10=20=14 16:53 RCVD

Disclosure Report Cover

Amendment

☐ Yes 🍱 No

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

1. Committee In	nformation										
a. Full Name									c. ID Number		
JOHNSON FO	R SHERIFF EI	LECTION COM	MITTE	EE					ALA-948F8M-C-001		
b. Mailing Addre	ess (include Cit	y, State and Zip	Code)						d. Date Filed		
3530 CARDW BURLINGTON									10/18/2014		
BOKEINGTO	v, IVC 27213								e. Phone Number		
									(336) 227-1495		
2. Report Year	3. Period Star	t Date (mm/dd/v	(v)	4. Period	End Da	te (mr	n/dd/vv)	5. Treasur	er Full Name		
2014		7/01/2014			10/18/2		,	PAUL E C			
6. Type of Com	mittee (Check C	One)	9. Typ	e of Report	t (c)	heck o	only one	type of rep	ort from one category)		
X Candidate Can			Munic				/County		Referendum		
Joint Fundrais	ser PA	C		Organizatio	nal	_	rgan izat io	onal	☐ Organizational		
Referendum		gal Expense Fund		Thirty-five		Q	uarterly		☐ Pre-referendum		
7. Type of Fund		le, check one)		Pre-primary			First		☐ Final		
☐ "Booster Fund				Pre-election	1		Second	8	Supplemental Final		
☐ Building Fund		900 - 0		Pre-runoff			Third		Annual		
	lection Year Can		_	Semi-annua			Fourth .	5	☐ Special		
NC Public Car	mpaign Financing	Fund	띧	Mid Ye	3337	_ s	emi-annua				
				Year E	nd		Mid Ye		10. Special Report Name		
Other:		_		Final		ᄖᇎ	Year E	nd			
8. Number of Fu	undraisers this	Report		Special			inal				
	0						pecial				
3. Account Info	rmation				3. Acc	ount	Informati	ion			
a. Financial Inst	itution Full Na	m e			a. Fina	ncial	Institutio	on Full Nam	e		
WACHOVIA											
b. Purpose		c. Account Cod	le		b. Pur	pose			c. Account Code		
RUN CAMPAI	IGN		1								
		d. Period Begin	n Balar	ıce					d. Period Begin Balance		
		\$ 17 12	20	2					\$		
CEDTIFICATIO)M	17,17	1,0.	>							
I certify that the Chapter 163 of funds. I furth	I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board Printed Name of Signer Signature of Appointed Treasurer Date										
FOR OFFICE U	SEONLY										
Date Receiv	red:	10-20-	<u>-14</u>	Emplo	yee:)G	- 0	<u>livery Method</u> Normal Mail		
Date Postma	arked:		_	Emplo	yee:				Registered Mail Hand Delivered		
Date Scanne	ed:		_	Emplo	yee:				Electronically Filed		
Date Data E	intered:			Emplo	yee:				Signer has not received mandatory training		
		nt treasurer, cus	stodiar	of books i	nforma	tion, o	oraccour	nt informati			

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

1. Committee Full Name (and Fund if applicable)	2. Type of Re	port	3.1	ID Number	
JOHNSON FOR SHERIFF ELECTION COMITTEE	2014 Third C	Quarter	A	LA-948F8M-C-00	01
Start of Election Cycle: January 1,		Total this Reporting Peri	od	Total this Election Cycle	e
4) Cash on Hand at Start		\$ 17,177	.03	\$ 590.	.97
RECEIPTS		- N 1			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0	.00	\$ 4,321.	.00
6) Contributions from Individuals	(CRO-1210)	\$ 0	.00	\$ 60,055.	.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0	.00	\$ 0.	.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0	.00	\$ 500.	.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)	\$ 0	.00	\$ 800.	.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)	\$ 0	.00	\$ 66,476.	.00
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$ 6,876	.05	\$ 42,305.	.02
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 1,300	.00	\$ 11,590.	.97
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0	.00	\$ 0.	.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 50	.00	\$ 187.	.00
15) Loan Repayments	(CRO-1420)	\$ 0	.00	\$ 800.	.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0	.00	\$ 400.	.00
17) In-Kind Contributions	(CRO-1510)	\$ 0	.00	\$ 2,833.	.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,	, 16 and 17)	\$ 8,226	.05	\$ 58,115.	.99
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$ 8,950		\$ 8,950.	
ADDITIONAL INFORMATION					100000
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0	.00		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0	.00		
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$ 0	.00		
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$ 0	.00		
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0	.00		
25) Administrative Support	(CRO-1710)	\$ 0	.00	\$ 0.	.00
26) Forgiven Loans	(CRO-1440)	\$ 0.	.00	\$ 0.	.00
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0	.00	\$ 0.	.00
28) Contributions to be Refunded	(CRO-1215)	\$ 0	.00	\$ 0.	.00

