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.

	remite de	active mi	OIMETTION.		Name of the last	VONE CHIEF				
1. Committee In a. Full Name	formation								T	
	D CLIEDIE	P PI P/	CTION COL	(TT)	TEN				c. ID Number	
JOHNSON FO									ALA-948F8M-C-001	
b. Mailing Addre		City, S	tate and Zip	Coc	le)				d. Date Filed	
3530 CARDWELL DR BURLINGTON, NC 27215									01/07/2011	
	,								e. Phone Number	
									(336) 227-1495	
2. Report Year	3. Period S	Start D	ate (mm/dd/y	y)	4. Period	End Date	(mm/dd/yy	5. Treasu	urer Full Name	
2010		10/17/	2010			12/31/201	0	PAUL E	COBB	
6. Type of Comn	nittee (Che	ck One		9.	Type of Re	port (chec	k only on	e type of re	port from one category)	
X Candidate Cam	npaign	Par			nicipal		State/Cou		Referendum	
□ PAC		Re	feren dum		Organizatio	onal	Organ	izational	☐ Organizational	
Independent E	xpenditure	☐ Joi	nt Fundraiser		Thirty-five	e day	Quarte		Pre-referendum	
Legal Expense	Fund	_		П	Pre-primar	y		rst	Final	
					Pre-electio		☐ Se	cond	Supplemental Final	
7. Type of Fund	(if appli	cable, c	heck one)	lī	Pre-runoff			hird	Annual	
☐ Booster Fund	10 11	1		-	Semi-annua			ourth	Special	
☐ Building Fund					Mid Ye		Sem i-a		Special	
				H	Year E		21/20/20/20/20/20	id Year	10 0 1 10 10	
Other:				H	Final	nu .		ear End	10. Special Report Name	
		a: D					Count.	ear End		
8. Number of Fu	nuraisers	mis Re	port	Ш	Special		Final		1	
	0						☐ Specia	Ļ		
11. Account Info						11. Accou	ınt İnforn	ation		
a. Financial Insti	tution Full	Name				a. Financi	al Institut	ion Full Na	me	
WACHOVIA	((#)									
b. Purpose			c. Account (ode		b. Purpose	;		c. Account Code	
RUN CAMPAIO	GN			1						
			1.0 10		P. 1					
			d. Period Be						d. Period Begin Balance	
			\$ 8199	1.0	ſ				\$	
CERTIFICATIO	N									
163 of the NC C	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. On 1/07/2011									
Pr	inted Name	of Signer		-	Sign	ature of App	pointed Ifre	asurer	Date	
FOR OFFICE US	E ONLY									
Date Received	d:	<u>J</u>	G	_	Emplo	vee: 1-	10-11	<u>De</u>	elivery Method Normal Mail	
Date Postmar	ked:			_	Employ	vee:	-	- □	Registered Mail Hand Delivered	
Date Scanned	i :	-		_	Employ	vee:		_ 0	Electronically Filed	
Date Data Ent	tered:			_	Employ	ree:		_ 0	Signer has not received mandatory training	
Please Note	: This form	ncanno	t be used to	ame	end comm	ittee inform	nation suc	h as the cou	mmittee address, treasurer,	
			asurer, cust							
Yo									ittee changes.	

