Disclosure Report Cover

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

1. Committee In	nformation		-33 (1)		**************************************					
a. Full Name									c. ID Number	
JOHNSON FO	R SHERIFF E	LECTION CO	MITTE	EΕ					ALA-948F8M-C-001	
b. Mailing Addre	ess (include Ci	ty, State and Zi _l	(Code						d. Date Filed	
3530 CARDW BURLINGTON									02/12/2012	
Beitaniorei	1, 110 27213								e. Phone Number	
									(336) 227-1495	
2. Report Year	3. Period Star	t Date (mm/dd/y	yy)	4. Period	End Da	te (ı	n m/dd/yy)	5. Treasur	er Full Name	
2011	0′	07/01/2011						PAUL E C	COBB	
6. Type of Com				e of Repor	t (c.	heck	k only one	type of repo	ort from one category)	
X Candidate Can		. 5	Munic				te/County		Referendum	
☐ Joint Fundrais	_			Organizatio			Organizatio	nal	☐ Organizational	
☐ Referendum		gal Expense Fund		Thirty-five			Quarterly		☐ Pre-referendum	
7. Type of Fund		le, check one)		Pre-primar			First		☐ Final	
Booster Fund	i"			Pre-election	n		Second		Supplemental Final	
☐ Building Fund	1 V . O	F1. F 1		Pre-runoff			Third		Annual	
	lection Year Can npaign Financing			Semi-annua Mid Ye		П	Fourth	,	☐ Special	
INC Public Cal	правн гшанств	gruna	片	Year E			Semi-annua Mid Ye		10 C 1 D 4 N	
Other:		_	H	Final	iiu	片	Year E		10. Special Report Name	
8. Number of Fu	indraisers this	Report		Special		片	Final	iid		
o. Ivamber of Fe		Report		Special		H				
	1						Special			
3. Account Information							t Informati			
a. Financial Institution Full Name				a. Fina	ncia	al Institutio	on Full Nam	e		
WACHOVIA										
b. Purpose		c. Account Cod	e		b. Pur	ose			c. Account Code	
RUN CAMPAI	GN		1							
		d. Period Begin	Balan	ce					d. Period Begin Balance	
		\$ 704.	00						\$	
CERTIFICATIO	N									
Chapter 163 o	f the NC Gener	al Statutes and	that no	funds are	commi	ngle	d with pro	hibited or o	2A, 22B & 22D-22M of ther non-disclosed ed by the NC State Board	
1	0			1.	1					
	Cobb In-			fore	Col	6,			02/12/2012	
Pı	rinted Name of S	igner		Sign	ature of	App	ointed Treas	surer	Date	
FOR OFFICE U	SEONLY	1					01.	_	10.0	
Date Receive	ed:	2/13/2	012	Emplo	yee: _		OH	- 🗆	ivery Method Normal Mail	
Date Postma	rked:		_	Employ	yee: _			- 🔼	Registered Mail Hand Delivered	
Date Scanne	d:		_	Emplo	yee: _			-	Electronically Filed	
Date Data Er	ntered:			Emplo	yee: _				Signer has not received mandatory training	
	assistar	nt treasurer, cus	todian	of books i	nformat	ion,	, or accoun	t informatio		
Y	ou must amend	d the Statement	of Org	anization (CRO-2	100A	1-E) to mak	e committee	e changes.	

Amendment Yes Yes No.

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

Use this form to summarize all disclosure reporting forms at 1. Committee Full Name (and Fund if applicable)	2. Type of Re			ID Num	ber
JOHNSON FOR SHERIFF ELECTION COMITTEE		End Semi-Annua			8F8M-C-001
		Total th	ie		Fotal this
Start of Election Cycle: January 1, 2011		Reporting P			ection Cycle
4) Cash on Hand at Start		\$ 7	704.00	\$	590.97
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 2,1	70.00	\$	2,170.00
6) Contributions from Individuals	(CRO-1210)	\$ 22,8	33.00	\$	22,933.00
7) Contributions from Political Party Committees	(CRO-1220)	\$	0.00	\$	0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 4	00.00	\$	400.00
9) Loan Proceeds	(CRO-1410)	\$	0.00	\$	800.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	0.00	\$	0.00
11) Other Receipt Sources					
11a) Interest on Bank Accounts	(CRO-1250)	\$	0.00	\$	0.00
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	0.00	\$	0.00
11c) Outside Sources of Income	(CRO-1250)	\$ 5	00.00	\$	500.00
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)		03.00	\$	26,803.00
EXPENDITURES		'			.,,
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$ 5,8	20.09	\$	5,916.09
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 3,5	90.00	\$	4,280.97
13c) Coordinated Party Expenditures	(CRO-1310)	\$	0.00	\$	0.00
(4) Aggregated Non-Media Expenditures	(CRO-1315)	\$	25.00	\$	25.00
15) Loan Repayments	(CRO-1420)		00.00	\$	800.00
6) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	0.00	\$	0.00
17) In-Kind Contributions	(CRO-1510)	\$ 2,7	83.00	\$	2,783.00
(8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15)	, 16 and 17)		18.09	\$	13,805.06
(9) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	· · · · · · · · · · · · · · · · · · ·	88.91	\$	13,588.91
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00		EN SI SELECTION
1) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	0.00		
2) Debts and Obligations owed by the Committee	(CRO-1610)	\$	0.00		(d) 21 (d) 25 (d)
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$	0.00		
4) Account Transfers Within the Committee	(CRO-1720)	\$	0.00	187	
5) Administrative Support	(CRO-1710)	\$	0.00	\$	0.00
26) 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

Aggregated Contributions from Individuals Page 1 of

Amendment

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

1. Committe		Fund if applicable)	Trom materials of p		. ID N	umber
		LECTION COMITT	EE			A-948F8M-C-001
<u> </u>						
	or Information	I- 10	11.1.12.15	T n		-
a. Amend Add	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/y	ууу)	f. Amount
☐ Remove	1	Cash		09/01/2011		\$ 50.00
☐ Add ☐ Remove	1	Cash		09/01/2011		\$ 50.00
☐ Add ☐ Remove	1	Cash		08/30/2011	İ	\$ 50.00
☐ Add ☐ Remove	1	Cash		08/29/2011		\$ 50.00
☐ Add ☐ Remove	l	Cash		09/29/2011		\$ 50.00
☐ Add ☐ Remove	1	Cash		09/29/2011		\$ 50.00
Add Remove	1	Cash		08/30/2011		\$ 50.00
Add Remove	1	Cash		08/30/2011		\$ 50.00
Add Remove	1	Cash		09/30/2011		\$ 50.00
Add Remove	1	Cash		09/30/2011		\$ 50.00
Add Remove	1	In-Kind	2-\$25.00 GIFT CERTIFICATES	09/07/2011		\$ 50.00
Add Remove	1	Cash	SERVINION LOS	08/29/2011		\$ 50.00
Add Remove	1	Cash		08/29/2011		\$ 50.00
Add Remove	1	Cash		09/29/2011		\$ 50.00
Add Remove	1	Cash		10/12/2011		\$ 50.00
Add Remove	1	Cash		08/30/2011		\$ 50.00
Add Remove	Ţ	Cash		08/30/2011		\$ 50.00
Add Remove	1	Cash		09/29/2011		\$ 50.00
Add Remove	1	Cash		09/29/2011		\$ 50.00
Add Remove	I	Cash		09/12/2011		\$ 50.00
Add Remove	1	Cash		09/12/2011		\$ 50.00
Add Remove	1	Cash		09/29/2011		\$ 50.00
Add Remove	1	Cash		09/06/2011		\$ 50.00
4. Total on	ly this Page				\$	\$1,150.00
	ALL CRO-120 ust be on line 5 of De	05 Pages tailed Summary Page C	 CRO-1100)		\$	\$2,170.00
CRO-1205	- I - I - I - I - I - I - I - I - I - I		State Board of Elections			April 200

Amendment

Aggregated Contributions from Individuals Page 2 of

Yes Yes

No No

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

1. Committe	e Full Name (and	Fund if applicable)			2. ID N	Number	
JOHNSON	FOR SHERIFF E	LECTION COMITT	EE		AL	.A-948F8N	I-C-001
2 6 4 7 4	T.C						
a. Amend	or Information b. Account Code	c. Form of Payment	a r. w.an	T B (/ //3	, ,	le i	
Add		 	d. In-Kind Description	e. Date (mm/dd	/уууу)	f. Amount	
Remove	1	Cash		09/06/201	1	\$	50.00
Add	1	Cash		10110100			
☐ Remove	-			10/12/201	l	\$	50.00
Add Remove	1	Cash		09/27/201	1	s	50.00
Add	1	Cash				<u> </u>	
Remove	*			10/12/201	1	\$	50.00
Add Remove	1	Cash		10/12/201	1	\$	50.00
☐ Add ☐ Remove	1	Check		08/03/201	1	\$	20.00
☐ Add ☐ Remove	1	Cash		08/24/201	1	\$	50.00
☐ Add ☐ Remove	1	Cash		08/24/201	1	\$	50.00
Add Remove	1	Cash		10/12/201	1	\$	50.00
Add Remove	1	Cash		08/30/201	1	\$	50.00
Add Remove	1	Cash		08/30/201	1	\$	50.00
Add Remove	1	Cash		09/29/201	1	\$	50.00
Add Remove	1	Cash		09/29/201	1	\$	50.00
☐ Add ☐ Remove	1	Cash		10/12/201	1	\$	50.00
Add Remove	1	Cash		08/24/201	1	\$	50.00
Add Remove	1	Cash		10/12/201	1	\$	50.00
Add Remove	1 .	Cash		08/24/201	1	\$	50.00
Add Remove	1	Cash .		08/29/201	1	\$	50.00
Add Remove	1	Cash		08/29/201	1	\$	50.00
Add Remove	1	Cash	•	09/07/201	I	\$	50.00
Add Remove	1	Cash		09/07/201	1	\$	50.00
	ly this Page				l \$	•	\$1,020.00
	ALL CRO-120	05 Pages	<u></u>	<u> </u>	 \$		\$2,170.00
(This line mu		etailed Summary Page C			.D	,	
CRO-1205		NC	State Board of Elections				April 2007

				Amendm	ent
Pg	_1_	of	25	Yes Yes	No.

1. Com	mittee Full Name	(and Fund if applicab	le)				2.	ID Number
		IFF ELECTION COM					-	ALA-948F8M-C-001
	ributor Informati			Add 🔲	Ren	nove		
	Name, Mailing Ado			b. Job Title	e/Pro	ofession	d. C	Comments
	ude city, state, & z	ip)		OWNER				
	RT D ADAMS			c. Employer's Name/Specific Field				
	87 SOUTH IAM, NC 27253			ADAMS TOWING &				
	227-0830			RECOVERY			e. I	Dection Sum to Date
							\$	1,000.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription		j. Date (mm/dd/yyyy)	L	k. Amount
	1	Check				09/14/2011		\$ 1,000.00
								\$
								\$
	ributor Informatio	_		 _		nove		
	Name, Mailing Add			b. Job Title	e/Pro	fession	d. (Comments
(include city, state, & zip)				7		RIFF'S JOURNAL		
JANET BEATY PO BOX 35				(ADVERT	<u>TISII</u> er's N	NG) Name/Specific Field		
HAZLEWOOD, NC 28738				SELF EM				
TIAZLE WOOD, NC 20736				OLUM LIN	TI DC		e. F	Dection Sum to Date
							\$	100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription		j. Date (mm/dd/yyyy)		k. Amount
	1	Check				09/27/2011		\$ 100.00
								\$
								\$
	ributor Informatio				Rem		_	
	lame, Mailing Add		-	b. Job Title		fession	d. C	Comments
	de city, state, & zi	(p)		MANAGE	ER		ı	
	RD BELTON IABLETON DRI	VE		c. Employe	r's N	ame/Specific Field	l	
	NGTON, NC 27:					EEK GOLF		
	,			COURSE			e. E	dection Sum to Date
							\$	2,240.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	j	j. Date (mm/dd/yyyy)		k. Amount
	1	In-Kind	GOLF FEES			10/12/2011		\$ 2,240.00
								\$
								\$
4. Tota	al only this Pag	ge					\$	3,340.00
	al of ALL CRO	Page CRO-1100)				\$	22,833.00	

			A mendment			
Pg	 of	25	Yes Yes	No.		

