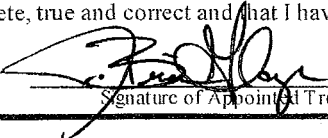


Disclosure Report Cover

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 Information																																							
a. Full Name COMMITTEE TO ELECT MEREDITH EDWARDS		c. ID Number																																					
b. Mailing Address (include City, State and Zip Code) 123 BAUMAN COURT GRAHAM, NC 27253		d. Date Filed 04/28/2018																																					
		e. Phone Number (919) 428-6779																																					
2. Report Year 2018	3. Period Start Date (mm/dd/yy) 01/01/2018	4. Period End Date (mm/dd/yy) 04/21/2018	5. Treasurer Full Name JOSEPH BRIAN GLAZE																																				
6. Type of Committee (Check One) <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		9. Type of Report (check only one type of report from one category) <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Municipal</th> <th>State/County</th> <th>Referendum</th> </tr> <tr> <td><input type="checkbox"/> Organizational</td> <td><input type="checkbox"/> Organizational</td> <td><input type="checkbox"/> Organizational</td> </tr> <tr> <td><input type="checkbox"/> Thirty-five day</td> <td><input type="checkbox"/> Quarterly</td> <td><input type="checkbox"/> Pre-referendum</td> </tr> <tr> <td><input type="checkbox"/> Pre-primary</td> <td><input type="checkbox"/> First</td> <td><input type="checkbox"/> Final</td> </tr> <tr> <td><input type="checkbox"/> Pre-election</td> <td><input type="checkbox"/> Second</td> <td><input type="checkbox"/> Supplemental Final</td> </tr> <tr> <td><input type="checkbox"/> Pre-runoff</td> <td><input type="checkbox"/> Third</td> <td><input type="checkbox"/> Annual</td> </tr> <tr> <td><input type="checkbox"/> Semi-annual</td> <td><input type="checkbox"/> Fourth</td> <td><input type="checkbox"/> Special</td> </tr> <tr> <td><input type="checkbox"/> Mid Year</td> <td><input type="checkbox"/> Semi-annual</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Year End</td> <td><input type="checkbox"/> Mid Year</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Final</td> <td><input type="checkbox"/> Year End</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Special</td> <td><input type="checkbox"/> Final</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>		Municipal	State/County	Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum	<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final	<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final	<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual	<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special	<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year		<input type="checkbox"/> Final	<input type="checkbox"/> Year End		<input type="checkbox"/> Special	<input type="checkbox"/> Final			<input type="checkbox"/> Special	
Municipal	State/County	Referendum																																					
<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational																																					
<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum																																					
<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final																																					
<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final																																					
<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual																																					
<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special																																					
<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual																																						
<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year																																						
<input type="checkbox"/> Final	<input type="checkbox"/> Year End																																						
<input type="checkbox"/> Special	<input type="checkbox"/> Final																																						
	<input type="checkbox"/> Special																																						
7. Type of Fund (if applicable, check one) <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:		10. Special Report Name 																																					
8. Number of Fundraisers this Report 1																																							
3. Account Information		3. Account Information																																					
a. Financial Institution Full Name CAPITAL BANK		a. Financial Institution Full Name																																					
b. Purpose COMMITTEE USE	c. Account Code J2911	b. Purpose	c. Account Code																																				
	d. Period Begin Balance \$		d. Period Begin Balance \$																																				
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																																							
<u>J. Brian Glaze</u> Printed Name of Signer		 Signature of Appointed Treasurer																																					
		04/28/2018 Date																																					
FOR OFFICE USE ONLY																																							
Date Received:	<u>4/29/18</u>	Employee:	<u>JG</u>																																				
Date Postmarked:	<u>5/2/18</u>	Employee:	<u>JG</u>																																				
Date Scanned:	_____	Employee:	_____																																				
Date Data Entered:	_____	Employee:	_____																																				
		Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received 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.																																							

Detailed Summary

Amendment
 Yes No

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 Report	3. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS	2018 First Quarter		
Start of Election Cycle: January 1, <u>2017</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 12,738.38	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 2,785.00	\$ 3,620.00
6) Contributions from Individuals	(CRO-1210)	\$ 12,952.39	\$ 28,905.28
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 1,046.00	\$ 1,046.00
9) Loan Proceeds	(CRO-1410)	\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.00	\$ 885.00
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,11d and 11e)		\$ 16,783.39	\$ 34,456.28
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 17,054.48	\$ 21,686.20
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 468.12	\$ 488.02
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)	\$ 3,573.39	\$ 3,856.28
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 21,095.99	\$ 26,030.50
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 8,425.78	\$ 8,425.78
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