Amendment ☐ Yes No No

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

Committee Full Name (and Fund if applicable)	2. Type of Re	port		3. ID I	Number
JOHNSON FOR SHERIFF ELECTION COMITTEE	2010 Fourth	Quarter		ALA	-948F8M-C-001
Start of Election Cycle: January 1, 2007	•	II.	al this	i	Total this Election Cycle
4) Cash on Hand at Start		\$	8,199.0	$\overline{}$	20,771.98
RECEIPTS	•				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	0.0	0 \$	3,968.00
6) Contributions from Individuals	(CRO-1210)	\$	2,300.0	0 \$	85,279.53
7) Contributions from Political Party Committees	(CRO-1220)	\$	0.0	0 \$	500.00
8) Contributions from Other Political Committees	(CRO-1230)	\$	500.0	0 \$	671.75
9) Loan Proceeds	(CRO-1410)	\$	0.0	0 \$	0.00
0) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	207.9	5 \$	235.76
1) Other Receipt Sources					
11a) Interest on Bank Accounts	(CRO-1250)	\$	1.0		53.69
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	100.0	0 \$	300.00
11c) Outside Sources of Income	(CRO-1250)	\$	0.0	0 \$	5.14
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	0.00	3 \$	0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	0.00) \$	0.00
2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	,11d and 11e)	\$	3,108.9	5 \$	91,013.87
<u>EXPENDITURES</u>					
3) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	9,079.45	5 \$	97,608.58
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	0.00) \$	5,240.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$	0.00) \$	0.00
4) Aggregated Non-Media Expenditures	(CRO-1315)	\$	137.54	\$	205.34
5) Loan Repayments	(CRO-1420)	\$	0.00	\$	0.00
6) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	0.00	\$	0.00
7) In-Kind Contributions	(CRO-1510)	\$	1,500.00		8,140.96
8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15	, 16 and 17)	\$	10,716.99	\$	111,194.88
9) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$	590.97		590.97
ADDITIONAL INFORMATION	Γ		_		
0) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00		
1) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	0.00		aff.s.
2) Debts and Obligations owed by the Committee	(CRO-1610)	\$	0.00		
3) Debts and Obligations owed to the Committee	(CRO-1620)	\$	0.00		
4) Account Transfers Within the Committee	(CRO-1720)	\$	0.00		
5) Administrative Support	(CRO-1710)	\$	0.00	\$	0.00
6) Forgiven Loans	(CRO-1440)	\$	0.00	\$	0.00
7) 48-Hour Notice Reports Sum	(CRO-2220)	\$	0.00	\$	0.00
8) Contributions to be Refunded	(CRO-1215)	\$	0.00	\$	0.00

Contributions from Individuals

Amendment 2 ☐ Yes Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Com	mittee Full Name	(and Fund if applicab	de)			2.	ID Number	
JOHNS	SON FOR SHERI	IFF ELECTION CON	MITTEE			A	ALA-948F8M-C-001	
3. Cont	ributor Informati	ion		Add 🔲 R	emove			
a. Full (Name, Mailing Ad	dress & Phone		b. Job Title/P	rofe ssi on	d. (Comments	
(inclu	ude city, state, & z	.ip)		OWNER SE	ERIFF'S JOURNAL			
JANE?	Г ВЕАТҮ			(ADVERTIS	SING)	1		
835 E	AGLES NEST RO	OAD		c. Employer's	s Name/Specific Field	_		
WAY	VESVILLE, NC	28786		SELF EMP	LOYED	<u></u>		
				1		e. I	Dection Sum to Date	
						\$	1,500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)	<u></u>	k. Amount	
]	In-Kind	BAND OF OZ FOR CAMPA	, ,	11/02/2010		\$ 1,500.00	
							\$	
							\$	
	ributor Informati				emove			
ľ	Name, Mailing Ado			b. Job Title/P	rofe ssi on	d. (C'omments	
	ide city, state, & z	ip)		ONER COB	LE TRENCH			
1	AS COBLE			SAFETY	N // 15 57 77	-		
	OWNING COU	RT			Name/Specific Field	-		
GRAH	AM, NC 27253			SEIf Employed			e. Election Sum to Date	
					•	e. 1	Hecmon Sum to Date	
						\$	500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
	1	Check			10/28/2010		\$ 500.00	
				· <u>. </u>			\$	
							\$	
	ributor Informatio				emove			
ļ.	lame, Mailing Add			b. Job Title/P	rofe ssion	d. C	Comments	
	ide city, state, & zi	ip)		EXECUTIV	E			
	H LOVE			a Employente	Name/Specific Field	ł		
	EST WILLOWBE					ŀ		
BUKLI	NGTON, NC 27	215		W E LOVE		e. F	dection Sum to Date	
			i	ASSOCIATI	ES, INC	\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	l cription	j. Date (mm/dd/yyyy)		k. Amount	
	1	Check			10/20/2010		\$ 150.00	
			-				\$	
					<u> </u>		\$	
l	1 1 11 15							
	al only this Pag	-				\$	2,150.00	
	al of ALL CR(_			:	\$	2,300.00	
(This li	ine must be on line (6 of Detailed Summary P	age CRO-1100)		:	Ψ	2,300.00	

