
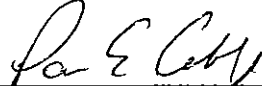


Disclosure Report Cover

08-12-10 P01:32 IN

Amendment
 Yes No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
 Do not use this form to update information.

1. Committee Information				
a. Full Name			c. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE			ALA-948F8M-C-001	
b. Mailing Address (include City, State and Zip Code)			d. Date Filed	
3530 CARDWELL DR BURLINGTON, NC 27215			08/11/2010	
			e. Phone Number	
			(336) 227-1495	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name	
2010	04/18/2010	06/30/2010	PAUL E COBB	
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 <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		
7. Type of Fund (if applicable, check one)		State/County <input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input checked="" type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
<input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		Referendum <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		
8. Number of Fundraisers this Report		10. Special Report Name		
3				
11. Account Information		11. Account Information		
a. Financial Institution Full Name		a. Financial Institution Full Name		
WACHOVIA				
b. Purpose	c. Account Code	b. Purpose	c. Account Code	
RUN CAMPAIGN	1			
	d. Period Begin Balance		d. Period Begin Balance	
	\$ 29,440.96		\$	
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.				
 Printed Name of Signer		 Signature of Appointed Treasurer		08/11/2010 Date
FOR OFFICE USE ONLY				
Date Received:	<u>8-12-10</u>	Employee:	<u>SH</u>	
Date Postmarked:	_____	Employee:	_____	
Date Scanned:	_____	Employee:	_____	
Date Data Entered:	_____	Employee:	_____	
Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> 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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE	2010 Second Quarter	ALA-948F8M-C-001	
Start of Election Cycle: January 1, <u>2007</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 29,440.96	\$ 20,771.98
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 1,493.00	\$ 1,548.00
6) Contributions from Individuals (CRO-1210)		\$ 17,474.96	\$ 67,878.53
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees (CRO-1230)		\$ 50.00	\$ 171.75
9) Loan Proceeds (CRO-1410)		\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 2.58	\$ 27.81
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)		\$ 7.74	\$ 52.69
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00	\$ 200.00
11c) Outside Sources of Income (CRO-1250)		\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 19,028.28	\$ 69,878.78
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 10,504.89	\$ 45,216.41
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 1,300.00	\$ 5,060.00
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 8.87	\$ 8.87
15) Loan Repayments (CRO-1420)		\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00	\$ 0.00
17) In-Kind Contributions (CRO-1510)		\$ 2,414.96	\$ 6,124.96
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 14,228.72	\$ 56,410.24
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 34,240.52	\$ 34,240.52
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0.00	
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 0.00	
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0.00	
24) Account Transfers Within the Committee (CRO-1720)		\$ 0.00	
25) Administrative Support (CRO-1710)		\$ 0.00	\$ 0.00
26) Forgiven Loans (CRO-1440)		\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0.00	\$ 0.00
28) Contributions to be Refunded (CRO-1215)		\$ 0.00	\$ 0.00

Aggregated Contributions from Individuals

Amendment

Yes No

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE				ALA-948F8M-C-001	
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/10/2010	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/12/2010	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		06/12/2010	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		05/28/2010	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/05/2010	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/12/2010	\$ 30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		04/23/2010	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		04/21/2010	\$ 40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		05/01/2010	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/21/2010	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		05/16/2010	\$ 30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/12/2010	\$ 15.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		06/12/2010	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/05/2010	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/05/2010	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		04/23/2010	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		05/10/2010	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		05/10/2010	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/12/2010	\$ 30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		06/12/2010	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/12/2010	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		05/05/2010	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/12/2010	\$ 50.00
4. Total only this Page					\$ 820.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 1,493.00

Aggregated Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE				ALA-948F8M-C-001	
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		05/01/2010	\$ 40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		05/05/2010	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/19/2010	\$ 36.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/19/2010	\$ 36.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		06/14/2010	\$ 15.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		06/19/2010	\$ 24.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		06/12/2010	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		05/05/2010	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		06/12/2010	\$ 15.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/21/2010	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/12/2010	\$ 30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		04/27/2010	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/11/2010	\$ 12.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/12/2010	\$ 30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		05/24/2010	\$ 30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/19/2010	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/19/2010	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		05/01/2010	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Check		06/12/2010	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/12/2010	\$ 35.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		06/12/2010	\$ 25.00
4. Total only this Page					\$ 673.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 1,493.00

