 |
| 5. Total of ALL CRO-1205 Pages | | | | \$ | \$4,030.00 |
| <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> | | | | | |

Aggregated Contributions from Individuals

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

| 1. Committee Full Name (and Fund if applicable) | | | | 2. ID Number | |
|--|-----------------|--------------------|------------------------|----------------------|------------|
| KEEP JOHNSON CLERK | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information | | | | | |
| a. Amend | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/20/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 5.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 10/02/2010 | \$ 50.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 40.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 10/04/2010 | \$ 50.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 30.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 10/02/2010 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| 4. Total only this Page | | | | \$ | \$460.00 |
| 5. Total of ALL CRO-1205 Pages | | | | \$ | \$4,030.00 |
| <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> | | | | | |

Aggregated Contributions from Individuals

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

| | |
|--|---|
| 1. Committee Full Name (and Fund if applicable) KEEP JOHNSON CLERK | 2. ID Number ALA-X8N7V0-C-001 |
|--|---|

3. Contributor Information

| a. Amend | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount |
|---------------------------------|-----------------|--------------------|------------------------|----------------------|-----------|
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Check | | 08/15/2010 | \$ 20.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Check | | 08/15/2010 | \$ 20.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 10/02/2010 | \$ 20.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 10/02/2010 | \$ 20.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 30.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Check | | 08/16/2010 | \$ 25.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Remove | | | | | |

4. Total only this Page \$ 395.00

5. Total of ALL CRO-1205 Pages \$ 4,030.00
(This line must be on line 5 of Detailed Summary Page CRO-1100)

Aggregated Contributions from Individuals

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

| 1. Committee Full Name (and Fund if applicable) | | | | 2. ID Number | |
|--|-----------------|--------------------|------------------------|----------------------|------------|
| KEEP JOHNSON CLERK | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information | | | | | |
| a. Amend | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/19/2010 | \$ 50.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 50.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 30.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/13/2010 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 09/26/2010 | \$ 50.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/24/2010 | \$ 50.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/16/2010 | \$ 50.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 09/30/2010 | \$ 30.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 50.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 30.00 |
| 4. Total only this Page | | | | \$ | \$600.00 |
| 5. Total of ALL CRO-1205 Pages | | | | \$ | \$4,030.00 |
| <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> | | | | | |

Aggregated Contributions from Individuals

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

| 1. Committee Full Name (and Fund if applicable) KEEP JOHNSON CLERK | | | | | 2. ID Number ALA-X8N7V0-C-001 | |
|---|-----------------|--------------------|------------------------|----------------------|---|--|
| 3. Contributor Information | | | | | | |
| a. Amend | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 10.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 30.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 10.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 20.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 07/08/2010 | \$ 50.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 10/04/2010 | \$ 50.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/20/2010 | \$ 10.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/20/2010 | \$ 20.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 20.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/16/2010 | \$ 20.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 20.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 10.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/18/2010 | \$ 20.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 10.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 20.00 | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 10.00 | |
| 4. Total only this Page | | | | | \$ 430.00 | |
| 5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 4,030.00 | |

Aggregated Contributions from Individuals

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

| 1. Committee Full Name (and Fund if applicable) KEEP JOHNSON CLERK | | | | | 2. ID Number ALA-X8N7V0-C-001 | |
|---|-----------------|--------------------|------------------------|----------------------|---|--|
| 3. Contributor Information | | | | | | |
| a. Amend | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount | |
| <input type="checkbox"/> Add | 1 | Check | | 08/16/2010 | \$ 40.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 10.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Check | | 09/30/2010 | \$ 25.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 10.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Check | | 10/02/2010 | \$ 50.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 20.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 10.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 10/02/2010 | \$ 10.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 20.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 10/02/2010 | \$ 10.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 10.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 10/02/2010 | \$ 10.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 10.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 10/02/2010 | \$ 10.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 10.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Check | | 08/21/2010 | \$ 20.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Check | | 09/26/2010 | \$ 50.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 10.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 10.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 10.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Check | | 10/02/2010 | \$ 50.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Check | | 10/02/2010 | \$ 20.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| 4. Total only this Page | | | | | \$ 435.00 | |
| 5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 4,030.00 | |

Aggregated Contributions from Individuals

Amendment

Yes No

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

| 1. Committee Full Name (and Fund if applicable) | | | | 2. ID Number | |
|--|-----------------|--------------------|------------------------|----------------------|------------|
| KEEP JOHNSON CLERK | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information | | | | | |
| a. Amend | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/25/2010 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 09/27/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 10/01/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 30.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 30.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 30.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/21/2010 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 10/08/2010 | \$ 50.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/21/2010 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/31/2010 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| 4. Total only this Page | | | | \$ | \$410.00 |
| 5. Total of ALL CRO-1205 Pages | | | | \$ | \$4,030.00 |
| <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> | | | | | |

Aggregated Contributions from Individuals

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

| 1. Committee Full Name (and Fund if applicable) | | | | 2. ID Number | |
|--|-----------------|--------------------|------------------------|----------------------|------------|
| KEEP JOHNSON CLERK | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information | | | | | |
| a. Amend | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 09/28/2010 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 07/20/2010 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 09/28/2010 | \$ 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/20/2010 | \$ 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Check | | 08/18/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 10/02/2010 | \$ 10.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Cash | | 08/21/2010 | \$ 20.00 |
| 4. Total only this Page | | | | \$ | \$335.00 |
| 5. Total of ALL CRO-1205 Pages | | | | \$ | \$4,030.00 |
| <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> | | | | | |