1. Com	mittee Full Name	(and Fund if applicab				2. J	ID Number		
		IFF ELECTION COM					A	ALA-948F8M	f-C-001
	ributor Informati			Add	☐ Rei	move			
	Name, Mailing Ado			b. Job	Title/Pr	rofession	d. C	Comments	
	rde city, state, & z			MAN	AGER				
	ETH BLAYLOCI I NC 49 TRAILEI			c. Employer's Name/Specific Field					
	INGTON, NC 27					REEK GOLF			
				COUP	RSE	!	e. E	Dection Sum	to Date
I <u></u> _							\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	i	j. Date (mm/dd/yyyy)		k. Amount	
	1	Check				10/12/2011		\$	100.00
								\$	
					·			\$	
	ributor Informatio			Add		move			
a. Full Name, Mailing Address & Phone					Title/Pro		d. C	Comments	
(include city, state, & zip) TIMOTHY J BRITT				LAW	ENFOR	RCEMENT			
1	LEMING GRAH	AM RD		c. Emp	loyer's I	Name/Specific Field			
	BURLINGTON, NC 27217			ALAN	MANCF	E COUNTY			
,						e. F	Dection Sum (to Date	
							\$		300.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription		j. Date (mm/dd/yyyy)		k. Amount	
	1	Check				10/12/2011		\$	300.00
								\$	
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	ributor Informatic			Add		move			
	iame, Mailing Add				Title/Pro		d. C	Comments	
	de city, state, & zi			LAW I	ENFOR	RCEMENT	İ		
	EY SHELTON B OGWOOD LAN			c. Emp	loyer's l	Name/Specific Field			
	AM, NC 27253			ALAN	1ANCF	E COUNTY .	<u> </u>		
							e. E	Dection Sum t	to Date
						ļ	\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription		j. Date (mm/dd/yyyy)		k. Amount	
	1	Check				09/12/2011		\$	100.00
								\$	
								\$	
4. Tota	al only this Pag	ge					\$		500.00
	al of ALL CRO						\$	25	2,833.00
(This I	ine must be on line (6 of Detailed Summary P	Page CRO-1100)					22	.,633.00

		Amendme	ent_
Pg3 of	25	Yes	No.
		. 1	-

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is hot used 1. Committee Full Name (and Fund if applicable) 2. ID Number JOHNSON FOR SHERIFF ELECTION COMITTEE ALA-948F8M-C-001 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) OWNER DEBRA F CARDWELL c. Employer's Name/Specific Field 5408 SOUTH NC 62 BURLINGTON, NC 27215 RANDY CARDWELL e. Election Sum to Date TRUCKING \$ 100.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check 08/24/2011 100.00 \$ \$ \$ 3. Contributor Information ☐ Add ☐ Remove b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) ATTORNEY RICK W CHAMPION c. Employer's Name/Specific Field 307 TRAVIS LANE GIBSONVILLE, NC 27249 **SELF** 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 Check 1 09/08/2011 \$ 100.00 \$ \$ ☐ Add ☐ Remove 3. Contributor Information b. Job Title/Profession d. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) OWNER KENT COBLE c. Employer's Name/Specific Field **5733 FOSTER STORE ROAD** LIBERTY, NC 27298 COBLE SANDROCK INC 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 Check 1 09/12/2011 1,000.00 \$ \$ \$ 1,200.00 4. Total only this Page \$ 5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

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			Amenament							
Pg	4	of	25	Yes Yes		No				
	1 0.00		000 10	n = · l ` .						

1. Committee Full Name (and Fund if applicable)							2.1	ID Number
JOHNS	SON FOR SHERI	IFF ELECTION COM	ЛТТЕЕ					ALA-948F8M-C-001
3. Cont	ributor Informati	on		Add	☐ Re	move		<u>, , , , , , , , , , , , , , , , , , , </u>
	Name, Mailing Add			b. Job	litle/Pr	ofession	d. (Comments
(inclu	ide city, state, & zi	ip)		ONER COBLE TRENCH				
	AS COBLE			SAFE				
1	OWNING COU	RТ		c. Empl	oyer's l	Name/Specific Field		
GRAH.	AM, NC 27253			ł			<u> </u>	5 S 42 Data
							е. г	Election Sum to Date
					·	r - · · · · · · · · · · · · · · · · · · 	\$	1,000.00
f. Prior		h. Form of Payment	i. In-Kind Desc	cription		j. Date (mm/dd/yyyy)		k. Amount
	1	Check		···-		09/14/2011		\$ 1,000.00
								\$
							····	\$
	ributor Informatio					move		
	lame, Mailing Add			b. Job	litle/Pr	ofession	d. C	Comments
	de city, state, & zi	i p)		OWNE	ER			
	THY J COLE			c. Employer's Name/Specific Field				
1	LINGTON ROAL	D						
GRAH	AM, NC 27253			ACE I	FENCE	C0	_ F	Election Sum to Date
							\$	100.00
f. Prior			i. In-Kind Desc	cription		j. Date (mm/dd/yyyy)		k. Amount
	1	Check				09/27/2011		\$ 100.00
								\$
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	ributor Informatio			Add		move		
	lame, Mailing Add			b. Job Title/Profession			d. Comments	
	de city, state, & zi			OWNE	ER			,
	Y RANDALL CO				1 7	Name/Specific Field		
	INTINGDONE S	TREET						
ELON,	NC 27244					EATING & AIR	e. E	Dection Sum to Date
				CONE	HION	IING		
							\$	100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription		j. Date (mm/dd/yyyy)		k. Amount
	1	Check			٠	09/19/2011		\$ 100.00
								\$
								\$
4. Tota	al only this Pag	ge	.				\$	1,200.00
5. Tota	Total of ALL CRO-1210 Pages					\$	22 922 00	
		6 of Detailed Summary P	Page CRO-1100)			i	Ð	22,833.00

Pg 5 of 25 Amendment

			_
Use this form to report individual contributions over \$50 or contributions		100 ODO 1000 : 1	r
OSC THIS TOTHLED TEPOIL INDIVIDUAL CONTINUING OVER \$50 OF CONTINUING	s under Sou	if form CKO 1205 is not use	ed

1. Com	mittee Full Name	e (and Fund if applicab	le)			2.	ID Number	•
JOHN	SON FOR SHER		Ā	ALA-948F8	3M-C-001			
	ributor Informat			Add 🗖 Re	move			
	Name, Mailing Ad			b. Job Title/Profession		d. e	d. Comments	
(incl	ide city, state, & 2	cip)		EXECUTIVE CAROLINA				
TERR	Y D CRENSHAV	V		NISSAN				
514 FI	ELDSTONE ST			c. Employer's	Name/Specific Field]		
BURL	INGTON, NC 2	7215		-		L		
						e. I	Dection Su	m to Date
						\$		1,000.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amoun	t
	1	Check			08/18/2011		\$	1,000.00
				,			\$	
							\$	
3. Cont	ributor Informati	on		Add 🔲 Re	move			
a. Full f	lame, Mailing Ad	dress & Phone		b. Job Title/Pr	ofession	d. (Comments	•
(include city, state, & zip)			OWNER					
CHAR	LES D CRENSH	AW JR						
1560 Y	ORK PLACE			c. Employer's	Name/Specific Field]		
BURL	BURLINGTON, NC 27215			CRENSHAW	/ HYUNDAI			
						e. I	Dection Sur	m to Date
						\$		100.00
f Prior	a Account Code	h. Form of Payment	i. In-Kind Desc	rintian	j. Date (mm/dd/yyyy)		k. Amount	
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	1	CHOOK			09/11/2011		\$	100.00
							\$	
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	ibutor Informati				move			
	ame, Mailing Ado			b. Job Title/Pro	ofession	d. C	omments	
•	de city, state, & z	ip)		RETIRED FA	RMER			
	S J DALE			·	v /0 / c			
	ELLMONT-MT				Name/Specific Field			
BUKLI	NGTON, NC 27	215	į	SELF		a E	Dection Sur	n to Data
						C. 1	Techon Sur	Date
						\$		200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	ription	j. Date (mm/dd/yyyy)		k. Amount	
	1	Check			10/12/2011		\$	200.00
					i		\$	
							\$	
4. Tota	l only this Pa	ge			!	\$		1,300.00
	I of ALL CR	O-1210 Pages 6 of Detailed Summary P	nge CRO-1100)			\$		22,833.00
(21113)	mon or on me	о од жишина заштану г	age cho-iivo)		Ì			

			- Amendme	ent
Pg	of	25	Yes Yes	No.

1. Com	mittee Full Name	e (and Fund if applicabl	le)			2.	ID Number
JOHNS	SON FOR SHERI	IFF ELECTION COM	1ITTEE				ALA-948F8M-C-001
3. Cont	ributor Informati	on		Add 🔲 Re	emove		· · · · · · · · · · · · · · · · · · ·
	Name, Mailing Add			b. Job Title/Profession		d. (Comments
(inclu	ude city, state, & z	ip)		OWNER			
	D DAVIS						
		OCK CREEK ROAD			Name/Specific Field	-	
BUKLI	INGTON, NC 27	/215		1	S NATIONWID	<u> </u>	T -4f Com to Date
				INSURANC	E	e. 1	Election Sum to Date
						\$	100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	 cription	j. Date (mm/dd/yyyy)	 	k. Amount
	1	Check			10/12/2011		100.00
1					10/12/2011		\$ 100.00
							\$
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							\$
	ributor Informatio			Add 🗌 Rei	move		
	Name, Mailing Add			b. Job Title/Pro	ofession	d. (Comments
(inclu	ide city, state, & zi	ip)		OWNER			- 11
	B DEATON			Frankrich No. 10 15 Frankrich			
	REENFERN COU		!		Name/Specific Field	1	
BURLI	INGTON, NC 27	215	!	A UNITED T	FRANSMISSION	ᆫ	
				1		e. E	Dection Sum to Date
						\$	100.00
f. Prior	g. Account Code		i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)		k. Amount
	1	Check		l	09/29/2011		\$ 100.00
							\$
	-						\$
3 Conta	ributor Informatio			Add ∏ Rer	Move		<u> </u>
	lame, Mailing Add		-	b. Job Title/Pro		la c	Comments
	đe city, state, & zi			POLICE OFF	· · · · · · · · · · · · · · · · · · ·	u	
	AS DENNY	<u>F7</u>		POLICE OFF	ICER		
	UINESS DRIVE		Ì	c. Employer's l	Name/Specific Field	1	
	AM, NC 27253			CITY OF GR			
	,				31111111111	e. E	Tection Sum to Date
						\$	100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)	اا	k. Amount
	1	Cash			10/12/2011		\$ 50.00
<u>'</u>					10/12/2011		\$ 20.00
	1	Check			10/12/2011		\$ 50.00
							\$
4. Total only this Page							300.00
5. Tota	al of ALL CRO)-1210 Pages				\$	22.822.00
(This line must be on line 6 of Detailed Summary Page CRO-1100)							22,833.00

				Amendm	ent	
Pg	7_	of	25	Yes Yes	Ø	No

1. Comr	nittee Full Name	(and Fund if applicabl	e)			2.]	D Numbe	r
JOHNS	ON FOR SHERI	IFF ELECTION COM	IITTEE			A	LA-948I	F8M-C-001
3. Conti	ributor Informati	on		Add 🔲 Re	move		 	
a. Full N	lame, Mailing Ado	dress & Phone	·····	b. Job Title/Pr	ofession	d. (d. Comments	
(inclu	de city, state, & z	ip)		EXECUTIVE			•	
ALLEN	I GANT							
	EST DAVIS ST			c. Employer's Name/Specific Field]		
	NGTON, NC 27			GLEN RAVI	EN MILLS			
						e. E	dection S	um to Date
						\$		1,000.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amou	nt
	1	Check			09/06/2011		\$	1,000.00
							\$	
							\$	-
3. Contr	ibutor Informati	on		Add Re	move			
a. Full N	. Full Name, Mailing Address & Phone				ofession	d. C	Comment	s
(include city, state, & zip)				INSURANCE	EAGENT			
MICHA	EL T HARDEN							i
	MAR ST			c. Employer's	Name/Specific Field]		
GRAHA	GRAHAM, NC 27253			FARM BUR	EAU			
	•					e. F	dection S	um to Date
						\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	eription	j. Date (mm/dd/yyyy)		k. Amou	nt
	1	Check			09/27/2011		\$	100.00
							\$	
							\$	
3. Contr	ibutor Informati	on		Add 🗖 Re	move			
a. Full N	ame, Mailing Ado	iress & Phone		b. Job Title/Pr	ofession	d. C	Comment	s
(inclu	de city, state, & zi	ip)		DENTIST				
	HARRIS AUGHN RD			c. Employer's	Name/Specific Field			
	NGTON, NC 27	217		SELF EMPL	OYED			
	26-6812					e. I	lection S	um to Date
						\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)		k. Amou	nt
	1	Check			09/14/2011		\$	100.00
							\$	
							\$	
4. Total only this Page					\$		1,200.00	
5. Tota	al of ALL CRO	O-1210 Pages			!	1		00.000.00
		6 of Detailed Summary F	Page CRO-1100)			\$		22,833.00

