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	formation								
a. Full Name								c. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE									
b. Mailing Address (include City, State and Zip Code)								d. Date Filed	
3530 CARDWE								01/18/2017	
BURLINGTON	, NC 2/213							e. Phone Number	
2. Report Year	3. Period Star	t Date (mm/dd/y)	y)	4. Period l	End Da	te (mm/dd/yy)	5. Treasur	er Full Name	
2016		7/01/2016			2/31/2		PAUL CO	BB JR	
6. Type of Comm	nittee (Check (One)	9. Typ	e of Report	(cl	neck only one	type of rep	ort from one category)	
X Candidate Cam	npaign Par		Munic		,	State/County		Referendum	
Joint Fundraise		С		Organizatio	nal	Organization	nal	☐ Organizational	
☐ Referendum	Les	gal Expense Fund		Thirty-five	day	Quarterly		☐ Pre-referendum	
7. Type of Fund	(if applicab	le, check one)		Pre-primary		First		☐ Final	
☐ "Booster Fund	["			Pre-election	l	☐ Second		☐ Supplemental Final	
☐ Building Fund				Pre-runoff		☐ Third		☐ Annual	
Presidential El	lection Year Car	didates Fund		Semi-annua		☐ Fourth		☐ Special	
NC Public Can	npaign Financin	g Fund		Mid Ye	ar	Semi-annua			
				Year E	ıd	Mid Ye		10. Special Report Name	
Other:				Final		Year E	nd		
8. Number of Fu	ındraisers thi	s Report		Special		Final			
	0	n -7				Special			
3. Account Information 3. Account Information									
a. Financial Institution Full Name a. Financial Institution Full Name									
WELLS FARG	O								
b. Purpose		c. Account Code	e		b. Pur	pose		c. Account Code	
CAMPAIGN A	CCOUNT		1						
		d. Period Begin	Balan	ıce				d. Period Begin Balance	
		\$26.05	4.0	1				\$	
CERTIFICATIO	ON	,							
I certify that t	he Committee	or Fund is in co	mplian	ce with all a	applica	ble provisions	of Article	22A, 22B & 22D-22M of	
Chapter 163 o	of the NC Gene	eral Statutes and	that n	o funds are	comm	ingled with pro	hibited or	other non-disclosed	
funds. I furth	er certify that	this report is con	mplete	, true and c	orrect	and that I have	e been train	ed by the NC State Board	
for 1 13	E C.66	Ja.		for	- 5	Cold	1	01/18/2017	
11.0	rinted Name of	Signer	•	Sign	ature of	Appointed Tre	asurer	Date	
FOR OFFICE U	SEONLY	1 1				011			
Date Receiv		1/19/17	_	Emplo	yee:	AH	_ <u>De</u>	elivery Method Normal Mail	
Date Postma	arked: _		_	Emplo	yee:		_ 5	Registered Mail Hand Delivered	
Date Scann	ed: _	1/19/17	_	Emplo	yee:	JG	_ ~~	Electronically Filed	
Date Data E	Entered: _		_	Emplo	yee:			Signer has not received mandatory training	
	assist	cannot be used to ant treasurer, cus and the Statement	stodia	n of books	informa	ation, or accou	nt informat		

Amendment ☐ Yes X No

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		3. ID Number		
The state of the s		nd Semi-Annual			
Start of Election Cycle: January 1,		Total this Reporting Perio	od	Total this Election Cycle	
4) Cash on Hand at Start		\$ 26,054.	01	\$ 32,545.01	
RECEIPTS				<u> </u>	
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0.	00	\$ 0.00	
6) Contributions from Individuals	(CRO-1210)	\$ 0.	00	\$ 150.00	
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.	00	\$ 0.00	
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.	00	\$ 0.00	
9) Loan Proceeds	(CRO-1410)	\$ 0.	00	\$ 0.00	
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	\$ 0.00	
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,1	lld and lle)	\$ 0.	.00	\$ 150.00	
EXPENDITURES					
13) Dis burs ements					
13a) Operating Expenditures	(CRO-1310)	\$ 5,500	.00	\$ 10,141.00	
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 3,350	.00	\$ 5,350.00	
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.	.00	\$ 0.00	
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 0	.00	\$ 0.00	
15) Loan Repayments	(CRO-1420)	\$ 0	.00	\$ 0.00	
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0	.00	\$ 0.00	
17) In-Kind Contributions	(CRO-1510)	\$ 0	.00	\$ 0.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,	, 16 and 17)	\$ 8,850	.00	\$ 15,491.00	
19) Cash on Hand at End (Add lines 4 and 12 together, then sub		\$ 17,204		\$ 17,204.01	
ADDITIONAL INFORMATION					
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	