Aggregated Contributions from Individuals

Page 10 of 10

Amendment
 Yes No

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

| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
|--|-----------------|--------------------|------------------------|----------------------|---------------------|--|
| KEEP JOHNSON CLERK | | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information | | | | | | |
| a. Amend | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount | |
| <input type="checkbox"/> Add | 1 | Check | | 09/15/2010 | \$ 25.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 20.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 10.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 40.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 08/21/2010 | \$ 10.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | 1 | Cash | | 10/02/2010 | \$ 20.00 | |
| <input type="checkbox"/> Remove | | | | | | |
| 4. Total only this Page | | | | | \$ 125.00 | |
| 5. Total of ALL CRO-1205 Pages | | | | | \$ 4,030.00 | |
| <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> | | | | | | |

Contributions from Individuals

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 | |
| KEEP JOHNSON CLERK | | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| JEFFREY A ANDREWS 818 WARWICK COURT BURLINGTON, NC 27215 (336) 228-6085 | | | ATTORNEY | | | |
| | | | c. Employer's Name/Specific Field VERNON LAW FIRM | | | |
| | | | | | 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 |
| <input type="checkbox"/> | 1 | Check | | 10/02/2010 | | \$ 100.00 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| WILLIAM R. BAKER 810 COLONIAL DRIVE BURLINGTON, NC 27215 | | | RETIRED | | | |
| | | | c. Employer's Name/Specific Field 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 |
| <input type="checkbox"/> | 1 | Check | | 09/29/2010 | | \$ 100.00 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| CORDELIA W BARRICK 110 HANFORD ROAD CHAPEL HILL, NC 27516 | | | TOXICOLOGIST | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 1,630.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | 1 | Check | | 08/21/2010 | | \$ 100.00 |
| <input type="checkbox"/> | 1 | Check | | 10/02/2010 | | \$ 80.00 |
| <input type="checkbox"/> | 1 | Check | | 10/06/2010 | | \$ 500.00 |
| 4. Total only this Page | | | | | \$ 880.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 9,014.00 | |

Contributions from Individuals

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 | |
| KEEP JOHNSON CLERK | | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| CORDELIA W BARRICK 110 HANFORD ROAD CHAPEL HILL, NC 27516 | | | TOXICOLOGIST | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 1,630.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | 1 | Check | | 10/12/2010 | \$ 500.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| STEPHANIE W. BOGGS 2943 MOSER LANE BURLINGTON, NC 27215 | | | SELF EMPLOYED | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | INDEPENDENT PARALEGAL | | e. Election Sum to Date | |
| | | | | | \$ 190.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input checked="" type="checkbox"/> | 1 | Check | | 05/06/2010 | \$ 50.00 | |
| <input type="checkbox"/> | 1 | Check | | 08/20/2010 | \$ 20.00 | |
| <input type="checkbox"/> | 1 | Cash | | 08/21/2010 | \$ 20.00 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| STEPHANIE W. BOGGS 2943 MOSER LANE BURLINGTON, NC 27215 | | | SELF EMPLOYED | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | INDEPENDENT PARALEGAL | | e. Election Sum to Date | |
| | | | | | \$ 190.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | 1 | In-Kind | SUPPLIES FOR BBQ SUPPER FUND RAISER | 10/02/2010 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 640.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 9,014.00 | |

Contributions from Individuals

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 | |
| KEEP JOHNSON CLERK | | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| LAWSON BROWN JR 522 S. LEXINGTON AVENUE BURLINGTON, NC 27216 | | | ATTORNEY | | | |
| | | | c. Employer's Name/Specific Field VERNON LAW FIRM | | | |
| | | | | | 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 | |
| <input type="checkbox"/> | 1 | Check | | 09/27/2010 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| PATRICE S. BRYAN 518 Tarleton Ave BURLINGTON, NC 27215 | | | PARALEGAL | | | |
| | | | c. Employer's Name/Specific Field WISHART, NORRIS, HENNINGER & PITTMAN, P.A. | | | |
| | | | | | e. Election Sum to Date \$ 75.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | 1 | Check | | 09/22/2010 | \$ 25.00 | |
| <input type="checkbox"/> | 1 | Check | | 10/07/2010 | \$ 50.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| BRADLEY G. BUCHANAN 1205 CASTLE PINES DRIVE MEBANE, NC 27302 | | | ASSISTANT DA | | | |
| | | | c. Employer's Name/Specific Field STATE OF NC | | | |
| | | | | | e. Election Sum to Date \$ 90.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input checked="" type="checkbox"/> | 1 | Check | | 05/06/2010 | \$ 50.00 | |
| <input type="checkbox"/> | 1 | Check | | 08/14/2010 | \$ 20.00 | |
| <input type="checkbox"/> | 1 | Cash | | 10/02/2010 | \$ 20.00 | |
| 4. Total only this Page | | | | | \$ 215.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 9,014.00 | |