					Amendme	ent	
Disbursements	Pg	1	of	2_	☐ Yes	X	Vo
Is a this form to report amonditures from the committee for exercise	na amancac	contril	ution	e to co	ndidate/no	litical	

	all Name (and Fund i		,				2. ID Nu ALA-		M-C-001
JOHNSON FO	R SHERIFF ELECT	ION COMITTEE	5						
3. Type of Dis bu	rsement (Please	use separate CRO)-1310	forms for each					
Operating Exp		ributions to Candidat					ed Party E	xpendit	ures
4. Payee Inform	ation			Add 🔲	Remove				
	ailing Address & Ph	one		b. Coordinate	d Committee N	ame	d. Comm	ents	
(include city, sta									
	COUNTY REPUBLI	CAN WOMEN							
PO BOX 1540					tered (Specify)				
ELON, NC 272	244			Federal	X County		-		
				☐ State	☐ Municip	ality:	e. Electio	n Sum	to Date
				Alamance			\$		250.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)		k. Re	quired Re	marks	
1	Check	G	09	9/04/2014	\$ 250.00				
					\$				
4. Payee Inform	ation			Add 🗖	Remove				
a. Full Name, Ma	ailing Address & Ph	one		b. Coordinate	d Committee N	ame	d. Comm	ents	
(include city, sta	te, & zip)								
ANTHONY K	(TONY) ROSE				1/6		1		
1706 STRATFO					tered (Specify) Z County		-		
BURLINGTON	I, NC 27217			Federal State		e. Electic	n Cum	to Data	
				- State	☐ Municip	ranty.	1000	n sum	
							\$		250.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Re	marks	3
1	Check	D	0′	7/07/2014	\$ 250.00				
					\$				
4. Payee Inform	ation			Add 🔲	Remove				
	ailing Address & Ph	one		b. Coordinate	d Committee N	ame	d. Comm	ents	
(include city, sta	ite, & zip)								
DAN W INGLI	Ε				1.0		1		
6388 RASCO F				c. Level Regis	tered (Specify) County		-		
BURLINGTON	I, NC 27217			State	Municip		e Flection	n Sum	to Date
				State	L WILLIEU	panty.		, 11 3 11 11	
							\$		500.00
f. Account Code	g. Form of Payment	h. Purpose Code	_	(mm/dd/yyyy)		k. Re	quired R	emarks	3
1	Check	D	0	7/08/2014	\$ 500.00				
					\$				
5. Total only thi	s Page						\$		1,000.00
	CRO-1310 Pages								
	in line 13a of Detailed	Summary Page CRO)-1100 ii	f Operating Expe	enses)		6		1 200 00
	in line 13b of Detailed i					Comm)	\$		1,300.00
	in line 13c of Detailed							-0-5-6-11	
The state of the s	odes (List detailed	expenditure code							
A* - Media	B* - Printii			undraising			her Cand		
E - Salaries	F* - Equipm			litical Party					Expenses
I - Postage	J - Penaltie	es	K* - (Office Expense	s Q* - I	Oonati	on to Leg	al Expe	ense Fund
O* Other		120.025.2000.000		E a L J (J -)					
* Codes requir	e detailed explanation	on in required rer	narks	neia (K)			P. Bornelling	D-	cambar 2000