Disbursements	Pg 1 of
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				Amendme	ent	
Pg	_1_	of	2	☐ Yes	X	No

1. Committee Fu	1. Committee Full Name (and Fund if applicable) 2. ID Number								
JOHNSON FO	R SHERIFF ELECT	ION COMMITTI	EE						
3. Type of Dis bu	rsement (Please i	ise separate CRO	-1310	forms for each	type of Disbu	seme	nt.)		
Operating Exp		ibutions to Candidat					ed Party Expe	nditures	
4. Payee Inform	ation			Add 🔲	Remove				
	niling Address & Pho	one		b. Coordinated	d Committee Na	m e	d. Commen	ts	
(include city, sta	•								
ALAMANCE C	OUNTY MEN REP	UBLICAN							
NC					tered (Specify)				
				☐ Federal ☐ State			e. Dection S	Sum to Date	
				State	Withhirt	anty.	c. Precion c	Juni to Date	
							\$	1,000.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Rema	irks	
1	Check	G	08	3/09/2016	\$ 1,000.00				
					\$	-			
4. Payee Inform	ation	·		Add 🗖	Remove				
	ailing Address & Pho	one			d Committee Na	m e	d. Commen	ts	
(include city, state, & zip)									
	COUNTY REPUBLI	CAN [ARTY WO	OMEN						
2966 SOUTH CHURCH ST NO. 179 c. Level Registered (Specify)									
BURLINGTON	I, NC 27215			☐ Federal	County:				
i				State	☐ Municip	ality:	e. Dection S	Sum to Date	
Alamance						\$	1,000.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Rema	arks	
1	Check	G 09/01/2016 \$ 1,000.00							
					\$				
4. Payee Inform	ation			Add 🔲	Remove	\			
	ailing Address & Pho	one			d Committee Na	ım e	d. Commen	ts	
(include city, sta	-				****				
AMY GALEY									
	FLOYD SCOTT LA	NE			tered (Specify)				
BURLINGTON	I, NC 27217			☐ Federal	County:		o Dording 4	Sum to Data	
				State	☐ Municip	anty:	e. Election S	oum to Date	
				Alamance			\$	250.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Rem	arks	
1	Check	D	08	8/09/2016	\$ 250.00				
				,,,, , , , , , , , , , , , , , , , , ,	\$				
5. Total only thi	s Page	<u> </u>	<u> </u>		<u> </u>		\$	2,250.00	
	CRO-1310 Pages						Ψ	2,230.00	
	_	Summary Paga CDA	_1100 :#	Ongratina Evna	nses)				
(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)							3,350.00		
(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						te			
E - Salaries	F* - Equipm	_		litical Party	H* - H	olding	g Public Off	ice Expenses	
I - Postage	J - Penaltie	s	K* - C	Office Expenses	9 Q* - D	onatio	on to Legal 1	Expense Fund	
O* Other			_						
* Codes requir	e detailed explanatio	n in required ren	narks f	ield (k)					