Contributions from Individuals

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 | |
| KEEP JOHNSON CLERK | | | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| PAUL COBB 3530 CARDWELL DRIVE BURLINGTON, NC 27215 | | | | CPA | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | COBB, EZEKIEL LOY & COMPANY | | 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 | |
| <input type="checkbox"/> | 1 | Check | | 07/12/2010 | | \$ 100.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| TOMMY COBLE 4357-A E. GREENSBORO CHAPEL HILL RD. GRAHAM, NC 27253 | | | | CAR SALESMAN | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | MIKE OWENS AUTO SALES | | e. Election Sum to Date | |
| | | | | | | \$ 150.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | 1 | Check | | 08/21/2010 | | \$ 50.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| EDWIN W COFFIN 2600 CROASDAILE FARM PKWAY APT D101 DURHAM, NC 27705 | | | | RETIRED | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | | | e. Election Sum to Date | |
| | | | | | | \$ 1,500.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | 1 | Check | | 09/02/2010 | | \$ 500.00 | |
| <input type="checkbox"/> | 1 | Check | | 10/13/2010 | | \$ 500.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| 4. Total only this Page | | | | | | \$ 1,150.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | \$ 9,014.00 | |

Contributions from Individuals

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 | |
| KEEP JOHNSON CLERK | | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| NATHANIEL W COFFIN 2600 CROASDAILE FARM PKWY APT. A310 DURHAM, NC 27705 | | | RETIRED | | | |
| | | | c. Employer's Name/Specific Field AMERICAN TOBACCO COMPANY | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 1,000.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | 1 | Check | | 09/14/2010 | | \$ 500.00 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| JULIAN BRYAN COLEMAN 102 OLE CHARLESTON DR. ELON, NC 27244 | | | ATTORNEY | | | |
| | | | c. Employer's Name/Specific Field SELF EMPLOYED | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 160.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | 1 | Check | | 08/18/2010 | | \$ 25.00 |
| <input type="checkbox"/> | 1 | Cash | | 08/21/2010 | | \$ 10.00 |
| <input type="checkbox"/> | 1 | Check | | 10/08/2010 | | \$ 125.00 |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| ROBERT D CROOM IV 2904 CLAREMONT RD RALEIGH, NC 27608 | | | ATTORNEY | | | |
| | | | c. Employer's Name/Specific Field NCDOJ | | | |
| | | | | | 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 |
| <input type="checkbox"/> | 1 | Check | | 09/29/2010 | | \$ 100.00 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 4. Total only this Page | | | | | \$ 760.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 9,014.00 | |

Contributions from Individuals

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 | |
| KEEP JOHNSON CLERK | | | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| FRED E DAIGLE JR 3196 TIMBERLYNE DR. MEBANE, NC 27302 | | | | CLAIMS ADJUSTER | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | ERIE INSURANCE | | 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 | |
| <input type="checkbox"/> | 1 | Check | | 09/26/2010 | | \$ 200.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| CHARLES E. DAVIS 207 PEBBLE BEACH DRIVE MEBANE, NC 27302 | | | | ATTORNEY | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | SELF EMPLOYED | | 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 | |
| <input type="checkbox"/> | 1 | Check | | 08/16/2010 | | \$ 250.00 | |
| <input type="checkbox"/> | 1 | Check | | 10/01/2010 | | \$ 250.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| SLAYTON A EVANS III 310 HEMLOCK DRIVE CHAPEL HILL, NC 27517 | | | | FINANCE | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | STATE EMPLOYEES' CREDIT UNION | | e. Election Sum to Date | |
| | | | | | | \$ 60.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input checked="" type="checkbox"/> | 1 | Check | | 05/03/2010 | | \$ 50.00 | |
| <input type="checkbox"/> | 1 | Cash | | 08/21/2010 | | \$ 10.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| 4. Total only this Page | | | | | | \$ 710.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | \$ 9,014.00 | |

Contributions from Individuals

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 | |
| KEEP JOHNSON CLERK | | | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| ALBERT F. FREUND 230 HUNTINGTON DR. CHAPEL HILL, NC 27514 | | | | RETIRED | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | | | e. Election Sum to Date | |
| | | | | | | \$ 270.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | 1 | Cash | | 10/02/2010 | \$ 20.00 | | |
| <input type="checkbox"/> | 1 | Check | | 10/06/2010 | \$ 250.00 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| ANNA GEROW 120 WESTOVER DR. ELON, NC 27244 (336) 584-1427 | | | | RETIRED | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | | | e. Election 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 | | |
| <input type="checkbox"/> | 1 | Cash | | 08/21/2010 | \$ 10.00 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| SUSAN J GIAMPORTEONE 181 E 6TH ST APT 304 WINSTON SALEM, NC 27101 | | | | ATTORNEY | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | WOMBLE CARLYLE SANDRIDGE & RICE | | e. Election Sum to Date | |
| | | | | | | \$ 150.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | 1 | Check | | 08/25/2010 | \$ 150.00 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 4. Total only this Page | | | | | | \$ 430.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | \$ 9,014.00 | |

Contributions from Individuals

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 | |
| KEEP JOHNSON CLERK | | | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| DONNA HARRIS 2612 SUMAC LANE BURLINGTON, NC 27215 | | | | ASSISTANT CLERK | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | CLERK OF COURTS OFFICE | | | |
| | | | | | | e. Election Sum to Date | |
| | | | | | | \$ 90.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | 1 | Cash | | 08/21/2010 | | \$ 50.00 | |
| <input type="checkbox"/> | 1 | Cash | | 10/02/2010 | | \$ 40.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| JACKIE S HENDERSON 507 MCGEE ST GRAHAM, NC 27253 | | | | RETIRED | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | RETIRED | | | |
| | | | | | | e. Election Sum to Date | |
| | | | | | | \$ 60.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | 1 | Check | | 08/11/2010 | | \$ 60.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| DAVID R. HUFFMAN 1312 SUNSET DRIVE BURLINGTON, NC 27215 | | | | ATTORNEY | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | SELF EMPLOYED | | | |
| | | | | | | 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 | |
| <input type="checkbox"/> | 1 | Check | | 09/23/2010 | | \$ 100.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 4. Total only this Page | | | | | | \$ 250.00 | |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | | \$ 9,014.00 | |