Aggregated Contributions from Individuals

Page 1 of 4

Amendment
 Yes No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		01/12/2018	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 35.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		01/15/2018	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		02/21/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		02/24/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		01/25/2018	\$ 40.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		02/23/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		02/14/2018	\$ 35.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 35.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		04/10/2018	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		02/23/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		02/21/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		02/21/2018	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 20.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/22/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 10.00	
4. Total only this Page					\$ 740.00	
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 2,785.00	

Aggregated Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/17/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/17/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		02/15/2018	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/16/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/16/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		02/25/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		02/24/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/13/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/13/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/14/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/14/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		04/09/2018	\$ 20.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		01/26/2018	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 20.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/15/2018	\$ 30.00	
4. Total only this Page					\$ 750.00	
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 2,785.00	

Aggregated Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/15/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/16/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/16/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 35.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		02/22/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/06/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/06/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/12/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/15/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/12/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/14/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/14/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		02/23/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		02/24/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		02/02/2018	\$ 40.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 35.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 35.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/05/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/05/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Cash		02/24/2018	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check		04/10/2018	\$ 50.00	
4. Total only this Page					\$ 735.00	
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 2,785.00	

Aggregated Contributions from Individuals

Page 4 of 4

Amendment
 Yes No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add	J2911	Check		04/08/2018	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	J2911	Check		04/10/2018	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	J2911	Cash		02/12/2018	\$ 30.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	J2911	Cash		02/12/2018	\$ 30.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	J2911	Cash		02/12/2018	\$ 30.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	J2911	Check		04/16/2018	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	J2911	Cash		02/23/2018	\$ 30.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	J2911	Check		04/05/2018	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	J2911	Check		02/03/2018	\$ 35.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	J2911	Check		02/23/2018	\$ 30.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	J2911	Check		01/24/2018	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	J2911	Cash		02/24/2018	\$ 30.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	J2911	Cash		02/24/2018	\$ 30.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	J2911	Cash		02/24/2018	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	J2911	Check		02/23/2018	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	J2911	Cash		02/24/2018	\$ 35.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	J2911	Check		01/31/2018	\$ 40.00	
<input type="checkbox"/> Remove						
4. Total only this Page					\$ 560.00	
5. Total of ALL CRO-1205 Pages					\$ 2,785.00	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

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)						2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DAVID ALLEN 308 E. PINE ST. GRAHAM, NC 27253				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						e. Election Sum to Date	
						\$ 120.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	J2911	Cash		02/01/2018	\$ 40.00		
<input type="checkbox"/>	J2911	Cash		02/09/2018	\$ 40.00		
<input type="checkbox"/>	J2911	Cash		02/16/2018	\$ 40.00		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
PATRICIA ALLEN 1222 S MAIN ST GRAHAM, NC 27253				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						e. Election Sum to Date	
						\$ 130.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	J2911	Check		02/02/2018	\$ 130.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JAMES AVANT 561 COOK RD ELON, NC 27244				FENCE PRO			
				c. Employer's Name/Specific Field			
				FENCE PRO			
						e. Election Sum to Date	
						\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	J2911	Check		02/16/2018	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 500.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 12,952.39	

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)					2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JENNIFER BALL 719 HAWTHORN RIDGE DR WHITSETT, NC 27377 (910) 617-2271			BUSINESS OWNER			
			c. Employer's Name/Specific Field			
			KNOT YOU AVERAGE EVENTS		e. Election Sum to Date	
				\$ 2,549.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	In-Kind	WINTER BLUE EVENT AT THE BROWNSTONE	02/27/2018	\$ 2,549.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
RODNEY BISHOP 2550 MOSS CREEK LOOP ELON, NC 27244			SYSTEM ANALYST			
			c. Employer's Name/Specific Field			
			Computer and Electronic Product Manufacturing		e. Election Sum to Date	
				\$ 60.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Check		02/23/2018	\$ 60.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
KEITH BRADY 5914 STONEY MTN RD BURLINGTON, NC 27217			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
				\$ 635.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Check		01/29/2018	\$ 500.00	
<input type="checkbox"/>	J2911	Cash		02/24/2018	\$ 35.00	
<input type="checkbox"/>	J2911	Check		02/24/2018	\$ 100.00	
4. Total only this Page					\$ 3,244.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 12,952.39	