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II D	IS	hi	Irs	en	nei	211
	10	\mathbf{v}				ILO

				Amendment				
Pg	2_	of	2_	☐ Yes	X	No		

	coordinated party ex					1000000	0 ID	
	ull Name (and Fund i R SHERIFF ELECT		3				ALA-9	nber 48F8M-C-001
3. Type of Dis bu	rsement (Please	use separate CRO	0-1310	forms for each				
Operating Exp	enses X Contr	ibutions to Candidat	es/Politi	cal Committees	Coc	ordinat	ed Party Ex	penditures
4. Payee Inform	ation			Add 🔲	Remove			
	ailing Address & Pho	one		b. Coordinated	d Committee Na	ame	d. Comme	nts
(include city, sta	te, & zip)							
MARK WALK	ER FOR CONGRES	SS						
154 HUFFMAN	N MILL RD				tered (Specify)			
BURLINGTON	I, NC 27215			X Federal	County:		TH	G
				State	☐ Municip	ality:	e. Hection	Sum to Date
							\$	1,100.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Rer	narks
1	Check	D	08	3/13/2014	\$ 100.00			
					\$			
4. Payee Inform	ation		П	Add	Remove			
Printed by the second s	ailing Address & Pho	one			d Committee Na	ame	d. Comme	ents
(include city, sta	•							
	SHLEY FOR COMN	MISSIONER						
2217 COY ST	STILL I TOK COM	HOSIONER		c. Level Regist	tered (Specify)			
BURLINGTON	I, NC 27215			☐ Federal	X County:			
				☐ State	☐ Municip	ality:	e. Election	Sum to Date
				Alamance			\$	200.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Rei	marks
1	Check	D	08	3/04/2014	\$ 200.00			
					\$			
5. Total only thi	s Page						\$	300.00
	CRO-1310 Pages						-	
	in line 13a of Detailed S	Summary Paga CRO	1100 if	Ongrating Eyng	ncoc)			
	in line 13a of Detailed S in line 13b of Detailed S					Comm)	\$	1,300.00
	in line 13c of Detailed S							
What is the second state of the second	odes (List detailed			er medicine de la companie				
A* - Media	B* - Printin			undraising	D - To	Anot	her Candic	late
E - Salaries	F* - Equipm			litical Party	H* - H	olding	g Public O	ffice Expenses
I - Postage	J - Penaltie		K* - O	office Expenses	s Q* - D	onati	on to Lega	l Expense Fund
O* Other								
* Codes requir	e detailed explanation							
CRO-1310		NC S	State Boa	ard of Elections				December 2009

												Amendm	ent
D	isb	urs	eme	ents				Pg	1	of	5_	☐ Yes	X No
			0.27			 •				1		1:1-4-1	1242 1

