Amendment

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 I	nformation					-			
a. Full Name	utor mauon							<del> </del>	c. ID Number
JOHNSON FO	R SHERIFF E	ELECTION CO	MITTE	E			<u> </u>		ALA-948F8M-C-001
b. Mailing Addr	ess (include Ci	ty, State and Zi	p Code)			-			d. Date Filed
3530 CARDW BURLINGTO					•				07/15/2012
BOKLINGTO	14, NC 2/213								e. Phone Number
									(336) 227-1495
2. Report Year	3. Period Sta	rt Date (mm/dd/	уу)	4. Period	End Da	te (	mm/dd/yy)	5. Treasur	er Full Name
2012	0	1/01/2012						PAUL E C	
6. Type of Com	mittee (Check	Опе)	9. Typ	e of Repor	t (ci	hec	k only one	type of rep	ort from one category)
X Candidate Can	npaign 🔲 Pa	rty	Munic			Sta	te/County		Referendum
Joint Fundrais	ser 🔲 PA	ıC		Organizatio	nal		Organizatio	nal	Organizational
Referendum	Le	gal Expense Fund		Thirty-five	day		Quarterly		Pre-referendum
7. Type of Fund		le, check one)	10	Pre-primar		П	First		Final
"Booster Fund		······································	lō	Pre-election		ıĦ	Second		Supplemental Final
Building Fund			15	Pre-runoff	_	Н	Third		☐ Annual
_	lection Year Car	rdidates Fund		Semi-annua	1	片	Fourth		Special
	npaign Financin			Mid Ye		-	Semi-annual		C. Spoots
I Ne i abile can	npaign i manem	g r wid		Year E		-			10. Special Report Name
Contracti			IB		bu .		Year Er		10. Special Report Name
Other:				Final		벋		ıa	
8. Number of Fu	indraisers this	s Report	□	Special		띨	Final		
	0					Ш	Special		
3. Account Info	rmation		<u> </u>	<del></del>	3. Acc	ОП	t Informati	on	<del>L</del>
a. Financial Inst		me					al Institutio		e
WACHOVIA						•		-	
b. Purpose		c. Account Cod	le		b. Purp	юзе	;		c. Account Code
RUN CAMPAI	GN		1						
		d. Period Begin	Balan	ce					d. Period Begin Balance
		8 .0 .00	201		ļ				\$
		\$ 13,588	1 . 7 1						
Chapter 163 of funds. I further fac   E	he Committee of f the NC Gener	ral Statutes and this report is co	that no	funds are true and c	commin orrecta	ngle nd	ed with prol	hibited or o	2A, 22B & 22D-22M of other non-disclosed ed by the NC State Board  07/15/2012  Date
FOR OFFICE U	SEONLY			<u></u>					
Date Receive	ed: _	7-17-12	_	Emplo	yee: _	ل	6		ivery Method Normal Mail
Date Postma	rked:		_	Emplo	yee: _		<u> </u>	- <b>Þ</b> ⊈	Registered Mail Hand Delivered
Date Scanne	-d:	····	_	Emplo	yee: _			. 0	Electronically Filed
Date Data En	ntered:			Emplo	yee: _				Signer has not received mandatory training
	assista	annot be used to nt treasurer, cus d the Statement	stodian	of books i	nformat	ion	, or accoun	t informatio	

Amendment

Detailed Summary
Use this form to summarize all disclosure reporting forms and to total monetary information Yes Yes ₩ No