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)						2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
TIM BRITT 2673 FLEMING-GRAHAM RD BURLINGTON, NC 27217				LE			
				c. Employer's Name/Specific Field			
				Executive, Legislative, and Other General Government Support			
						e. Election Sum to Date	
						\$ 120.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	J2911	Check		02/23/2018	\$ 120.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
SUSAN BURTON 3332 ARDMORE ST BURLINGTON, NC 27215				BUSINESS OWNER			
				c. Employer's Name/Specific Field			
				B/B TRAILER SALES			
						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		
<input type="checkbox"/>	J2911	Check		04/16/2018	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DEBRA CARDWELL POB 339 ALAMANCE, NC 27201				BUSINESS OWNER			
				c. Employer's Name/Specific Field			
				CARDWELL STONE CENTER			
						e. Election Sum to Date	
						\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	J2911	Check		03/20/2018	\$ 150.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 370.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 12,952.39	

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)						2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
R KEITH COLEMAN 1624 RIVERSIDE DRIVE HILLSBOROUGH, NC 27278				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
				e. Election Sum to Date			
				\$		1,740.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	J2911	Check		02/07/2018	\$ 420.00		
<input type="checkbox"/>	J2911	Check		02/07/2018	\$ 800.00		
<input type="checkbox"/>	J2911	Cash		02/24/2018	\$ 20.00		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JIM COPLAND 3025 N FAIRWAY DR BURLINGTON, NC 27215				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
				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		
<input type="checkbox"/>	J2911	Check		04/09/2018	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JANET COUNCILMAN 1113 SHERWOOD DRIVE BURLINGTON, NC 27215				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
				e. Election Sum to Date			
				\$		80.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input checked="" type="checkbox"/>	J2911	Cash		11/24/2017	\$ 20.00		
<input type="checkbox"/>	J2911	Check		02/20/2018	\$ 60.00		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1,400.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 12,952.39	

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)						2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
SUE COX 1183 REATKIN LN GRAHAM, NC 27253				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED		e. Election Sum to Date	
				\$		60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	J2911	Check		02/16/2018	\$ 30.00		
<input type="checkbox"/>	J2911	Check		02/18/2018	\$ 30.00		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CHRISTIE DOSS 1230 WALNUT COVE LN SNOW CAMP, NC 27349				SELF-EMPLOYED			
				c. Employer's Name/Specific Field			
				SELF		e. Election Sum to Date	
				\$		93.84	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	J2911	In-Kind	T-SHIRTS	03/27/2018	\$ 88.26		
<input type="checkbox"/>	J2911	In-Kind	FACEBOOK ADS	03/31/2018	\$ 5.58		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JENNA EARLEY 407 EDINBURGH DR BURLINGTON, NC 27215				PROSECUTOR			
				c. Employer's Name/Specific Field			
				Executive, Legislative, and Other General Government Support		e. Election Sum to Date	
				\$		60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	J2911	Check		02/14/2018	\$ 60.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 213.84	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 12,952.39	

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)					2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
BETTY EDWARDS 2123 MARTIN ST BURLINGTON, NC 27217			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
				\$ 200.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Cash		02/01/2018	\$ 50.00	
<input type="checkbox"/>	J2911	Cash		02/02/2018	\$ 50.00	
<input type="checkbox"/>	J2911	Cash		02/06/2018	\$ 50.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
BETTY EDWARDS 2123 MARTIN ST BURLINGTON, NC 27217			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
				\$ 200.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Cash		02/09/2018	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
DWIGHT EPPERSON 1314 SPRINGWOOD CHURCH RD BURLINGTON, NC 27215			REALTOR			
			c. Employer's Name/Specific Field			
			Real Estate		e. Election Sum to Date	
				\$ 150.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Check		02/24/2018	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 350.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 12,952.39	

Contributions from Individuals

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Amendment
 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	
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
JAMES FAUCETTE 3111 B COMMERCE PLACE BURLINGTON, NC 27215				FINANCIAL AID OFFICER		
				c. Employer's Name/Specific Field		
				ACC		
				e. Election Sum to Date		
				\$ 60.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Cash		04/06/2018	\$ 30.00	
<input type="checkbox"/>	J2911	Cash		04/12/2018	\$ 30.00	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
SCOTT FOWLER 604 WOODVALE DR GREENSBORO, NC 27410				UNICHEM		
				c. Employer's Name/Specific Field		
				Chemical Manufacturing		
				e. Election Sum to Date		
				\$ 150.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Check		01/25/2018	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
AMY GALEY 233 FLOYD SCOTT LN BURLINGTON, NC 27217				ATTORNEY		
				c. Employer's Name/Specific Field		
				SELF EMPLOYED		
				e. Election Sum to Date		
				\$ 240.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Check		02/23/2018	\$ 140.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 350.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 12,952.39	