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						ALA-948F8M-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ROBERT D ADAMS 5065 NC HWY 54 GRAHAM, NC 27253 (336) 227-0830				OWNER			
				c. Employer's Name/Specific Field			
				ADAMS TOWING & RECOVERY		e. Election Sum to Date	
						\$ 2,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	1	Check		04/23/2010		\$ 1,000.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JOHN BAKATASIAS 142 N GRAHAM-HOPEDALE RD BURLINGTON, NC 27217				OWNER			
				c. Employer's Name/Specific Field			
				WESTERN STEAK HOUSE		e. Election Sum to Date	
						\$ 450.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	1	In-Kind	FOOD	05/01/2010		\$ 450.00	
<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	
FRANK BELL 1411 BOONE RD BURLINGTON, NC 27217				CATTLE FARMER			
				c. Employer's Name/Specific Field			
				SELF EMPLOYED		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		06/12/2010		\$ 200.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 1,650.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 17,474.96	

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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						ALA-948F8M-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MAX G BRAXTON 9064 BRAXTON-CURL TRAIL GRAHAM, NC 27253				HVAC TECH			
				c. Employer's Name/Specific Field			
				UNCCCH			
						e. Election Sum to Date	
						\$ 429.93	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	In-Kind	VARIOUS SUPPLIES FOR FISH FRY	06/12/2010	\$ 59.93		
<input type="checkbox"/>	1	Check		06/14/2010	\$ 370.00		
<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	
LINDA J BRITT 1607 JOHN LANE EAST BURLINGTON, NC 27217				RETIRED			
				c. Employer's Name/Specific Field			
				NONE			
						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		06/12/2010	\$ 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	
TIMOTHY J BRITT 2673 FLEMING GRAHAM RD BURLINGTON, NC 27217				LAW ENFORCEMENT			
				c. Employer's Name/Specific Field			
				ALAMANCE COUNTY			
						e. Election Sum to Date	
						\$ 289.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	In-Kind	TABLES & CHAIRS	06/14/2010	\$ 130.00		
<input type="checkbox"/>	1	In-Kind	SUPPLIES FOR HOT DOG SUPPER	06/19/2010	\$ 159.00		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 918.93	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 17,474.96	

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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						ALA-948F8M-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
PETE K BURLESON 4758 FRIENDSHIP-PATTERSON MILL RD BURLINGTON, NC 27215				RETIRED			
				c. Employer's Name/Specific Field			
				NONE			
						e. Election Sum to Date	
						\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	Check		06/23/2010	\$ 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	
TOMMY COBLE 4357A GREENSBORO CHAPEL HILL RD. GRAHAM, NC 27253				CAR SALESMAN			
				c. Employer's Name/Specific Field			
				MIKE OWENS AUTO SALES			
						e. Election Sum to Date	
						\$ 350.00	
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		07/13/2009	\$ 100.00		
<input type="checkbox"/>	1	Check		04/26/2010	\$ 250.00		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
TOMMY COBLE 4357A GREENSBORO CHAPEL HILL RD GRAHAM, NC 27253				CAR SALESMAN			
				c. Employer's Name/Specific Field			
				MIKE OWENS AUTO SALES			
						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		06/06/2010	\$ 60.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 610.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 17,474.96	

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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						ALA-948F8M-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JAMES COPLAND 3025 N FAIRWAY DR BURLINGTON, NC 27215 (336) 226-0272				TEXTILES			
				c. Employer's Name/Specific Field			
				COPLAND FABRICS INC			
						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		05/10/2010	\$ 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	
EDWARD L DIXON 1682 DIXON LAMB RD GRAHAM, NC 27253				CATTLE FARMER			
				c. Employer's Name/Specific Field			
				SELF			
						e. Election Sum to Date	
						\$ 634.85	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	In-Kind	70 LBS FLOUNDER	06/20/2010	\$ 169.85		
<input type="checkbox"/>	1	Check		06/20/2010	\$ 465.00		
<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	
JOHN M GLENN 1540 WEST DAVIS ST BURLINGTON, NC 27215				OWNER			
				c. Employer's Name/Specific Field			
				JOHN M GLENN BUILDERS			
						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		06/08/2010	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1,134.85	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 17,474.96	