1. Committee Full Name (and Fund if applicable)	2. Type of Re	port		D Num	ber
JOHNSON FOR SHERIFF ELECTION COMITTEE	2012 Mid Ye	ear Semi-Annual	A	LA-94	8F8M-C-001
Start of Election Cycle: January 1, 2011		Total this Reporting Peri	od	1	Total this ection Cycle
4) Cash on Hand at Start		\$ 13,588	.91	\$	590.97
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0	.00	\$	2,170.00
6) Contributions from Individuals	(CRO-1210)	\$ 925	.00	\$	23,858.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0	.00	\$	0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0	.00	\$	400.00
9) Loan Proceeds	(CRO-1410)	\$ 0	.00	\$	800.00
(0) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0	.00	\$	0.00
11) Other Receipt Sources		Port Comment			e de la composición de la composición Ancidad de la composición de
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0	.00	\$	0.00
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ 0	.00	\$	0.00
11c) Outside Sources of Income	(CRO-1250)	\$ 0	.00	\$	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,	lld and lle)	\$ 925	.00	\$	27,728.00
EXPENDITURES				weze sisse	
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$ 4,361	.00	\$	10,277.09
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 2,110	.78	\$	6,391.75
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0	.00	\$	0.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 0	.00	\$	25.00
15) Loan Repayments	(CRO-1420)	\$ 0	.00	\$	800.00
(6) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0	.00	\$	0.00
(7) In-Kind Contributions	(CRO-1510)	\$ 0	.00	\$	2,783.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,	, 16 and 17)	\$ 6,471	.78	\$	20,276.84
9) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$ 8,042	.13	\$	8,042.13
ADDITIONAL INFORMATION	(000 1000)		00		
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)		.00		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	<del></del>	.00		
22) Debts and Obligations owed by the Committee	(CRO-1610)		.00		
23) Debts and Obligations owed to the Committee	(CRO-1620)		.00		
24) Account Transfers Within the Committee	(CRO-1720)	<u> </u>	.00		
25) Administrative Support	(CRO-1710)	\$ 0	.00	\$	0.00
26) Forgiven Loans	(CRO-1440)	\$ 0	.00	\$	0.00
27) 48-Hour Notice Reports Sum	(CRO-2220)	<del></del>	.00	\$	0.00
28) Contributions to be Refunded  CRO-1100 NC State Board	(CRO-1215)	\$ 0	.00	\$	0.00 August 2008

## Contributions from Individuals Pg 1 of 2 Amendment Yes 2

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	le)				2. ID Number		
JOHN	SON FOR SHER	IFF ELECTION COM	ЛТТЕЕ				ALA-948F8M-C-001		
3. Cont	ributor Informati	on		Add	Re	move	_		
	Name, Mailing Ad			b. Job Title/Profession			d. (	Comments	
(incl	ude city, state, & z	ip)		OPERATOR .					
CLAR	ENCE G BYRD.	TR							
3361A	GARDEN ROAL	D		c. Emple	yer's l	Name/Specific Field			
BURL	INGTON, NC 27	7215		QUAL	ITY E	QUIPMENT LLC	L_		
							e. i	Lection Sum to Date	
							\$	200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	Description j. Date (mm/dd/yyyy			<u> </u>	k. Amount	
	1	Check	<del> </del>			04/30/2012		200.00	
	•					04/30/2012		\$ 200.00	
								\$	
			<u></u>						
								\$	
3. Cont	ributor Informati	on		Add [	Rei	nove			
	Name, Mailing Ado		•	b. Job T	tle/Pr	ofession	d. (	Comments	
(inclu	ide city, state, & z	ip)		OWNE:	R				
	RT FREEMAN			<u> </u>	·····	10 10 TT 13	ļ		
1	UNMORE DRIV			<u> </u>	<u> </u>	Name/Specific Field			
BURL	INGTON, NC 27	217		FREEN	IAN E	ELECTRIC	a I	dection Sum to Date	
							C. I	detion Sum to Date	
							\$	500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription j. Date (mm/dd/y)				k. Amount	
	1	Check				01/09/2012		\$ 500.00	
	··· · · · · · · · · · · · · · · · · ·							\$	
								\$	
	ributor Informati			Add [		nove			
	lame, Mailing Add			b. Job Ti	tle/Pro	fession	d, C	Comments	
	de city, state, & zi	· · · · · · · ·		RETIRI	ED				
	ALL D JOHNSO	N		o Emplo	varie i	Name/Specific Field			
ï	IANDALE RD			<del></del>	yersi	ame/specific rieiu			
GKAH	AM, NC 27253			NONE			e. F	lection Sum to Date	
							\$	25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	cription		j. Date (mm/dd/yyyy)		k. Amount	
	1	Check				04/30/2012		\$ 25.00	
		<del>, , _,_ ,,                            </del>				04/30/2012		\$ 25.00	
								\$	
								\$	
4. Total only this Page							\$	725.00	
5. Total of ALL CRO-1210 Pages							\$	925.00	
(This l	ine must be on line	6 of Detailed Summary F	age CRO-1100)				~	723.00	

