

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 Ron Parrish for Sheriff	c. ID Number QD41EN
b. Mailing Address (include City, State and Zip Code) 401 Springhill Lane Gibsonville, NC 27149	d. Date Filed 10/25/2010
	e. Phone Number 336-449-3280

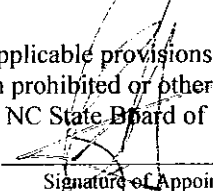
2. Report Year 2010	3. Period Start Date (mm/dd/yy) 7/1/2010	4. Period End Date (mm/dd/yy) 10/16/2010	5. Treasurer Full Name Ronald L Parrish
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6. Type of Committee (Check One)		9. Type of Report <i>(check only one type of report from one category)</i>		
<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	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
7. Type of Fund <i>(if applicable, check one)</i>		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input checked="" type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Other:		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	10. Special Report Name
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
8. Number of Fundraisers this Report		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

11. Account Information		11. Account Information	
a. Financial Institution Full Name SunTrust Bank	b. Purpose Campaign	a. Financial Institution Full Name	b. Purpose
c. Account Code 1	d. Period Begin Balance \$ 7334.65	c. Account Code	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.

Ronald L Parrish
Printed Name of Signer


Signature of Appointed Treasurer

10/25/2010
Date

FOR OFFICE USE ONLY

Date Received: 11-5-10 Employee: JG

Date Postmarked: _____ Employee: _____

Date Scanned: _____ Employee: _____

Date Data Entered: _____ Employee: _____

Delivery Method

Normal Mail

Registered Mail

Hand Delivered

Electronically Filed

Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.
You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

Amendment
 Yes No

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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
Ron Parrish for Sheriff	Third	QD41EN	
Start of Election Cycle: January 1, 2007		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 7334.65	\$ 0
<u>RECEIPTS</u>			
5) Aggregated Contributions from Individuals	<i>(CRO-1205)</i>	\$ 4844.00	\$ 7039.00
6) Contributions from Individuals	<i>(CRO-1210)</i>	\$ 10738.93	\$ 18773.93
7) Contributions from Political Party Committees	<i>(CRO-1220)</i>	\$ 1250.00	\$ 1250.00
8) Contributions from Other Political Committees	<i>(CRO-1230)</i>	\$	\$
9) Loan Proceeds	<i>(CRO-1410)</i>	\$	\$
10) Refunds/Reimbursements To the Committee	<i>(CRO-1240)</i>	\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	<i>(CRO-1250)</i>	\$	\$
11b) Contributions from Not-for-Profit Organizations	<i>(CRO-1250)</i>	\$	\$
11c) Outside Sources of Income	<i>(CRO-1250)</i>	\$	\$
11d) Legal Expense Fund – Other Sources	<i>(CRO-1270)</i>	\$	\$
11 e) Exempt Purchase Price Sales	<i>(CRO-1265)</i>	\$	\$
12) TOTAL RECEIPTS <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)</i>		\$ 16832.93	\$ 27062.93
<u>EXPENDITURES</u>			
13) Disbursements			
13a) Operating Expenditures	<i>(CRO-1310)</i>	\$ 20244.57	\$ 22939.92
13b) Contributions to Candidates/Political Committees	<i>(CRO-1310)</i>	\$ 325.00	\$ 525.00
13c) Coordinated Party Expenditures	<i>(CRO-1310)</i>	\$	\$
14) Aggregated Non-Media Expenditures	<i>(CRO-1315)</i>	\$	\$
15) Loan Repayments	<i>(CRO-1420)</i>	\$	\$
16) Refunds/Reimbursements From the Committee	<i>(CRO-1320)</i>	\$	\$
17) In-Kind Contributions	<i>(CRO-1510)</i>	\$ 100.00	\$ 100.00
18) TOTAL EXPENDITURES <i>(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</i>		\$ 20669.57	\$ 23564.92
19) Cash on Hand at End <i>(Add lines 4 and 12 together, then subtract line 18)</i>		\$ 3498.01	\$ 3498.01
<u>ADDITIONAL INFORMATION</u>			
20) Non-Monetary Gifts Given to Other Committees	<i>(CRO-1330)</i>	\$	\$
21) Outstanding Loans (incl. ones from other campaigns)	<i>(CRO-1430)</i>	\$	\$
22) Debts and Obligations owed By the Committee	<i>(CRO-1610)</i>	\$	\$
23) Debts and Obligations owed To the Committee	<i>(CRO-1620)</i>	\$	\$
24) Account Transfers Within the Committee	<i>(CRO-1720)</i>	\$	\$
25) Administrative Support	<i>(CRO-1710)</i>	\$	\$
26) Forgiven Loans	<i>(CRO-1440)</i>	\$	\$
27) 48-Hour Notice Reports Sum	<i>(CRO-2200)</i>	\$	\$
28) Contributions to be Refunded	<i>(CRO-1215)</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	
Ron Parrish for Sheriff						QD4IEN	
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 Crotts (cont from previous page) 5825 Laurel Ridge Snow Camp, NC 27349 (336) 226-6675				Owner Graham Furniture			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$ 1,460.00	
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	CASH		06/01/2010		\$ 40.00	
<input checked="" type="checkbox"/>	1	CHECK		05/28/2010		\$ 500.00	
<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	
Paula Crotts 5825 Laurel Ridge Snow Camp, NC 27349 (336) 226-6675				Supervisor Alamance County			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$ 540.00	
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		07/16/2010		\$ 20.00	
<input checked="" type="checkbox"/>	1	CASH		06/01/2010		\$ 20.00	
<input checked="" type="checkbox"/>	1	CHECK		01/15/2010		\$ 500.00	
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	
Steve Madren 3979 Danieley Water Wheel Rd. Burlington, NC 27217 #(336) 584-7617				Salesman JMW Industries			
				c. Employer's Name/Specific Field		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	CASH		07/11/2010		\$ 40.00	
<input type="checkbox"/>	1	CASH		07/14/2010		\$ 20.00	
<input type="checkbox"/>	1	CASH		07/17/2010		\$ 40.00	
4. Total only this Page						\$ 120.00	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>						\$ 10,738.93	

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	
Ron Parrish for Sheriff					QD41EN	
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	
Tina Cannon 4014 Forbes Way Burlington, NC 27215 (336) 270-6151			STUDENT			
			c. Employer's Name/Specific Field			
					c. 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		08/28/2010		\$ 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	
Daniel Hawkins 1553 Cherry Lane Haw River, NC 27258 (336) 578-4526			Attorney			
			c. Employer's Name/Specific Field			
			Daniel Hawkins PA		c. 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		08/29/2010		\$ 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	
Elizabeth Kitto 117 Cornwallis Ct. Mebane, NC 27302 (336) 380-2758			Unemployed			
			c. Employer's Name/Specific Field			
					c. 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		07/16/2010		\$ 100.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 275.00	
5. Total of ALL CRO-1210 Pages					\$ 10,738.93	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