1. Committee Fu	ll Name (and Fund i	fapplicable)						2. ID Nu	mber 948F8M-C-00
JOHNSON FOR	R SHERIFF ELECT	TION COMITTER	Ξ					ALA-	940F0M-C-00
3. Type of Dis but	rsement (Please	use separate CRO	0-1310	forms for eac	h type				
X Operating Exp		ributions to Candidat	tes/Polit	ical Committees	3	Coc	ordinat	ed Party Ex	ependitures
4. Payee Informa	ation			Add 🔲	Rem	ove			
	iling Address & Pho	one		b. Coordinate	d Con	nmittee Na	ame	d. Comm	ents
(include city, stat									
	EN GREENSBORO								
	RBORN ST 21ST			c. Level Regis					
CHICAGO, IL				☐ Federal		County:			
				☐ State		Municip	ality:	e. Electio	n Sum to Date
								\$	150.0
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. An	ount	k. Re	quired Re	marks
1	Check	0	0	9/10/2014	\$	150.00	ADV	/ERTISIN	NG
					\$				
4. Payee Informa	ation			Add 🔲	Rem	ove			
	iling Address & Ph	one		b. Coordinate	d Cor	nmittee N	ame	d. Comm	ents
(include city, stat									
	OUNTY SPECIAL	OLYMPICS		1					
1133 19TH ST		021100		c. Level Regis	stered	(Specify)]	
WASHINGTON				☐ Federal					
				☐ State		Municip	ality:	e. Electio	n Sum to Date
								\$	600.0
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. An	nount	k. Re	quired Re	marks
1	Check	0		9/26/2014	\$	600.00	ADV	VERTISIN	NG
-	Circox		 	7/20/2011	\$		112	, Dittion	
				4 11 D			SERENE.		
4. Payee Informa				Add D	Rem		a m a	d. Comm	onte
	iling Address & Ph	one		b. Coordinate	eu Coi	minittee N	ame	u. Comm	ents
(include city, sta				-					
ALAMANCE N				c. Level Regis	stered	(Specify)		-	
114 WEST ELM				Federal	stereu	County	:	-	
GRAHAM, NC	27253			☐ State				e. Electio	n Sum to Date
							,		
								\$	1,000.0
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Ar	nount	k. Re	quired Re	marks
1	Check	0		9/16/2014		1,000.00	ADV	VERTISI	٧G
-					\$,			
5 75 () 1 (1)					٦Ψ			\$	1,750.0
5. Total only this								Φ	1,750.
(This line goes in	CRO-1310 Pages In line 13a of Detailed In line 13b of Detailed					s/Political (Commun.	\$	6,876.
(This line goes in	n line 13b of Detailed S n line 13c of Detailed S	Summary Page CRO Summary Page CRO	-1100 ij	Contributed Pa	arty Ex	penditures)	Jilili)		
Committee of the Commit	des (List detailed								
A* - Media	B* - Printii			Fundraising		D - To	Anot	her Cand	idate
E - Salaries	F* - Equipm		G-Po	olitical Party			100		Office Expens
I - Postage	J - Penaltie	es	K* - (Office Expense	es	Q* - D	onati	on to Leg	al Expense Fu
O* Other									
* Codes require	e detailed explanatio	on in required re	narks	field (k)					Dacambar 2