D	ic	hu	ırs	e	m	e	nts	1
u	13	เวน	113	C			1112	,

				Amenume	LIII	
Pg	2	of	2	☐ Yes	X	No

	coordinated party ex								
1. Committee Fu	ıll Name (and Fund i	f applicable)						2. ID Nu	mber
JOHNSON FO	R SHERIFF ELECT	ION COMMITTI	EE						
3. Type of Dis bu	rsement (Please 1	ise separate CRO	-1310	forms for each	typ				
Operating Exp		ibutions to Candidat	es/Polit	ical Committees		Coo	rdinate	ed Party E	xpenditures
4. Payee Inform	ation			Add 🔲	Ren	ove			
	ailing Address & Pho	one		b. Coordinated	Co	mmittee Na	m e	d. Comm	ents
(include city, sta								:	
	FOR GOVERNOR								
P O BOX 98027				c. Level Regist	erec				
RALEIGH, NC 27624				☐ Federal ☐ County:					
				X State		☐ Municip	ality:	e. Election	on Sum to Date
								\$	500.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Re	quired R	emarks
1	Check	D	10	0/20/2016	\$	500.00			
					\$		-		
4. Payee Information Add Remove a Full Name Mailing Address & Phone b. Coordinated Committee Name d. Comments									
d. 1 diritatio, Fidaning Fidanos & Front									
(include city, sta	te, & zip)			1					
RIDDELL FOR				c. Level Regist	harac	(Specify)			
6343 BEALE R				Federal		County:			
SNOW CAMP,	, NC 27349			X State		☐ Municip		e. Electi	on Sum to Date
						<u> </u>			
								\$	600.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Re	quired R	emarks
1	Check	D		0/03/2016	\$	600.00			
					-				
					\$				
5. Total only thi	is Page							\$	1,100.00
6 Total of ALL	CRO-1310 Pages								
	in line 13a of Detailed S	Summary Page CRO	-1100 i	f Operating Expe	nses)			•	3,350.00
	in line 13b of Detailed S					s/Political C	omm)	\$	3,330.00
(This line goes	in line 13c of Detailed S	Summary Page CRO	-1100 ij	Coordinated Pa	rty E.	xpenditures)			
	odes (List detailed								
A* - Media	B* - Printir	ıg		Fundraising				her Cand	
E - Salaries				olitical Party H* - Holding					Office Expenses
I - Postage	J - Penaltie	es	K* - (Office Expense	S	Q* - D	onatio	on to Leg	gal Expense Fund
O* Other									
* Codes requir	e detailed explanation	on in required ren	narks	field (k)					

	Am	e n	dm	ent	
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Disbursements

				/ LIII C IX GIII .		
Pg	1	of	5_	☐ Yes	X	No

1. Committee Full Name (and Fund if applicable) 2. ID Number									
JOHNSON FOI	R SHERIFF ELECT	ION COMMITTI	EE						
3. Type of Dis bursement (Please use separate CRO-1310 forms for each type of Disbursement.)									
X Operating Exp		ibutions to Candidat						ed Party Exp	oenditures
4. Payee Inform				Add 🗖	Remo				
a. Full Name, Ma	ailing Address & Pho	ne		b. Coordinated	d Com	mittee Na	m e	d. Comme	nts
(include city, sta									
	OR FREEDOM		:	. Y 1 D	3 7	Cons at few			
P O BOX 316			:	c. Level Registered (Specify) Federal County:					
MEBANE NC,	NC 27302			State	F	Municip		e. Election	Sum to Date
					5	P		\$	1,000.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Am	ount	k. Re	quired Ren	ıarks
1	Check	0		1/10/2016		,000.00	CON	TRIBUTI	ON
					\$				
4. Payee Inform	ation			Add 🗖	Remo	ve	L		
	ailing Address & Pho	one	<u>_</u>	b. Coordinated			ım e	d. Comme	nts
(include city, sta	-							-	·····
ALAMANCE N									
PO BOX 431				c. Level Regist	tered (
GRAHAM, NC	27253			☐ Federal ☐ County: ☐ State ☐ Municipality				13	S 4- T
				☐ State	L	J Municip	auty:	e. Election	Sum to Date
								\$	750.00
f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks									
1	Check	0	12	2/12/2016	\$	750.00	ADV	/ERTISIN	G
					\$	· 			
4. Payee Inform	ation			Add 🔲	Remo	ve			
	ailing Address & Pho	one		b. Coordinate	d Com	mittee Na	ıme	d. Comme	nts
(include city, sta	te, & zip)								
	I SHRINE CLUB			. T I.D	4 1 1	C			
PLANTATION				c. Level Regist	tered (Specify) County:		ļ	
BURLINGTON	N, NC 27215			State	F			e. Dection	Sum to Date
					Ton-				
								\$	200.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Am	ount	—	quired Ren	
1	Check	0	10	0/03/2016	\$	200.00	CON	NTRIBUTI	ON
					\$				
5. Total only thi	s Page	*************************************						\$	1,950.00
6. Total of ALL	CRO-1310 Pages								
	in line 13a of Detailed S	Summary Page CRO	-1100 if	Operating Expe	nses)			e	5,500.00
(This line goes i	in line 13b of Detailed S	Summary Page CRO	-1100 if	Contrib to Cand	lidates/i		omm)	\$	5,500.00
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)									
7. Purpose Co	odes (List detailed	expenditure code	in (h.)	above)					
A* - Media	B* - Printin	ıg	C* - F	undraising		D - To	Anot	her Candid	ate
E - Salaries	F* - Equipm	ent		litical Party			-	-	ffice Expenses
I - Postage	J - Penaltie	:S	K* - C	Office Expense:	s	Q* - D	onatio	on to Legal	Expense Fund
O* Other	- Jo4-11 o J 4*			: .1.4.7.)					
* Codes requir	e detailed explanatio	on in required ren	narks t	ieia (K)					