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) Ron Parrish for Sheriff					2. ID Number QD41EN								
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								
Board of Elections 115 S Maple St. Graham, NC 27253 (336) 570-6755			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:		\$ 702. ⁶⁰								
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks								
1	check	O	07/29/2010	\$25. ⁶⁰	Registered Voters CD								
<td colspan="7">4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove</td>							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								
Wal-Mart 530 S. Graham-Hopedale Rd. Burlington, NC 27215 (336) 226-1819			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:		\$ 20.34								
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks								
1	check	K	07/30/2010	\$20.34	Files/File System								
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								
Fairway Outdoor Advertising 1920 W. Lee St. Greensboro, NC 27403 (336) 292-4242			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:		\$ 2,370. ⁰⁰								
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks								
1	check	A	08/03/2010	\$2370. ⁰⁰	Billboards								
5. Total only this Page					\$ 2415.94								
6. Total of ALL CRO-1310 Pages					\$ 20,244. ⁵⁷								
<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) Ron Parrish for Sheriff					2. ID Number QD41EN	
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	
Suntrust Bank 2221 Maple Ave. Parrington, NC 27215 (336) 222-1317			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:		\$ 48.75	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	draft	O	08/19/2010	\$ 7.00	Analysis Fee	
1	draft	O	09/01/2010	\$15.00	checks	
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	
USPS N. Myrtle Beach, SC (843) 272-5864			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:		\$ 28.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	I	07/06/2010	\$28.00	stamps - Fundrais Postcard	
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	
Paradise Printers 3651 Alamance Rd. Burlington, NC 27215 (336) 570-2922			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:		\$ 1,144.31	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	A	07/12/2010	\$562.46	T-shirts	
1	check	A	09/16/2010	\$581.85	T-shirts	
5. Total only this Page					\$ 1,194.31	
6. Total of ALL CRO-1310 Pages					\$ 20,244.51	
<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) Ron Parrish for Sheriff					2. ID Number QD41EN	
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	
Times-News P.O. Box 481 Burlington, NC 27215 (336) 227-0131			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:		\$ 5033.05	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	A	08/6/2010	\$498.05	Ads - Newspaper	
1	check	A	09/22/2010	\$4,535.00	Ads - Newspaper	
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 (336) 226-8436			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:		\$ 346.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	A	08/16/2010	\$346.50	Advertisement	
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	
Best Buy University Dr. Burlington, NC 27215 (336) 584-0297			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:		\$ 94.80	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	K	09/01/2010	\$94.80	Recorder	
5. Total only this Page					\$ 5,474.35	
6. Total of ALL CRO-1310 Pages					\$ 20,244.52	
<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 <i>(List detailed expenditure code in (h.) above)</i>						
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) Ron Parrish for Sheriff						2. ID Number QD41EN
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	
Van's Advertising 3264 Van Dr Burlington, NC 27215 (336) 226-7400			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:		\$ See next entry	
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	\$4026. ¹⁹	Big signs, yard signs	
1	check	A	08/15/2010	\$1,536. ⁵²	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	
Van's Advertising <i>(cont)</i> 3264 Van Dr. Burlington, NC 27215 (336) 226-7400			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:		\$ 8,390.29	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	A	09/16/2010	\$2469. ²⁰	Big signs, 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	
Harris Teeter 2727 S. Church St. Burlington, NC 27215 (336) 585-1444			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:		\$ 108.48	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	C	10/13/2010	\$37.73	Items for Meet + Greet	
1	check	C	10/12/2010	\$70.75	Items for Meet + Greet	
5. Total only this Page						\$ 8740.39
6. Total of ALL CRO-1310 Pages						\$ 20,244.52
<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) Ron Parrish for Sheriff					2. ID Number QD41EN	
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	
Powers Firearms 2304 Jane St. Greensboro, NC 27407 (336) 294-4994			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:		\$ 1,583.93	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	C	07/19/2010	\$1,583.93	Gun Raffle	
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	
Julie Parrish 401 Springhill Ln. Gibsonville, NC 27249 (336) 449-3280			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:		\$ 145.90	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	C	07/20/2010	\$145.90	Reimbursed for Fundraiser Items	
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	
WBAG Radio 1745 Burch Bridge Rd. Burlington, NC 27217 (336) 226-1189			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:		\$ 210.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	A	10/08/2010	\$105.00	Ads-Radio	
1	check	A	10/12/2010	\$105.00	Ads-Radio	
5. Total only this Page					\$ 1,939.83	
6. Total of ALL CRO-1310 Pages					\$ 20,244.57	
<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) Ron Parrish for Sheriff					2. ID Number QD41EN
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	
Tractor Supply 3129 Garden Rd. Burlington, NC 27215 (336) 586-9222		c. Level Registered (Specify)		e. Election Sum to Date \$ See next entry	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	F	07/22/2010	\$210.74	Fence Posts-Signs
1	check	F	07/31/2010	\$202.14	Fence Posts-Signs
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	
Tractor Supply (cont) 3129 Garden Rd. Burlington, NC 27215 (336) 586-9222		c. Level Registered (Specify)		e. Election Sum to Date \$ 589.75	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	F	09/08/2010	\$101.07	Fence Posts-Signs
1	check	F	09/21/2010	\$75.80	Fence Posts-Signs
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	
Alamance Co. Fallen Heroes 842 S main st. %midCarline Graham, NC 27353		c. Level Registered (Specify)		e. Election Sum to Date \$ 100.00	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	A	09/24/2010	\$100.00	Advertising - Golf Tour me.
5. Total only this Page					\$ 689.75
6. Total of ALL CRO-1310 Pages					\$ 20,244.57
<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) Ron Parrish for Sheriff					2. ID Number QD41EN	
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	
Democratic Women P.O. Box 1815 Burlington, NC 27216			c. Level Registered (Specify)		e. Election Sum to Date \$ 40.00	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	G	09/21/2010	\$ 40.00		
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	
Allied Churches 206 N. Fisher St Burlington, NC 27217 (336) 229-0881			c. Level Registered (Specify)		e. Election Sum to Date \$ 50.00	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	C	09/21/2010	\$ 50.00	for leaves & fishes	
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	
Martin Chapel Baptist 5043 Martin Chapel Church Rd Melbane, NC 27307 (336) 421-0192			c. Level Registered (Specify)		e. Election Sum to Date \$ 50.00	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	O	10/16/2010	\$ 50.00	Charity Event	
5. Total only this Page					\$ 140.00	
6. Total of ALL CRO-1310 Pages					\$ 20,245.52	
<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	
Ron Parrish for Sheriff					QD41EN	
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	
Pinnacle (336)229-1939 1292 Rauhut St Burlington, NC 27217			c. Level Registered (Specify)		e. Election Sum to Date \$ 250. ⁰⁰	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	A	10/16/2010	\$250. ⁰⁰	Advertising	
				\$		
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	
			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:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
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	
			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:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
5. Total only this Page					\$ 250. ⁰⁰	
6. Total of ALL CRO-1310 Pages					\$ 20,244 ⁵⁷	
<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) Ron Parrish for Sheriff					2. ID Number QD41EN
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input type="checkbox"/> Operating Expenses <input checked="" 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	
Jeremy Teeter for Co. Comm. 706 Huffman Mill Rd. Burlington, NC 27215 (336)		c. Level Registered (Specify)		e. Election Sum to Date \$ 100.00	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	D	07/20/2010	\$ 100.00	
				\$	
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	
Ann Vaughan for Co. Comm. 117 Cornwallis Ct. Mebane, NC 27302 (919) 563-3359		c. Level Registered (Specify)		e. Election Sum to Date \$ 100.00	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	D	07/20/2010	\$ 100.00	
				\$	
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	
Hunt Johnson for Clerk 1 Court Square Graham, NC 27253 (919) 563-2117		c. Level Registered (Specify)		e. Election Sum to Date \$ 50.00	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	D	08/21/2010	\$ 50.00	
				\$	
5. Total only this Page					\$ 250.00
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 325.00
7. Purpose Codes (List detailed expenditure code in (h.) above)					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		D - To Another Candidate	
I - Postage		J - Penalties		G - Political Party	
O* - Other		K* - Office Expenses		H* - Holding Public Office Expenses	
Q* - Donation to Legal Expense Fund					
* 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) Ron Parrish for Sheriff					2. ID Number QD41EN	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input checked="" 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	
Henry Vines for Co. Comm. 3450 Isley Dr. Snow Camp, NC 27349 (336) 227-1761			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:		\$ 75.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	D	09/14/2010	\$50.00		
1	check	D	10/2/2010	\$25.00		
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	
			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:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
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	
			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:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
5. Total only this Page					\$ 175.00	
6. Total of ALL CRO-1310 Pages					\$ 325.00	
<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)						