T									
D	10	h		PC	0	m	m	te	
	1.3	.,	u					1.3	

				AIII	ename	cnt	
Pg	2_	of	5_		Yes	X	No

1. Committee F	ull Name (and Fund	if applicable)					2. ID Nun	nber
	R SHERIFF ELECT		3					948F8M-C-001
3. Type of Disbu		use separate CRO						
Operating Exp	CONTRACTOR OF THE PARTY OF THE	ributions to Candidat	es/Polit	tical Committees	Co	ordinat	ed Party Ex	penditures
4. Payee Inform				Add 🔲	Remove			
a. Full Name, Ma	ailing Address & Ph	one		b. Coordinate	d Committee N	ame	d. Comme	nts
(include city, sta	ite, & zip)							
BAPTIST TEM								
2224 ANTHON					stered (Specify)		_	
BURLINGTON	J, NC 27215			☐ Federal	County		- F1 - 4'	S t D t
				☐ State	L Municip	banty:	e. Bection	Sum to Date
							\$	250.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	i. Amount	k. Re	quired Rei	marks
1	Check	0		7/17/2014	\$ 250.00		NTRIBUTI	
			0/34/2		\$			
4. Payee Inform			Ц	Add	Remove		Licenne	
	ailing Address & Pho	one		b. Coordinate	d Committee Na	ame	d. Comme	nts
(include city, sta				-				
PLANTATION	N SHRINE CLUB			c. Level Regis	tered (Specify)		1	
BURLINGTON	1							
DORDINGTON	i, NC 2/213			☐ Federal ☐ State	☐ County: ☐ Municip		e. Election	Sum to Date
							\$	100.00
		·	1	L				100.00
	g. Form of Payment	h. Purpose Code		e (mm/dd/yyyy)	j. Amount		quired Rer	
1	Check	О	0	9/22/2014	\$ 100.00	ADV	/ERTISIN	G
					\$			
4. Payee Inform	ation			Add \square	Remove			
	ailing Address & Pho	one			d Committee Na	ame	d. Comme	nts
(include city, sta								
CROSSROADS								
1206 VAUGHN					tered (Specify)			
BURLINGTON	I, NC 27215			☐ Federal	County:			
				☐ State	☐ Municip	ality:	e. Election	Sum to Date
							\$	250.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	li. Amount	k. Re	quired Ren	narks
1	Check	0		8/08/2014	\$ 250.00		TRIBUTI	
	Circox	0	0.	0/00/2014		COL	TRIBUTI	OIV
					\$			
5. Total only this	s Page						\$	600.00
6. Total of ALL	CRO-1310 Pages							
(This line goes in	in line 13a of Detailed S	Summary Page CRO-	.1100 if	Operating Expension	nses)		· ·	6 976 05
(This line goes i	n line 13b of Detailed S	Summary Page CRO-	·1100 if	Contrib to Cand	lidates/Political C	omm)	\$	6,876.05
(This line goes in	n line 13c of Detailed S	ummary Page CRO-	1100 if	Coordinated Pa	rty Expenditures)			
7. Purpose Co	odes (List detailed	expenditure code	in (h.)	above)				
A* - Media	B* - Printin	g	C* - F	undraising	D - To	Anotl	her Candid	ate
E - Salaries	F* - Equipme	ent	G - Po	litical Party	H* - H	olding	Public Of	ffice Expenses
I - Postage	J - Penaltie	S	K* - C	Office Expenses	s Q* - D	onatio	on to Legal	Expense Fund
O* Other								
* Codes require	e detailed explanatio	n in required rem	arks f	ield(k)				

T										
D	15	۱h	П	rs	e	m	e	n	TS	

				Amenum	ent
Pg	3	of	5_	☐ Yes	X No

1. Committee Fu	Ill Name (and Fund i	f applicable)						2. ID Nu	
	R SHERIFF ELECT		Ξ					ALA-	948F8M-C-001
3. Type of Dis bu	rsement (Please	use separate CRC	0-1310	forms for each	h type of D				
Operating Exp	enses Conti	ributions to Candidat	es/Polit	ical Committees		Coo	rdinate	ed Party E	xpenditures
4. Payee Informa	ation			Add 🔲	Remove				
a. Full Name, Ma	iling Address & Pho	one		b. Coordinate	d Committ	ee Na	m e	d. Comm	ents
(include city, sta	te, & zip)								
RAMADA INN									
2703 RAMADA				c. Level Regis	Co				
BURLINGTON	, NC 27215			☐ Federal ☐ State	-	unicip:	ality:	e Flectio	n Sum to Date
				State		штегр			
								\$	3,415.03
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	t	k. Re	quired Re	marks
1	Check	О	1	0/08/2014	\$ 3,415	5.03	ELE	CTION C	ELEBRATION
					\$				
4. Payee Inform	ation			Add 🗆	Remove				
	ailing Address & Pho	one		b. Coordinate	d Committ	ee Na	m e	d. Comm	ents
(include city, sta	10 70 00								
RIVERDALE B	APTIST CHURCH								
1273 HAW RIV	ER-HOPEDALE R	D		c. Level Regis					
BURLINGTON	, NC 27217			Federal	Co			a Floatio	n Cum to Doto
				☐ State	LI M	unicip	anty.	e. Becuo	n Sum to Date
								\$	100.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	t	k. Re	quired Re	marks
1	Check	О	0	7/17/2014	\$ 100	0.00	DON	IATION	
					\$				
4. Payee Inform	ation			Add 🔲	Remove				
The state of the s	ailing Address & Ph	one		b. Coordinate	d Committ	ee Na	me	d. Comm	ents
(include city, sta									
SHARPE AWA	RDS								
3653 ALAMAN				c. Level Regis					
BURLINGTON	I, NC 27216			☐ Federal		ounty:		a Floatic	n Sum to Date
				☐ State	LI M	unicip	anty:	e. Hectio	on Sum to Date
								\$	111.02
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Am oun	t	k. Re	quired Re	marks
1	Check	О	1	0/07/2014	\$ 111	1.02	ADV	ERTISI	NG
					\$				
5. Total only thi	s Dogo							\$	3,626.05
								Φ	3,020.03
	CRO-1310 Pages	C D CDO	1100 :	COn quating Evn	meas)				
	n line 13a of Detailed S n line 13b of Detailed S					ical C	a 222 22)	\$	6,876.05
	n line 13c of Detailed S						,,,,,		
	odes (List detailed		12/10/20/20						
A* - Media	B* - Printir			Fundraising	D	- To	Anot	her Cand	idate
E - Salaries	F* - Equipm			olitical Party					Office Expenses
I - Postage	J - Penaltie			Office Expense			_	•	al Expense Fund
O* Other				NAME OF TAXABLE PARTY.					
* Codes requir	e detailed explanatio	on in required ren	narks	field (k)					2 1 222

