21-08-15 14:56 RCVD

## **Disclosure Report Cover**

Amendment

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

1. Committee Information a. Full Name c. ID Number JOHNSON FOR SHERIFF ELECTION COMITTEE ALA-948F8M-C-001 d. Date Filed b. Mailing Address (include City, State and Zip Code) 3530 CARDWELL DR 01/07/2015 BURLINGTON, NC 27215 e. Phone Number (336) 227-1495 2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasurer Full Name PAUL E COBB 2014 10/19/2014 12/31/2014 6. Type of Committee (Check One) (check only one type of report from one category) 9. Type of Report X Candidate Campaign Party Municipal State/County Referendum Joint Fundraiser Organizational ☐ PAC Organizational Organizational Pre-referendum Referendum Legal Expense Fund Thirty-five day Quarterly 7. Type of Fund (if applicable, check one) Final Pre-primary First Booster Fund" Supplemental Final Pre-election Second Building Fund Pre-runoff Third Annual ☐ Special Presidential Election Year Candidates Fund Semi-annual Fourth ■ NC Public Campaign Financing Fund Mid Year Semi-annual Year End Mid Year 10. Special Report Name Other: Final Year End ☐ Final 8. Number of Fundraisers this Report Special ☐ Special 3. Account Information 3. Account Information a. Financial Institution Full Name a. Financial Institution Full Name WACHOVIA c. Account Code b. Purpose c. Account Code b. Purpose RUN CAMPAIGN 1 d. Period Begin Balance d. Period Begin Balance 8950.98 CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board 01/07/2015 PAUL E. COBB UN. Signature of Appointed Treasurer Date Printed Name of Signer FOR OFFICE USE ONLY -08-15 Delivery Method Date Received: ☐ Normal Mail Registered Mail Date Postmarked: Employee: Hand Delivered ☐ Electronically Filed Employee: Date Scanned: ☐ Signer has not received Employee: Date Data Entered: mandatory training Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Amendment X No ☐ Yes

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 Nur	nber	
JOHNSON FOR SHERIFF ELECTION COMITTEE	2014 Fourth	Quarter	F	ALA-94	LA-948F8M-C-001	
Start of Election Cycle: January 1,2011		1	l this	E	Total this ection Cycle	
4) Cash on Hand at Start		\$	8,950.98	\$	590.97	
RECEIPTS						
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)	\$	1,000.00	\$	1,500.00	
9) Loan Proceeds	(CRO-1410)	\$	0.00	\$	800.00	
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	1,100.00	\$	1,100.00	
11) Other Receipt Sources		P. 9 7 A. 7 19				
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)	\$	2,100.00	\$	68,576.00	
EXPENDITURES						
13) Disbursements				157. 65. 17. 41. 47.		
13a) Operating Expenditures	(CRO-1310)	\$	2,198.50	\$	44,503.52	
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	150.00	\$	11,740.97	
13c) Coordinated Party Expenditures	(CRO-1310)	\$	0.00	\$	0.00	
44) Aggregated Non-Media Expenditures	(CRO-1315)	\$	0.00	\$	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)	\$	2,348.50	\$	60,464.49	
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	otract line 18)	\$	8,702.48	\$	8,702.48	
ADDITIONAL INFORMATION	1			Ruin 2500		
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	(1)		
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 August 200	

Contributions from Other Political Committees Pg 1 of _	1	Amendme:	nt 🔯 No
Use this form to report contributions from other candidate, referendum or PAC committees			
1. Committee Full Name (and Fund if applicable)	2. I	D Number	

1. Committee F	ull Name (and Fund if	applicable)				2. I	D Numl	er
JOHNSON FO	R SHERIFF ELECTION	ON COMITTEE				Α	LA-948	8F8M-C-001
3. Contributor I	nformation		Add 🔲	Remov	re			
a. Full Name, Ma	ailing Address & Phone	;	b. Type of Com	mittee		d. C	ommen	ts
(include city,	state, & zip)				PAC			
DAN W INGLI	E CAMPAIGN ACCO	OUNT FRIENDS	☐ Referendum					
FOR DAN			c. Level Registe	ered (Sp	ecify)			
6388 RASCO F	SD.		☐ Federal	X	County:			
BURLINGTON	N, NC 27217		☐ State		Municipality:	e. E	lection S	Sum to Date
						\$		1,000.00
f. Account Code	g. Form of Payment	h. In-Kind Descri	otion	i. I	Oate (mm/dd/yy	уу)	j. Amo	unt
1	Check				12/09/2014		\$	1,000.00
							\$	
							\$	
4. Total only this	s Page	·			-	\$		\$1,000.00
	CRO-1230 Pages be on line 8 of Detailed Si	ummary Page CRO-1	100)			\$		\$1,000.00