Contributions from Individuals

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 | |
| KEEP JOHNSON CLERK | | | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| WILLIAM H. HUMBERT 207 PEBBLE BEACH DRIVE MEBANE, NC 27302 (919) 563-2611 | | | | ATTORNEY | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | SELF EMPLOYED | | e. Election Sum to Date | |
| | | | | | | \$ 250.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | 1 | Check | | 10/01/2010 | | \$ 250.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| DEBBIE HUYNH 127 STONEHAM ROAD MEBANE, NC 27302 (919) 563-6101 | | | | ATTORNEY | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | SELF EMPLOYED | | e. Election Sum to Date | |
| | | | | | | \$ 150.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input checked="" type="checkbox"/> | 1 | Check | | 04/26/2010 | | \$ 50.00 | |
| <input type="checkbox"/> | 1 | Check | | 09/07/2010 | | \$ 100.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| JAMES HUNT JOHNSON 1241 S FIFTH ST #A-1 MEBANE, NC 27302 | | | | CLERK OF SUPERIOR COURT | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | STATE OF NC | | e. Election Sum to Date | |
| | | | | | | \$ 1,523.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | 1 | In-Kind | PRODUCTION COSTS FOR TIME WARNER CABLE | 10/06/2010 | | \$ 599.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 4. Total only this Page | | | | | | \$ 949.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | \$ 9,014.00 | |

Contributions from Individuals

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 | |
| KEEP JOHNSON CLERK | | | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) VIOLA C JOHNSON 801 EMORY DRIVE CHAPEL HILL, NC 27517 | | | | b. Job Title/Profession SCHOOL TEACHER | | d. Comments | |
| | | | | c. Employer's Name/Specific Field RETIRED | | | |
| | | | | | | e. Election Sum to Date | |
| | | | | | | \$ 2,000.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | 1 | Check | | 10/13/2010 | | \$ 1,000.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) ERNEST A KOURY JR PO BOX 850 BURLINGTON, NC 27216 | | | | b. Job Title/Profession SUPERVISOR | | d. Comments | |
| | | | | c. Employer's Name/Specific Field CAROLINA HOSIERY | | | |
| | | | | | | 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 | |
| <input type="checkbox"/> | 1 | Check | | 10/02/2010 | | \$ 100.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) KATHERINE S LANDES 1313 CHERRY DRIVE BURLINGTON, NC 27215 | | | | b. Job Title/Profession SENIOR ACTUARIAL ANALYST | | d. Comments | |
| | | | | c. Employer's Name/Specific Field GMAC INSURANCE | | | |
| | | | | | | e. Election Sum to Date | |
| | | | | | | \$ 226.78 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | 1 | Check | | 08/20/2010 | | \$ 40.00 | |
| <input type="checkbox"/> | 1 | Cash | | 08/21/2010 | | \$ 20.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| 4. Total only this Page | | | | | | \$ 1,160.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | \$ 9,014.00 | |

Contributions from Individuals

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 | |
| KEEP JOHNSON CLERK | | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| THOMAS B LANGAN 217 WINFIELD DR. KING, NC 27021 | | | ASST. DISTRICT ATTORNEY | | | |
| | | | c. Employer's Name/Specific Field STATE OF NC | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 120.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | 1 | Cash | | 08/21/2010 | \$ 20.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| JAMES STEVE LYNCH 2197 HOSKINS ROAD BURLINGTON, NC 27215 | | | INVESTIGATOR | | | |
| | | | c. Employer's Name/Specific Field DISTRICT ATTORNEY'S OFFICE - 15A | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 125.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | 1 | Check | | 10/02/2010 | \$ 25.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| ROBERT H. MARTIN 211 EVA DRIVE GIBSONVILLE, NC 27249 | | | ATTORNEY | | | |
| | | | c. Employer's Name/Specific Field SELF EMPLOYED | | | |
| | | | | | 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 | |
| <input type="checkbox"/> | 1 | Check | | 10/01/2010 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 145.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 9,014.00 | |

Contributions from Individuals

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 | |
| KEEP JOHNSON CLERK | | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| GRIFFIN MCCLURE III 501 GRANDVIEW DRIVE GRAHAM, NC 27253 | | | SELF EMPLOYED | | | |
| | | | c. Employer's Name/Specific Field GM3, INC. | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 75.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | 1 | Check | | 07/01/2010 | \$ 75.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| D. MARSH MCLELLAND 2018 NOTTINGHAM LANE BURLINGTON, NC 27215 | | | RETIRED | | | |
| | | | c. Employer's Name/Specific Field RETIRED | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 1,000.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | 1 | Check | | 08/16/2010 | \$ 500.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| GARY R MCPHERSON 121 VICTORIA LANE GIBSONVILLE, NC 27249 | | | OWNER | | | |
| | | | c. Employer's Name/Specific Field MCPHERSON'S CLEANERS | | | |
| | | | | | 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 | |
| <input type="checkbox"/> | 1 | Check | | 09/27/2010 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 675.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 9,014.00 | |