Pg 8 of 25 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 COMITTEE ALA-948F8M-C-001 3. Contributor Information ☐ Remove □ Add a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) OWNER JOHN E HARRIS c. Employer's Name/Specific Field 605 OAKDALE CT BURLINGTON, NC 27217 RST LOGISTICS e. Election Sum to Date 200.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description k. Amount j. Date (mm/dd/yyyy) Check 1 09/29/2011 \$ 200.00 \$ \$ 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) LAW ENFORCEMENT MONTE HOLLAND c. Employer's Name/Specific Field 1926 HILLDALE DR BURLINJGTON, NC 27215 ALAMANCE COUNTY e. Election Sum to Date (336) 227-2270 100.00 g. Account Code h. Form of Payment i. In-Kind Description k. Amount f. Prior j. Date (mm/dd/yyyy) Check 10/12/2011 \$ 100.00 \$ \$ ☐ Add ☐ Remove 3. Contributor Information a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) OWNER INSURANCE AGENCY MICHAEL HOLT c. Employer's Name/Specific Field 1859 DUNBAR PLACE BURLINGTON, NC 27215 MIKE HOLT ALL STATE e. Dection Sum to Date INSURANCE AGENCY 100.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check 09/07/2011 100.00 \$ \$ \$ 400.00 4. Total only this Page \$ 5. Total of ALL CRO-1210 Pages \$ 22,833.00 (This line must be on line 6 of Detailed Summary Page CRO-1100)

				- Aşmenamı	2 11 1
Pg	9	of	25	Yes	No

1. Comi	nittee Full Name	(and Fund if applicabl	e)			2. 1	D Numbe	r
	DHNSON FOR SHERIFF ELECTION COMITTEE							8M-C-001
3. Conti	ributor Informati	on		Add 🔲 Rei	move			
	lame, Mailing Ado			b. Job Title/Profession		d. Comments		
(inclu	de city, state, & z	ip)		ATTORNEY				
DAVIE	R HUFFMAN							
	UNSET DRIVE			c. Employer's Name/Specific Field				
	NGTON, NC 27	215		SELF				
	•					c. I	lection St	ım to Date
						\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amour	ıt
	1	Check			09/07/2011	,	\$	100.00
							\$	
							\$	
3. Contributor Information								
	ame, Mailing Add	b. Job Title/Pro		d. C	omments			
(inclu	(include city, state, & zip)						<u> </u>	
JOHN I	M ISLEY			LINEMAN				
	PANISH OAK H	ILL RD		c. Employer's l	Name/Specific Field	•		
SNOW CAMP, NC 27349				DUKE POW	ER	<u> </u>		
						e. F	lection Su	ım to Date
						\$		200.00
e n.:	- 1 C - 1-	h. Form of Payment	i. In-Kind Des	anistics.	j. Date (mm/dd/yyyy)	<u> </u>	k. Amour	
		Check	1. III-Killa Des	cription			K. Amoui	<u>-</u>
	1	CHOCK			09/19/2011		\$	200.00
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	i butor Informati				nove			
	ame, Mailing Add			b. Job Title/Pro	ofession	d. C	omments	
(inclu	de city, state, & zi	ip)		OWNER				
	KALPER			- F	N			
	OODSIDE DRI	VE			Name/Specific Field			
GRAH	AM, NC 27253			ALAMANCE	E TOWING	o F	laction S	ım to Date
						-	zeetion be	
						\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)		k. Amour	ıt
	1	Check		<u> </u>	08/02/2011			100.00
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4. Tota	al only this Pa	ge				\$		400.00
	al of ALL CRO	O-1210 Pages 6 of Detailed Summary I	Page CRO-1100)		:	\$		22,833.00
(I IIIS I	me must be on une	o oj Detatica Summary I	"gc CRO-1100)			1		

Pg 10 of 25 Amendment No

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

1. Com	mittee Full Name	(and Fund if applicab	le)			2.	ID Number	
JOHNS	SON FOR SHER	•	A	ALA-948F8M-C-001				
3. Cont	ributor Informati	on		Add 🔲 Re	move	_		
a. Full l	Name, Mailing Ad	dress & Phone		b. Job Title/Profession		d, C	d. Comments	
(inclu	ide city, state, & z	ip)		LAW ENFORCEMENT		1		
DONA	LD KERNODLE			[
4144 U	INION RIDGE R	D		c. Employer's	Name/Specific Field			
BURL	INGTON, NC 27	⁷ 217		ALAMANCI	E COUNTY	L		
Ī						e. I	Election Sum to Date	
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
	1	Check			09/29/2011		\$ 100.00	
				, ,			\$	
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3. Conti	ributor Informati	on		Add □ Re	move			
a. Full N	lame, Mailing Add	lress & Phone		b. Job Title/Pr	ofession	d. (d. Comments	
(inclu	(include city, state, & zip)				UG KIMREY			
DOUGLAS KIMREY			PLUMBING					
3289 M	3289 MATTIE FLORENCE			c. Employer's	Name/Specific Field			
GRAH.	AM, NC 27253			1		<u> </u>		
						e, F	Dection Sum to Date	
				1		\$	200.00	
f Prior	a Account Code	h. Form of Payment	i. In-Kind Des	rintian	j. Date (mm/dd/yyyy)	L	k. Amount	
	l	Check	II All Addid Deg	cription				
	1				09/14/2011		\$ 200.00	
							\$	
		····					\$	
	ributor Informatio				move			
	lame, Mailing Add			b. Job Title/Pr	ofession	d. (Comments	
	de city, state, & zi	p)		OWNER				
	KIMREY			- Eto	Name/Specific Field	l		
	/3Y 49 SOUTH	10				l		
SNOW	CAMP, NC 273	49		ASSOCIATE	D PLUMBING	e. F	Dection Sum to Date	
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)		k. Amount	
	1	Check			09/27/2011		\$ 100.00	
					55.27,2011		Ψ 100.00	
							\$	
							\$	
4. Tota	al only this Pag	ge				\$	400.00	
						\$	22,833.00	
		5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						

				Amendment		
Pg	11	of	25	Yes	No.	

1. Com	mittee Full Name	(and Fund if applicabl	le)			2.)	ID Number
JOHNS	SON FOR SHERI	IFF ELECTION COM	AITTEE			A	ALA-948F8M-C-001
3. Cont	ributor Informati	on		Add 🔲 Re	move		
	Name, Mailing Add			b. Job Title/Pr	ofession	d. (Comments
	ide city, state, & zi	- ` 		OWNER			
	IE G KIRKPATR						
	LAMANCE RD			c. Employer's Name/Specific Field			
	INGTON, NC 27	215		1	GRADING AND		Dection Sum to Date
(336) 3	84-1745		I	PAVING INC			Hechon Sum to Date
						\$	1,000.00
f. Prior		h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)		k. Amount
	1	Check			08/22/2011		\$ 1,000.00
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	ļ						\$
	ributor Informatio			Add 🔲 Rei			
	lame, Mailing Add	b. Job Title/Pr		d, C	Comments		
(include city, state, & zip)				EXECUTIVE			
	KOURY		!	HOSIERY M	ILL INC Name/Specific Field		
		JNION RIDGE RD	!	c. emproyers	Name/Specific rieiu		
ELUN,	ELON, NC 27244					e E	Dection Sum to Date
			!				
			1	ĺ	ļ	\$	493.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)		k. Amount
	1	In-Kind	12 MEALS AN RENTAL	1D ROOM	09/21/2011		\$ 493.00
							\$
							\$
	ributor Informatio		· · · · · · · · · · · · · · · · · · ·		move		
	lame, Mailing Add			b. Job Title/Pro	ofession	d. C	Comments
	de city, state, & zi			LAW ENFOR	CEMENT		
	TOPHER E LAF			c. Fmployer's	Name/Specific Field		
	/ESTMEADOW : NC 27244	LANE		ALAMANCE			
ELCIN,	NC 21244			ALAMANCE		e. E	Dection Sum to Date
						\$	200.00
. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	eription	j. Date (mm/dd/yyyy)		k. Amount
	1	Check			09/27/2011		\$ 200.00
							\$
							\$
4. Tota	al only this Pag	ge	<u></u>		1	\$	1,693.00
	al of ALL CRO	<u> </u>			1	•	22.822.00
		6 of Detailed Summary F	Page CRO-1100)		ļ	\$	22,833.00

Pg 12 of 25 Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used	Jse this form to re	port individual contributions	s over \$50 or contributions	under \$50 if form CRO 1205	s not used
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1. Com	nittee Full Name		2.1	D Number				
JOHNS	ON FOR SHERI	FF ELECTION COM	IITTEE			A	LA-948F8M-C-001	
3. Conti	ributor Informati	on		Add 🔲 R	emove			
a. Full N	lame, Mailing Add	lress & Phone		b. Job Title/P	rofession	d. C	d. Comments	
(inclu	de city, state, & z	ip)		LAW ENFORCEMENT				
	RD LONGAMO			. E 1 4-	N	ļ		
1354 SHALLOWFORD CHURCH ROAD					Name/Specific Field	-		
ELUN,	NC 27244			ALAMANC	E COUNTY	e. E	lection Sum to Date	
							200.00	
						\$	300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)	1	k. Amount	
	1	Check			10/17/2011		\$ 300.00	
							\$	
							\$	
	ibutor Informati				emove	Ι		
	ame, Mailing Add			b. Job Title/P	rofession	d. C	Comments	
•	de city, state, & zi	(P)		OWNER				
JAMES A LOWE II 2255 WEST FRONT ST				c. Employer's Name/Specific Field				
BURLINGTON, NC 27215					IERAL HOME	1		
2014411014110			202101		e. F	lection Sum to Date		
						\$	200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)	ļ. <u></u>	k. Amount	
	1	Check	***		10/12/2011		\$ 200.00	
							\$	
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20.			<u> </u>	Add II D				
	ibutor Information			Add 🔲 Ro b. Job Title/P	rofession	d. C	Comments	
	de city, state, & zi			INVESTIGA				
	S LYNCH			1111 231102			:	
	OSKINS RD			c. Employer's	Name/Specific Field			
BURLI	NGTON, NC 27	215		SELF EMPI	LOYED		lection Sum to Date	
						e. r		
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)		k. Amount	
	1	Check			09/14/2011		\$ 100.00	
							\$	
							\$	
4. Total only this Page						\$	600.00	
						\$	22 022 00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)							22,833.00	

				Amenam	ent	
Pg	_13	of	_25_	Yes	🔯 No	
			GD 0 100	. ایم	. `	

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-001 3. Contributor Information ☐ Add ☐ Remove b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) BANKER THOMAS MANNING c. Employer's Name/Specific Field 2035 STUART CT BURLINGTON, NC 27215 RANDOLPH BANK 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 Check 1 08/29/2011 \$ 100.00 \$ \$ ☐ Add ☐ Remove 3. Contributor Information a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) OWNER WILLIAM BRUCE MCHUGH c. Employer's Name/Specific Field 1541 WEST DAVIS ST BURLINGTON', NC 27215 FLOOR DESIGNS LIMITED 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 Check 09/27/2011 100.00 \$ \$ \$ ☐ Add ☐ Remove 3. Contributor Information b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) DEPUTY MORRIS D MCPHERSON c. Employer's Name/Specific Field 1908 FAIRFIELD DRIVE BURLINGTON, NC 27215 ALAMANCE COUNTY e. Election Sum to Date 100.00 f. Prior g. Account Code | b. Form of Payment k. Amount i. In-Kind Description j. Date (mm/dd/yyyy) Check 09/30/2011 \$ 100.00 \$ \$ 300.00 4. Total only this Page \$ 5. Total of ALL CRO-1210 Pages \$ 22,833.00 (This line must be on line 6 of Detailed Summary Page CRO-1100)