Disclosure Report Cover

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 Ron Parrish for Sheriff	c. ID Number QD41EN
b. Mailing Address (include City, State and Zip Code) 401 Springhill Lane Gibsonville, NC 27149	d. Date Filed 10/25/2010
	e. Phone Number 336-449-3280

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2010	7/1/2010	10/16/2010	Ronald L Parrish

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"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser	Municipal	State/County	Referendum
	<input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input checked="" type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
7. Type of Fund (if applicable, check one)			
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:			
8. Number of Fundraisers this Report			
	10. Special Report Name		

11. Account Information		11. Account Information	
a. Financial Institution Full Name SunTrust Bank		a. Financial Institution Full Name	
b. Purpose Campaign	c. Account Code 1	b. Purpose	c. Account Code
d. Period Begin Balance Account	\$ 7334.65	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.

Ronald L Parrish _____ 10/25/2010 _____
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: 10-25-10 Employee: JG

Date Postmarked: _____ Employee: _____

Date Scanned: _____ Employee: _____

Date Data Entered: _____ Employee: _____

Delivery Method

Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed
 Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

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

Detailed Summary

Amendment
 Yes No

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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
Ron Parrish for Sheriff	Third	QD41EN	
Start of Election Cycle: January 1, 2007		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 7334.65	\$
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 4844.00	\$ 7039.00
6) Contributions from Individuals	(CRO-1210)	\$ 10738.93	\$ 18773.93
7) Contributions from Political Party Committees	(CRO-1220)	\$ 1250.00	\$ 1250.00
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 16832.93	\$ 27062.93
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 20244.57	\$ 22939.92
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 325.00	\$ 525.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$ 100.00	\$ 100.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 20669.57	\$ 23564.92
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 3498.01	\$ 3498.01
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$	
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$	
24) Account Transfers Within the Committee	(CRO-1720)	\$	
25) Administrative Support	(CRO-1710)	\$	\$
26) Forgiven Loans	(CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum	(CRO-2200)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$

Aggregated Contributions from Individuals

Page

1 of 9

Amendment

Yes No

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

1. Committee Full Name (and Fund if applicable) Ron Parrish for Sheriff	2. ID Number QD41EN
---	-------------------------------

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		07/11/2010	\$ 20.00
<input type="checkbox"/> Remove	1	check		07/11/2010	\$ 20.00
<input type="checkbox"/> Add	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Remove	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Add	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Remove	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Add	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Remove	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Add	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Remove	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Add	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Remove	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Add	1	cash		07/11/2010	\$ 40.00
<input type="checkbox"/> Remove	1	cash		07/11/2010	\$ 40.00
<input type="checkbox"/> Add	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Remove	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Add	1	cash		07/11/2010	\$ 40.00
<input type="checkbox"/> Remove	1	cash		07/11/2010	\$ 40.00
<input type="checkbox"/> Add	1	cash		07/11/2010	\$ 40.00
<input type="checkbox"/> Remove	1	cash		07/11/2010	\$ 40.00
<input type="checkbox"/> Add	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Remove	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Add	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Remove	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Add	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Remove	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Add	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Remove	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Add	1	check		07/11/2010	\$ 20.00
<input type="checkbox"/> Remove	1	check		07/11/2010	\$ 40.00
<input type="checkbox"/> Add	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Remove	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Add	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Remove	1	cash		07/11/2010	\$ 40.00
<input type="checkbox"/> Add	1	cash		07/11/2010	\$ 40.00
<input type="checkbox"/> Remove	1	cash		07/11/2010	\$ 40.00
<input type="checkbox"/> Add	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Remove	1	cash		07/11/2010	\$ 20.00
<input type="checkbox"/> Add	1	cash		07/12/2010	\$ 20.00
<input type="checkbox"/> Remove	1	cash		07/12/2010	\$ 20.00

4. Total only this Page \$ 560.00

5. Total of ALL CRO-1205 Pages \$ 4,844.00

(This line must be on line 5 of Detailed Summary Page CRO-1100)

Aggregated Contributions from Individuals

Page

2 of 9

Amendment

Yes No

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

1. Committee Full Name (and Fund if applicable) Ron Parrish for Sheriff	2. ID Number QD41EN
---	-------------------------------