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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						ALA-948F8M-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MONTE HOLLAND 1926 HILLDALE DR BURLINGTON, NC 27215 (336) 227-2270				LAW ENFORCEMENT			
				c. Employer's Name/Specific Field			
				ALAMANCE COUNTY		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		05/05/2010	\$ 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	
MICHAEL L ISLEY 2062 NOTTINGHAM LANE BURLINGTON, NC 27215				LIFE INSURANCE RECRUITER			
				c. Employer's Name/Specific Field			
				COLONIAL LIFE		e. Election Sum to Date	
						\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	Check		05/01/2010	\$ 150.00		
<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	
BONNIE JOHNSON 1402 CHERRY LANE GRAHAM, NC 27253 (336) 578-3691				OWNER			
				c. Employer's Name/Specific Field			
				J & J ACCOUNTING SERVICE INC		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		04/21/2010	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 500.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 17,474.96	

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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						ALA-948F8M-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
KENDALL D JOHNSON 8354 MANDALE RD GRAHAM, NC 27253				RETIRE			
				c. Employer's Name/Specific Field			
				NONE		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		05/01/2010	\$ 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	
LARRY W JOHNSON 9151-C LINDLEY MILL RD SNOW CAMP, NC 27349				RETIRE			
				c. Employer's Name/Specific Field			
				NONE		e. Election Sum to Date	
						\$ 601.26	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	In-Kind	COOKING SUPPLIES	06/19/2010	\$ 236.26		
<input type="checkbox"/>	1	Check		06/19/2010	\$ 365.00		
<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	
MARK STEVEN KAPLER 3246 WOODSIDE AVE GRAHAM, NC 27253				OWNER			
				c. Employer's Name/Specific Field			
				ALAMANCE TOWING		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		04/19/2010	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 951.26	
5. Total of ALL CRO-1210 Pages						\$ 17,474.96	
<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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE					ALA-948F8M-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
RONNIE G KIRKPATRICK 3536 ALAMANCE RD BURLINGTON, NC 27215 (336) 584-1745			OWNER			
			c. Employer's Name/Specific Field			
			TRIANGLE GRADING AND PAVING INC		e. Election Sum to Date	
					\$ 4,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		04/26/2010	\$ 4,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
STEVE LOVE 2462 MAJOR HILL RD GRAHAM, NC 27253			POULTRY FARMER			
			c. Employer's Name/Specific Field			
			SELF		e. Election Sum to Date	
					\$ 242.13	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	In-Kind	FOOD FOR FISH FYR	06/19/2010	\$ 242.13	
<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	
LOUIS K LUDWIG 2144 CARROLL DR ELON, NC 27244			RETIRED			
			c. Employer's Name/Specific Field			
			NONE		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		05/01/2010	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 4,342.13	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 17,474.96	

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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						ALA-948F8M-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JUSTIN ERIC MCPHERSON 7329 BEALE RD SNOW CAMP, NC 27349				OWNER			
				c. Employer's Name/Specific Field			
				MAC TIRE		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		06/22/2010	\$ 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	
MORRIS MCPHERSON 1226 WESTBROOK AVE ELON, NC 27244				RETIRED			
				c. Employer's Name/Specific Field			
				NONE		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		05/11/2010	\$ 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	
JOHN MOON 748 LOUIS GRAHAM RD NEBANE, NC 27302				ATHLETIC DIRECTOR			
				c. Employer's Name/Specific Field			
				ALAMANCE BURLINGTON SCHOOL SYSTEM		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		05/07/2010	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 550.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 17,474.96	