Pg 14 of 25 Amendment No

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

1. Committee Full Name (and Fund if applicable)							ID Number
JOHNS	SON FOR SHERI	IFF ELECTION COM	HTTEE			Α	ALA-948F8M-C-001
3. Cont	ributor Informati	on		Add 🔲 Re	move		
	Name, Mailing Ado		•	b. Job Title/Pr	ofession	d. (Comments
(inclu	ide city, state, & z	ip)		OWNER			
	N C MOODY		I	<u> </u>	10 10 50 11	}	
	HERRY LANE		!	1	Name/Specific Field	-	
HAW I	RIVER, NC 2725	58	!	MOODY BR			Election Sum to Date
			1	TRUCKING		e. r	dection Sum to Date
	· · · · · · · · · · · · · · · · · · ·	T	,			\$	500.00
f. Prior	g. Account Code		i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)		k. Amount
	1	Check			09/30/2011		\$ 500.00
							\$
							\$
	ributor Informati			Add 🔲 Rei	move		
	lame, Mailing Add			b. Job Title/Pro	ofession	d. (Comments
(inclu	ide city, state, & zi	ip)		OWNER		_	
	A H MOODY		!	<u> </u>		Į	
	HERRY LANE		!	c. Employer's Name/Specific Field			
HAW RIVER, NC 27258			!	MOODY'S B		<u></u>	Oration Community Date
		!	TRUCKING		e. E	Dection Sum to Date	
						\$	500.00
f. Prior	g. Account Code		i. In-Kind Desc	eription	j. Date (mm/dd/yyyy)		k. Amount
	1	Check			09/30/2011		\$ 500.00
						_	\$
							\$
3. Contr	ributor Informatio	on		Add □ Rer	move		
a. Full N	lame, Mailing Add	iress & Phone		b. Job Title/Pro	ofession	d. C	Comments
(inclu	de city, state, & zi	ip)		OWNER			
LARRY	Y WAYNE MOR	RIS		l		ĺ	
	IORRIS TRAIL				Name/Specific Field	ĺ	
SNOW	CAMP, NC 273	.49		LARRY MOI	RRIS TRUCKING	- E	Dection Sum to Date
				ĺ		е. с	lection Sum to Date
						\$	100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	eription	j. Date (mm/dd/yyyy)		k. Amount
	1	Check		·	08/24/2011		\$ 100.00
							\$
							\$
4. Total only this Page						\$	1,100.00
5. Total of ALL CRO-1210 Pages						- F	22.022.00
(This line must be on line 6 of Detailed Summary Page CRO-1100)						\$	22,833.00

			Amenament				
Pg	15	of	25	Yes	N		

1. Com	mittee Full Name	(and Fund if applicabl	le)			2. J	D Numb	er	
JOHNS	JOHNSON FOR SHERIFF ELECTION COMITTEE							ALA-948F8M-C-001	
3. Cont	ributor Informati	on		Add 🔲 Rei	move				
a. Full l	Name, Mailing Ado	dress & Phone		b. Job Title/Pr	ofession	d. (d. Comments		
(inclu	ide city, state, & z	ip)		INVESTMEN	ĮTS		•		
DAVII	O MORTON								
1509 C	HARLEIGH CO	URT		c. Employer's l	Name/Specific Field				
ELON, NC 27244				SELF EMPL	OYED	<u> </u>			
						e. I	dection 8	Sum to Date	
						\$		1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	 cription	j. Date (mm/dd/yyyy)	l	k. Amou	ınt	
	1	Check			10/12/2011			1 000 00	
	-				10/12/2011		\$	1,000.00	
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a. Full N	Yame, Mailing Ado	lress & Phone		b. Job Title/Pro	ofession	d. C	Commen	ts	
(inclu	de city, state, & z	ip)		OWNER	-				
RODNEY DARRELL NEWTON									
3002 SWEPS-SAX ROAD				c. Employer's Name/Specific Field					
SWEPSONVILLE, NC 27359				NEWTON'S	FIRE & SAFETY	L	<u> </u>		
(336) 578-3931				e. I	dection 8	Sum to Date			
						\$		1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	 cription	j. Date (mm/dð/yyyy)	L	k. Amou	ınt	
	1	Check			09/11/2011		· ·	1 000 00	
					09/11/2011		\$	1,000.00	
							\$		
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3. Conf	ributor Informati	OTI	<u>'</u>	Add □ Rei	move		l		
	lame, Mailing Ado			b. Job Title/Pro	ofession	d. C	Commen	ts	
	de city, state, & z			OWNER AU	TO DEALER		• •		
PERRY	E NICHOLS								
	UITT DRIVE			c. Employer's !	Name/Specific Field				
ELON,	NC 27244			NICHOLS D	ODGE	<u> </u>	- · · · · ·		
						e, I	dection S	Sum to Date	
						\$		500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)	L	k. Amou	ınt	
	1	Check			08/26/2011		s	500.00	
								7,0,140	
							\$		
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4. Total only this Page						\$		2,500.00	
5. Total of ALL CRO-1210 Pages						\$		22,833.00	
(This l	line must be on line	6 of Detailed Summary I	'age CRO-1100)			<u> </u>			

Pg 16 of 25 Amendment No

1. Com	mittee Full Name	(and Fund if applicabl	le)			[2.]	(D Numbe	r
		IFF ELECTION COM					-	8M-C-001
3. Cont	ributor Informati	on .		Add 🔲 Re	move	_	,	
	Name, Mailing Ad			b. Job Title/Pr		d. C	Comments	3
(inclu	ide city, state, & z	ip)		OWNER				
MITCH	ELL G OAKLE	Y				İ		
	ARNETT ROAL			c. Employer's	Name/Specific Field	1		
MEBA	NE, NC 27302			MITCH OAF	KLEY TRUCKING	<u> </u>		
				1		e. I	dection S	ım to Date
						\$		200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)	<u> </u>	k. Amoui	ıt
	1	Check			10/12/2011		\$	200.00
							\$	
							\$	
	ributor Informati				move			
	lame, Mailing Ado			b. Job Title/Pr	ofession	d. C	Comments	
(inclu	de city, state, & z	ip)		DENTIST				
DAVIE	PATTERSON					1		
4476 FRIENDSHIP PATTERSON MILL RD				Name/Specific Field				
BURLINGTON, NC 27215			SELF EMPL	OYED		3 4' C	4. D. 4.	
					е. н	rection Si	ım to Date	
						\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	lerintian	j. Date (mm/dd/yyyy)	I	k. Amour	
	1	Check						
	•				09/30/2011		\$	100.00
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							\$	
	ibutor Informati			. —	move			
	ame, Maiting Ado			b. Job Title/Profession			Comments	
-	de city, state, & zi	ip)		OWNER				
	NE PETERSON			- P1	V/0			
	AGETOWN ROA				Name/Specific Field			
BURLI	NGTON, NC 27	217		ASKEW PET		o E	lection C.	ım to Date
				MONUMEN	18	e. E	Action St	im to Date
						\$		100.00
. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	eription	j. Date (mm/dd/yyyy)		k. Amour	ıt .
	1	Check			09/29/2011	·	\$	100.00
ш					07/27/2011		Ф	100.00
							\$	
							\$	
4. Total only this Page						\$		400.00
	of ALL CRO	•				\$	·	22,833.00
(This line must be on line 6 of Detailed Summary Page CRO-1100)								•

Pg 17 of 25 Amendment Yes No

individual contributions o		

_		(and Fund if applicabl					D Number	
JOHNS	ON FOR SHERI	FF ELECTION COM	HTTEE			ALA-948F8M-C-001		
3. Contr	ributor Informatio)n		Add 🔲 Rei	move			
	lame, Mailing Add			b. Job Title/Pr		d. C	Comments	-
	de city, state, & zi			OWNER		Γ_		
· · · · · · · · · · · · · · · · · · ·	EN DALE PHILI			l				
	OP RD			c. Employer's	Name/Specific Field	1		1
	NGTON, NC 27	217		DIESEL ENG	GINE REPAIR	L		
						e. E	lection Su	m to Date
						\$		300.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)	•	k. Amoun	t
	1	Check			08/05/2011		\$	300.00
							\$	
							\$	
3. Contr	ributor Informatio	on		Add 🔲 Rei				
	ame, Mailing Add		-,	b. Job Title/Pr	ofession	d. C	Comments	
(inclu	de city, state, & zi	p)		COMPUTER	TECHNOLOGIST			
STEVE	EN K PICKARD							
250 DIXON RD					Name/Specific Field			
	AM, NC 27253				E REGIONAL		No -4' ~	- 4a D
				MEDICAL C	ENTER	e. E	uection Su	ım to Date
						\$		100.00
f. D-,	a Association	h. Form of Payment	i. In-Kind Desc		j. Date (mm/dd/yyyy)	Щ.	k, Amoun	t
-	~ _	Check	i. in-kina Des					-
	1	CHECK			10/12/2011		\$	100.00
							\$	
							\$	
	ributor Informatio				move			
a. Full N	lame, Mailing Add	lress & Phone		b. Job Title/Pr	ofession	d. (om ments	
(inclu	de city, state, & zi	ip)		OWNER				
JOHN '	T PORTERFIELI	D	_ _		M (9	1		
	ARRIAGE CREE				Name/Specific Field	Į		
HAW F	RIVER, NC 2725	58		IMPACT FU	LFILLMENT		Bactic- C	ım to Date
						e. I	section St	im to Date
						\$		1,000.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	<u>cription</u>	j. Date (mm/dd/yyyy)		k. Amour	ıt
	1	Check			10/12/2011		\$	1,000.00
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					-		\$	
4. Tots	al only this Pa	ge				' \$	· · · · · · · · · · · · · · · · · · ·	1,400.00
5. Tota	al of ALL CRO	O-1210 Pages	9 CPO 1100			\$		22,833.00
(This line must be on line 6 of Detailed Summary Page CRO-1100)								

Pg 18 of

Amendment

Contributions from Individuals

Pg 18 of 25 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		2.	ID Number					
JOHNS	SON FOR SHERI	IFF ELECTION COM	1TTEE			P	ALA-948F8M-C-001		
	ributor Informatio				emove	_			
	Name, Mailing Add			b. Job Title/Pr	rofession	d. (Comments		
	ide city, state, & zi	ip)		BAIL BOND	SMAN				
	AEL REAVES			E James	37 - 10 - 15 - 13	-			
	HESTNUT STRE			<u> </u>	Name/Specific Field	-			
BUKLI	INGTON, NC 27	217		SELF	l	L 1	Dection Sum to Date		
i i					!		Methon Sum to Date		
	·	T	T	<u>L</u>	·	\$	200.00		
f. Prior		h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)		k. Amount		
	1	Check			09/27/2011		\$ 200.00		
							\$		
							\$		
	3. Contributor Information								
	lame, Mailing Add			b. Job Title/Pr	ofession	d. (Comments		
(inclu	ide city, state, & zi	ı p)		COMPUTER	SPECIALIST				
ANTHONY K (TONY) ROSE			c. Employer's Name/Specific Field						
1706 STRATFORD RD			!	<u> </u>		1			
BURLINGTON, NC 27217			ļ	ELON UNIV			Dection Sum to Date		
			1	!	e. 1	nection sam to Date			
						\$	100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	eription	j. Date (mm/dd/yyyy)		k. Amount		
	1	Check			10/12/2011		\$ 100.00		
							\$		
							\$		
3. Contr	ributor Informatio	on		Add 🔲 Rea	move				
a. Full N	lame, Mailing Add	ress & Phone		b. Job Title/Pr	ofession	d. (Comments		
(inclu	de city, state, & zi	p)		OWNER					
	M D SHARPE NC HWY 62			c. Employer's	Name/Specific Field				
	NGTON, NC 27	215		DOUG SHA	RPE CAROLINA				
	27-8537			HOMES		e. F	dection Sum to Date		
						\$	100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	eription	j. Date (mm/dd/yyyy)		k. Amount		
	1	Check			08/22/2011		\$ 100.00		
							\$		
							\$		
4. Total only this Page							400.00		
5. Total of ALL CRO-1210 Pages						\$	22,833.00		
(This line must be on line 6 of Detailed Summary Page CRO-1100)							22,033.00		