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		07/12/2010	\$ 20. ⁰⁰
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		1	Cash		07/12/2010	\$ 20. ⁰⁰
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		1	Cash		07/12/2010	\$ 20. ⁰⁰
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		1	Cash		07/12/2010	\$ 40. ⁰⁰
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		1	Cash		07/12/2010	\$ 20. ⁰⁰
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		1	check		07/12/2010	\$ 50. ⁰⁰
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		1	Cash		07/13/2010	\$ 20. ⁰⁰
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		1	Cash		07/13/2010	\$ 40. ⁰⁰
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		1	Cash		07/13/2010	\$ 40. ⁰⁰
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		1	Cash		07/13/2010	\$ 20. ⁰⁰
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		1	Cash		07/13/2010	\$ 20. ⁰⁰
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		1	Cash		07/14/2010	\$ 20. ⁰⁰
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		1	Cash		07/14/2010	\$ 20. ⁰⁰
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		1	Cash		07/14/2010	\$ 20. ⁰⁰
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		1	Cash		07/14/2010	\$ 20. ⁰⁰
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		1	Cash		07/14/2010	\$ 20. ⁰⁰
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		1	Cash		07/14/2010	\$ 20. ⁰⁰
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		1	check		07/14/2010	\$ 40. ⁰⁰
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		1	Cash		07/16/2010	\$ 20. ⁰⁰
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		1	Cash		07/16/2010	\$ 20. ⁰⁰
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add		1	Cash		07/16/2010	\$ 20. ⁰⁰
<input type="checkbox"/> Remove						

4. Total only this Page	\$ 550. ⁰⁰
5. Total of ALL CRO-1205 Pages	\$ 4,844. ⁰⁰
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>	

Aggregated Contributions from Individuals

Page

3 of 9

Amendment

Yes No

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

1. Committee Full Name (and Fund if applicable) Ron Parrish for Sheriff	2. ID Number QD41EN
---	-------------------------------

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		07/16/2010	\$ 20.00
<input type="checkbox"/>	Remove	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Add	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Remove	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Add	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Remove	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Add	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Remove	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Add	1	cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Remove	1	cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Add	1	cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Remove	1	cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Add	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Remove	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Add	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Remove	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Add	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Remove	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Add	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Remove	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Add	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Remove	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Add	1	cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Remove	1	cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Add	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Remove	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Add	1	cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Remove	1	cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Add	1	cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Remove	1	cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Add	1	check		07/16/2010	\$ 40.00
<input type="checkbox"/>	Remove	1	check		07/16/2010	\$ 20.00
<input type="checkbox"/>	Add	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Remove	1	Cash		07/16/2010	\$ 20.00
<input type="checkbox"/>	Add	1	Cash		07/16/2010	\$ 40.00
<input type="checkbox"/>	Remove	1	Cash		07/16/2010	\$ 40.00

4. Total only this Page	\$ 500.00
5. Total of ALL CRO-1205 Pages	\$ 4,844.00
<small>(This line must be on line 5 of Detailed Summary Page CRO-1100)</small>	

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) Ron Parrish for Sheriff	2. ID Number QD41EN
---	-------------------------------

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		7/16/10	\$ 40. ⁰⁰
<input type="checkbox"/> Remove		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Add		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Remove		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Add		1	Cash		7/16/10	\$ 40. ⁰⁰
<input type="checkbox"/> Remove		1	Cash		7/16/10	\$ 40. ⁰⁰
<input type="checkbox"/> Add		1	check		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Remove		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Add		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Remove		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Add		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Remove		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Add		1	Cash		7/16/10	\$ 40. ⁰⁰
<input type="checkbox"/> Remove		1	Cash		7/16/10	\$ 40. ⁰⁰
<input type="checkbox"/> Add		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Remove		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Add		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Remove		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Add		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Remove		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Add		1	Cash		7/16/10	\$ 40. ⁰⁰
<input type="checkbox"/> Remove		1	Cash		7/16/10	\$ 40. ⁰⁰
<input type="checkbox"/> Add		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Remove		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Add		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Remove		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Add		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Remove		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Add		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Remove		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Add		1	Cash		7/16/10	\$ 40. ⁰⁰
<input type="checkbox"/> Remove		1	Cash		7/16/10	\$ 40. ⁰⁰
<input type="checkbox"/> Add		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Remove		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Add		1	Cash		7/16/10	\$ 20. ⁰⁰
<input type="checkbox"/> Remove		1	Cash		7/16/10	\$ 20. ⁰⁰

4. Total only this Page \$ 560.⁰⁰**5. Total of ALL CRO-1205 Pages** \$ 4,844.⁰⁰

(This line must be on line 5 of Detailed Summary Page CRO-1100)

Aggregated Contributions from Individuals

Page

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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				
Ron Parrish for Sheriff		QD41EN				
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		7/16/10	\$ 40. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/16/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/16/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/16/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/17/10	\$ 40. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/17/10	\$ 30. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/17/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/17/10	\$ 40. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		7/17/10	\$ 40. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/17/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/17/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/17/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/17/10	\$ 40. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/17/10	\$ 40. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/17/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/17/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/17/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/17/10	\$ 40. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/17/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/17/10	\$ 40. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		7/17/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		7/17/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
4. Total only this Page					\$ 600. ⁰⁰	
5. Total of ALL CRO-1205 Pages					\$ 4,844. ⁰⁰	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

Aggregated Contributions from Individuals

Page

7 of 9

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				
Ron Parrish for Sheriff		QD41EN				
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		07/17/2010	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		7/17/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Cash		7/17/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Cash		7/17/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		7/17/10	\$ 25. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		7/17/10	\$ 50. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Cash		7/17/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Cash		7/17/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Cash		7/17/10	\$ 40. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		7/17/10	\$ 50. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		7/17/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Cash		7/17/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		7/17/10	\$ 50. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		7/17/10	\$ 50. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		7/17/10	\$ 40. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		7/17/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Cash		7/17/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Cash		7/17/10	\$ 40. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Cash		7/17/10	\$ 20. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		7/17/10	\$ 40. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		7/17/10	\$ 50. ⁰⁰	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	Check		7/17/10	\$ 50. ⁰⁰	
<input type="checkbox"/> Remove						
4. Total only this Page					\$ 705. ⁰⁰	
5. Total of ALL CRO-1205 Pages					\$ 4,844. ⁰⁰	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

Aggregated Contributions from Individuals

Page

8 of 9

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				
Ron Parrish for Sheriff		QD41EN				
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		7/17/10	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/17/10	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/17/10	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/17/10	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		7/17/10	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/17/10	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/20/10	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/20/10	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		7/20/10	\$ 40.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		7/20/10	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		7/27/10	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/30/10	\$ 40.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		7/30/10	\$ 40.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		7/10/10	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	money order		8/4/10	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		8/9/10	\$ 49.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		8/17/10	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		8/22/10	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		9/2/10	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		9/3/10	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	check		9/11/10	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	1	cash		9/23/10	\$ 50.00	
<input type="checkbox"/> Remove						
4. Total only this Page					\$ 759.00	
5. Total of ALL CRO-1205 Pages					\$ 4,844.00	
<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) Ron Parrish for Sheriff	2. ID Number QD41EN
---	-------------------------------