Die	hur	eem	ents
1718		SEII	C1117

1 Camer: 44 - E	II Name (and Dund !	familiable)		·			- 1	2. ID Num	her
	III Name (and Fund i R SHERIFF ELECT		EE	 				#. ED INUIII	UV.1
3. Type of Disbu	reamont (Ploneo	ise separate CRO	2-1310	forms for each	h type o	f Dishu	rseme	nt.)	
Operating Exp		ibutions to Candidat			<u> </u>			ed Party Exp	enditures
4. Payee Inform				· · · · · · · · · · · · · · · · · · ·	Remov	e			
	iling Address & Pho	one		b. Coordinate			ım e	d. Commer	its
(include city, sta	=								
	GUE OF ALAMAN	CE COUNTY							
914 CHAPEL H		OL COCIVII		c. Level Regis	tered (S				
BURLINGTON				☐ Federal		County:			
				☐ State	<u> </u>	Municip	ality:	e. Dection	Sum to Date
								\$	300.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amo	unt	k. Re	quired Rem	arks
1	Check	0	09	9/13/2016	\$ 1	125.00	ADV	ERTISING	3
					\$				
4. Payee Inform	ation	**************************************		Add 🔲	Remov	e			
	ailing Address & Pho	one		b. Coordinate	d Com n	ittee Na	me	d. Commer	ıts
(include city, sta	-								
LIVING MISSI	ONARY BAPTIST	CHURCH							
6061 SOUTH F	IWY 49		c. Level Regis						
BURLINGTON		Federal	님	County: Municip		a Flaction	Sum to Date		
				State		Municip	anty.	e. Mection	Sum to Date
								\$	500.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amo	unt	k. Re	quired Rem	arks
1	Check	0	0	9/23/2016	\$:	500.00	ADV	ERTISING	3
					\$				
4. Payee Inform	ation			Add 🔲	Remov	re		.'	
	ailing Address & Ph	one		b. Coordinate	d Comn	ittee N	am e	d. Comme	nts
(include city, sta	=					•			
N C VALUES									
9650 STRICKL	AND ROAD			c. Level Regis					
SUITE 103-226				Federal		County		a Flaction	Sum to Date
RALEIGH, NC	27615			☐ State		Municip	banty.	e. Mection	Sum to Date
								\$	500.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amo	unt	k. Re	quired Ren	arks
1	Check	0	1	0/03/2016	1	500.00		ERTISING	
	Chok		 		 		ļ '		·
		<u> </u>		····	\$				
5. Total only thi	s Page							\$	1,125.00
6. Total of ALL	CRO-1310 Pages								
	in line 13a of Detailed .							\$	5,500.00
	in line 13b of Detailed .							*	2,200.00
(This line goes	in line 13c of Detailed S	Summary Page CRO	-1100 ij	Coordinated Pa	irty Expe	nditures)	,		
7. Purpose C	odes (List detailed	expenditure code	in (h.)	above)	-				·
A* - Media	B* - Printii	ng	C* - I	undraising		D - To	Anot	her Candid	ate
E - Salaries	F* - Equipm	~	G - Po	litical Party		H* - H	olding	g Public Of	fice Expenses
I - Postage	J - Penaltie		K* - (Office Expense	es	Q* - D	onatio	on to Legal	Expense Fund
O* Other									
* Codes requir	e detailed explanation	on in required rer	narks 1	field (k)					