Contributions from Individuals

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 | |
| KEEP JOHNSON CLERK | | | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| JODI M MULLIS P.O BOX 193 HAW RIVER, NC 27258 | | | | ASSISTANT CLERK | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | ALAMANCE COUNTY CLERK OF COURT'S OFFICE | | 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 | |
| <input type="checkbox"/> | 1 | Check | | 08/16/2010 | | \$ 80.00 | |
| <input type="checkbox"/> | 1 | Cash | | 08/21/2010 | | \$ 20.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| RICHARD H. SHIRLEY JR 2208 W. FRONT STREET BURLINGTON, NC 27215 | | | | CAR DEAKER | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | DICK SHIRLEY | | 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 | |
| <input type="checkbox"/> | 1 | Check | | 10/04/2010 | | \$ 100.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| DONNA J SPOON 4153 S NC 49 BURLINGTON, NC 27215 | | | | DEPUTY CLERK | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | ALAMANCE COUNTY CLERK OF COURT'S OFFICE | | e. Election Sum to Date | |
| | | | | | | \$ 140.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | 1 | Check | | 08/16/2010 | | \$ 100.00 | |
| <input type="checkbox"/> | 1 | Check | | 08/19/2010 | | \$ 10.00 | |
| <input type="checkbox"/> | 1 | Check | | 08/19/2010 | | \$ 20.00 | |
| 4. Total only this Page | | | | | | \$ 330.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | \$ 9,014.00 | |

Contributions from Individuals

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 | |
| KEEP JOHNSON CLERK | | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| DONNA J SPOON 4153 S NC 49 BURLINGTON, NC 27215 | | | DEPUTY CLERK | | | |
| | | | c. Employer's Name/Specific Field ALAMANCE COUNTY CLKER OF COURT'S OFFICE | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 140.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | 1 | Cash | | 10/02/2010 | \$ 10.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| FREDERICK J STERNBERG 37 S. W. COURT SQUARE GRAHAM, NC 27253 (336) 228-0273 | | | ATTORNEY | | | |
| | | | c. Employer's Name/Specific Field FREDERICK J. STERNBERG, P.A. | | | |
| | | | | | 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 | |
| <input type="checkbox"/> | 1 | Check | | 08/30/2010 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| LEONORAH STOUT 213 N. MELVILLE ST. GRAHAM, NC 27253 | | | TEACHER | | | |
| | | | c. Employer's Name/Specific Field 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 | |
| <input type="checkbox"/> | 1 | Check | | 08/12/2010 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 210.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 9,014.00 | |

Contributions from Individuals

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 | |
| KEEP JOHNSON CLERK | | | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| CHARLES C THOMPSON III PO BOX 913 GRAHAM, NC 27253 | | | | ATTORNEY | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | SELF EMPLOYED | | 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 | |
| <input type="checkbox"/> | 1 | Check | | 08/24/2010 | | \$ 100.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| LOUISE B. WILSON P O BOX 252 GRAHAM, NC 27253 | | | | RETIRED | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | 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 | |
| <input type="checkbox"/> | 1 | Check | | 09/17/2010 | | \$ 100.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| DORINDA L WOOD 2518 S NC 87 GRAHAM, NC 27253 | | | | HEAD BOOKKEEPER | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | ALAMANCE COUNTY CLERK OF COURT'S OFFICE | | e. Election 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 | |
| <input type="checkbox"/> | 1 | Check | | 08/16/2010 | | \$ 100.00 | |
| <input type="checkbox"/> | 1 | Cash | | 10/02/2010 | | \$ 10.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| 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) | | | | | | \$ 9,014.00 | |

Contributions from Individuals

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 | |
| KEEP JOHNSON CLERK | | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments |
| WILEY P. WOOTEN P. O. BOX 2958 BURLINGTON, NC 27216 | | | ATTORNEY | | |
| | | | | | |
| | | | VERNON LAW FIRM | | 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 |
| <input type="checkbox"/> | 1 | Check | | 10/04/2010 | \$ 200.00 |
| <input type="checkbox"/> | | | | | \$ |
| <input type="checkbox"/> | | | | | \$ |
| 4. Total only this Page | | | | | \$ 200.00 |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 9,014.00 |

Contributions from Political Party Committees

Use this form to report contributions from a political party

| | | | | |
|---|---------------------------|-------------------------------|---|------------------|
| 1. Committee Full Name (and Fund if applicable) KEEP JOHNSON CLERK | | | 2. ID Number ALA-X8N7V0-C-001 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) DEMOCRATIC WOMEN OF ALAMANCE COUNTY P. O. BOX 1815 BURLINGTON, NC 27215 | | | b. Comments | |
| | | | c. Election Sum to Date \$ 600.00 | |
| d. Account Code | e. Form of Payment | f. In-Kind Description | g. Date (mm/dd/yyyy) | h. Amount |
| 1 | Check | | 08/30/2010 | \$ 600.00 |
| | | | | \$ |
| | | | | \$ |
| 4. Total only this Page | | | \$ 600.00 | |
| 5. Total of ALL CRO-1220 Pages <i>(This line must be on line 7 of Detailed Summary Page CRO-1100)</i> | | | \$ 600.00 | |