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		check		9/24/10	\$ 25.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		check		9/25/10	\$ 20.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		check		10/4/10	\$ 35.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		cash		07/11/10	\$ 20.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		cash		07/16/10	\$ 10.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$

4. Total only this Page	\$ 110.00
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5. Total of ALL CRO-1205 Pages	\$ 4,844.00
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(This line must be on line 5 of Detailed Summary Page CRO-1100)

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	
Ron Parrish for Sheriff						QD4IEN	
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	
Shannon Scott 1534 Finnsbury Dr. Burlington, NC 27217 (336) 437-9939				Auditor			
				c. Employer's Name/Specific Field			
				LabCorp		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		07/09/2010		\$ 140. 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	
Sharon Holt 2574 Nealwood Ave. Graham, NC 27253 (336) 222-9142				Program Manager			
				c. Employer's Name/Specific Field			
				General Dynamics		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		07/09/2010		\$ 100. ⁰⁰	
<input type="checkbox"/>	1	CASH		07/11/2010		\$ 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	
Kyle Holt 2574 Nealwood Ave. Graham, NC 27253 (336) 222-9142				Student			
				c. Employer's Name/Specific Field			
				Student - ECU		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		07/09/2010		\$ 100. ⁰⁰	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 380. ⁰⁰	
5. Total of ALL CRO-1210 Pages						\$ 10,738. ⁹³	
<i>(This line must be on line 6 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	
Ron Parrish for Sheriff					QD4IEN	
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	
Chris Cobitz 412 S. Williamson Ave. Elon, NC 27244 (336) 584-2935			Executive Director			
			c. Employer's Name/Specific Field			
			Charlotte-Mecklenburg School System		e. Election Sum to Date \$ 520. 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		07/11/2010	\$ 520. 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	
Spencer Murray 3362 William Newlin Dr. Graham, NC 27253 (336) 266-7045			Accountant			
			c. Employer's Name/Specific Field			
			Honda		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		07/11/2010	\$ 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	
Dixie Sizemore 3631 Brick Church Rd. Burlington, NC 27215 # - unknown			Clerk/Sales			
			c. Employer's Name/Specific Field			
			Belks		e. Election Sum to Date \$ 80. 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		07/04/2010	\$ 40. ⁰⁰	
<input type="checkbox"/>	1	cash		07/12/2010	\$ 40. ⁰⁰	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 660. ⁰⁰	
5. Total of ALL CRO-1210 Pages					\$ 10,738.93	
<i>(This line must be on line 6 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	
Ron Parrish for Sheriff					QD41EN	
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	
Alan Bailey 605 Pebble Dr. Gibsonville, NC 27249 (336) 446-4232			Printer			
			c. Employer's Name/Specific Field			
			International Minute Press		e. Election Sum to Date	
					\$ 320. 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		07/11/2010	\$ 20. ⁰⁰	
<input checked="" type="checkbox"/>	1	check		02/19/2010	\$ 300. 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	
Rhonda Johnston 3999 Yount Ct. Burlington, NC 27215 (336) 570-0022			Sales			
			c. Employer's Name/Specific Field			
			Verizon Wireless		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	
Leigh Ann Cutlip 1904 Broadway Dr. Graham, NC 27253 (336) 226-7816			Business Process Expert			
			c. Employer's Name/Specific Field			
			Lenovo		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		07/15/2010	\$ 100. ⁰⁰	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 220. ⁰⁰	
5. Total of ALL CRO-1210 Pages					\$ 10,738.93	
<i>(This line must be on line 6 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	
Ron Parrish for Sheriff						QD4IEN	
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	
Bea Kay Powers 2604 W. Woodlyn. Dr. Greensboro, NC (336) 294-9505				President			
				c. Employer's Name/Specific Field			
				Powers Security & Firearms			
						e. Election Sum to Date	
						\$ 1,303.93	
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		07/16/2010		\$ 20. ⁰⁰	
<input type="checkbox"/>	1	Check		07/19/2010		\$ 1,283.93	
<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	
Eddie Shoe 212 N. Ninth St. Mebane, NC 27302 (919) 304-5821				Retired			
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 395. 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		07/16/2010		\$ 40. ⁰⁰	
<input type="checkbox"/>	1	Check		08/16/2010		\$ 250. ⁰⁰	
<input type="checkbox"/>	1	Check		10/08/2010		\$ 105. 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	
Christine Roy P.O. Box 4238 Burlington, NC 27217 (336) 421-4583				Homemaker			
				c. Employer's Name/Specific Field			
						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		07/16/2010		\$ 200. ⁰⁰	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 1,898.93	
5. Total of ALL CRO-1210 Pages						\$ 10,738.93	
<i>(This line must be on line 6 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	
Ron Parrish for Sheriff					QD4IEN	
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	
Bruce Shoe 267 W. Front St. Burlington, NC 27215 (336) 229-3500			officer BPD			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
					\$ 80. 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		07/15/2010		\$ 40. ⁰⁰
<input type="checkbox"/>	1	Cash		07/16/2010		\$ 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	
Victor Hoffman 646 Huntington St. Elon, NC 27244 (336) 687-0070			Retired			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
					\$ 65. 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		05/11/2010		\$ 25. ⁰⁰
<input type="checkbox"/>	1	Cash		07/16/2010		\$ 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	
Paul Crotts 5825 Laurel Ridge Snow Camp, NC 27349 (336) 226-6675			Owner Graham Furniture			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
					\$ Cont next page	
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		07/16/2010		\$ 20. ⁰⁰
<input type="checkbox"/>	1	check		09/16/2010		\$ 500. ⁰⁰
<input checked="" type="checkbox"/>	1	check		02/16/2010		\$ 400. ⁰⁰
						\$ 640. ⁰⁰
4. Total only this Page						\$ 640. ⁰⁰
5. Total of ALL CRO-1210 Pages						\$ 10,738.93
<i>(This line must be on line 6 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	
Ron Parrish for Sheriff						QD41EN	
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 Crotts (cont from previous page) 5825 Laurel Ridge Snow Camp, NC 27349 (336) 226-6675				Owner Graham Furniture			
				c. Employer's Name/Specific Field			
						e. Election Sum to Date \$ 1,460.00	
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	Cash		06/01/2010		\$ 40.00	
<input checked="" type="checkbox"/>	1	Check		05/28/2010		\$ 500.00	
<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	
Paula Crotts 5825 Laurel Ridge Snow Camp, NC 27349 (336) 226-6675				Supervisor Alamance County			
				c. Employer's Name/Specific Field			
						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	Cash		07/16/2010		\$ 20.00	
<input checked="" type="checkbox"/>	1	Cash		06/01/2010		\$ 20.00	
<input checked="" type="checkbox"/>	1	Check		01/15/2010		\$ 500.00	
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	
Steve Madren 3979 Danieley Water Wheel Rd. Burlington, NC 27217 #(336) 584-7617				Salesman JMW Industries			
				c. Employer's Name/Specific Field			
						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	Cash		07/11/2010		\$ 40.00	
<input type="checkbox"/>	1	Cash		07/14/2010		\$ 20.00	
<input type="checkbox"/>	1	Cash		07/17/2010		\$ 40.00	
						\$ 120.00	
4. Total only this Page						\$ 120.00	
5. Total of ALL CRO-1210 Pages						\$ 10,738.93	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