Amendment Pg 19 of

Contributions from Individuals

Pg 19 of 25 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. I	ID Number	
JOHNS	ON FOR SHERI	IFF ELECTION COM	IITTEE				A	LA-948F81	M-C-001
3. Contr	ributor Informatio	on		Add [Rer	move			
a. Full N	lame, Mailing Add	Iress & Phone		b. Job Title/Profession		ofession	d. C	Comments	
(inclu	ide city, state, & zi	ip)		OWNER					
	HIA K SHARPE		Ī	<u></u>		- 20			
	UBURN HILLS		!	ļ		Name/Specific Field			
GREEN	NSBORO, NC 27	7407	!	SHARI	PE AW	/ARDS		Dection Sun	- to Dota
			ļ				е. г	dection Sun	1 to Date
							\$		200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription		j. Date (mm/dd/yyyy)		k. Amount	
	1	Check				10/12/2011		\$	200.00
	:							\$	
								\$	
	ributor Informatio			·	Rer		,		
	lame, Mailing Add			b. Job Ti		ofession	d. C	Comments	
<u>-</u>	de city, state, & zi	ip)		EMPLO	OYEE				
	B SHARPE			c. Employer's Name/Specific Field					
2824 HUFFMAN MILL RD			1		-	- -	-		
BURLINGTON, NC 27215			!	BYNU	M SH	ARPE MOTORS	e F	Dection Sun	n to Date
				1			\$		300.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription		j. Date (mm/dd/yyyy)		k. Amount	
	1	Check				08/29/2011		\$	300.00
								\$	
								\$	
3. Contr	ributor Informatio	on		Add [Rer	nove			
a. Full N	ame, Mailing Add	iress & Phone		b. Job Ti	itle/Pro	ofession	d. C	Comments	
(inclu	de city, state, & zi	ip)		EMPLO	OYEE				
	AS KELLY SHIF			- Frank		Name/Specific Field	-		
	INECREST ROA	.D	!	<u> </u>	· - · · · · · · · · · · · · · · · · · ·		ł		
DURH	AM, NC 27705		!	DICK	SHIKL	EY CHEVROLET	e. [Dection Sun	to Date
							\vdash		-
				L			\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription		j. Date (mm/dd/yyyy)		k. Amount	
	Į .	Check				09/19/2011		\$	100.00
								\$	
								\$	
4. Total only this Page							\$		600.00
	al of ALL CRO				_		\$		22,833.00
(This line must be on line 6 of Detailed Summary Page CRO-1100)						1	-	22,633.00	

pg 20 of 25 Amendment No

Use this form to report ind	lividual contributions over \$50	0 or contributions under \$50	if form CRO 1205 is not used

		(and Fund if applicabl				2. 1	ID Number
JOHNS	ON FOR SHERI	IFF ELECTION COM	TITTEE			Α	ALA-948F8M-C-001
3. Cont	ributor Informati	оп		Add 🔲 Re	emove		
	Name, Mailing Ado			b. Job Title/Pr	rofession	d. C	Comments
	ide city, state, & z	ip)		OWNER			·
	HOFFNER			E el mede	** // ::	1	
		TTERSON MILL RD)		Name/Specific Field	ł	
BUKLI	INGTON, NC 27	/215		CAROLINA	SUPPLY INC	e. F	Election Sum to Date
				1	!	\$	100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount
	1	Check			09/29/2011		\$ 100.00
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	ributor Informatio				move		
	ame, Mailing Add			b. Job Title/Pr	ofession	d. C	Comments
	de city, state, & zi	ip)		RETIRED			
	SMITH		I	E	Employer's Name/Specific Field		
2714 WEST FRONTST			I	c. Employer's	Name/Specific Field	ļ	
BURLI	NGTON, NC 27	215	I		ļ	e F	Dection Sum to Date
			I		ļ		
l			I		ļ	\$	100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)	_	k. Amount
	1	Check			09/07/2011		\$ 100.00
							\$
							\$
	ributor Informatio				move		
	lame, Mailing Add			b. Job Title/Pr		d. C	Comments
	de city, state, & zi			EMPLOYEE			
	ETH STAINBAC		!	30 mass and mile	N 10 10 n Gold	İ	
	HURCHILL DRI		!	c. Employer's Name/Specific Field			
BURLI	NGTON, NC 27	215	!	MCCLURE I	FUNERAL	e. F	Dection Sum to Date
j			!	SERVICE		 	
			!			\$	200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)		k. Amount
	1	Check			09/12/2011		\$ 200.00
							\$
							\$
4. Tota	al only this Pag	ge				\$	400.00
	al of ALL CRO					_	22 022 00
		6 of Detailed Summary P	Page CRO-1100)		!	\$	22,833.00

Pg 21 of 25 Amendment Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 2. ID Number 1. Committee Full Name (and Fund if applicable) ALA-948F8M-C-001 JOHNSON FOR SHERIFF ELECTION COMITTEE ☐ Add ☐ Remove 3. Contributor Information d. Comments b. Job Title/Profession a. Full Name, Mailing Address & Phone (include city, state, & zip) OWNER JR STALLINGS SR c. Employer's Name/Specific Field 6330 DAVID MORTON RD CAROLINA CHEM STRIP OF BURLINGTON, NC 27217 e. Election Sum to Date ALAMANCE INC 400.00 f. Prior g. Account Code h. Form of Payment j. Date (mm/dd/yyyy) k. Amount i. In-Kind Description Check 1 09/27/2011 \$ 400.00 \$ \$ ☐ Add ☐ Remove 3. Contributor Information b. Job Title/Profession d. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) ELECTRICIAN WILBUR SUGGS JR c. Employer's Name/Specific Field 1464 GEORGE BASON RD GRAHAM, NC 27253 S & S ELECTRIC e. Dection Sum to Date 100.00 j. Date (mm/dd/yyyy) f. Prior g. Account Code h. Form of Payment i. In-Kind Description k. Amount Check 09/07/2011 100.00 \$ \$ \$ ☐ Add ☐ Remove 3. Contributor Information b. Job Title/Profession d. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) OWNER JENNIFER L TALLEY c. Employer's Name/Specific Field 808 SIDEVIEW ST GRAHAM SODA SHOP & GRAHAM, NC 27253 e. Election Sum to Date **GRILL** 400.00 k. Amount h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) f. Prior g. Account Code Check 09/01/2011 400.00 \$ \$ \$ П 900.00 4. Total only this Page \$ 5. Total of ALL CRO-1210 Pages \$ 22,833.00 (This line must be on line 6 of Detailed Summary Page CRO-1100)

Pg 22 of 25 Amendment N

Use this form to report individua	l contributions over \$50	or contributions under S	\$50 if form CRO	1205 is not used
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		(and Fund if applicabl				2. ID Number		
JOHNS	JOHNSON FOR SHERIFF ELECTION COMITTEE					Α	LA-948F8	M-C-001
3. Conti	ributor Informatio)n		Add 🔲 Rei	move			
	Name, Mailing Add		 -	b. Job Title/Pr		d. (Comments	
	ide city, state, & zi		<u> </u>	OWNER				
JOE A	TICKLE							
1	ARDEN RD				Name/Specific Field	-		
	NGTON, NC 27	215		JOE'S 66 SE	RVICE	ρT	Jection Sur	n to Data
(336) 5	84-4401					-		
						\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
	1	Check			08/30/2011	_	\$	100.00
						_	\$	
							\$	
	ributor Informatio				move	_		
	lame, Mailing Add			b. Job Title/Pr	ofession	d. (Comments	
	ide city, state, & zi	р)		OWNER				
ROGER VAUGHN				c. Employer's Name/Specific Field				
	RL DRIVE			GRAHAM SPORTING GOODS				
ELUN,	NC 27244			GRAHAM S	SGOOD DAILLYO T	e. Election Sum to Date		
						\$ 200.00		
L_						\$		200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
	1	Check			09/30/2011		\$	200.00
							\$	
							\$	
	ributor Informatio			- · · · · · . 	move	T-	~	
	Name, Mailing Add		_	b. Job Title/Pr		d. (Comments	
	ide city, state, & zi	(p)		INSURANCE	E AGENT			
	LD WALTERS IRCH LANE			c. Employer's	Name/Specific Field	1		
				WALKER IN	NSURANCE			
BURLI	INGTON, NC 27	215		AGENCY		e. l	Dection Sur	n to Date
						\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	<u>cription</u>	j. Date (mm/dd/yyyy)		k. Amount	:
	l L	Check			09/19/2011		\$	100.00
							\$	
						_	\$	
4. Tota	al only this Pa	ge				\$		400.00
						6		22 822 00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)				\$		22,833.00		

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)

JOHNSON FOR SHERIFF ELECTION COMITTEE

3. Contributor Information

Add Remove

	OR TOR BILLIA	FF ELECTION COM	HILEE			A	LA-948F8M-C-0	701
3. Cont	ributor Informatio	on		Add 🔲 Re	move	_		
a. Full N	Name, Mailing Add	lress & Phone		b. Job Title/Profession		d. Comments		
	ide city, state, & zi	ip)		OWNER				
	L WARREN	an a.v.		c. Employer's Name/Specific Field				
	DEEP CREEK CH			—		1		
	INGTON, NC 27 178-2931	217		C & J UTILI	TIES	e. I	Dection Sum to Da	ıte
(330) 3	76-2931							
						\$	1,000	0.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
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. Full Name, Mailing Address & Phone				b. Job Title/Pr		d. C	Comments	
(inclu	de city, state, & zi	p)		LAW ENFOR	RCEMENT			
	RT WILBORN			<u></u>				
3636 W MEADOW LANE			c. Employer's Name/Specific Field					
ELON, NC 27244				ALAMANCI	E COUNTY		dection Sum to Da	+
							gection Sum to Da	tre
						\$	100	00.0
Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
	1	Check			10/12/2011		\$ 100	0.00
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□ 3. Contr	ributor Informatio			Add 🔲 Re	nove			
3. Contr	lame, Mailing Add	lress & Phone		Add 🔲 Rei		d. (
3. Contr		lress & Phone				d. (\$	
3. Contra. Full N	lame, Mailing Add de city, state, & zi TT WILLIAMS	lress & Phone p)		b. Job Title/Pr SBI AGENT	ofession	d. (\$	
3. Contra. Full N (inclu M SCO 6067 O	iame, Mailing Add de city, state, & zi TT WILLIAMS LD ORCHARD I	lress & Phone p) ROAD		b. Job Title/Pr SBI AGENT c. Employer's	ofession Name/Specific Field	d. (\$	
3. Contra. Full N (inclu M SCO 6067 O	lame, Mailing Add de city, state, & zi TT WILLIAMS	lress & Phone p) ROAD		b. Job Title/Pr SBI AGENT c. Employer's S STATE OF N	ofession Name/Specific Field		\$ Comments	ate
3. Contra. Full N (inclu M SCO 6067 O	iame, Mailing Add de city, state, & zi TT WILLIAMS LD ORCHARD I	lress & Phone p) ROAD		b. Job Title/Pr SBI AGENT c. Employer's	ofession Name/Specific Field	е. А	S Comments Dection Sum to Da	
3. Contra a. Full N (inclu M SCO 6067 O KERNE	iame, Mailing Add de city, state, & zi TT WILLIAMS LD ORCHARD I ERSVILLE, NC 2	lress & Phone p) ROAD 27284		b. Job Title/Pr SBI AGENT c. Employer's 3 STATE OF N CAROLINA	ofession Name/Specific Field NORTH	e. H	S Comments Dection Sum to Da	nte).00
3. Contra a. Full N (inclu M SCO 6067 O KERNE	iame, Mailing Add de city, state, & zi TT WILLIAMS LD ORCHARD I ERSVILLE, NC 2	lress & Phone p) ROAD 27284 h. Form of Payment	i. In-Kind Desc	b. Job Title/Pr SBI AGENT c. Employer's 3 STATE OF N CAROLINA	ofession Name/Specific Field	e. H	S Comments Dection Sum to Da	
3. Contra a. Full N (inclu M SCO 6067 O KERNE	iame, Mailing Add de city, state, & zi TT WILLIAMS LD ORCHARD I ERSVILLE, NC 2	lress & Phone p) ROAD 27284		b. Job Title/Pr SBI AGENT c. Employer's 3 STATE OF N CAROLINA	ofession Name/Specific Field NORTH	e. H	\$ Comments Dection Sum to Da 200 k. Amount	
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3. Contra Full N (inclu M SCO 6067 O KERNE	lame, Mailing Add de city, state, & zi TT WILLIAMS LD ORCHARD I ERSVILLE, NC 2	lress & Phone p) ROAD 27284 h. Form of Payment Check		b. Job Title/Pr SBI AGENT c. Employer's 3 STATE OF N CAROLINA	ofession Name/Specific Field NORTH j. Date (mm/dd/yyyy)	e. H	Section Sum to Da 200 k. Amount \$ 200	0.00
3. Contra Full N (inclu M SCO 6067 O KERNE	lame, Mailing Add de city, state, & zi TT WILLIAMS LD ORCHARD I ERSVILLE, NC 2	Iress & Phone p) ROAD 27284 h. Form of Payment Check		b. Job Title/Pr SBI AGENT c. Employer's 3 STATE OF N CAROLINA	ofession Name/Specific Field NORTH j. Date (mm/dd/yyyy)	e. F	Section Sum to Da 200 k. Amount \$ 200 \$	0.00