					Amendme	ent
ontributions from Individuals	Pg	2	of	2	☐ Yes	X No
e this form to report individual contributions over \$50 or contribution	ns une	der \$50	if for	m CRO 120	5 is not use	d

Ose III	is form to report in	edividual contribution	is over pougloic	ontributions	under 350 il folili CRO	1203	D HOLUSCO	<u> </u>
1. Con	ımittee Full Name	(and Fund if applical	de)			2.	ID Number	
JOHN	SON FOR SHER	IFF ELECTION COM	MITTEE			F	ALA-948F8	M-C-001
3. Con	tributor Informati	on		Add 🔲 F	Remove			
a. Full	Name, Mailing Ad	dress & Phone		b. Job Title/	Profession	d. (	Comments	
(incl	ude city, state, & z	ip)		DENTIST			_	
DAVI	D PATTERSON					4		
1		TTERSON MILL RE	)	<u> </u>	s Name/Specific Field	-		
BURL	INGTON, NC 27	7215		SELF EMP	LOYED		Dection Sur	n to Date
							CACCHON SU	
]						\$		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			01/05/2012		\$	100.00
							\$	
							\$	
3. Cont	ributor Informati	on		Add □ R	Remove		•	
a. Full l	Name, Mailing Ado	lress & Phone		b. Job Title/I	Profession	d. (	Comments	
(incl	ide city, state, & z	ip)		EMPLOYE	Е			
	ROBERTS				77 10 14 77 13	4		
	INELAND DRIV	Έ			s Name/Specific Field	-		
	AM, NC 27253			LOWES FU	INERAL HOME	e. Election Sum to Dat		
(336) 4	228-8366						200000000000000000000000000000000000000	
						\$		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			02/21/2012		\$	100.00
							\$	
							\$	
4. Tot	al only this Pa	ge	<del></del>			\$	•	200.00
5. Tot	al of ALL CR	<del> </del>	Page CPO 1100			\$		925.00
CRO-12		о ој решиец онттату 1		ard of Election	IS	<u> </u>		April 2007
-110-11								