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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						ALA-948F8M-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
LARRY MORRIS 3140 MORRIS TRAIL SNOW CAMP, NC 27349				OWNER			
				c. Employer's Name/Specific Field			
				LARRY MORRIS TRUCKING		e. Election Sum to Date	
						\$ 151.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	In-Kind	CHICKEN	06/01/2010	\$ 151.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DAVID MORTON 1509 CHARLEIGH COURT ELON, NC 27244				INVESTMENTS			
				c. Employer's Name/Specific Field			
				SELF EMPLOYED		e. Election Sum to Date	
						\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	Check		06/07/2010	\$ 1,000.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JAMES D MOSER 1772 BELL3MONT ALAMANCE RDE BURLINGTON, NC 27215				CPA			
				c. Employer's Name/Specific Field			
				GILLIAM COBLE MOSER LLC		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		05/10/2010	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1,251.00	
5. Total of ALL CRO-1210 Pages						\$ 17,474.96	
<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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						ALA-948F8M-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
STEVEN MOSS 2608 BARBER RD ELON, NC 27244 (336) 584-9638				OWNER			
				c. Employer's Name/Specific Field			
				WILSON TIRE SERVICE			
						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		05/01/2010	\$ 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	
MICHAEL OWENS 4716 GREEN HILL RD SNOW CAMP, NC 27349				OWNER			
				c. Employer's Name/Specific Field			
				MIKE OWENS AUTO SALES			
						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		05/06/2010	\$ 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	
STEPHEN DALE PHILLIPS 740 LOOP RD BURLINGTON, NC 27217				OWNER			
				c. Employer's Name/Specific Field			
				DIESEL ENGINE REPAIR			
						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		05/10/2010	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 600.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 17,474.96	

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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						ALA-948F8M-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
BYNUM D SHARPE 6122 S NC HWY 62 BURLINGTON, NC 27215 (336) 227-8537			OWNER				
			c. Employer's Name/Specific Field		e. Election Sum to Date		
			DOUG SHARPE CAROLINA HOMES		\$ 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		05/17/2010	\$ 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		
DONALD E SMITH 729 ENGLEMAN AVE BURLINGTON, NC 27215			RETIRED				
			c. Employer's Name/Specific Field		e. Election Sum to Date		
			NONE		\$ 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		06/29/2010	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
RICHARD L SMITH 4321 MILLSTONE PLACE BURLINGTON, NC 27215			RETIRED				
			c. Employer's Name/Specific Field		e. Election Sum to Date		
			NONE		\$ 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		04/30/2010	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 450.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 17,474.96	

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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						ALA-948F8M-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
TIMOTHY SPEARS 1018 EDITH STREET BURLINGTON, NC 27215				OWNER			
				c. Employer's Name/Specific Field			
				SUPERIOR TRAILER SALES		e. Election Sum to Date	
						\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	1	Check		04/20/2010		\$ 500.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
RONNIE STALLINGS 632 FERGUSON RD BURLINGTON, NC 27217				OWNER			
				c. Employer's Name/Specific Field			
				CAROLINA CHEM STRIP		e. Election Sum to Date	
						\$ 450.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	1	In-Kind	RENTAL TABLE & CHAIRS FOR SHERIFF	05/01/2010		\$ 450.00	
<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	
THOMAS LACY TEAGUE JR 325 ARBOR ROAD WINSTON SALEM, NC 27104				OWNER			
				c. Employer's Name/Specific Field			
				SALEM LEASING CORPORATION		e. Election Sum to Date	
						\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	1	Check		04/22/2010		\$ 1,000.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 1,950.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 17,474.96	

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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						ALA-948F8M-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
RANDY THOMAS 9322 PERRY RD GRAHAM, NC 27253			CARPENTER				
			c. Employer's Name/Specific Field				
			SELF EMPLOYED		e. Election Sum to Date		
					\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	Check		06/12/2010	\$ 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		
WILLIAM DAVID VAUGHN 1046 BOB VAUGHN LANE SWEPSONVILLE, NC 27359 (336) 212-3282			RETIRED				
			c. Employer's Name/Specific Field				
			NONE		e. Election Sum to Date		
					\$ 800.00		
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		04/28/2010	\$ 500.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
GLENDA WALKER 4630 BLANCHARD RD BURLINGTON, NC 27217			RETIRED				
			c. Employer's Name/Specific Field				
			NONE		e. Election Sum to Date		
					\$ 300.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	Check		06/19/2010	\$ 300.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 900.00	
5. Total of ALL CRO-1210 Pages						\$ 17,474.96	
<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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						ALA-948F8M-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JAMES WALKER 7 HICKORY DE ELON, NC 27244				ATTORNEY			
				c. Employer's Name/Specific Field			
				SELF EMPLOYED			
						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		04/28/2010	\$ 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	
STEVE WALL 3538 SWEPSONVILLE-SAXAPAHAW RD GRAHAM, NC 27253				OWNER			
				c. Employer's Name/Specific Field			
				STEVE'S GARDEN FRESH MARKET			
						e. Election Sum to Date	
						\$ 366.79	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	In-Kind	FOOD & UTENSILS FOR EATING	06/11/2010	\$ 366.79		
<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	
JERRY L WARREN 2307 DEEP CREEK CHURCH RD BURLINGTON, NC 27217 (336) 578-2931				OWNER			
				c. Employer's Name/Specific Field			
				C & J UTILITIES			
						e. Election Sum to Date	
						\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	Check		05/10/2010	\$ 1,000.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1,466.79	
5. Total of ALL CRO-1210 Pages						\$ 17,474.96	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