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	
Ron Parrish for Sheriff					QD4IEN	
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	
Lee Holt 526 Judge Sharpe Rd. Graham, NC 27253 (336) 376-8057			Construction			
			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	CASH		07/11/2010		\$ 40. ⁰⁰
<input type="checkbox"/>	1	CASH		07/14/2010		\$ 20. ⁰⁰
<input type="checkbox"/>	1	CASH		07/17/2010		\$ 40. 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	
Victoria Frye 2025 Crescent Dr. Graham, NC 27253 (336) 578-6139			Retired			
			c. Employer's Name/Specific Field			
					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		07/17/2010		\$ 20. ⁰⁰
<input type="checkbox"/>	1	CHECK		07/17/2010		\$ 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	
Terry Barnard 2946 Shelley Graham Dr. Graham, NC 27253 (336) 229-4320			Software Engineer			
			c. Employer's Name/Specific Field IBM			
					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		07/17/2010		\$ 100. ⁰⁰
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 320. ⁰⁰	
5. Total of ALL CRO-1210 Pages					\$ 10,738. ⁹³	
<i>(This line must be on line 6 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	
Ron Parrish for Sheriff				QD4IEN	
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 Revegno 3422 N.C. Hwy 54 Graham, NC 27253 (336) 567-0194			Owner		
			c. Employer's Name/Specific Field		
			Alamance Magazine		
					e. Election Sum to Date
					\$ 550. 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		07/17/2010	\$ 200. ⁰⁰
<input type="checkbox"/>	1	check		09/08/2010	\$ 350. 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
Rodney Johnson 1057 Red Bird Ct. Randleman, NC 27317 (336) 329-8169			Retired		
			c. Employer's Name/Specific Field		
					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		07/17/2010	\$ 20. ⁰⁰
<input checked="" type="checkbox"/>	1	check		01/10/2010	\$ 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
Becky Costner 6089 Royster Rd. Greensboro, NC 27455 (336) 643-9483			Retired		
			c. Employer's Name/Specific Field		
					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		07/17/2010	\$ 100. ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 670. ⁰⁰
5. Total of ALL CRO-1210 Pages					\$ 10,738.93
<i>(This line must be on line 6 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	
Ron Parrish for Sheriff					QD4IEN	
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	
Terri Andrews 1355 George Basom Rd. Graham, NC 27253 (336) 578-7876			Clinical Systems Mgr			
			c. Employer's Name/Specific Field ARMC			
					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		07/17/2010		\$ 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	
Anna Gerow 120 Westover Dr. Elon, NC 27244 (336) 584-1427			Retired			
			c. Employer's Name/Specific Field			
					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	Cash		07/17/2010		\$ 5. ⁰⁰
<input checked="" type="checkbox"/>	1	check		04/11/2010		\$ 100. ⁰⁰
<input checked="" type="checkbox"/>	1	Cash		06/05/2010		\$ 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	
Don Windsor 4253 Old Hillsborough Rd. Medicine, NC 27302 (919) 563-6266			Retired			
			c. Employer's Name/Specific Field			
					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		07/17/2010		\$ 200. ⁰⁰
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 305. ⁰⁰	
5. Total of ALL CRO-1210 Pages					\$ 10,738.93	
<i>(This line must be on line 6 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	
Ron Parrish for Sheriff					QD41EN	
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	
Bobby Price 3549 Cook St. Mebane, NC 27302 (919) 563-6712			Retired			
			c. Employer's Name/Specific Field			
					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		07/17/2010	\$ 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	
April Smith 2548 MacLead St. Burlington, NC 27217 (336) 207-3570			Unemployed			
			c. Employer's Name/Specific Field			
					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		07/17/2010	\$ 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	
Judy Riggs 630 Huntington St. Eton, NC 27244 (336) 446-4220			Retired			
			c. Employer's Name/Specific Field			
					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		07/17/2010	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages					\$ 10,738.93	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>						