C_{Δ}	ntributions	from	Individuals
υ	HII IVUUVIIS	пош	muividuais

Amendment

Contributions from Individuals

Pg 2 of 2 Yes

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 COMITTEE						ALA-948F8M-C-00			
3. Cont	ributor Informati	on		Add 🔲	Remove	<u> </u>			
a. Full N	lame, Mailing Ado	lress & Phone	•	b. Job Title	Profession	d. Comme	nts		
(inclu	de city, state, & zi	ip)		HOUSEWI	FE				
KIMBE	ERLY C LOVE								
536 WI	EST WILLOWBI	ROOK DR		c. Employer	's Name/Specific Field				
BURLI	NGTON, NC 27	215		N/A					
				}		e. Election Sum to Date			
						\$	250.00		
. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	scription	j. Date (mm/dd/yyyy)	k. Am	ount		
	1	Check			10/20/2010	\$	150.00		
						\$			
				~		\$			
1. Tota	d only this Pa	ge				\$	150.00		
	nl of ALL CRO	O-1210 Pages 6 of Detailed Summary F	Page CRO-1100)			\$	2,300.00		
RO.12		····		and of Electio		·	Varil 200		

CRO-1210

NC State Board of Elections

April 2007

Contributi	ions from Othe	r Dolitical	Committees	1	Ame	ndment
	ions from Othe				<u>l</u> 🗆	Yes 🔀 No
	report contributions		date, referendum or F	AC committees	In 10 M	
					2. ID Nu	nber
JOHNSON FO	R SHERIFF ELECTI	ON COMITTEE	3		ALA-9	48F8M-C-001
3. Contributor]	Information		☐ Add ☐ F	Remove	<u> </u>	
a. Full Name, M	ailing Address & Phon	e	b. Type of Commi	ttee	d. Commo	ents
(include city,	state, & zip)		Candidate	X PAC	 	
NORTH CARG	OLINA HOME BUIL	DERS	Referendum	_		
PO BOX 99090		DLKS	c. Level Registere	d (Specify)	1	
RALEIGH, NO			Federal	County:	7	
, 10122, 110	2.02.		X State	Municipality:	e. Election	Sum to Date
					\$	500.00
f. Account Code	g. Form of Payment	h. In-Kind Desc	ription	i. Date (mm/dd/y	yyy) j. Am	ount
1	Check			10/21/2010	\$	500.00
					\$	_
					\$	
4. Total only thi	s Page			_	\$	\$500.00
	CRO-1230 Pages be on line 8 of Detailed S	ummary Page CRO)-1100)		\$	\$500.00
CRO-1230	-	NC Sta	nte Board of Elections			April 2007

		Amendment	
Refunds/Reimbursements To the Committee	Pg <u> </u> of	1 Ves X No	0

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 П Add 🔲 Remove a. Full Name, Mailing Address & Phone d. Type of Committee g. Comments (include city, state, & zip) PAC Candidate Referendum Party MEBANE ENTERPRISE e. Level Registered (Specify) h. Original Expenditure Date 106 N FOURTH ST Federal County: MEBANE, NC 27302 08/03/2010 Municipality: State i. O riginal Expenditure Amt 5.000.00 b. Job Title/Profession c. Employer's Name/Specific Field f. Purpose . Election Sum to Date REFUND FOR ADVERTISING 0.00 k. Account Code 1. Form of Payment m. In-Kind Description n. Date (mm/dd/yyyy) o. Amount Check 11/19/2010 \$ 179.45 3. Contributor Information Add 🔲 Remove a. Full Name, Mailing Address & Phone d. Type of Committee g. Comments (include city, state, & zip) Candidate PAC Party Referendum TIME WARNER CABLE e. Level Registered (Specify) h. Original Expenditure Date 316 HUFFMAN MILL RD Federal County: BURLINGTON, NC 27215 09/28/2010 ☐ State Municipality: i. Original Expenditure Amt 2,971.60 b. Job Title/Profession c. Employer's Name/Specific Field f. Purpose j. Election Sum to Date OVERPAYMENT FOR 0.00 **ADVERTISING** k. Account Code l. Form of Payment m. In-Kind Description n. Date (mm/dd/yyyy) o. Amount Check 12/14/2010 \$ 8.50 3. Contributor Information П П Remove Add a. Full Name, Mailing Address & Phone d. Type of Committee g. Comments (include city, state, & zip) Candidate PAC ■ Referendum Party WACHOVIA e. Level Registered (Specify) h. Original Expenditure Date MAIN ST County: Federal BURLINGTON, NC 27215 12/31/2008 ☐ State Municipality i. O riginal Expenditure Amt 3.24 b. Job Title/Profession c. Employer's Name/Specific Field f. Purpose j. Election Sum to Date REFUND BANK SERVICE 0.00 CHARGES k. Account Code 1. Form of Payment m. In-Kind Description n. Date (mm/dd/yyyy) o. Amount 1 Draft 12/17/2010 \$ 20.00 207.95 4. Total only this Page \$ 5. Total of ALL CRO-1240 Pages \$ 207.95