CRO-1230 NC State Board of Elections April 2007

		Amendment
Refunds/Reimbursements To the Committee	Pg 1 of 1	Yes 🗓 No

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

1. Committee Full	Name	(and Fund if ap	plicable)			2. ID	2. ID Number		
JOHNSON FOR	SHERI	FF ELECTION	COMITTEE		·		ALA-948F8M-C-001		
3. Contributor Inf	ormati	on		Add 🔲 Re	move				
a. Full Name, Mail	ing Add	lress & Phone		d. Type of Comm	ittee	g. Co	mments		
(include city, sta	ite, & zi	ip)			■ PAC		*		
MARK WALKE	R FOR	CONGRESS		Referendum	Party	l			
154 HUFFMAN I	MILL F	æ		e. Level Register		h, O	h. Original Expenditure Date		
BURLINGTON, NC 27215		X Federal	County:	08/13/2014					
		☐ State	Municipality:						
				i. Or	iginal Expenditure Amt				
				\$	100.00				
b. Job Title/Profess	ion	c. Employer's N	lame/Specific Field	f. Purpose		j. Đe	ction Sum to Date		
				REFUND OF OV TO CONGRESSI		\$	0.00		
k. Account Code	l. Form	of Payment	m. In-Kind Descrip	tion	n. Date (mm/dd/	уууу)	o. Amount		
1		Check			11/30/2014		\$ 100.00		
3. Contributor Inf	ormatic	תו		Add 🔲 Re	move		11.00		
a. Full Name, Maili				d. Type of Commi	ttee	g. Comments			
(include city, sta	te, & zi	p)		■ Candidate	☐ PAC				
MARK WALKER	FOR	CONGRESS		Referendum	☐ Party				
154 HUFFMAN N				e. Level Registere	d (Specify)	h. Or	iginal Expenditure Date		
BURLINGTON, 1				X Federal State	County: Municipality:		06/17/2014		
						i Ori	ginal Expenditure Amt		
						\$	1,000.00		
b. Job Title/Profess	ion	c. Employer's N	ame/Specific Field	f. Purpose		j. He	ction Sum to Date		
	•			REFUND OF OVE TO CONGRESSION		\$	0.00		
k. Account Code	l. Form	of Payment	m. In-Kind Descript	tion	n. Date (mm/dd/	уууу)	o. Amount		
1		Check			11/30/2014		\$ 1,000.00		
4. Total only th	is Pag	ge			<u> </u>	\$ 1,100.00			
5. Total of ALI (This line must be			S nmary Page CRO-110	0)		\$	1,100.00		
							D 1 0005		

CRO-1240 NC State Board of Elections December 2007

Disbursen	aents				Pg _	_1 of	!	<u>l</u>	X No
	report expenditures		ee for c	perating exper	ıses, co	ontributi	ons to	candidate/p	olitical
	coordinated party ex	•						la mar i	<del></del>
	ull Name (and Fund i			- <u>-</u>				2. ID Numb	er 8F8M-C-001
JOHNSON FO	R SHERIFF ELECT	ION COMITTEE	3					ALA-740	3F 91VI-C-00 I
3. Type of Disbu		use separate CRO		·					
Operating Exp	penses X Conti	ributions to Candidat	tes/Polit	ical Committees		Coc	ordinat	ted Party Expe	nditures
4. Payee Inform	ation			Add 🔲	Remo	ve			
a. Full Name, Ma	ailing Address & Pho	one		b. Coordinate	d Com	nittee Na	ame	d. Comment	s
(include city, sta	ite, & zip)								
STEVE ROSS	FOR HOUSE OF RE	EPRESENTATIV	ES						
1314 MCCUIS				c. Level Regis					
BURLINGTON	I, NC 27215			Federal		County:			
				X State		Municip	ality:	e. Dection S	um to Date
								\$	150.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Am o	unt	k. Re	quired Rema	rks
1	Check	D	1	1/04/2014	\$	150.00			
					\$				
5. Total only thi	s Page				<u> </u>			\$	150.00
6. Total of ALL	CRO-1310 Pages								
(This line goes i	in line 13a of Detailed S	Jummary Page CRO	-1100 if	Operating Expen	nses)			\$	150.00
	in line 13b of Detailed S					olitical C	omm)	1 2	170.00
(This line goes i	in line 13c of Detailed S	ummary Page CRO-	·1100 if	Coordinated Par	rty Expe	nditures)	!		
7. Purpose Co	odes (List detailed	expenditure code	in (h.)	above)					
A* - Media	B* - Printin	g	C* - F	Tundraising		D - To	Anotl	her Candidat	e
E - Salaries	F* - Equipme	ent	G-Po	litical Party				Public Offic	
I - Postage	J - Penalties	S	K* - C	Office Expenses	š	Q* - D	onatic	on to Legal E	xpense Fund
O* Other									
* Codes require	e detailed explanation	n in required rem	ıarks f	ield (k)					