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nte	en	me	A	re	11	h	C	Di	
1118	CII	1116	C	13	u	.,	e.	"	

				Amendm	ent
Pg	4_	of	5_	☐ Yes	X No

1. Committee Fu	ull Name (and Fund i	f applicable)					2. ID Nu	
JOHNSON FOR SHERIFF ELECTION COMITTEE							ALA-	948F8M-C-001
3. Type of Dis bu	rsement (Please	use separate CRC)-1310	forms for each	h type of Disbu	rseme	nt.)	
Operating Exp	benses	ributions to Candidat	es/Polit	ical Committees	☐ Coo	ordinat	ed Party E	xpenditures
4. Payee Inform	ation			Add 🔲	Remove			
a. Full Name, Ma	ailing Address & Pho	one		b. Coordinate	d Committee Na	ame	d. Comm	ents
(include city, sta	te, & zip)							
SOUTHERN A	LAMANCE ATHLI	ETICS & BOOST	ER					
CLUB					tered (Specify)			
	N HIGH SCHOOL	RD		Federal	County:		- Dart's	on Sum to Date
GRAHAM, NC	27253			State	L Munch	anty.	e. Electio	on 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	emarks
1	Check	О	08	8/07/2014	\$ 200.00	ADV	ERTISII	NG
					\$			
4. Payee Inform	ation			Add	Remove			
	ailing Address & Pho	one		b. Coordinate	d Committee Na	ame	d. Comm	ents
(include city, sta								
The second secon	LAMANCE HIGH S		AL	a Laurel Bania	to and (Consolfa)			
	N HIGH SCHOOL	RD		Federal	tered (Specify) County:			
GRAHAM, NC	27253			State			e. Electic	on Sum to Date
							\$	125.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	_	quired Re	
1	Check	О	09	9/30/2014	\$ 125.00	ADV	'ERTISII	NG
					\$			
4. Payee Inform	ation			Add \square	Remove			
The contract of the second of	ailing Address & Pho	one		b. Coordinate	d Committee Na	ame	d. Comm	ents
(include city, sta								
SOUTHERN H	IGH SCHOOL MAI	RCHING BAND						
SOUTHERN H	IGH SCHOOL RD				tered (Specify)			
GRAHAM, NC	27253			Federal	County:		· ·	G
				☐ State	Municip	ality:	e. Hectio	on Sum to Date
							\$	500.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/vvvv)	i. Amount	k. Re	quired Re	emarks
1	Check	0		8/04/2014	\$ 500.00		TRIBUT	
				0/01/2011	1,000,000,000,000,000,000	001	- Tube i	
					\$			
5. Total only thi	s Page						\$	825.00
6. Total of ALL	CRO-1310 Pages							
	n line 13a of Detailed S						\$	6,876.05
	n line 13b of Detailed S n line 13c of Detailed S					omm)	173	,,,,,,,,,,
	odes (List detailed							
A* - Media	B* - Printin			undraising	D - To	Anotl	ner Candi	idate
E - Salaries	F* - Equipm	_		litical Party				Office Expenses
I - Postage	J - Penaltie		K* - C	Office Expenses		_		al Expense Fund
O* Other								
* Codes require	e detailed explanatio	n in required ren	arks f	ield (k)		Cheffell		