(This line must be on line 10 of Detailed Summary Page CRO-1100)

Jse this form to	eipt Sources report income not rep		orm. i.e. ir					Amendm Yes t contribu	No No
. Committee Fu	ull Name (and Fund if	applicable)					2.]	D Numbe	Г
OHNSON FO	R SHERIFF ELECTION	ON COMITTEE	,				A	LA-948F	'8M-C-001
. Type of Recei	<u> </u>	se separate CRO-1 butions from Not-for-							;
. Contributor I	nformation		Add	Remo	ve				
. Full Name, Ma	iling Address & Phon	2	b. Not-for-Profit Federal ID# d. Comments						 ·
(include city, s	state, & zip)							···	
BURLINGTON	I SHRINE CLUB								
PLANTATION	DRIVE		c. Outsi	de Sourc	e Expl	anatio	n		
BURLINGTON	I, NC 27215								
							e. F	lection Su	ım to Date
							\$		100.00
Account Code	g. Form of Payment	h. In-Kind Descrip	tion	i.	Date (mm/de	l/yyyy)	j. Amoun	t
1	Check				10/	18/20	10	¢	100.00

(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)

CRO-1250

NC State Board of Elections

December 2007

5. Total only this Page

6. Total of ALL CRO-1250 Pages

(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)

(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)

\$

\$

\$

100.00

100.00

				Amendment						
Pg	1	of	1	☐ Yes	X No					

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

L. Committee Fr	ıll Name (and Fund if	annlicable)				15	D Numb	ar
	R SHERIFF ELECTION					+		· · · · · · · · · · · · · · · · · · ·
		ON COMITTEE				A	LA-948.	F8M-C-001
3. Type of Recei					or each type of Rec			
X Interest	Contri	butions from Not-for-	Profit C	rgan i	zations 🔲 Outside Sc	urce.	s of Incom	e
4. Contributor I	nformation		Add		Remove			
a. Full Name, Ma	iling Address & Phone		b. Not-	for-F	rofit Federal ID#	d. C	.'ommen	s
(include city, s	state, & zip)							
WACHOVIA E	BANK							
233 SOUTH M	AIN ST		c. Out:	ide 8	Source Explanation			
GRAHAM, NC	27253							
						e. I	dection S	um to Date
						\$		5.83
f. Account Code	g. Form of Payment	h. In-Kind Descrip	otion		i. Date (mm/dd/y)	yy)	j. Amou	1t
1	Draft				10/29/2010		\$	0.69
		<u> </u>				 -	-	
							\$	
4. Contributor b	nformation		Add		Remove		· · · · · · · · · · · · · · · · · · ·	
a. Fuli Name, Ma	iling Address & Phone		b. Not-	for-P	rofit Federal ID #	d. C	omment	s
(include city, s	tate, & zip)							
WACHOVIA B	ANK							
233 SOUTH M.	AIN ST		c. Outs	ide 5	Source Explanation			
GRAHAM, NC	27253							
						e. Election Sum to Date		
		:				\$		0.31
f. Account Code	g. Form of Payment	h. In-Kind Descrip	tion		i. Date (mm/dd/yy	уу)	j. Amour	ıt
1	Draft				11/30/2010		\$	0.25
1	Draft				12/31/2010		\$	0.06
5. Total only	this Page	· · · · · · · · · · · · · · · · · · ·				\$		1.00
(This line goes in (This line goes in (This line goes in	L CRO-1250 Pag uline 11a of Detailed Sun uline 11b of Detailed Sun uline 11c of Detailed Sun	nmary Page CRO-110 nmary Page CRO-110 nmary Page CRO-110	0 if Not- 0 if Outs	for-P ide S	ources of Income)	\$		1.00
CDO 1250		MC State Day	CT1					