Contributions from Individuals

Amendment

Yes No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						ALA-948F8M-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
RON WRIGHTENBERRY 1735 JOHNSON RD BURLINGTON, NC 27217				OWNER			
				c. Employer's Name/Specific Field			
				COMPLETE LAWN SERVICE		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		06/18/2010	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 200.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 17,474.96	

Contributions from Other Political Committees Pg 1 of 1

Amendment
 Yes No

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

1. Committee Full Name (and Fund if applicable)			2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE			ALA-948F8M-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee		d. Comments
PARKER FOR NC HOUSE 1617 ST ANDREWS ST MEBANE, NC 27302		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		
		c. Level Registered (Specify)		
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
				e. Election Sum to Date
				\$ 150.00
f. Account Code	g. Form of Payment	h. In-kind Description	i. Date (mm/dd/yyyy)	j. Amount
1	Check		05/01/2010	\$ 50.00
				\$
				\$
4. Total only this Page				\$ 50.00
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$ 50.00

Refunds/Reimbursements To the Committee

Pg 1 of 1

Amendment

Yes No

Use this form to report refunds received by the committee or reimbursements for a previous expenditure.

1. Committee Full Name (and Fund if applicable)			2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMITTEE			ALA-948F8M-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		g. Comments
WACHOVIA MAIN ST BURLINGTON, NC 27215		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered (Specify)		
		<input type="checkbox"/> Federal <input type="checkbox"/> County:		h. Original Expenditure Date
		<input type="checkbox"/> State <input type="checkbox"/> Municipality:		05/20/2010
				i. Original Expenditure Amt
				\$ 72.73
b. Job Title/Profession	c. Employer's Name/Specific Field	f. Purpose		j. Election Sum to Date
		REFUND OF WITHHOLDING TAX		\$ 70.89
k. Account Code	l. Form of Payment	m. In-Kind Description	n. Date (mm/dd/yyyy)	o. Amount
I	Draft		06/25/2010	\$ 2.58
4. Total only this Page				\$ 2.58
5. Total of ALL CRO-1240 Pages				\$ 2.58
<i>(This line must be on line 10 of Detailed Summary Page CRO-1100)</i>				

Other Receipt Sources

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

1. Committee Full Name (and Fund if applicable)				2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE				ALA-948F8M-C-001	
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>					
<input checked="" type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input type="checkbox"/> Outside Sources of Income					
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
WACHOVIA MAIN ST BURLINGTON, NC 27215			c. Outside Source Explanation	e. Election Sum to Date \$ 47.19	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
1	Draft		04/30/2010	\$ 2.24	
				\$	
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
WACHOVIA MAIN ST BURLINGTON, NC 27215			c. Outside Source Explanation	e. Election Sum to Date \$ 5.50	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
1	Draft		05/28/2010	\$ 2.46	
1	Draft		06/30/2010	\$ 3.04	
5. Total only this Page				\$ 7.74	
6. Total of ALL CRO-1250 Pages				\$ 7.74	
<i>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</i> <i>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</i> <i>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</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)						2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						ALA-948F8M-C-001	
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	
ALAMANCE COUNTY REPUBLICAN WOMEN 413 SMITH ST BURLINGTON, NC 27217							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				Alamance		\$ 1,000.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	G	05/04/2010	\$ 1,000.00			
				\$			
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	
PARKER FOR NC HOUSE 1617 SAINT ANDREWS DRIVE MEBANE, NC 27302							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 300.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	D	06/30/2010	\$ 300.00	ADVERTISING		
				\$			
5. Total only this Page						\$ 1,300.00	
6. Total of ALL CRO-1310 Pages						\$ 1,300.00	
<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)							