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	
Ron Parrish for Sheriff				QD41EN	
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
Shani Hammond 313 Falling Brook Dr. Belmont, NC 28012 (704) 825-2768			Housewife		
			c. Employer's Name/Specific Field		
			c. 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		07/22/2010	\$ 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
Gary Massey 1965 Sandy Cross Rd. Burlington, NC 27217 (336) 578-0386			Retired		
			c. Employer's Name/Specific Field		
			c. Election Sum to Date		
			\$ 170. 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		07/25/2010	\$ 50. ⁰⁰
<input checked="" type="checkbox"/>	1	Check		05/28/2010	\$ 120. 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
D. M. McLelland 2018 Nottingham Ln. Burlington, NC 27215 (336) 584-8580			Retired		
			c. Employer's Name/Specific Field		
			c. 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		07/28/2010	\$ 500. ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 650. ⁰⁰
5. Total of ALL CRO-1210 Pages					\$ 10,738.93
<i>(This line must be on line 6 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	
Ron Parrish for Sheriff					QD41EN	
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	
Randy Massey P.O. Box 1983 Burlington, NC 27216 (336) 421-0531			Owner			
			c. Employer's Name/Specific Field Massey Concrete			
					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		07/31/2010		\$ 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	
Shirley Waggoner 2218 Erin Ct. Graham, NC 27253 227-2228			Retired			
			c. Employer's Name/Specific Field			
					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		07/31/2010		\$ 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	
Pamela Senechal 4435 Fern Glen Dr. Burlington, NC 27215 (336) 227-3981			Housewife			
			c. Employer's Name/Specific Field			
					e. Election Sum to Date \$ 2000. 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		8/4/2010		\$ 2000. ⁰⁰
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 2,300. ⁰⁰	
5. Total of ALL CRO-1210 Pages					\$ 10,738. ⁹³	
<i>(This line must be on line 6 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	
Ron Parrish for Sheriff					QD41EN	
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	
Larry Allen 1408 St. Andrews Dr. Mebane, NC 27302 (336) 570-4668			Retired			
			c. Employer's Name/Specific Field			
					c. Election Sum to Date	
					\$ 300. ⁰⁰	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	1	check		08/14/2010		\$ 300. 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	
Fred Long 804 Croftwood Dr. Gibsonville, NC 27249 (336) 449-9306			Sales			
			c. Employer's Name/Specific Field			
			Star Foods		c. 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		08/15/2010		\$ 100. ⁰⁰
<input type="checkbox"/>		In-kind	Food for Event	07/17/2010		\$ 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	
R.E. Florence 0107 Gibson Rd. Mebane, NC 27302 (336) 578-0637			Retired			
			c. Employer's Name/Specific Field			
					c. 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		8/22/2010		\$ 100. ⁰⁰
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 600. ⁰⁰	
5. Total of ALL CRO-1210 Pages					\$ 10,738.93	
<i>(This line must be on line 6 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	
Ron Parrish for Sheriff					QD41EN	
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	
Tina Cannon 4014 Forbes Way Burlington, NC 27215 (336) 270-6151						
					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		08/28/2010	\$ 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	
Daniel Hawkins 1553 Cherry Lane Haw River, NC 27258 (336) 578-4526			Attorney			
			Daniel Hawkins PA		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		08/29/2010	\$ 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	
Elizabeth Kitto 117 Cornwallis Ct. Mebane, NC 27302 (336) 380-2758			Unemployed			
					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		07/16/2010	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 275.00	
5. Total of ALL CRO-1210 Pages					\$ 10,738.93	
<i>(This line must be on line 6 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	
Ron Parrish for Sheriff					QD41EN	
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	
Johnny Freeman 703 S. Sellars Mill Rd. Burlington, NC 27217 (336) 226-2702			Retired			
			c. Employer's Name/Specific Field			
					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	Check		09/02/2010		\$ 100. ⁰⁰
<input checked="" type="checkbox"/>	1	Cash		06/05/2010		\$ 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	
George Johnson JR 414 Springhill Ln. Gibsonville, NC 27249 (336) 449-7991			Retired			
			c. Employer's Name/Specific Field			
					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		09/03/2010		\$ 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	
R.C. Thiel 1220 Altamahaw Union Rd. Burlington, NC 27217 (336) 226-6763			Retired			
			c. Employer's Name/Specific Field			
					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		09/09/2010		\$ 100. ⁰⁰
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 300. ⁰⁰	
5. Total of ALL CRO-1210 Pages					\$ 10,738.93	
<i>(This line must be on line 6 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	
Ron Parrish for Sheriff					QD41EN	
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	
Linda Cann 2356 Glencoe St. Burlington, NC 27217 (336) 229-1452			Unemployed			
			c. Employer's Name/Specific Field			
					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		09/11/2010		\$ 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	
Cornelia Henderson 222 S. Melville St. Graham, NC 27253 (336) 226-5225			Retired			
			c. Employer's Name/Specific Field			
					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		09/11/2010		\$ 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	
Henderson Scott 1400 N. Jim Minor Rd Haw River, NC 27258 (336) 578-5612			Retired			
			c. Employer's Name/Specific Field			
					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		09/22/2010		\$ 250.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 600.00	
5. Total of ALL CRO-1210 Pages					\$ 10,738.93	
<i>(This line must be on line 6 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	
Ron Parrish for Sheriff					QD41EN	
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 Hollan 13005 Turtle Cove Trl. Fort Myers, FL 33903 (239) 745-6026			Retired			
			c. Employer's Name/Specific Field			
					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		10/5/2010	\$ 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	
John Ketcham 4 White Oak Elon, NC 27244 (336) 584-7225			Owner			
			c. Employer's Name/Specific Field			
			Blakey Hall		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		10/7/2010	\$ 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	
Richard Barbour 1501 Charleigh Ct. Elon, NC 27244 (336) 584-6722			Sales			
			c. Employer's Name/Specific Field			
			Ecolab		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		10/10/2010	\$ 100. ⁰⁰	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 500. ⁰⁰	
5. Total of ALL CRO-1210 Pages					\$ 10,738.93	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

Contributions from Political Party Committees

Use this form to report contributions from a political party

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Ron Parrish for Sheriff						QD41EN	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)					b. Comments		
Democratic Women of Alamance Co P.O. Box 1815 Burlington, NC 27215							
					c. Election Sum to Date		
					\$ 1,250.00		
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount			
i	check		08/30/2000	\$ 1,250.00			
				\$			
				\$			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)					b. Comments		
					c. Election Sum to Date		
					\$		
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount			
				\$			
				\$			
				\$			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)					b. Comments		
					c. Election Sum to Date		
					\$		
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount			
				\$			
				\$			
				\$			
4. Total only this Page						\$ 1,250.00	
5. Total of ALL CRO-1220 Pages						\$ 1,250.00	
<i>(This line must be on line 7 of Detailed Summary Page CRO-1100)</i>							