n	ie	hu	re	Δ	m	Δ	nts	
.,	1.5			•	261	•	1112	r

				Amenum	CHIL	
Pg	3_	of	5	☐ Yes	X	No

	ll Name (and Fund i						2. ID Nu	mber
	R SHERIFF ELECT		EE					
3. Type of Dis bu	rsement (Please 1	use separate CRO)-131 <i>0</i>	forms for eacl	h type of Disbu	rseme	nt.)	
Operating Exp		ibutions to Candidat						xpenditures
4. Payee Informa				Add 🔲	Remove			
	iling Address & Pho	one		b. Coordinate	d Committee Na	me	d. Comn	ients
(include city, stat	te, & zip)							
MEMORIAL FU PO BOX 97072	W ENFOREMENT JND J, DC 20090-7072	OFFICERS		c. Level Regis Federal State	tered (Specify) County: Municipality:			
							\$	200.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired R	emarks
1	Check	О	0	7/21/2016	\$ 100.00	CON	ITRIBU'	rion
					\$			
4. Payee Inform	ation			Add 🔲	Remove	<u>. </u>		
	iling Address & Ph	one			d Committee Na	ame	d. Comn	nents
(include city, sta								
SOUTHERN ALAMANCE ATHLETICS & BOOSTER CLUB 631 SOUTHERN HIGH SCHOOL ROAD				c. Level Regis	tered (Specify) County	:		
GRAHAMN, N		KOAD		☐ State	☐ Municip		e. Electi	on Sum to Date
OKAHAMIN, IN	C 27233						\$	3,300.00
f Assaurt Codo	g. Form of Payment	h. Purpose Code	i Dote	(m m /dd/vvvv)	li Amount	k. Re	quired R	· · · · · · · · · · · · · · · · · · ·
1. Account Code	Check	O		0/20/2016	\$ 1,000.00		/ERTISI	
1	CHECK		1	0/20/2010	\$ 1,000.00	I I	DICTIO	110
	**				<u> </u>			
4. Payee Inform					Remove d Committee N	o m e	d. Com	nents
•	ailing Address & Ph	one		b. Coordinate	u Committee N	ame	u. Com	
(include city, sta SOUTHERN H PO BOX 175 SWEPSONVIL	IGH SCHOOL BAY	ND BOOSTERS		Federal	ctered (Specify) County		El 4	on Sum to Poto
				☐ State	Munici	oanty.	e. Electi	on Sum to Date
							\$	500.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	e (mm/dd/yyyy)	j. Amount	k. Re	quired F	tem arks
1	Check	О	0	8/30/2016	\$ 500.00	ADV	VERTIS	NG
					\$			
			<u>.</u>		 	<u> </u>	\$	1,600.00
5. Total only thi	S Page CRO-1310 Pages	·					1	1,000.00
(This line goes i	in line 13a of Detailed in line 13b of Detailed in line 13b of Detailed in line 13c of Detailed in lin	Summary Page CRO	D-1100 i	f Contrib to Can	didates/Political C		\$	5,500.00
7. Purpose C	odes (List detailed	expenditure code	in (h.)	above)				
A* - Media	B* - Printii	_		Fundraising			her Can	
E - Salaries	F* - Equipm			olitical Party			-	Office Expenses gal Expense Fund
I - Postage O* Other	J - Penaltic	es	W (Office Expense	3 V"-1	onati	on to Le	gai expense runu
	e detailed explanation	on in required re	marks	field (k)				