Contributions from Other Political Committees pg 1 of 1 Amendment Yes No

Use this form to report contributions from other candidate, referendum or PAC committees

| | | | | |
|--|---------------------------|---|-----------------------------|--------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | | 2. ID Number | |
| KEEP JOHNSON CLERK | | | ALA-X8N7V0-C-001 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Type of Committee | | d. Comments |
| RONALD L PARRISH CAMPAIGN ACCOUNT 211 E ELM STREET GRAHAM, NC 27253 | | <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum | | |
| | | c. Level Registered (Specify) | | |
| | | <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | |
| | | Alamance | | e. Election Sum to Date |
| | | | | \$ 50.00 |
| f. Account Code | g. Form of Payment | h. In-Kind Description | i. Date (mm/dd/yyyy) | j. Amount |
| 1 | Check | | 08/21/2010 | \$ 50.00 |
| | | | | \$ |
| | | | | \$ |
| 4. Total only this Page | | | | \$ 50.00 |
| 5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100) | | | | \$ 50.00 |

Disbursements

Amendment

Pg 1 of 9 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 | |
| KEEP JOHNSON CLERK | | | | | | ALA-X8N7V0-C-001 | |
| 3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> | | | | | | | |
| <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates Political Committees <input type="checkbox"/> Coordinated Party Expenditures | | | | | | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> | | | | b. Coordinated Committee Name | | d. Comments | |
| Al Van's Advertising 3264 Van Drive BURLINGTON, NC 27215 | | | | | | | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 4,175.37 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| 1 | Check | B | 07/13/2010 | \$ 373.07 | PENS | | |
| | | | | \$ | | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> | | | | b. Coordinated Committee Name | | d. Comments | |
| ALAMANCE COUNTY FALLEN HEROES MEMORIAL GRAHAM, NC 27253 | | | | | | | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 100.00 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| 1 | Check | O | 09/14/2010 | \$ 100.00 | GOLF HOLE | | |
| | | | | \$ | SPONSORSHIP | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> | | | | b. Coordinated Committee Name | | d. Comments | |
| ALAMANCE MAGAZINE 217 EAST DAVIS ST. BURLINGTON, NC 27216 | | | | | | | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 281.25 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| 1 | Check | A | 09/13/2010 | \$ 281.25 | ADS ALAMANCE | | |
| | | | | \$ | MAGAZINE & | | |
| 5. Total only this Page | | | | | | \$ 754.32 | |
| 6. Total of ALL CRO-1310 Pages | | | | | | \$ 17,093.81 | |
| <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> | | | | | | | |
| 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

Amendment

Pg 2 of 9 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) KEEP JOHNSON CLERK | | | | | | 2. ID Number ALA-X8N7V0-C-001 | |
| 3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> | | | | | | | |
| <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates Political Committees <input type="checkbox"/> Coordinated Party Expenditures | | | | | | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> APPLE TIME INC PO BOX 1210 CANTON, TX 75103 | | | | b. Coordinated Committee Name | | d. Comments | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 831.95 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| 1 | Debit Card | O | 08/05/2010 | \$ 831.95 | COLOR CHANGING CUPS | | |
| | | | | \$ | | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> STEPHANIE W. BOGGS 2943 MOSER LANE BURLINGTON, NC 27215 | | | | b. Coordinated Committee Name | | d. Comments | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 173.70 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| 1 | Check | C | 10/04/2010 | \$ 173.70 | SUPPLIES FOR BARBQUE DINNER | | |
| | | | | \$ | | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> ANNE BREWER 3640 GREENHILLD ROAD GRAHAM, NC 27253 | | | | b. Coordinated Committee Name | | d. Comments | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 649.72 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| 1 | Check | C | 08/23/2010 | \$ 649.72 | CHICKEN DINNER FOOD AND SUPPLIES | | |
| | | | | \$ | | | |
| 5. Total only this Page | | | | | | \$ 1,655.37 | |
| 6. Total of ALL CRO-1310 Pages | | | | | | \$ 17,093.81 | |
| <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> | | | | | | | |
| 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

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 | |
| KEEP JOHNSON CLERK | | | | | | ALA-X8N7V0-C-001 | |
| 3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> | | | | | | | |
| <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures | | | | | | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Coordinated Committee Name | | d. Comments | |
| International Minute Press 1143-F St. Marks Church Rd. BURLINGTON, NC 27215 | | | | | | | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 2,617.43 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| 1 | Debit Card | B | 07/26/2010 | \$ 68.50 | ENVELOPES | | |
| 1 | Check | B | 08/06/2010 | \$ 90.26 | ENVELOPES | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Coordinated Committee Name | | d. Comments | |
| International Minute Press 1143-F St. Marks Church Rd. BURLINGTON, NC 27215 | | | | | | | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 2,617.43 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| 1 | Debit Card | B | 08/23/2010 | \$ 128.07 | CARDS | | |
| 1 | Check | B | 09/17/2010 | \$ 515.20 | PALM CARDS | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Coordinated Committee Name | | d. Comments | |
| International Minute Press 1143-F St. Marks Church Rd. BURLINGTON, NC 27215 | | | | | | | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 2,617.43 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| 1 | Check | B | 09/23/2010 | \$ 205.70 | CARDS | | |
| | | | | \$ | | | |
| 5. Total only this Page | | | | | | \$ 1,007.73 | |
| 6. Total of ALL CRO-1310 Pages | | | | | | \$ 17,093.81 | |
| <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> | | | | | | | |
| 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