Disbursements

Amendment

Pg 1 of 6 Yes No

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

1. Committee Full Name (and Fund if applicable) JOHNSON FOR SHERIFF ELECTION COMMITTEE	2. ID Number ALA-948F8M-C-001
--	---

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*
 Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> ALAMANCE NEWS 114 WEST ELM ST GRAHAM, NC 27253	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
		e. Election Sum to Date \$ 1,087.70

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	A	04/26/2010	\$ 587.70	ADVERTISING
				\$	

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> APPLE TIME INC PO BOX 1210 CANTON, TX 75103	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
		e. Election Sum to Date \$ 5,847.23

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	A	06/07/2010	\$ 960.99	ADERTISING
1	Check	A	06/30/2010	\$ 4,886.24	ADVERTISING CUPS, PENS, ETC

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> CORNERSTONE COMMUNITY CHURCH SAXAPAHAW, NC 27340	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 \$ 100.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	A	04/27/2010	\$ 100.00	GOLF SPONSORSHIP
				\$	

5. Total only this Page	\$ 6,534.93
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>	\$ 10,504.89

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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						ALA-948F8M-C-001	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ELI WHITNEY VFD 7618 SOUTH NC HGH 87 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:			
						\$ 200.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	C	06/30/2010	\$ 200.00	BUILDING RENTAL		
				\$			
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	
AMANDA GUTHRIE 3333 BLUE MOON TRAIL 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:			
						\$ 105.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	A	05/07/2010	\$ 105.00	ART WORK FOR ADS		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
INTERNATIONAL MINUTE PRESS 1143-F ST MARKS CHURCH RD BURLINGTON, NC 27215							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 322.39	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	B	05/06/2010	\$ 322.39	LETTERHEAD & ENVELOPES		
				\$			
5. Total only this Page						\$ 627.39	
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)						\$ 10,504.89	
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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						ALA-948F8M-C-001	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<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	
KENNETH POOLE 102 TARLETON AVE BURLINGTON, NC 27215							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 1,050.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
I	Check	A	04/27/2010	\$ 350.00	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	
MEBANE ENTERPRISE 106 N FOURTH ST MEBANE, NC 27302							
				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:		\$ 405.73	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	A	04/26/2010	\$ 405.73	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	
MOORES CHAPEL BAPTIST CHURCH PO BOX 55 SAXAPAHAW, NC 27430							
				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:		\$ 200.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
I	Check	O	04/27/2010	\$ 100.00	CONTRIBUTION		
				\$			
5. Total only this Page						\$ 855.73	
6. Total of ALL CRO-1310 Pages						\$ 10,504.89	
(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)							
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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						ALA-948F8M-C-001
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
<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
PIEDMONT CAROLINA AMERICAN RED CROSS 511 WEST DAVIS ST BURLINGTON, NC 27215						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County:		
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 1,070.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	O	04/19/2010	\$ 70.00	CONTRIBUTION	
				\$		
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
RELAY FOR LIFE 4 OAK BRAHCH GREENSBORO, NC 27407						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County:		
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 100.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	O	04/19/2010	\$ 100.00	CONTRIBUTION	
				\$		
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
SHS ATHLETICS 631 SOUTHERN HIGH SCHOOL RD GRAHAM, NC 27253						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County:		
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 1,050.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	AO	05/07/2010	\$ 100.00	HOLE SPONSOR	
1	Check	A	05/10/2010	\$ 200.00	GOLF TOURNAMENT	
5. Total only this Page						\$ 470.00
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)						\$ 10,504.89
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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						ALA-948F8M-C-001
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
SHS ATHLETICS 631 SOUTHERN HIGH SCHOOL RD GRAHAM, NC 27253				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 1,050.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	A	06/30/2010	\$ 750.00	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
TIMES NEWS 707 SOUTH MAIN ST BURLINGTON, NC 27215				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 5,361.96
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	A	04/30/2010	\$ 1,062.11	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
U S POST OFFICE SOUTH MARSHALL ST GREAHAM, NC 27253				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
						\$ 368.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	I	04/21/2010	\$ 132.00		
				\$		
5. Total only this Page						\$ 1,944.11
6. Total of ALL CRO-1310 Pages						\$ 10,504.89
(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)						
7. Purpose Codes (List detailed expenditure code in (h.) above)						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund
O* Other						
* Codes require detailed explanation in required remarks field (k)						