				Amendm	ent
Pg	24	of	25	Yes	🔁 No
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1. Com	mittee Full Name	(and Fund if applicabl	le)			2. I	D Number
JOHNS	ON FOR SHERI	IFF ELECTION COM	TITTEE			A	LA-948F8M-C-001
	ributor Informati			Add 🔲 Re	emove		
	Name, Mailing Add			b. Job Title/Pr	ofession	d. C	Comments
(inclu	ide city, state, & zi	ip)		OWNER			
	WILSON		I		10 10 70 13		
	OSS CREEK LO	OOP	!		Name/Specific Field		
ELON,	NC 27244		!	ELON AUT		- E	Testion Com to Date
			į	ONSITE RE	ALTY	е. г	Dection Sum to Date
			!			\$	100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)		k. Amount
	1	Check			09/30/2011		\$ 100.00
							\$
							\$
3. Conti	ributor Informatio	on		Add 🔲 Re	move		\ <u></u>
a. Full N	iame, Mailing Add	Iress & Phone		b. Job Title/Pr	ofession	d. C	Comments
(inclu	de city, state, & zi	ip)		OWNER			
HENRY	Y LEE WOOD						
	WY 87 SOUTH		!	c. Employer's Name/Specific Field			
GRAHA	AM, NC 27253		!	HENRY'S A	UTO SERVICE		~ O D.4.
			!			e. E	Dection Sum to Date
						\$	300.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	eription	j. Date (mm/dd/yyyy)		k. Amount
	1	Check			08/29/2011		\$ 300.00
							\$
	<u> </u>						\$
	ributor Informatio				move		
	lame, Mailing Add			b. Job Title/Pr	ofession	d. C	Comments
(inclu	de city, state, & zi	(p)		OWNER			
JA WO	ODY LLIE PACE ROA	A ID		c. Employer's	Name/Specific Field		
	NGTON, NC 27:		Ì	WOODY'S E			
DUICL	NG1011, 110 27.	211		********	1001 31101	e. E	lection Sum to Date
						\$	100.00
f, Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	eription	j. Date (mm/dd/yyyy)	Т	k. Amount
	i	Check			09/27/2011		\$ 100.00
					07/27/2011		\$ 100,00
			ļ				\$
							\$
4. Tota	al only this Pag	ge				\$	500.00
5. Tota	al of ALL CRO)-1210 Pages				ę	22 833 00
(This line must be on line 6 of Detailed Summary Page CRO-1100)					\$	22,833.00	

C_{0}	ntribu	tions	from	Indi	vidi	ıa İç
VU	IIII IIVU	เนบแจ	шчш	HHUI	YIUU	12113

Amendment Pg <u>25</u> of

Contributions from Individuals

Pg 25 of 25 Yes

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

1. Comr	t. Committee Full Name (and Fund if applicable)						2. ID Number	
JOHNS	ON FOR SHERI	FF ELECTION COM	NTTEE			ALA-948F8M-C-001		
3. Contr	ributor Informati	on		Add 🔲 Re	emove	<u>'</u>		
a. Full Name, Mailing Address & Phone b. Job Title/Profession d.					đ. C	Comment	s	
(include city, state, & zip)			OWNER					
RONALD WRIGHTENBERRY JR								
1735 JOHNSON RD c. Employer's Name/Specific Field								
BURLINGTON, NC 27217			COMPLETE	E LAWN SERVICE				
						e. Election Sum to Date		
								100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription	j. Date (mm/dd/yyyy)		k. Amou	nt
	1	Check			09/29/2011		\$	100.00
							\$	
							\$:
4. Total only this Page					\$		100.00	
	5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$		22,833.00

CRO-1210

NC State Board of Elections

April 2007

Contributions from Other Political Committees Pg 1 of 1	Amendmer X Yes	
Use this form to report contributions from other candidate, referendum or PAC committees		

1. Committee Fo	ull Name (and Fund if	applicable)			2. I	D Number	
JOHNSON FO	R SHERIFF ELECTION	ON COMITTEE		- -	А	LA-948F8	M-C-001
3. Contributor I	nformation		Add 🔲	Remove			
a. Fuli Name, Ma	ailing Address & Phone	2	b. Type of Comp	nittee	d. C	omments	· · · · · · · · · · · · · · · · · · ·
(include city, s	state, & zip)		X Candidate	PAC			
DAN W INGLI	 E		Referendum				
6388 RASCO F	ROAD		c. Level Registe	red (Specify)]		
BURLINGTON, NC 27217			☐ Federal	County:			
			∑ State	Municipality:	c. Đ	ection Sum	to Date
					\$		300.00
f. Account Code	g. Form of Payment	h. In-Kind Descrip	ption	i. Date (mm/dd/yy	yyy)	j. Amount	
1	Check			08/23/2011		\$	300.00
						\$	
						\$	
3. Contributor I			·	Remove			
	iling Address & Phone	;	b. Type of Comm		d. C	omments	
(include city, s	state, & zip)		☑ Candidate	PAC			
PARKER FOR	HOUSE-63		Referendum				
1617 SAINT A	NDREWS DRIVE		c. Level Registered (Specify)				
MEBANE, NC	27302		Federal	= '	County:		
			∑ State	Municipality:	е. Ы	ection Sum	to Date
					\$		100.00
f. Account Code	g. Form of Payment	h. In-Kind Descrip	otion	i. Date (mm/dd/yy	уу)	j. Amount	
1	Check			10/12/2011		\$	100.00
						\$	
						\$	
4. Total only this	s Page	.1	······································		\$	 	\$400.00
	CRO-1230 Pages be on line 8 of Detailed St	ummary Page CRO-1.	100)		\$		\$400.00

CRO-1230

NC State Board of Elections

April 2007

Other I	Receipt	Sources
---------	---------	----------------

				- Amendm	ent
Pg	_1_	of	1	Yes Yes	No No

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

1 Committee Fr	Ill Name (and Fund if	applicable)			2 1	D Number	r
		1					
JOHNSON FOI	R SHERIFF ELECTION	ON COMITTEE			A	LA-948F	8M-C-001
3. Type of Recei	pt Source (Please u.	se separate CRO-1	250 forms	for each type of Reco	eipt .	Source.)	
Interest				nizations X Outside So			
4. Contributor I	nformation		Add \Box	Remove			
	iling Address & Phone	· ————	b. Not-for	-Profit Federal ID#	d. C	Comments	
(include city, s	tate, & zip)				TH	S CHECK V	WAS
FREEMAN EL	FCTRIC LLC		1			POSITED IN	
1065 DUNMOI			c. Outsid	e Source Explanation			REFUNDED
BURLINGTON				· · · · · · · · · · · · · · · · · · ·	. אינו	IANUARY 2	2012.
DOREMOTOR	,,110 27213				e. E	lection Su	m to Date
					\$		500.00
					J		500.00
f. Account Code	g. Form of Payment	h. In-Kind Descri	ption	i. Date (mm/dd/y	ууу)	j. Amoun	t
1	Check			10/05/2011		\$	500.00
						\$	
5. Total only	this Page				\$		500.00
6. Total of Al	LL CRO-1250 Pa	ges					
	n line 11a of Detailed Su	-	00 if Interes	t)	\$		500.00
, ,	line 11b of Detailed Su				D		200.00
,	n line 11c of Detailed Sui						
CDO 1250			and of Flect			17	ecember 2007

CRO-1250

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				Amenum	ent
Pg	1	of	3	Yes Yes	No
enses	contrib	oitu	ns to car	ndidate/no	ditical

1. Committee F	ull Name (and Fund	if applicable)					2. ID Number	r
JOHNSON FO	R SHERIFF ELECT	ION COMITTEI	Ξ				ALA-948)	F8M-C-001
3. Type of Disbu	irsement <i>(Please</i>	use separate CRO)- <i>1310</i>	forms for eac.	h type of Disbu	rseme	ent.)	
Operating Exp	penses X Cont	ributions to Candida	es/Polit	ical Committees	☐ Coo	ordinat	ed Party Expen	ditures
4. Payee Inform	ation			Add 🔲	Remove		. <u></u>	
a. Full Name, Ma	ailing Address & Ph	one		b. Coordinate	d Committee N	am e	d. Comments	
(include city, sta	te, & zip)							
l .	COUNTY REPUBLI	CAN PARTY						
608 N O'KELL				c. Level Regis	tered (Specify) Z County:			
ELON, NC 272	244			State	☐ Municip		e. Dection Su	m to Date
				Alamance			\$	480.00
5.4		l. n	I		1:			
		h. Purpose Code			 	к. Ке	quired Remar	K S
<u>l</u>	Check	G	08	3/23/2011	\$ 280.00			
					\$			
4. Payee Inform				Add 🗖	Remove			
i .	ailing Address & Pho	one		b. Coordinate	d Committee Na	am e	d. Comments	
(include city, sta								
	OUNTY REPUBLI	CAN PARTY		e Lavel Pogis	tered (Specify)			
PO BOX 69	VC 27201			Federal	County:			
ALAMANCE, 1	NC 2/201			☐ State	☐ Municip		e. Dection Su	m to Date
				Alamance	<u></u>			
					Y*** * * * * * * * * * * * * * * * * *		\$	810.00
	•			(mm/dd/yyyy)		k. Re	quired Remar	ks
1	Check	G	09	9/14/2011	\$ 310.00			
					\$			
4. Payee Inform	ation			Add 🔲	Remove			
a. Full Name, Ma	iling Address & Pho	one		b. Coordinate	d Committee Na	ım e	d. Comments	
(include city, sta	te, & zip)							
	OUNTY REPUBLI	CAN WOMEN		a I amil Danie				
413 SMITH ST	NG 05015			Federal	tered (Specify) Z County:			
BURLINGTON	, NC 2/21/			☐ State			e. Bection Su	m to Date
 - -							\$ 1,90.90	7 - 500:00 -
F. Assount Cada	g. Form of Payment	h Purnose Code	i Doto	(mm/dd/www)	i Amount	l Re	quired Remark	
1. Account Code		G		0/06/2011	\$ 500.00	K. Ac		
	Check	U	10					.
					\$			
5. Total only this	s Page				<u> </u>	į	\$	1,090.00
6. Total of ALL	CRO-1310 Pages					;		
(This line goes in	n line 13a of Detailed S	ummary Page CRO-	1100 if	Operating Expci	uses)		\$	3,590.00
	r line 13b of Detailed S r line 13c of Detailed S		_			omm)		0,000
7. Purpose Co	des (List detailed	expenditure code	in (h.) a	ibove)				
A* - Media	B* - Printin			undraising	D - To	Anotl	ner Candidate	
E - Salaries	F* - Equipme			itical Party			Public Office	
I - Postage	J - Penalties	3	K* - O	ffice Expenses	Q* - D	onatio	n to Legal Exp	pense Fund
O* Other	3-4-21-3 3 3			34 (I-)				
" Codes require	detailed explanation	a in required rem	arks fi	еіа (к)				