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 | |
| KEEP JOHNSON CLERK | | | | | | ALA-X8N7V0-C-001 | |
| 3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> | | | | | | | |
| <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates Political Committees <input type="checkbox"/> Coordinated Party Expenditures | | | | | | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> | | | | b. Coordinated Committee Name | | d. Comments | |
| MARKELL PRINTING 718 E DAVIS STREET BURLINGTON, NC 27215 (336) 226-7148 | | | | c. Level Registered (Specify) | | | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | e. Election Sum to Date | |
| | | | | | | \$ 1,816.13 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| 1 | Check | B | 08/26/2010 | \$ 1,168.55 | YARD SIGNS | | |
| 1 | Check | B | 10/07/2010 | \$ 647.58 | YARD SIGNS | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> | | | | b. Coordinated Committee Name | | d. Comments | |
| MEBANE ENTERPRISE 106 N. FOURTH ST. MEBANE, NC 27302 | | | | c. Level Registered (Specify) | | | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | e. Election Sum to Date | |
| | | | | | | \$ 1,175.90 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| 1 | Check | A | 07/19/2010 | \$ 307.80 | ADS THROUGH AUGUST | | |
| 1 | Check | A | 10/13/2010 | \$ 765.50 | 2010 NEWSPAPER ADS | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> | | | | b. Coordinated Committee Name | | d. Comments | |
| MIKE MAYSE PHOTOGRAPHY 828 CHAPEL HILL ROAD BURLINGTON, NC 27215 | | | | c. Level Registered (Specify) | | | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> 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 | | |
| 1 | Check | O | 09/03/2010 | \$ 100.00 | PHOTOS | | |
| | | | | \$ | | | |
| 5. Total only this Page | | | | | | \$ 2,989.43 | |
| 6. Total of ALL CRO-1310 Pages | | | | | | \$ 17,093.81 | |
| <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> | | | | | | | |
| 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

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 | |
| KEEP JOHNSON CLERK | | | | | | ALA-X8N7V0-C-001 | |
| 3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> | | | | | | | |
| <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates Political Committees <input type="checkbox"/> Coordinated Party Expenditures | | | | | | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> | | | | b. Coordinated Committee Name | | d. Comments | |
| SDL ADVERTISING 3032-A Rock Hill Rd. BURLINGTON, NC 27215 | | | | | | | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | | |
| | | | | | | \$ 1,095.00 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| 1 | Check | A | 07/13/2010 | \$ 1,095.00 | BILLBOARD DISPLAY - | | |
| | | | | \$ | SEPT - NOV 2 | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> | | | | b. Coordinated Committee Name | | d. Comments | |
| SIGN WORX 2529 S CHURCH STREET BURLINGTON, NC 27215 | | | | | | | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | | |
| | | | | | | \$ 91.59 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| 1 | Check | O | 09/17/2010 | \$ 91.59 | BANNER | | |
| | | | | \$ | | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> | | | | b. Coordinated Committee Name | | d. Comments | |
| THE ALAMANCE NEWS 114 WEST ELM STREET GRAHAM, NC 27253 (336) 228-7851 | | | | | | | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | | |
| | | | | | | \$ 2,376.25 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| 1 | Check | A | 07/21/2010 | \$ 847.60 | ADS IN PAPER + | | |
| 1 | Check | A | 09/24/2010 | \$ 1,528.65 | ELECTION GAZETTE ADVERTISING | | |
| 5. Total only this Page | | | | | | \$ 3,562.84 | |
| 6. Total of ALL CRO-1310 Pages | | | | | | \$ 17,093.81 | |
| <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> | | | | | | | |
| 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

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 | |
| KEEP JOHNSON CLERK | | | | | | ALA-X8N7V0-C-001 | |
| 3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> | | | | | | | |
| <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates Political Committees <input type="checkbox"/> Coordinated Party Expenditures | | | | | | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> | | | | b. Coordinated Committee Name | | d. Comments | |
| THE PINNACLE 1292 RAUHUT STREET BURLINGTON, NC 27217 | | | | | | | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 175.00 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| 1 | Check | A | 10/04/2010 | \$ 175.00 | ADVERTISING | | |
| | | | | \$ | | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> | | | | b. Coordinated Committee Name | | d. Comments | |
| THE SHIRT LAB 1895 WEST COMMONWEALTH AVE FULLERTON, CA 92833 | | | | | | | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 1,190.80 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| 1 | Check | O | 07/26/2010 | \$ 1,076.96 | CAMPAIGN T-SHIRTS | | |
| 1 | Check | O | 09/17/2010 | \$ 113.84 | T-SHIRTS | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> | | | | b. Coordinated Committee Name | | d. Comments | |
| TIME WARNER CABLE ADC GREENSBORO, NC | | | | | | | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 1,997.50 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| 1 | Debit Card | A | 10/12/2010 | \$ 558.45 | TV ADVERTISING | | |
| 1 | Debit Card | A | 10/14/2010 | \$ 1,439.05 | TV ADVERTISING | | |
| 5. Total only this Page | | | | | | \$ 3,363.30 | |
| 6. Total of ALL CRO-1310 Pages | | | | | | \$ 17,093.81 | |
| <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> | | | | | | | |
| 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