NC State Board of Elections

CRO-1310

Amendment

December 2009

T. *	T.		
211	burs	eme	ents.

			Amenam	ent
Pg	1	of	 ☐ Yes	X No

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

	ull Name (and Fund				· · · · · · · · · · · · · · · · · · ·		2. ID Nur	nher
	R SHERIFF ELECT		Ξ					948F8M-C-001
2 There are the	/DI	upa papanasa CDA	7 1214	fames for an	h tung of Dist.	ME Stee	<u> </u>	· · · · · · · · · · · · · · · · · · ·
3. Type of Dis by Operating Ex	· · · · · · · · · · · · · · · · · · ·	use separate CRC ributions to Candidat					ed Party Ex	nenditures
	<u> </u>	HOURIOUS TO CAHUICA				oi wii ai	curatty Ex	гропштигоз
4. Payee Inform		000		Add   Coordinate	Remove d Committee N	am e	d. Commo	ents
•	ailing Address & Ph	one		D. Coordinate	d Committee N	anic	a. Comm	. 11 13
(include city, sta				-				
ALAMANCE N 114 WEST ELI				c. Level Regis	tered (Specify)		1	
GRAHAM, NO				Federal	☐ County	:	1	
Cicatiati, NC	. 21233			☐ State	Munici	ality:	e. Election	a Sum to Date
							\$ 1,2	50.°° 7 <del>50.0</del> 0
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Re	marks
1	Check	0	1:	2/22/2014	\$ 750.00	AD۱	/ERTISEN	MENT .
					<del>                                     </del>			·
					\$			
4. Payee Inform				Add 🔲	Remove			
	ailing Address & Ph	one		b. Coordinate	d Committee N	ame	d. Comme	ents
(include city, sta				-				
	FOR GOOD BUS	NESS		o Yavel Dagio	tered (Specify)			
	PO BOX 26762				County			
RALEIGH, NC	2/611-6/62			Federal State			e. Election	Sum to Date
				<del></del>			~~ ~	
							\$ 1,1	50 0 150.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Res	narks
1	Check	0	10	0/30/2014	\$ 150.00	SCH	OLARSH	IPS FOR KIDS
					\$			
4. Payee Inform	ation	<u> </u>		Add □	Remove			
	ailing Address & Ph	one			d Committee Na	ıme	d. Comme	ents
(include city, sta					* '			
LAMBS CHAP	· ·	·-····································		1				
415 ROXBORO					tered (Specify)			
HAW RIVER, 1				l	County			
•				☐ State	Municip	ality:	e. Dection	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 Res	narks
1. Account Code	·	O O		2/01/2014	\$ 500.00	<b>-</b>	ARING II	
Ţ	Check		1.4	4/01/2014		l	EMONY	
					\$	ODI.		
5. Total only this	s Page						\$	1,400.00
6. Total of ALL	CRO-1310 Pages							
	n line 13a of Detailed S						\$	2,198.50
	n line 13b of Detailed S					omm)	Ψ	٠, , , , 0.50
(This line goes i	n line 13c of Detailed S	ummary Page CRO-	1100 <b>i</b> f	Coordinated Par	rty Expenditures)			
7. Purpose Co	des (List detailed	expenditure code	in (h <i>.</i> ) :	above)			_ <del></del>	
A* - Media	B* - Printin			undraising	D - To	Anotl	ner Candid	ate
E - Salaries	F* - Equipm	-	G - Po	litical Party	Н* - Н	olding	Public O	ffice Expenses
I - Postage	J - Penaltie	s	K* - C	office Expenses	Q* - D	onatio	n to Legal	Expense Fund
O* Other			_					
* Codes require	e detailed explanatio	n in required rem	arks fi	ield (k)				