Dis	hu	rse	me	nts
7/13	IJΨ	136	1111	TI LO

				- Amendm	e n t	
Pg	2_	of	_3_	Yes Yes		No

1. Committee Fu	II Name (and Fund i	f applicable)		· - · · · · · · · · · · · · · ·				2. JD Nu	mber
	R SHERIFF ELECT		<u> </u>		_			ALA	948F8M-C-00
3. Type of Disbu	rsement (Please i	use separate CRC)-1310	forms for each	type o	f Disbu	semei	nt.)	
Operating Exp		ibutions to Candidat							xpenditures
4. Payee Informa				Add 🔲	Remov	/e			
	iling Address & Pho	ne		b. Coordinate			m e	d. Com n	ents
(include city, sta									
DAN W INGLE									
6388 RASCO R				c. Level Regis					
BURLINGTON				☐ Federal		County:	L		
	,			X State		Municip	ality:	e. Electio	on Sum to Date
								\$	1,000.0
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Ama	unt	k. Red	quired R	emarks
1	Check	D	08	3/23/2011	\$ 1,	00.000			
<u>. </u>					\$				
4. Payee Informa	ation	<u> </u>		Add 🔲	Remo	ve			
	ailing Address & Pho	one		b. Coordinate			ıme	d. Com n	ents
(include city, sta									
PARKER FOR			_	1					
	NDREWS DRIVE			c. Level Regis	tered (S				
MEBANE, NC				Federal Federal		County:			
				X State	L	Municip	ality:	e. Electi	on Sum to Date
								\$	250.0
f. Account Code	g. Form of Payment	h, Purpose Code	i. Date	(mm/dd/yyyy)	j. Am o	unt	k. Re	quired R	emarks
1	Check	D		0/28/2011		250.00			<u></u>
	Check				\$		-		
4.70	- t*			Add 🔲	Remo	ve			
4. Payee Inform	ation ailing Address & Ph			b. Coordinate			ате	d. Comn	n e n ts
•	-	one		B. 60074111111					
(include city, sta	Y FOR GOVERNO	AD.		1					
PO BOX 98027		·K		c. Level Regis	tered (Specify)			
RALEIGH, NC				Federal		County			
I CALLIOII, IIC	21024			X State		Municip	ality:	e. Electi	on Sum to Date
								\$	1,000.
f Account Code	g. Form of Payment	h. Purpose Code	j. Date	(mm/dd/vvvv)	j. Am	ount	k. Re	quired R	temarks
· · · · · · · · · · · · ·	Check	D		9/14/2011		,000.00			
1	CHECK		ļ); I TI 4 U J I	1	, , , , , , , , , , , , , , , , , , , ,			
			<u> </u>		\$				
5. Total only thi	s Page							\$	2,250.
6. Total of ALL	CRO-1310 Pages								
(This line goes i	n line 13a of Detailed .	Summary Page CRO	7-1100 ij	f Operating Expe	nses)			\$	3,590.
(This line goes i	n line 13b of Detailed .	Summary Page CRO)-1100 ij	f Contrib to Cand	tidates/1	Political C	Comm)		•
(This line goes i	n line 13c of Detailed S	Summary Page CRO	-1100 ij	Coordinated Pa	rty Exp	enditures)		İ	
7. Purpose Co	odes (List detailed	expenditure code	in (h.)	above)					
A* - Media	B* - Printis			undraising		D - To	Anot	her Cano	lidate
E - Salaries	F* - Equipm	_	G - Po	olitical Party					Office Expens
I - Postage	J - Penaltie		K* - (Office Expense	S	Q* - T	onatio	on to Leg	gal Expense Fu
O* Other									
* Codes requir	e detailed explanation	on in required rea	narks i	field (k)					

D	is	b	urs	em	en	ts
v	12	v	ulo	CHI	CII	L.S

				Amendm	ent
Рg	3	of	3	Yes Yes	N 📆

	coordinated party c.	<u> </u>							
1. Committee F	ull Name (and Fund	if applicable)						2. ID Nu	
JOHNSON FO	R SHERIFF ELECT	TON COMITTEE	3					ALA-	948F8M-C-001
<u>_</u>		-							
3. Type of Disbu		use separate CRO							
Operating Ex	penses X Cont	ributions to Candidat	es/Polit	ical Committee	S	☐ Co-	ordinat	ed Party E	xpenditures
4. Payee Inform				Add 🔲	Rer	nove	•		
a. Full Name, M	ailing Address & Ph	one		b. Coordinat	ed Co	mmittee N	am e	d. Comm	ents
(include city, sta	ate, & zip)								
RIDDELL FOR	R NC HOUSE 64								
6343 BEALE R	ROAD			c. Level Regi	stere				
SNOW CAMP,	, NC 27349			☐ Federal		County			
				X State		☐ Municip	pality:	e. Electio	n Sum to Date
								\$	250.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy) j. A	mount	k. Re	quired Re	marks
1	Check	D	12	2/23/2011	\$	250.00	!		
		-			\$				
5. Total only thi	s Page				-1			\$	250.00
6. Total of ALL	CRO-1310 Pages				· · · · · ·				
	in line 13a of Detailed S	Summary Page CRO	.1100 if	Operating Exp.	enses)				
. •	in line 13b of Detailed S		-				omm)	\$	3,590.00
	in line 13c of Detailed S						- 1		
7. Purpose Co	odes (List detailed	expenditure code	in (h.) a	above)					
A* - Media	B* - Printin	g	C* - F	undraising		D - To	Anoth	ner Candi	date
E - Salaries	F* - Equipme	ent	G - Po	litical Party		H* - H	olding	Public O	ffice Expenses
I - Postage	J - Penaltie	s	K* - 0	office Expense	es	Q* - D	onatio	n to Lega	l Expense Fund
O* Other									
* Codes require	e detailed explanatio								
CRO-1310		NC S	ate Boa	rd of Elections					December 2009

D	ic	h	F3 I	•€	P	m	ρ	n	te
v	10	w	u	. J	C	111	C	ш	LO

				Antendme	ent	
Pg	1	of	4	X Yes	u.	No

1. Committee F	ull Name (and Fund i	ıf applicable)					2. ID Num	ber		
OHNSON FOR SHERIFF ELECTION COMITTEE ALA-948F8M-C-001 Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)										
3. Type of Disbu										
X Operating Exp	penses Contr	ributions to Candidat					ted Party Exp	enditures		
4. Payee Inform					Remove					
	ailing Address & Pho	one		b. Coordinated	d Committee Na	me	d. Commer	its		
(include city, sta										
	COUNTY REPUBLI	.CAN PARTY	,	- 1 77 -:-]			
608 N O'KELL'			1	c. Level Regist Federal	tered (Specify) X County:		4			
ELON, NC 272	244		I	State			a Bection	Sum to Date		
			j	Alamance	<u> </u>		\$	480.00		
f. Account Code	g. Form of Payment	h. Purpose Code	li. Date	(mm/dd/yyyy)	i Amount	k. Re	 equired Rem	arks		
1	Check	G			\$ 200.00		4			
					\$					
4 Davis Inform	<u> </u>	<u></u>								
4. Payee Information Ma	nation ailing Address & Pho				Remove d Committee Na	- тп р	d. Commen	- 6.0		
a. Full Name, Ma (include city, sta	-	one	ļ	D, COULDINATED	1 Committee ma	nie	a. Comme.	its		
ALAMANCE N				1		ļ				
ALAMANCE N 114 WEST ELN			'	c. Level Regist	tered (Specify)		†			
GRAHAM, NC			,	Federal	County:		†			
Old III,	41433		!	State	☐ <u>Municip</u>	ality:	e. Dection	Sum to Date		
							\$ 750	1,472.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Rem	arks		
1	Check	Α	12	2/09/2011	\$ 750.00	ADV	VERTISINO	}		
					\$					
4. Payee Inform:					Remove					
· ·	ailing Address & Pho	one		b. Coordinated	d Committee Na	m e	d. Commen	its		
(include city, sta			!	1		!				
APPLE TIME I	NC		J	c. Level Registe	(Cnocify)		-			
PO BOX 1210	77.00		I	Federal	County:		-			
CANTON, TX	75103		1	State			e. Dection	Sum to Date		
			1				1.			
							\$	1,542.73		
l. Account Code	g. Form of Payment	h. Purpose Code					quired Rem			
1	Check	С	11	1/14/2011	\$ 1,164.08		T ITEMS F			
1	Check	0	12	2/05/2011			APAIGN IT	EMS TO		
							EAWAY			
5. Total only this	s Page						\$	2,492.73		
6. Total of ALL	CRO-1310 Pages]				
	n line 13a of Detailed Si	ummary Page CRO-	-1100 if	Operating Expen	ises)	1	s .	5,820.09		
(This line goes in	n line 13b of Detailed Si	Summary Page CRO-	-1100 if	Contrib to Candi	idates/Political Co	mm)	D	3,040.07		
(This line goes in	n line 13c of Detailed St	ummary Page CRO-	1100 if	Coordinated Pari	ty Expenditures)					
	o des (List detailed o									
A* - Media	B* - Printing	_		undraising			her Candida			
E - Salaries	F* - Equipme			litical Party				ice Expenses		
I - Postage	J - Penalties	3	K* - O	office Expenses	Q* - Do	onatio	on to Legal ?	Expense Fund		
O* Other	7 4 9 - 4 44 a	* · · · · · · · · · · · · · · · · · · ·	l-o f	2.13 <i>0</i> ,3						
* Codes require	e detailed explanatior	a in requirea rem	arks n	.ela (K)						

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1)	15	hu	rs	e	m	ρ	nts	3

				Amename	ent
g	2	of	4	X Yes	X N

1. Committee F	ull Name (and Fund i	f applicable)					2. ID Nu	
JOHNSON FO	R SHERIFF ELECT	ION COMITTER	3	. •			ALA-	948F8M-C-001
3. Type of Disbu	irsement (Please	use separate CR()-131 <i>0</i>	forms for eac.	h type of Disbu	rseme	nt.)	
X Operating Exp	oenses	ributions to Candidat	tes/Polit	ical Committees	Coo	ordinat	ed Party E:	xpenditures
4. Payee Inform	ation			Add 🔲	Remove			
a. Full Name, M	ailing Address & Ph	one		b. Coordinate	d Committee N	am e	d. Comm	ents
(include city, sta	te, & zip)							
BISCUITVILL	E INC	-]	
213 WEST RIV	ER STREET				tered (Specify)]	
GRAHAM, NC	27253			Federal	County:			
				☐ State	☐ Municip	ality:	e. Hectio	n Sum to Date
							\$	257.96
f. Account Code	g. Form of Payment		i. Date	(mm/dd/yyyy)		k. Re	quired Re	marks
1	Check	С	10	0/04/2011	\$ 257.96	BISC	CUITS FO	OR GOLF
			 		\$	TRO	UNAME	NT
4. Payee Inform	ation			Add 🔲	Remove			<u>.</u>
	ailing Address & Pho	one			d Committee Na	am e	d. Comm	ents
(include city, sta	-							·
	JNITED METHOD	IST CHURCH BO	ΟY	1				
SCOUTS				c. Level Regis	tered (Specify)		j	
	HIP-PATTERSON	MILL RD		☐ Federal	County:			
BURLINGTON	i, NC 27215			☐ State	☐ Municip	ality:	e. Dectio	n Sum to Date
							\$	300.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	li. Amount	k. Re	uired Re	marks
1	Check	0	t —	2/19/2011	\$ 300.00			ION TO BOY
•	Chook		12	2/17/2011		SCO		1011 10 10 1
					\$			
4. Payee Inform	ation			Add 🔲	Remove			
a. Full Name, Ma	iling Address & Pho	опе		b. Coordinate	d Committee Na	ıme	d. Comm	ents
(include city, sta	te, & zip)							
QUAKER CRE	EK GOLF COURSE	3						
2817 BARNET	T ROAD				tered (Specify)			
MEBANE, NC	27302			Federal	County:		a Plantin	n Sum to Date
				☐ State	Municip	amy.	e. Mectio	1 Sum to Date
							\$	900.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Re	marks
1	Check	С	10	0/10/2011	\$ 900.00	GOL	F TOUR	NAMENT
					\$	PRIZ	ŒS	
5. Total only this	s Page				<u> </u>		\$	1,457.96
	CRO-1310 Pages							
	n line 13a of Detailed S	ummaru Paga CRO.	.1100 if	Oneratina Fyne	ncoc)			
	u line 13b of Detailed S					omm)	\$	5,820.09
	n line 13c of Detailed S					,		
7. Purpose Co	des (List detailed	expenditure code	in (h.) a	above)				
A∗ - Media	B* - Printin	g	C* - F	undraising	D - To	Anotl	ner Candio	late
E - Salaries	F* - Equipme	ent	G - Po	litical Party	H* - He	olding	Public O	office Expenses
I - Postage	J - Penalties	3	K* - O	ffice Expenses	9 Q* - D	onatio	n to Lega	l Expense Fund
O* Other			_					
* Codes require	detailed explanation	n in required rem	arks fi	ield (k)				