Disbursem Use this form to	nents report expenditures	from the committee	ee for o	pperating expen	_	5 of		_ U Y		X No
committees and	coordinated party ex	penditures								
1. Committee F	ull Name (and Fund i	f applicable)						2. ID Nui		
JOHNSON FO	R SHERIFF ELECT	TON COMITTEE	Ξ					ALA-	948181	M-C-001
3. Type of Dis bu		use separate CRO			type					
Operating Exp	penses	ributions to Candidat	es/Polit	ical Committees		☐ Co	ordinat	ed Party Ex	cpenditu	ires
4. Payee Inform	ation			Add 🗖	Remo					
a. Full Name, M	ailing Address & Pho	one		b. Coordinate	d Com	mittee N	ame	d. Comm	ents	
(include city, sta	ıte, & zip)									
TABASCO MA	ASONIC LODGE									
206 1/2 MAIN	ST			c. Level Regis	tered (
GIBSONVILLI	E, NC 27249			☐ Federal	F	County		T31	0	. D.
				☐ State		Munici	pality:	e. Electio	n Sum	to Date
								\$		75.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Am	ount	k. Re	quired Re	marks	
1	Check	0	1	0/08/2014	\$	75.00	ADV	/ERTISIN	NG	
					\$					
5. Total only thi	is Page							\$		75.00
6. Total of ALL	CRO-1310 Pages									
(This line goes	in line 13a of Detailed S in line 13b of Detailed S in line 13c of Detailed S	Summary Page CRO	-1100 ij	f Contrib to Cand	lidates/			\$		6,876.05
7. Purpose C	odes (List detailed	expenditure code	in (h.)	above)						
A* - Media	B* - Printin	ıg	C* - I	undraising		D - To	Anot	her Candi	date	

G - Political Party

NC State Board of Elections

K* - Office Expenses

H* - Holding Public Office Expenses

Q* - Donation to Legal Expense Fund

December 2009

E - Salaries

I - Postage

O* Other

CRO-1310

F* - Equipment

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

J - Penalties

Aggregated	Non-Media	Expenditures
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Page 1 of 1 Amendment Yes X No

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

1. Committe	ee Full Name (and	d Fund if applicable)				2. ID	Number	
JOHNSON	FOR SHERIFF	ELECTION COMIT	TTEE				ALA-	-948F8M-C-001
3. Payee Int	formation							
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd	l/yyyy)	f. Am	ount	g. Required Remarks
Add Remove	1	Check	O 08/07/2014			\$	50.00	CONTRIBUTION
4. Total o	nly this Page					\$		50.00
	f ALL CRO-1 nust be on line 14 o	315 Pages f Detailed Summary Pa	ge CRO-1100)			\$		50.00
6. Purpos	e Codes (List	detailed expenditu	re code in (d) a	bove)				
	B*	- Printing	C* - Fundr	aising	D - '	To An	other Ca	ndidate
E - Salaı	ries F*	- Equipment	G - Political	Party	H* -	- Hold	ling Pub	lic Office Expenses
I - Posta	ge J-	Penalties	K* - Office	Expenses	Q* -	- Dona	ations to	Legal Expense Fund
O* - Ot	her			E NE OOLAC COMMISSION NO.		0.003100.000		•
* Codes	require detai	led explanation i	n required rer	narks field (g	g)			
CRO-1315		NC St	ate Board of Electio	ns				December 2009