Disbursements

Amendment

Pg 6 of 6 Yes No

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE				ALA-948F8M-C-001	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
WACHOVIA MAIN ST BURLINGTON, NC 27215					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Sum to Date
					\$ 70.89
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Draft	K	05/20/2010	\$ 72.73	CHECK PRINTING
				\$	
5. Total only this Page					\$ 72.73
6. Total of ALL CRO-1310 Pages					\$ 10,504.89
<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)					

Aggregated Non-Media Expenditures

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

1. Committee Full Name (and Fund if applicable)				2. ID Number		
JOHNSON FOR SHERIFF ELECTION COMITTEE				ALA-948F8M-C-001		
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Draft	K	05/14/2010	\$ 7.50	BANK CHARGE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Draft	K	04/30/2010	\$ 0.63	BANK CHARGE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	Draft	K	05/28/2010	\$ 0.74	BANK CHARGE
4. Total only this Page					\$	8.87
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$	8.87
6. Purpose Codes (List detailed expenditure codes in (d) above)						
B* - Printing		C* - Fundraising		D - To Another Candidate		
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donations to Legal Expense Fund
O* - Other						
* Codes require detailed explanation in required remarks field (g)						

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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE		ALA-948F8M-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
JOHN BAKATASIAS 142 N GRAHAM-HOPEDALE RD BURLINGTON, NC 27217		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 450.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD		05/01/2010	\$ 450.00
			\$
			\$
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	
MAX G BRAXTON 9064 BRAXTON-CURL TRAIL GRAHAM, NC 27253		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 429.93	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
VARIOUS SUPPLIES FOR FISH FRY		06/12/2010	\$ 59.93
			\$
			\$
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	
TIMOTHY J BRITT 2673 FLEMING GRAHAM RD BURLINGTON, NC 27217		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 289.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
TABLES & CHAIRS		06/14/2010	\$ 130.00
SUPPLIES FOR HOT DOG SUPPER		06/19/2010	\$ 159.00
			\$
4. Total only this Page		\$ 798.93	
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 2,414.96	

In-Kind Contributions

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1. Committee Full Name (and Fund if applicable)		2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE		ALA-948F8M-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
EDWARD L DIXON 1682 DIXON LAMB RD GRAHAM, NC 27253		<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	
		\$	634.85
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
70 LBS FLOUNDER		06/20/2010	\$ 169.85
			\$
			\$
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
LARRY W JOHNSON 9151-C LINDLEY MILL RD SNOW CAMP, NC 27349		<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	
		\$	601.26
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
COOKING SUPPLIES		06/19/2010	\$ 236.26
			\$
			\$
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
STEVE LOVE 2462 MAJOR HILL RD GRAHAM, NC 27253		<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	
		\$	242.13
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD FOR FISH FYR		06/19/2010	\$ 242.13
			\$
			\$
4. Total only this Page		\$	648.24
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$	2,414.96

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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE		ALA-948F8M-C-001	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
LARRY MORRIS 3140 MORRIS TRAIL SNOW CAMP, NC 27349		<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	
		\$	151.00
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
CHICKEN		06/01/2010	\$ 151.00
			\$
			\$
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
RONNIE STALLINGS 632 FERGUSON RD BURLINGTON, NC 27217		<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	
		\$	450.00
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
RENTAL TABLE & CHAIRS FOR SHERIFF APPRECIATION DINNER		05/01/2010	\$ 450.00
			\$
			\$
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
STEVE WALL 3538 SWEPSONVILLE-SAXAPAHAW RD GRAHAM, NC 27253		<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	
		\$	366.79
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD & UTENSILS FOR EATING		06/11/2010	\$ 366.79
			\$
			\$
4. Total only this Page		\$	967.79
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$	2,414.96