Die	burs	eme	nte
1010	Duis	CILL	1113

				Amenum	meni		
Pg	2	of	2	☐ Yes	X	No	

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

communees and	coolumated party e.	xpendautes									
1. Committee F	ull Name (and Fund	if applicable)									
JOHNSON FO	JOHNSON FOR SHERIFF ELECTION COMITTEE							ALA-9	148F8M-C-001		
3. Type of Dis bu	rsement (Please	use separate CRO	)-131 <i>0</i>	forms for each	h typ	e of Disbu	rseme	nt.)			
Operating Ex		ributions to Candidat							penditures		
4. Payee Inform	ation			Add 🔲	Rer	nove					
a. Full Name, M	ailing Address & Ph	one		b. Coordinate	d Co	mmittee Na	ım e	d. Comme	nts		
(include city, sta	te, & zip)										
RIVER CITY S	UPPLY LLC										
3150 STAGE P	OST RD			c. Level Regis	tere						
SUITE 101				Federal		County:	ADVERTISING    k. Required Remarks     ADVERTISING     k. Required Remarks     ADVERTISING     k. Required Remarks     ADVERTISING     ADVERTI				
BARLETT, TN				☐ State		Municip	anty:	e. Election	Sum to Date		
(901) 372-5569											
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Re	quired Ren	narks		
1	Check	0	1	0/22/2014	\$	599.50	ADV	ERTISIN	G		
	***				\$						
4. Payee Inform	ation			Add 🔲	Ren	nove					
	iling Address & Pho	one		b. Coordinate	d Co	mmittee Na	те	d. Comme	nts		
(include city, sta	te, & zip)					···					
SCHOLASTIC	SPORTS										
5575 HOLLINS	ROAD			c. Level Regist	terec			_			
ROANOKE, AI	₹ 24019			☐ Federal ☐ State		County:		e. Dection Sum to Date			
				LI State		☐ Municip	anty.	·			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	nount	k. Re	quired Ren	narks		
1	Check	0	10	0/20/2014	\$	199.00	ADV	ERTISIN	G		
					\$						
5. Total only thi	s Page							\$	798.50		
6. Total of ALL	CRO-1310 Pages										
	n line 13a of Detailed S							S	2.198.50		
	n line 13b of Detailed S						mm)	•	_,_,		
(This line goes i	n line 13c of Detailed S	ummary Page CRO-	1100 if	Coordinated Par	rty Ex	penditures)	į				
<del></del>	des (List detailed										
A* - Media	B* - Printin	•		undraising							
E - Salaries	F* - Equipme			litical Party					_		
I - Postage	J - Penaltie	S	K* - C	office Expenses	5	Q* - De	onatio	n to Legal	Expense Fund		
O* Other	م المحمد الم	n in unanimad wa	orka S	iald (k)							
<ul> <li>Codes require</li> </ul>	e detailed explanation	u ta regutrea rem	arks t	ieia (K)							

				Amendment				
Pg	2	of	2_	Yes	X	No		

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

COMMITTEE COS UNA	coordinated party c.	пропинитез								
1. Committee F	2. ID Number ALA-948F8M-C-001									
JOHNSON FO	ALA-9481	F8M-C-001								
3. Type of Disbu	rsement (Please	use separate CRO	<i>)-1310</i>	forms for each	h type of Disbu	rseme	ent.)			
Operating Exp	ordinat	ed Party Expen	ditures							
4. Payee Inform	ation			Add 🔲	Remove					
a. Full Name, M	ailing Address & Ph	one	b. Coordinated Committee Name			d. Comments				
(include city, sta										
RIVER CITY S	UPPLY LLC									
3150 STAGE P	OST RD			tered (Specify)						
SUITE 101			☐ Federal	☐ County						
BARLETT, TN	38133		☐ State	☐ Municip	e. Election Sum to Date					
(901) 372-5569					\$ 1254.71 _599.50					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Remar	ks		
1	Check	0	1	0/22/2014	\$ 599.50	ΑD\	/ERTISING			
					\$					
4. Payee Inform	ation			Add 🔲	Remove					
	ailing Address & Pho	one		b. Coordinate	d Committee N	ame	d. Comments	•		
(include city, sta	te, & zip)									
SCHOLASTIC	SPORTS									
5575 HOLLINS			tered (Specify)	ļ						
ROANOKE, AK 24019				Federal	County					
				☐ State	☐ Municip	ality:	e. Dection Su	m to Date		
							\$ 398.0			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	te (mm/dd/yyyy) j. Amount k. Required Remar		ks				
1	Check	0	10	10/20/2014 \$ 199.00 ADVERTISING		!				
					\$					
5. Total only thi	s Page		··········				\$	798.50		
6. Total of ALL	CRO-1310 Pages		·							
(This line goes i	n line 13a of Detailed S	Summary Page CRO	-1100 if	Operating Expen	nses)		e.	2,198.50		
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)  (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)										
(This line goes i	n line 13c of Detailed S	ummary Page CRO-	-1100 if	Coordinated Par	rty Expenditures)					
7. Purpose Co	des (List detailed	expenditure code	in (h.)	above)						
A* - Media B* - Printing C*			C* - F				Another Candidate			
• •		•			-	ing Public Office Expenses				
- 5			K* - Office Expenses Q* - Donatio				on to Legal Expense Fund			
O* Other										
* Codes require detailed explanation in required remarks field (k)										