Disbursement									-
TRAINING MEM	2	nt	eı	m	rse	111	s h	1	11

				Amename	ent
Pg	4	of	5	☐ Yes	X No

1. Committee Fu	ull Name (and Fund i	f applicable)					2. ID Numb	er
JOHNSON FO	R SHERIFF ELECT	ION COMMITT	EE					
3. Type of Disbu	rsement (Please	use separate CRO)-131 <i>0</i>	forms for each	h type of Disbu	rseme	nt.)	
Operating Exp	oenses	ibutions to Candidat	es/Polit	ical Committees	Coo	ordinat	ed Party Expe	nditures
4. Payee Inform	ation			Add 🔲	Remove			
	ailing Address & Pho	one		b. Coordinate	d Committee N	am e	d. Commen	ts
(include city, sta	te, & zip)				-			
SOUTHERN H	IGH SCHOOL FUT	URE FARMERS	OF					
AMERICA					tered (Specify)]	
631 HIGH SCH	OOL RD			☐ Federal	☐ County			
GRAHAM, NC	27253			☐ State	☐ Municip	ality:	e. Dection S	um to Date
							\$	500.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Rema	ırks
1	Check	0	1	1/28/2016	\$ 500.00	CON	TRIBUTIO	N
					\$			
4. Payee Inform		· · · · · · · · · · · · · · · · · · ·		Add 🔲	Remove			
	ailing Address & Pho	one		b. Coordinate	d Committee Na	am e	d. Commen	ts
(include city, sta	te, & zip)							
SOUTHERN H								
	N HIGH SCHOOL	RD			tered (Specify)			
GRAHAM, NC	27253			☐ Federal ☐ State	County:		T79 41 C	t. D.
				L State	Municip	anty:	e. Election S	oum to Date
							\$	125.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Rema	rks
1	Check	О	08	8/26/2016	\$ 125.00	ADV	ERTISING	
					\$			
4. Payee Inform	ation			Add □	Remove	·	·	
	ailing Address & Pho	one		b. Coordinate	d Committee Na	ame	d. Commen	ts
(include city, sta	_							
	IDDLE SCHOOL B	AND PARENT						
ORGANIZATIO				c. Level Regist	tered (Specify)			
PO BOX 778				☐ Federal	County:			
GRAHAM, NC	27253			☐ State	☐ Municip	ality:	e. Dection S	um to Date
							\$	100.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Rema	rks
1	Check	O		0/06/2016	\$ 100.00		ERTISING	
				70072010	\$	71.0 (DRITIONIC	<u> </u>
5. Total only this	s Раде						\$	725.00
	CRO-1310 Pages					·	•	723.00
	•	n cno	1100 .0					
	n line 13a of Detailed S		-		•		\$	5,500.00
-	n line 13b of Detailed S n line 13c of Detailed S		-			omm)		
	des (List detailed							
A* - Media	B* - Printin			undraising	D - To	Anoth	ner Candidat	e
E - Salaries	F* - Equipme	_		litical Party			Public Offi	
I - Postage	J - Penaltie			ffice Expenses		-		xpense Fund
O* Other			~					· · · · · · · · · · · · · · · · · · ·
	e detailed explanation	n in required rem	arks fi	eld (k)				

Die	hu	rca	m	ents
IJIS	1)11	186		SHIN

				Amenan	ient	
Pg	5	of	5	☐ Yes	X	No

committees and	coordinated party ex	penanures							
1. Committee Fu	ull Name (and Fund i	f applicable)						2. ID Nun	nber
	R SHERIFF ELECT		EE						
· · · · · · · · · · · · · · · · · · ·								- 1	
3. Type of Dis bu		<u>ise separate CRO</u>							
Operating Exp	oenses Contr	ibutions to Candidat	es/Polit	ical Committee:	s	☐ Coc	ordinate	ed Party Ex	penditures
4. Payee Inform				Add 🔲	Rem				
a. Full Name, Ma	ailing Address & Pho	one		b. Coordinate	ed Cor	nmittee Na	ame	d. Comme	nts
(include city, sta	te, & zip)								
STRONG MAN	IN GOLF TOURNA	MENT							
2609 TROXLE	R RD			c. Level Regi	stered				
BURLINGTON, NC 27215						Y31 42	Same to Dota		
				☐ State	!	Municip	ality:	e. Election	Sum to Date
								\$	100.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy) j. An	nount	k. Re	quired Rei	narks
1	Check	O	0'	7/21/2016	/21/2016 \$ 100.00 ADV		ADV	VERTISEMENT	
				· · · · · · · · · · · · · · · · · · ·	\$				
5. Total only thi	s Page	1						\$	100.00
6. Total of ALL	CRO-1310 Pages		···						
	in line 13a of Detailed S	Summarv Page CRO	-1100 if	Operating Exp	enses)			•	5,500.00
(This line goes	in line 13b of Detailed S	Summary Page CRO	-1100 if	Contrib to Can	didates	s/Political C	Comm)	\$	3,300.00
(This line goes	in line 13c of Detailed S	ummary Page CRO	-1100 if	Coordinated P	arty Ex	penditures)			
7. Purpose C	odes (List detailed	expenditure code	in (h.)	above)					
A* - Media	B* - Printin	g	C* - F	undraising				her Candic	
E - Salaries	F* - Equipm	ent	G - Po	litical Party					ffice Expenses
I - Postage	J - Penaltie	S	K* - C	Office Expense	es	Q* - D	onatio	on to Lega	l Expense Fund
O* Other									
* Codes requir	e detailed explanatio								
CRO-1310		NC S	tate Bo	ard of Elections	5				December 2009