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) Ron Parrish for Sheriff					2. ID Number QD41EN	
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	
Board of Elections 115 S. Maple St. Graham, NC 27253 (336) 570-6755			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:			
					\$ 25.60	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	O	07/29/2010	\$25.60	Registered Voters CD	
					\$	
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	
Wal-Mart 530 S. Graham-Hopedale Rd. Burlington, NC 27215 (336) 226-1819			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:			
					\$ 20.34	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	K	07/30/2010	\$20.34	Files/File System	
					\$	
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	
Fairway Outdoor Advertising 1920 W. Lee St. Greensboro, NC 27403 (336) 292-4242			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:			
					\$ 2,370.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	A	08/03/2010	\$2370.00	Billboards	
					\$	
5. Total only this Page					\$ 2415.94	
6. Total of ALL CRO-1310 Pages					\$ 20,569.57	
<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) Ron Parrish for Sheriff					2. ID Number QD41EN
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
Suntrust Bank 2221 Maple Ave. Burlington, NC 27215 (336) 222-1317			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:		
					\$ 48.75
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	draft	0	08/19/2010	\$ 7.00	Analysis Fee
1	draft	0	09/01/2010	\$ 15.00	Checks
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
USPS N. Myrtle Beach, SC (843) 272-5864			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:		
					\$ 28.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	I	07/06/2010	\$ 28.00	Stamps - Fundraiser Postcards
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
Paradise Printers 3651 Alamance Rd. Burlington, NC 27215 (336) 570-2922			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:		
					\$ 1,144.31
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	A	07/12/2010	\$ 562.46	T-shirts
1	check	A	09/16/2010	\$ 581.85	T-shirts
5. Total only this Page					\$ 1,194.31
6. Total of ALL CRO-1310 Pages					\$ 20,569.57
<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) Ron Parrish for Sheriff					2. ID Number QD41EN
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) Times-News P.O. Box 481 Burlington, NC 27215 (336) 227-0131		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 \$ 5033.05	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	A	08/6/2010	\$498.05	Ads - Newspaper
1	check	A	09/22/2010	\$4,535.00	Ads - Newspaper
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Alamance magazine 217 East Davis St. Burlington, NC 27216 (336) 226-8436		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 \$ 346.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	A	08/16/2010	\$346.50	Advertisement
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Best Buy University Dr. Burlington, NC 27215 (336) 584-0297		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 \$ 94.80	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	K	09/01/2010	\$94.80	Recorder
5. Total only this Page					\$ 5,474.35
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>					\$ 20,569.57
7. Purpose Codes (List detailed expenditure code in (h.) above)					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
O* - Other				D - To Another Candidate	
				H* - Holding Public Office Expenses	
				Q* - Donation to Legal Expense Fund	
* 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) Ron Parrish for Sheriff						2. ID Number QD41EN
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	
Van's Advertising 3264 Van Dr Burlington, NC 27215 (336) 226-7400			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:			
k. Required Remarks \$ See next entry						
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	\$4026. ¹⁹	Big signs, yard signs	
1	check	A	08/15/2010	\$1,536. ⁵²	yard signs	
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	
Van's Advertising (cont) 3264 Van Dr. Burlington, NC 27215 (336) 226-7400			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:			
k. Required Remarks \$ 8,390.29						
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	A	09/16/2010	\$2469. ²⁰	Big signs, yard signs	
k. Required Remarks \$						
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	
Harris Teeter 2727 S. Church St. Burlington, NC 27215 (336) 585-1444			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:			
k. Required Remarks \$ 108.48						
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	C	10/13/2010	\$37.73	Items for Meet + Greet	
1	check	C	10/12/2010	\$70.75	Items for Meet + Greet	
k. Required Remarks \$ 8140.39						
5. Total only this Page						
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>						
k. Required Remarks \$ 20,569.57						
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) Ron Parrish for Sheriff					2. ID Number QD41EN	
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	
Powers Firearms 2304 Jane St. Greensboro, NC 27407 (336) 294-4994			c. Level Registered (Specify)		e. Election Sum to Date \$ 1,583.93	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	C	07/19/2010	\$1,583.93	Gun Raffle	
				\$		
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	
Julie Parrish 401 Springhill Ln. Gibsonville, NC 27249 (336) 449-3280			c. Level Registered (Specify)		e. Election Sum to Date \$ 145.90	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	C	07/20/2010	\$145.90	Reimbursed for Fundraiser Items	
				\$		
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	
WBAG Radio 1745 Burch Bridge Rd. Burlington, NC 27217 (336) 226-1189			c. Level Registered (Specify)		e. Election Sum to Date \$ 210.00	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	A	10/08/2010	\$105.00	Ads-Radio	
1	check	A	10/12/2010	\$105.00	Ads-Radio	
					\$ 1939.83	
5. Total only this Page						
6. Total of ALL CRO-1310 Pages						
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)						
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)						
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						
					\$ 20,569.57	
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) Ron Parrish for Sheriff						2. ID Number QD41EN
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	
Tractor Supply 3129 Garden Rd. Burlington, NC 27215 (336) 586-9222			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:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	F	07/22/2010	\$210.74	Fence Posts-Signs	
1	check	F	07/31/2010	\$202.14	Fence Posts-Signs	
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	
Tractor Supply (cont) 3129 Garden Rd. Burlington, NC 27215 (336) 586-9222			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:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	F	09/08/2010	\$101.07	Fence Posts-Signs	
1	check	F	09/21/2010	\$75.80	Fence Posts-Signs	
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	
Alamance Co. Fallen Hero 842 S. main st. %midCarolina 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:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	A	09/24/2010	\$100.00	Advertising-Bolf Tournament	
				\$		
5. Total only this Page					\$ 689.75	
6. Total of ALL CRO-1310 Pages					\$ 20,569.57	
<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) Ron Parrish for Sheriff					2. ID Number QD41EN
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
Democratic Women P.O. Box 1815 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:		
					\$ 40.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	G	09/21/2010	\$40.00	
				\$	
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
Allied Churches 206 N. Fisher St. Burlington, NC 27217 (336) 229-0881			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:		
					\$ 50.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	C	09/21/2010	\$50.00	for loaves & fishes
				\$	
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
Martin Chapel Baptist 5043 Martin Chapel Church Rd Mebane, NC 27307 (336) 421-0192			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:		
					\$ 50.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	O	10/16/2010	\$50.00	Charity Event
				\$	
5. Total only this Page					\$ 140.00
6. Total of ALL CRO-1310 Pages					\$ 20,569.57
<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) Ron Parrish for Sheriff					2. ID Number QD41EN	
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	
Pinnacle (336)229-1939 1292 Rauhut St 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:		\$ 250. ⁰⁰	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	check	A	10/16/2010	\$250. ⁰⁰	Advertising	
				\$		
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	
			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:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
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	
			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:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
5. Total only this Page					\$ 250. ⁰⁰	
6. Total of ALL CRO-1310 Pages					\$ 20,569. ⁵⁷	
<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) Ron Parrish for Sheriff					2. ID Number QD41EN	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input checked="" 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	
Jeremy Teetor for Co. Comm. 706 Huffman Mill Rd. Burlington, NC 27215 (336)			c. Level Registered (Specify)		e. Election Sum to Date \$ 100.00	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	D	07/20/2010	\$ 100.00		
				\$		
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	
Ann Vaughan for Co. Comm. 117 Cornwallis Ct. Mebane, NC 27302 (919) 563-3359			c. Level Registered (Specify)		e. Election Sum to Date \$ 100.00	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	D	07/20/2010	\$ 100.00		
				\$		
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	
Hunt Johnson for Clerk 1 Court Square Graham, NC 27253 (919) 563-2117			c. Level Registered (Specify)		e. Election Sum to Date \$ 50.00	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	D	08/21/2010	\$ 50.00		
				\$		
5. Total only this Page					\$ 250.00	
6. Total of ALL CRO-1310 Pages					\$ 20,569.57	
<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) Ron Parrish for Sheriff					2. ID Number QD41EN	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input checked="" 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	
Henry Vines for Co. Comm. 3450 Isley Dr. Snow Camp, NC 27349 (336) 227-1761			c. Level Registered (Specify)		e. Election Sum to Date \$ 75.00	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	check	D	09/14/2010	\$50.00		
1	check	D	10/2/2010	\$25.00		
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	
			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:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
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	
			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:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
5. Total only this Page					\$ 75.00	
6. Total of ALL CRO-1310 Pages					\$ 20,569.57	
<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)						

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)		2. ID Number	
Ron Parrish for Sheriff		QD41EN	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
Fred Long 804 Croftwood Dr. Gibsonville, NC 27249 (336) 449-9306		<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	
			d. Election Sum to Date
			\$ 100.00
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Hot Dogs, Buns, Chili, Condiments		07/17/2010	\$ 100.00
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
		<input 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	
			d. Election Sum to Date
			\$
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
		<input 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	
			d. Election Sum to Date
			\$
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
4. Total only this Page			\$ 100.00
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>			\$ 100.00