					Amendme	2 A t
Disbursements	Pg	1	of	2_	Yes Yes	X

1. Committee F	ull Name (and Fu	nd if applicable)					2. ID Nu	
		ECTION COMITTE	E				ALA-	948F8M-C-001
3. Type of Disbu	arsement <i>(Plea</i>	ise use separate CR(	<u>0-1310</u>	forms for eac	h t <u>ype of Disbu</u>	ırsemi	e <u>nt.)</u>	
Operating Exp		Contributions to Candida					ted Party Ex	xpenditures
4. Payee Inform	ation			Add 🔲	Remove		·····	<del></del>
	ailing Address &	Phone			ed Committee N	am e	d. Comm	ents
(include city, sta	ıte, & zip)							<del></del>
APPLE TIME I	INC	-		Ĺ			]	
PO BOX 1210					stered (Specify)		]	
CANTON, TX	75103			Federal	County:		-410	- · n
				State	☐ (AYMIDIC!)	Dality:	e. Mecuo	n Sum to Date
						1	\$	2,153.51
f Account Code	g Form of Payme	ent h. Purpose Code	li Date	 e (mm/dd/yyyy)	j, Amount	Ik. Re	quired Re	-
1	Check	O	+	2/24/2012	\$ 610.78	+	VERTISIN	
<b> </b>	CHOOK	<del></del>		2/24/2012	<u> </u>	AD.	/ERIDA	10
			<u> </u>		\$			
4. Payee Inform				Add 🔲	Remove		-	
	ailing Address &	Phone		b. Coordinate	d Committee Na	аше	d. Comme	ents
(include city, sta								
THOMAS MAN	·-·-·		1	T. Proje	7.42 22.7		1	
2035 STUART			1		stered (Specify)		1	
BURLINGTON	, NC 27215		!	Federal State	County:		The estion	n Sum to Date
			!	7 21 STREE	☐ Municip	allty.	e. Electron	A SUM to Date
			!			J	\$	250.00
f. Account Code	g. Form of Payme	nt h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Rei	marks
1	Check	D		3/30/2012	\$ 250.00	<b> </b>	1	
<del> </del>			<del></del>	700121	\$	<del></del>		
<u> </u>			<u></u>	<del></del>		<u> </u>	<del></del>	
4. Payee Informs		<del></del>		Add 🔲	Remove	<del></del>	·	
	ailing Address & I	Phone	!	b. Coordinate	d Committee Na	<u>іш е</u>	d. Comme	ents
(include city, stat				1		J	i	
NC HORSE CO				a Level Regis	tered (Specify)	$\longrightarrow$	ĺ	
2037 YALE DR				Federal	County:		i	
GRAHAM, NC	21233			State	-	L	e. Election	n Sum to Date
			}		<u>-</u>			<del></del>
							\$	1,000.00
f. Account Code	g. Form of Paymer	nt h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Ret	marks
I	Check	О	03	3/19/2012	\$ 1,000.00	CON	TRIBUTI	IOM
			<b>——</b>		\$			
- m (-114h);	¥w.				<u> </u>	<del></del>		1.000.70
5. Total only this	<del></del>	<u>, , , , , , , , , , , , , , , , , , , </u>	<del></del>	<del> </del>			\$	1,860.78
	CRO-1310 Pages						i	
	· · · · · · · · · · · · · · · · · · ·	d Summary Page CRO-	-				\$	2,110.78
-	•	d Summary Page CRO-	-				•	- <b>,</b>
		d Summary Page CRO-		<del></del>	ty Expenditures)			
		ed expenditure code						<u> </u>
A* - Media	B* - Print	~		undraising			ier Candid	
E - Salaries	F* - Equip	•		litical Party		_		ffice Expenses
I - Postage	J - Penalt	ties	K* - O	ffice Expenses	Q* - Do	onatio	n to Legal	Expense Fund
O* Other	* 4-51-4	· · · · · · · · · · · · · · · · · · ·						
* Codes require	detailed explanar	tion in required rem	arks n	eld (k)				

					Amendm	ent	
Disbursements	Pg	_2	of	2	☐ Yes	X	Νc
Jse this form to report expenditures from the committee for operating exp	enses	, contril	outio	ns to ca	ndidate/po	litical	
committees and coordinated party expenditures							

COMMITTEES AND	i coordinated party e	penunuies							
1. Committee l	full Name (and Fund	if applicable)				1		2. ID Nu	
JOHNSON FO	OR SHERIFF ELECT	TION COMITTE	E					ALA-	948F8M-C-001
2.55	. /DI		0.1010			CDIT		12.3	
3. Type of Disb		use separate CR							
Operating Ex		ributions to Candida	tes/Polit	ical Committees		L Co	ordinat	ed Party E	xpenditures
4. Payee Inform				Add 🗖		nove			
a. Full Name, M	lailing Address & Ph	one		b. Coordinate	d Co	mmittee N	ате	d. Comm	ents
(include city, st	ate, & zip)			]					
DAVID SMIT	H								
2714 WEST FI	RONTST			c. Level Regis	tere	<u> </u>			
BURLINGTO	N, NC 27215			☐ Federal		County			
ľ				State		Municip	ality:	e. Dectio	n Sum to Date
								\$	250.00
f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Re								quired Re	marks
1	Check	D	02	2/21/2012	\$	250.00		•	
					\$				
5. Total only thi	is Page		•	•	•			\$	250.00
6. Total of ALL	CRO-1310 Pages			<del></del>		<del> </del>			
1	in line 13a of Detailed S	Summary Page CRO	-1100 if	Oneratino Expe	nses)				
_	in line 13b of Detailed S		_		-	s/Political C	omm)	\$	2,110.78
	in line 13c of Detailed S						,		
7. Purpose C	odes (List detailed	expenditure code	in (h.)	above)		*			
A* - Media	B* - Printio	g	C* - F	undraising		D - To	Anoth	ier Candi	date
E - Salaries	F* - Equipm	ent	G - Po	litical Party		H* - H	olding	Public O	ffice Expenses
I - Postage	J - Penaltie	s	K* - 0	ffice Expenses	S		_		l Expense Fund
O* Other				-		-		Ü	•
* Codes requir	e detailed explanatio	n in required ren	arks fi	eld (k)			:	<u> </u>	
CRO-1310		NC S	tate Boa	rd of Elections					December 2009