				Amendment							
Pg	_1_	o f	3	☐ Yes	X No						

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

1. Committee Fu	ıll Name (and Fund	if applicable)						2. ID Nu	
JOHNSON FO	R SHERIFF ELEC	TION COMITTEI	Ξ					ALA-	948F8M-C-001
3. Type of Disbu	rsement (Please	use separate CRO)- <i>1310</i>	forms for eac	h type	of Disbu	rseme	nt.)	<u>.</u> ,
M Operating Exp	oenses Cont	ributions to Candida	es/Polit	ical Committees		Coc	ordinat	ed Party E	x pendit wes
4. Payee Inform	ation			_	Renx				
a. Full Name, Ma	niling Address & Ph	one		b. C'oordinate	d Com	mittee N	ame	d. Comm	ents
(include city, sta	te, & zip)								
ALAMANCE N						· · · · · · · · · · · · · · · · · · ·			
114 WEST ELN				c. Level Regis		County:			
GRAHAM, NC	27253			State				e Electio	n Sum to Date
<u> </u>					<u>-</u> -	_ intumorp		\$	722.00
f Account Codo	g. Form of Payment	h Purnose Code	i Dote	(mm/dd/mm)	li tro	ount	l: Re	quired Re	
1. Account Code		1	 		1			ERTISI	
1	Check	AO	1.	2/13/2010	\$	722.00	ADV	EKIISII	NG
					\$				
4. Payee Inform	ation			Add 🔲	Remo	ve			
a. Full Name, Ma	niling Address & Ph	one		b. Coordinate	d Com	mittee Na	ame	d. Comm	ents
(include city, sta	te, & zip)				- <u>-</u>	•			
	F CONCERNED C	HRISTIANS PAG	0						
PO BOX 1961				c. Level Regis	tered (
BURLINGTON	, NC 27216			Federal State	F	County: Municip		a Mactio	n Sum to Date
				Jan State		Municip	anty.	e. Electio	it Bain to Date
								\$	200.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Am	ount	k. Re	quired Re	marks
1	Check	О	10	0/27/2010	\$	200.00	DON	ATION	
		·			\$				
4. Payee Inform	ation	1		Add 🔲	Remo	ve		-	
•	uling Address & Ph	one		b. Coordinate			me	d. Comm	ents
(include city, sta	_								
	NAL MINUTE PRE	SS							
	RKS CHURCH RD			c. Level Regis	tered (
BURLINGTON				Federal		County:			
				State	L	Municip	ality:	e. Electio	n Sum to Date
								\$	977.37
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Am	ount	k. Re	quired Re	marks
1	Check	0	10	0/21/2010	\$	654.98	CAR	DS FOR	HANDOUTS
					\$	•••			
					<u> </u>		<u> </u>		
5. Total only this	s Page							\$	1,576.98
6. Total of ALL	CRO-1310 Pages								
, ,	n line 13a of Detailed .		-					\$	9,079.45
	n line 13b of Detailed . n line 13c of Detailed !						omm)		,,
****		•			ty Exp	chameres)			· · · · · ·
	des (List detailed			· · · · · · · · · · · · · · · · · · ·		Th. 00		<u></u>	1 .
A* - Media	B* - Printir			undraising				er Candid	
E - Salaries	F* - Equipm J - Penaltie			litical Party Office Expenses	,				ffice Expenses
I ~ Postage O* Other	J - renaltie	3	A - U	ince gapenses	•	Ų" - ΙΜ	งแสเเอ	u to Lega	l Expense Fund
	detailed explanation	n in required ren	arks f	ield (k)					