•		*							
D	15	h	H	rς	ρ	m	e	n	ts

				Amendme	ent	
Pg	3_	of	4	💢 Yes	Á	No
		hostin.	ma to an	n didata/na	lition	1

1. Committee Fu	ıll Name (and Fund i	f applicable)					2. ID Num	
JOHNSON FO		ALA-9	48F8M-C-001					
3. Type of Dis bu	rsement (Please)	use separate CRC	D-1310	forms for each	type of Disbu	rseme	<u>nt.)</u>	
X Operating Exp	enses	ributions to Candidat	tes/Polit	ical Committees	Coc	rdinat	ed Party Exp	enditures
4. Payee Inform	ation			Add 🔲	Remove			
a. Full Name, Ma	ailing Address & Pho	one		b. Coordinate	d Committee Na	ıme	d. Comme	nts
(include city, sta	te, & zip)							
SHS ATHLETI				, , , , , , , , , , , , , , , , , , ,	1 (C :E.)			
	N HIGH SCHOOL	RD		Federal	tered (Specify) County:			
GRAHAM, NC	27253			State	☐ Municip		e. Election	Sum to Date
					<u> </u>		\$	500.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	l (mm/dd/yyyy)	j. Amount	k. Re	quired Ren	arks
1	Check	Α		8/15/2011	\$ 500.00	ADV	ERTISIN	G SIGNS
					\$			
4. Payee Inform	ation	<u> </u>	ΤП	Add 🔲	Remove			·
	niling Address & Pho	one			d Committee Na	ım e	d. Comme	nts
(include city, sta	_						·	
SIGN CRAFTE								
2001 MAPLE A					tered (Specify)			
BURLINGTON	, NC 27215			Federal	County:		T3	C (D-A:
				☐ State	LI Municip	anty:	e. Election	Sum to Date
							\$	392.12
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Ren	ıarks
1	Check	О	10	0/04/2011	\$ 392.12	SIG	NS FOR G	OLF
					\$	TOU	IRNAMEN	IŢ · · ·
4. Payee Inform	ation			Add □	Remove			
	niling Address & Pho	one	<u> </u>	b. Coordinate	d Committee Na	ıme	d. Comme	nts
(include city, sta								
STEVE'S GAR	DEN MARKET							
329 WEST HAI	RDEN ST			c. Level Regis	tered (Specify) County:		ļ	
GRAHAM, NC	27253			State			e Flection	Sum to Date
				<u> </u>				
							\$	539.28
f. Account Code	g. Form of Payment	h, Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Ren	arks
1	Check	С	10	0/11/2011	\$ 539.28	FOO	D FOR GO	OLF
					\$	TOU	IRNAMEN	IT
5. Total only this	s Page		<u> </u>				\$	1,431.40
	CRO-1310 Pages							
	n line 13a of Detailed S	Summanı Paga CRO	_1100 if	Op <i>erating</i> Fyne	nses)		! 	
	n tine 134 of Detailed S n line 13b of Detailed S					omm)	\$	5,820.09
	n line 13c of Detailed S							
7. Purpose Co	des (List detailed	expenditure code	in (h.)	above)	· · · · · ·			
A* - Media	B* - Printin			undraising	D - To	Anot	her Candid	ate
E - Salaries	F* - Equipm	ent		litical Party				fice Expenses
I - Postage	J - Penaltie	S	K* - C	Office Expense:	s Q* - D	onatio	on to Legal	Expense Fund
O* Other	. dotalled	n in nominal	oorles f	ald (la)				
i n Coaes reguire	e detailed explanatio	a in requireu ren	uair KS I	iciu (v)				

-	•	¥							
D	10	h	TE!	rc	ρ	m	ρ	n	tc
_	10	•			•		\sim	44	

				Amendm	ent
Pg	4	of	_4_	Yes	No.
		4 . *		311 . /	45.4

	Ill Name (and Fund				· · ·				2. ID Nur	nber
	R SHERIFF ELECT		Ξ					•	ALA-9	948F8M-C-001
3. Type of Disbu	rsement (Please	use separate CRC)- <i>1310</i>	forms for	each	type o	Disbu	rseme	nt.)	
M Operating Exp	enses Cont	ributions to Candidat	es/Polit	ical Commi	ttees		Cod	ordinat	ed Party Ex	penditures
4. Payee Informa	ation			Add 🔲	Ī	Remov	e			
	illing Address & Ph	one		b. Coordi	nated	Comm	ittee Na	ame	d. Comme	nts
(include city, sta										
STRIKE ZONE				. II D	1 ? . 4	1 (0.	:6\		ł	
!	BASON ROAD			c. Level R			County:		{	
GRAHAM, NC	2753			State	11	_	-		e. Election	Sum to Date
				<u></u>					\$	100.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	 	vvv)	i. Amou	ın t	k. Re	quired Res	
1	Check	0	<u> </u>	1/04/2011	$\overline{}$		00.00		· VTRIBUT	*
			<u> </u>	1,0 1,2011		\$ \$		001		
4. Payee Informa	etion	<u>.</u>	\Box	Add \square		Remov	<u> </u>			
	iling Address & Ph	one		b. Coordi				ıme	d. Comme	nts
(include city, stat	_	one								
	INTERNATIONA	I.								
115 WILSON S				c. Level R						
GRAHAM, NC	27253			Federa	ıl		County:		<u> </u>	
				State		<u> </u>	Municip	ality:	e. Bection	Sum to Date
									\$	250.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/y	ууу) ј	j. Am ou	nŧ	k. Re	quired Res	marks
1	Check	0	1	1/17/2011	:	\$ 2	50.00	CON	TRIBUT	ION TO A
					-	\$		NOT	FOR PRO	OFIT
4. Payee Informa	rtion	· · · · · · · · · · · · · · · · · · ·		Add 🔲		Remov	•			
	iling Address & Ph	one		b. Coording				ım e	d. Comme	nts
(include city, stat	•									
U S POST OFFI										
SOUTH MARS	HALL ST			c. Level R						
GREAHAM, NO	C 27253			☐ Federa	ıl		County: Municip		o Cleation	1 Sum to Date
				State			withincip	anty.		1 Sum to Date
									\$	184.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yy	ууу) ј	j. Amou	nt	k. Re	quired Res	marks
1	Check	I	0:	8/31/2011		\$	44.00			
1	Check	I	10	 0/31/2011		\$	44.00			
5. Total only this	Page		<u> </u>	,					\$	438.00
6. Total of ALL 0	CRO-1310 Pages							.,		
	line 13a of Detailed S	Summary Page CRO-	-1100 if	Operating I	Ехреп:	ses)			e e	£ 820.00
(This line goes in	t line 13b of Detailed S t line 13c of Detailed S	Summary Page CRO-	-1100 if	Contrib to C	Candid	dates/Po		omm)	\$	5,820.09
7. Purpose Co	des (List detailed	expenditure code	in (h.)	above)						
A* - Media	B* - Printin			undraising	g		D - To	Anoth	her Candid	late
E - Salaries	F* - Equipm	_		litical Party	_					ffice Expenses
I - Postage	J - Penaltie		K* - C	Office Expe	enses		Q* - D	onatio	n to Legal	l Expense Fund
O* Other										
* Codes require	detailed explanatio	n in required ren	ıarks f	ield (k)						

Aggregated Non-Media E	xpenditures
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Page 1 of 1 Yes No

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

		orting non-ividua	1				anta anti-
		ELECTION COMIT			2. ID		0497974 C 001
JOHNSON	TOK SHEKIT	ELECTION COM)				ALA-	-948F8M-C-001
3. Payee Inf	formation						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Am	ount	g. Required Remarks
☐ Add ☐ Remove	1	Check	G	12/23/2011	\$	25.00	
4. Total o	nly this Page				\$		25.00
	f ALL CRO-1 nust be on line 14 o	315 Pages f Detailed Summary Pa	ge CRO-1100)		\$		25.00
6. Purpos E - Salar I - Posta O* - Ot	B* ies F* ge J-	letailed expenditu - Printing - Equipment Penalties	C* - Fundr G - Political	aising D - Party H *:	To And Hold	other Car l ing Pub l	ndidate lic Office Expenses Legal Expense Fund
* Codes	require detai	led explanation i	n required ren	narks field (g)			
CRO-1315		NC Sta	ate Board of Electio	ns			December 2009

Loan Repaym	ents
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		Amendment					
Pg	1	o f	_1_	囡	Yes	(8)	No

Use this form to report payments on an existing loan.

1. Committee Full Name (ar	id Fund if applica	ble)		2. ID Numbe	er
JOHNSON FOR SHERIFF ELECTION COMITTEE				ALA-948F8M-C-001	
3. Lender Information		☐ Add	Remove		
a. Full Name, Mailing Addre (include city, state, & zip)	ss & Phone			b. Comment	s
TERRY JOHNSON 3934 SPANISH OAK HIL	L RD			c. Original I	oan Date
SNOW CAMP, NC 37349 (336) 229-4872					3/2011
(620) 223 1012				d. Original I	Joan Amount
				\$	800.00
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repaymen	t Amount
\$ 0.00	1	Check	09/23/2011	\$	800.00
\$				\$	
4. Total only this Page				\$	800.00
5. Total of ALL CRO- (This line must be on line 15	~	ry Page CRO-1100)		\$	800.00

CRO-1420

NC State Board of Elections

December 2007

Amendment

In-Kind Contributions

Pg 1 of 1 Yes No

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 COMITTEE	,		ALA-	948F8M-C-001
3. Contributor Information	Add 🔲 Re	emove		
a. Full Name, Mailing Address & Phone	b. Type of Cor	atributor	c. Con	nments
(include city, state, & zip)	Individual			
Aggregated Individual Contribution	Candidate		İ	
	Party			
	☐ PAC ☐ Referendum	_	1 7	
	1		d. Hec	tion Sum to Date
	Other Receipt Source		\$	50.00
c. Description		f. Date (mm/de	Јуууу)	g. Fair Market Amount
2-\$25.00 GIFT CERTIFICATES		09/07/20	11	\$ 50.00
				\$
				\$
3. Contributor Information				
a. Full Name, Mailing Address & Phone	b. Type of Con	tributor	c. Com	ments
(include city, state, & zip)	Individual			
RICHARD BELTON	Candidate			
2639 MABLETON DRIVE	Party PAC			
BURLINGTON, NC 27217	Referendun	1	d Floo	tion Sum to Date
	Other Rece		u. Erec	non Sum to Date
		.p.: 55 th 55	\$	2,240.00
e. Description		f, Date (mm/dd	/уууу)	g. Fair Market Amount
GOLF FEES		10/12/20	11	\$ 2,240.00
				\$
				\$
3. Contributor Information	Add 🗆 Rei	nove		
a. Full Name, Mailing Address & Phone	b. Type of Con	tributor	c. Com	ments
(include city, state, & zip)	Individual			
BRAD KOURY	Candidate Party			
1513 ALTAMAHAW-UNION RIDGE RD	PAC			
ELON, NC 27244	Referendum		d Flect	ion Sum to Date
	Other Recei			
	<u> </u>		\$	493.00
e. Description		f. Date (mm/dd.	уууу)	g. Fair Market Amount
12 MEALS AND ROOM RENTAL		09/21/201	1	\$ 493.00
				\$
				\$
4. Total only this Page			\$	2,783.00
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO	0-1100)		\$	2,783.00