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) KEEP JOHNSON CLERK | 2. ID Number ALA-X8N7V0-C-001 |
|--|---|

| |
|---|
| 3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates Political Committees <input type="checkbox"/> Coordinated Party Expenditures |
|---|

| | | | | | |
|--|---------------------------|------------------------|---|------------------|--|
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> TIMES-NEWS PO BOX 481 BURLINGTON, NC 27216 | | | b. Coordinated Committee Name | | d. Comments |
| | | | c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | e. Election Sum to Date |
| | | | | | \$ 3,297.70 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| 1 | Debit Card | A | 07/28/2010 | \$ 984.00 | NEWSPAPER |
| 1 | Check | A | 09/30/2010 | \$ 828.00 | ADVERTISING VOTE GUIDE ADVERTISING |

| | | | | | |
|--|---------------------------|------------------------|---|------------------|----------------------------|
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> TIMES-NEWS PO BOX 481 BURLINGTON, NC 27216 | | | b. Coordinated Committee Name | | d. Comments |
| | | | c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | e. Election Sum to Date |
| | | | | | \$ 3,297.70 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| 1 | Check | A | 10/07/2010 | \$ 737.70 | NEWSPAPER |
| | | | | \$ | ADVERTISING |

| | | | | | |
|---|---------------------------|------------------------|---|------------------|----------------------------|
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> UNITED STATES POSTAL SERVICE MARSHALL STREET GRAHAM, NC 27253 | | | b. Coordinated Committee Name | | d. Comments |
| | | | c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | e. Election Sum to Date |
| | | | | | \$ 1,067.53 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| 1 | Debit Card | I | 08/12/2010 | \$ 74.75 | |
| 1 | Check | I | 09/24/2010 | \$ 61.70 | |

| | |
|--------------------------------|-------------|
| 5. Total only this Page | \$ 2,686.15 |
|--------------------------------|-------------|

| | |
|--|--------------|
| 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> | \$ 17,093.81 |
|--|--------------|

| | | | |
|--|----------------|----------------------|-------------------------------------|
| 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) | | | |

Aggregated Non-Media Expenditures

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

| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
|--|-----------------------|-----------------------------|---|----------------------|---------------------|----------------------------|
| KEEP JOHNSON CLERK | | | | | ALA-X8N7V0-C-001 | |
| 3. Payee Information | | | | | | |
| a. Amend | b. Account Code | c. Form of Payment | d. Purpose Code | e. Date (mm/dd/yyyy) | f. Amount | g. Required Remarks |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Debit Card | O | 10/01/2010 | \$ 30.00 | POSTER ON WALL |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Draft | O | 08/10/2010 | \$ 12.00 | JULY SERVICE CHARGES |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Draft | O | 09/10/2010 | \$ 12.00 | SERVICE CHARGES FOR AUGUST |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | 1 | Draft | O | 10/12/2010 | \$ 12.00 | SEPT SERVICE CHARGES |
| 4. Total only this Page | | | | | \$ 66.00 | |
| 5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 66.00 | |
| 6. Purpose Codes (List detailed expenditure code in (d) above) | | | | | | |
| | 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* - Donations to Legal Expense Fund | | | |
| O* - Other | | | | | | |
| * Codes require detailed explanation in required remarks field (g) | | | | | | |

Outstanding Loans

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

| | | | |
|--|----------------------------|---|----------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | 2. ID Number | |
| KEEP JOHNSON CLERK | | ALA-X8N7V0-C-001 | |
| 3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Job Title/Profession | d. Comments |
| JAMES HUNT JOHNSON 1241 S FIFTH ST #A-1 MEBANE, NC 27302 (919) 260-4498 | | CLERK OF SUPERIOR COURT | 04/08/2010 |
| | | c. Employer's Name/Specific Field STATE OF NORTH CAROLINA | |
| | | f. End Date (mm/dd/yyyy) | |
| g. Rate | h. Security Pledged | i. Original Loan Amount | j. Remaining Loan Balance |
| 0% | | \$ 5,000.00 | \$ 5,000.00 |
| k. Full Name of Lending Institution | | | l. Loan Number |
| | | | |
| 4. Total only this Page | | | \$ 5,000.00 |
| 5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i> | | | \$ 5,000.00 |

In-Kind Contributions

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) KEEP JOHNSON CLERK | | 2. ID Number ALA-X8N7V0-C-001 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) STEPHANIE W. BOGGS 2943 MOSER LANE BURLINGTON, NC 27215 | b. Type of Contributor <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source | c. Comments d. Election Sum to Date \$ 190.00 | |
| e. Description | f. Date (mm/dd/yyyy) | g. Fair Market Amount | |
| SUPPLIES FOR BBQ SUPPER FUND RAISER | 10/02/2010 | \$ 100.00 | |
| | | \$ | |
| | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) JAMES HUNT JOHNSON 1241 S FIFTH ST #A-1 MEBANE, NC 27302 | b. Type of Contributor <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source | c. Comments d. Election Sum to Date \$ 1,523.00 | |
| e. Description | f. Date (mm/dd/yyyy) | g. Fair Market Amount | |
| PRODUCTION COSTS FOR TIME WARNER CABLE AD | 10/06/2010 | \$ 599.00 | |
| | | \$ | |
| | | \$ | |
| 4. Total only this Page | | \$ 699.00 | |
| 5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i> | | \$ 699.00 | |