Disbursemen	ıts
-------------	-----

			Amendment						
Pg	 of	3	☐ Yes	X No					

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

1. Committee Fi	ull Name (:	and Fund	if applicable)				-		2. ID N	
JOHNSON FO	R SHERIF	F ELECT	TION COMITTEE	3					ALA	A-948F8M-C-00T
3. Type of Disbu		(Please	use separate CRC	<u>)-1310</u>	forms for eac	h ty				
Operating Exp	penses	Conti	ributions to Candidat	es/Polit	ical Committees		Cor	ordinat	ed Party	Expenditures
4. Payee Inform							move			
a. Full Name, Ma	ailing Add	ress & Pho	one		b. Coordinate	d C	ommittee N	ame	d. Com	ments
(include city, sta	te, & zip)									
PATRICIA JOH	INSON	_								
3934 SPANISH	IOAK HII	LL RD			c. Level Regis	tere				
SNOW CAMP,	NC 2734	9			Federal		County:		-	
					☐ State		Municip	ality:	e. Elect	ion Sum to Date
	•		·						\$	261.08
f. Account Code	g. Form of	Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Re	quired l	Remarks
1	Ch	eck	0	1	1/05/2010	\$	261.08	CAN	MPAIGN	1
						\$		CEL	EBRA 1	TON
4 D T 6	<u> </u>			└		1				
4. Payee Inform		9 DI			Add 🔲		move			
a. Full Name, Ma	_	ess & Pho	one		b. C'oordinate	d C	minittee iv:	ıme	d. Com	ments
(include city, sta					1					
OFFICE DEPO					c. Level Regis	tere	d (Specify)		ł	
1825 SOUTH C					Federal		County:		1	
BURLINGTON	, NC 2/2	15			State				e. Electi	ion Sum to Date
·							<u> </u>			
								ļ	\$	109.84
f. Account Code	g. Form of	Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Re	quired F	Remarks
1	Che		0	1	0/19/2010	\$	109.84	ADV	/ERTIS	EMENT CARDS
						\$	•			
4. Payce Inform	ation				Add 🔲	Rei	move			
a. Full Name, Ma		ess & Pho	one		b. Coordinate			ıme	d. Com	ments
(include city, sta				ŀ						_
		TEMS SI	GN & PRINTING	j	l					
3264 VAN DRI					c. Level Regist	tere				
BURLINGTON		15		,	Federal .	_	County:			
ļ	•			ļ	☐ State		Municip	ality:	e. Becti	ion Sum to Date
İ					1				\$	4,590.97
f. Account Code	g. Form of	Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Re	quired R	temarks
1	Che		0	·		\$	1,487.55			MES FOR SIGNS
					7/10/2010	\vdash	1,107.55		L I IU.	ALD I OK SIGI.E
						\$				
5. Total only this								į	\$	1,858,47
6. Total of ALL	CRO-1310	Pages						i i		
(This line go <i>e</i> s ir	n line 13a oj	Detailed S	Summary Page CRO-	1100 if	Operating Exper	nses)	(\$	9,079.45
			Summary Page CRO- Summary Page CRO-	_				9mm)	Ψ	2,012.10
7 Purpose Co	des (Lis	t detailed	expenditure code	in (h.) a	above)			-		
A* - Media		- Printing			undraising		D. To	Anoth	ner Cand	lidata
E - Salaries		- Equipme	- -		litical Party					Office Expenses
I - Postage		- Penalties			office Expenses	g				gal Expense Fund
O* Other	•	1 011	,			•	· ·	Minus	n to Lee	,ai Espeno e z unu
	detailed e	xplanatio	n in required rem	arks fi	eld (k)					

Disbursements

				Amenam	ent	
Pg	3	of	3	☐ Yes	X No)