		Amendment
Disbursements	Pg <u>1</u> of <u>5</u>	Yes 🛛 Y

1. Committee l	Tull Name (an	d Fund	if applicable)							2. ID Num	
JOHNSON FO	OR SHERIFF	ELECT	TION COMITTE	E						ALA-9	48F8M-C-00T
3. Type of Dish	ursement <i>(</i>	Please	use separate CR	<u> </u>	forms for	eacl	type	of Disbu	rseme	nt.)	
Operating Ex	peases	Cont	ributions to Candida	tes/Polit	ical Commi	ittees		☐ Co	ordinat	ed Party Exp	enditures
4. Payee Inform	nation				Add 🗌	]	Rem	ove			
a. Fuli Name, M	lailing Addres	ss & Ph	one		b. Coordi	nate	d Con	ımittee N	ame	d. Comme	n ts
(include city, st	ate, & zip)										
ALAMANCE			-		ļ.,			(0 :5)			
2172 BELLEM			ROAD		c. Level R			County			
BURLINGTO	N, NC 27215				State	11	_ L			e Election	Sum to Date
									<u> </u>	s	300.00
f Account Code	a Form of Pa	vment	h. Purpose Code	li Date	(m m /dd/br	,,,,,,,)	i Am	ount	k Re	quired Rem	
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1	Cileur			J 0	4/05/2012		\$	300.00	CON	1100011	
				<u> </u>	<u> </u>		\$				
4. Payee Information											
a. Full Name, M	_	s & Pho	one		b. Coordi	natec	Com	mittee N	ame	d. Commer	ıts
(include city, sta			· · · · · · · · · · · · · · · · · · ·								
ALAMANCE (	COUNTY RE	PUBLI	CAN WOMEN		a Yawal D			(Consider)			
PO BOX 1540		c. Level R			County:						
ELON, NC 27		State	ш	Ľ			e. Bection	Sum to Date			
					Alamanc					\$	1,000.00
f. Account Code	g. Form of Pa	yment	h. Purpose Code	i. Date	(mm/dd/y	ууу)	j. Am	ouat	k. Re	quired Rem	arks
1	Check	:	G	0:	5/03/2012		\$	500.00			
							\$				
4. Payee Inform	ation				Add 🔲	<del></del>	Remo	ve		· · ·	•
a, Full Name, M		s & Pho	one		b. Coordii	nated	Сош	mittee Na	me	d. Commer	ıts
(include city, sta	te, & zip)										
CROSSROADS	E 2ND ANN	TUAL B	ENEFIT GOLF								
TOURNAMEN	T				c. Level R						
PO BOX 673					☐ Federa	I		County:		- Y7141	C 4. D.4.
BURLINGTON	I, NC 27216				☐ State			_ ivitaticip	апту.	e. Mection	Sum to Date
										\$	300.00
f. Account Code	g. Form of Pa	yment	h. Purpose Code	i. Date	(mm/đd/yʒ	ууу)	j. Am	ount	k. Re	quired Rem	arks
1	Check		О	0.5	5/18/2012		<u>\$</u>	300.00	ADV	ERTISINO	<del></del>
							\$			· · · · ·	<del> </del>
7 Marsh	- Davis					. :	-		<u> </u>	Φ.	1 100 00
5. Total only thi			<del></del>		<del></del>					\$	1,100.00
6. Total of ALL		_									
	-		ummary Page CRO-	-		-	-			\$	4,361.00
	_		ummary Page CRO- ummary Page CRO-	-					omm)		
			expenditure code	<del></del>			<i>y 11.</i> p	chanares)			<del> </del>
A* - Media		Printing		* . *				D - To	Anoth	er Candida	te
E - Salaries		gui pme		C* - Fundraising D - To Another Candidate G - Political Party H* - Holding Public Office E							
[ - Postage		enalties			ffice Expe						Expense Fund
O* Other		,		_				~ ,,,,			
The state of the s	detailed expl	anation	ı in required rem	arks fi	eld (k)			. <u> </u>			