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

	coordinated party e	<u> </u>							
	ull Name (and Fund							2. ID Nun	
JOHNSON FO	R SHERIFF ELEC	FION COMITTE	E				_	ALA-9	18F8M-C-001
3. Type of Disb		use separate CR(<i>9-1310</i>	forms for eac	h ty	pe of Disbu	rseme	ent.)	
X Operating Ex	penses Cont	ributions to Candida	tes/Polit	ical Committees	5	Co	ordinat	ed Party Ex	penditures
4. Payee Inform	ation			Add 🔲	Re	move			
a. Full Name, M	ailing Address & Ph	one		b. Coordinate	d C	ommittee N	ame	d. Comme	nts
(include city, sta	ite, & zip)								
WBAG			-	<u></u>					
1745 BURCH I	BRIDGE RD			c. Level Regis	tere				
BURLINGTON	I, NC 27215			Federal		☐ County		ļ <u>.</u>	
				State		☐ Municip	pality:	e. Dection	Sum to Date
								\$	100.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. 2	mount	k. Re	quired Ren	narks
1	Check	\$ O	13	2/17/2010	\$	100.00	ADV	ERTISIN	G
,				 	\$				
4. Payee Inform	ation			Add 🔲	Re	move	<u> </u>		
a. Full Name, M	ailing Address & Ph	one		b. Coordinate			ame	d. Comme	nts
(include city, sta	-			·					
WESTERN ST	EAK HOUSE								
142 B GRAHA	M HOPEDALE RD			c. Level Regis	tere	d (Specify)			
BURLINGTON	I, NC 27215			Federal		County:			
				State		☐ Municip	ality:	e. Dection	Sum to Date
· · · · · · · · · · · · · · · · · · ·								\$	5,544.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Re	quired Ren	arks
1	Check	О	11	/05/2010	\$	5,544.00	CAM	IPAIGN	
	<u>.</u>				\$		CEL	EBRATIO	N
5. Total only thi	е Рада				Ф	<u> </u>		d's	5.611.00
								<u>\$</u>	5,644,00
	CRO-1310 Pages						:		
	n line 13a of Detailed S							\$	9,079.45
	n line 13b of Detailed S n line 13c of Detailed S						9 mm) :		1
	des (List detailed				rıy E.	xpenatures)			
A* - Media	B* - Printin			ındraising		D - To	A noth	er Candida	ite
E - Salaries	F* - Equipm	1		itical Party					ice Expenses
I - Postage	J - Penaltie			ffice Expenses	;				Expense Fund
O* Other			_	-1		ν Δ.			
* Codes require	detailed explanation	n in required rem	arks fi	eld (k)					
		1.40			-				

Aggregated Non-Media Expenditures

Amendment ☐ Yes 🗓 No Page 1 of 1

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 b. Account Code | c. Form of Payment | d. Purpose Code | e. Date (mm/dd/yyyy) a. Amend g. Required Remarks f. Amount Add Check TELEPHONE 12/13/2010 \$ 25.99 Remove Add 1 POWER FOR Check @ K 10/26/2010 \$ 33.04 Remove CAMPAIGN OFFICE Add 1 Check K ELECTRIC POWER 11/15/2010 \$ 18.59 Remove Add i Check K COMPUTER WEBSITE 12/02/2010 \$ 41.92 Remove Add Draft K BANK CHARGE 1 \$ 10/31/2010 2.00 Remove Add 1 Draft O K BANK CHARGES 12/31/2010 \$ 16.00 Remove 4. Total only this Page \$ 137.54 5. Total of ALL CRO-1315 Pages \$ 137.54 (This line must be on line 14 of Detailed Summary Page CRO-1100) 6. Purpose Codes (List detailed expenditure code in (d) above) C* - Fundraising B* - Printing D - To Another Candidate F* - Equipment E - Salaries G - Political Party H* - Holding Public Office Expenses K* - Office Expenses I - Postage J - Penalties O* - Donations to Legal Expense Fund

CRO-1315

O* - Other

* Codes require detailed explanation in required remarks field (g) NC State Board of Elections

December 2009

T TH 100					Amendment		
In-Kind Contributions	Pg	1	of	1	☐ Yes	X No	
Use this form to report non-monetary contributions, donations, goods of							

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 I	Yumber				
JOHNSON FOR SHERIFF ELECTION COMITTEE					ALA-948F8M-C-001			
3. Contributor Information	☐ Add ☐ R	emove	}		<u></u>			
a. Full Name, Mailing Address & Phone	b. Type of Co		c. Com	ments				
(include city, state, & zip)	M Individual							
JANET BEATY	☐ Candidate							
835 EAGLES NEST ROAD	☐ Party							
WAYNESVILLE, NC 28786	PAC Referendum							
,				d. Election Sum to Date				
	Other Receipt Source		\$		1,500.00			
e. Description	<u>1</u>	f. Date (mm/	dd/yyyy)	g. Fair N	larket Amount			
BAND OF OZ (MUSIC) FOR CAMPAIGN PARTY		11/02/2	010	\$	1,500.00			
				\$				
				\$				
4. Total only this Page			\$		1,500.00			
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page	CRO-1100)		\$	- , , <u> </u>	1,500.00			

CRO-1510

NC State Board of Elections

December 2007