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_	ישכו	ui ot	шч	1163	

			Amendment								
Pg	2_	of	5	☐ Yes	X	No					

1. Committee F	ull Name (s	and Fund	if applicable)						2. ID Nu	
JOHNSON FOR SHERIFF ELECTION COMITTEE									ALA	-948F8M-C-001
3. Type of Disbu			use separate CRC							
X Operating Exp	ــــــــــــــــــــــــــــــــــــــ	Cont	ributions to Candidat	tes/Polit	ical Committees	;	Cor	ordinat	ed Party E	expenditures
4. Payee Inform					Add 🔲		nove			<u></u>
a. Full Name, Ma	_	ress & Ph	one		b. Coordinate	d Co	mmittee Na	ame	d. Comm	ents
(include city, sta		<del></del>								
		)MMUNI	ITY CENTER CA	MP	c. Level Regis	*	* (Specify)			
1333 OVERBR					c. Level Regis		County:	-		
BURLINGTON	i, NC 2/21	15			State	í			e. Electic	on Sum to Date
				İ				_	\$	500.00
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ł	(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

7. Purpose Codes (List detailed expenditure code in (h.) above)

A\* - Media

B\* - Printing

C\* - Fundraising

D - To Another Candidate

E - Salaries

G - Political Party

I - Postage

F\* - Equipment

H\* - Holding Public Office Expenses

J - Penalties

K\* - Office Expenses

Q\* - Donation to Legal Expense Fund

O\* Other

\* Codes require detailed explanation in required remarks field (k)

					Amendm	e n t
Disbursements	Pg	4	of	5_	☐ Yes	

1. Committee Full Name (and Fund if applicable) ALA-948F8M-C-001 JOHNSON FOR SHERIFF ELECTION COMITTEE 3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) X Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures 4. Payee Information Remove a. Full Name, Mailing Address & Phone d. Comments b. Coordinated Committee Name (include city, state, & zip) OLD NORTH STATE COUNCIL c. Level Registered (Specify) 1405 WESTOVER TER Federal County: PO BOX 29046 ☐ State ■ Municipality: e. Election Sum to Date GREENSBORO, NC 27408-7908 100.00 f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks Check 03/14/2012 100.00 CONTRIBUTION 18 4. Payee Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) PAT MCCRORY FOR GOVERNOR c. Level Registered (Specify) PO BOX 98027 Federal County: RALEIGH, NC 27624 X State ☐ Municipality: e. Election Sum to Date 2,000.00 f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks D Check 04/05/2012 1,000.00 4. Payee Information ☐ Add Remove b. Coordinated Committee Name a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) ROMNEY FOR PRESIDENT c. Level Registered (Specify) PO BOX 149756 X Federal County: BOSTON, NC 02114-9756 ☐ State Municipality: e. Election Sum to Date 100.00 f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) k. Required Remarks j. Amount D Check 06/01/2012 100.00 \$ 5. Total only this Page \$ 1.200.00 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) 4,361.00 (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) 7. Purpose Codes (List detailed expenditure code in (h.) above) A\* - Media B\* - Printing C\* - Fundraising D - To Another Candidate E - Salaries F\* - Equipment G - Political Party H\* - Holding Public Office Expenses I - Postage J - Penalties K\* - Office Expenses Q\* - Donation to Legal Expense Fund O\* Other \* Codes require detailed explanation in required remarks field (k)

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	a coordinated party									
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E - Salaries	F* - Equipme			itical Party				Public Office Expenses		
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