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)					2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
KELLEY GATES 624 COUNTRY CLUB DR BURLINGTON, NC 27215			ATTORNEY			
			c. Employer's Name/Specific Field			
			Executive, Legislative, and Other General Government Support			
					e. Election Sum to Date	
					\$ 220.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Check		02/01/2018	\$ 100.00	
<input type="checkbox"/>	J2911	Check		02/20/2018	\$ 120.00	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
MARK GREENE 117 GEORGETOWNE DR ELON, NC 27244			SVP			
			c. Employer's Name/Specific Field			
			NCSECU			
					e. Election Sum to Date	
					\$ 75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Check		02/07/2018	\$ 75.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
MURIEL GROCE 36743 POND SIDE LN PURCELLVILLE, VA 20132			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election Sum to Date	
					\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Check		02/17/2018	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 445.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 12,952.39	

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)					2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
ANGIE HALL 312 MALLARD CREEK DR GRAHAM, NC 27253				FINANCIAL ADVISOR		
				c. Employer's Name/Specific Field		
				PINNACLE WEALTH		
						e. Election Sum to Date
						\$ 60.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Check		02/04/2018	\$ 60.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
GARY HARRIS 2546 BARBER RD ELON, NC 27244				RETIRED		
				c. Employer's Name/Specific Field		
				RETIRED		
						e. Election Sum to Date
						\$ 150.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Check		01/25/2018	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
HOWARD HICKS SR 120 RANDOM LANE BURLINGTON, NC 27215				RETIRED		
				c. Employer's Name/Specific Field		
				RETIRED		
						e. Election Sum to Date
						\$ 145.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>	J2911	Cash		12/31/2017	\$ 50.00	
<input type="checkbox"/>	J2911	Cash		02/21/2018	\$ 35.00	
<input type="checkbox"/>	J2911	Cash		02/24/2018	\$ 20.00	
4. Total only this Page					\$ 265.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 12,952.39	

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)						2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
HOWARD HICKS SR 120 RANDOM LANE BURLINGTON, NC 27215				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED		e. Election Sum to Date	
						\$ 145.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	J2911	Cash		03/26/2018	\$ 20.00		
<input type="checkbox"/>	J2911	Cash		04/14/2018	\$ 20.00		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ELIZABETH GARRISON HODGE 3188 TIMBERLYNE DR MEBANE, NC 27302				HEALTH CARE			
				c. Employer's Name/Specific Field			
				HEALTH CARE		e. Election Sum to Date	
						\$ 190.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	J2911	Check		01/11/2018	\$ 100.00		
<input type="checkbox"/>	J2911	Cash		02/24/2018	\$ 20.00		
<input type="checkbox"/>	J2911	Check		02/24/2018	\$ 70.00		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ROSE HOLLAND 2155 QUAIL DR GRAHAM, NC 27253				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED		e. Election Sum to Date	
						\$ 180.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	J2911	Check		02/22/2018	\$ 180.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 410.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 12,952.39	

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)					2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
SUE HOLMES PO BOX 1218 GRAHAM, NC 27252			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 120.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Check		02/21/2018	\$ 120.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
FD HORNADAY III POB 790 BURLINGTON, NC 27216			PRESIDENT/CEO			
			c. Employer's Name/Specific Field			
			KNITWEAR FABRICS, INC		e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Check		03/16/2018	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
MICHELLE HOWE 1432 RIDGECREST AVE BURLINGTON, NC 27215			TEACHER			
			c. Employer's Name/Specific Field			
			Educational Services		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	
<input type="checkbox"/>	J2911	Check		02/24/2018	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 470.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 12,952.39	

Contributions from Individuals

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Amendment
 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	
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
MIKE JOHNSTON 240 BIDNEY DR BURLINGTON, NC 27215			SELF-EMPLOYED			
			c. Employer's Name/Specific Field SELF			
					e. Election Sum to Date	
					\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Check		02/23/2018	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
KRISTEN JOLLY 1102 BRICEWOOD LN CEDAR GROVE, NC 27231			DENTAL			
			c. Employer's Name/Specific Field SUNRISE DENTAL			
					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	
<input type="checkbox"/>	J2911	Check		04/20/2018	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
ELLIS KENNEDY 8126 SILAS DR SNOW CAMP, NC 27349			GROUNDS KEEPER			
			c. Employer's Name/Specific Field HOSPITALITY			
					e. Election Sum to Date	
					\$ 60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Check		02/21/2018	\$ 60.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 310.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 12,952.39	

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)						2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
RICKEY LEE 2979 S 119 MEBANE, NC 27302				RETIRE			
				c. Employer's Name/Specific Field			
				RETIRE			
						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	
<input type="checkbox"/>	J2911	Check		02/24/2018		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DENISE MARTI 1527 JORDAN MEADOWS DR BURLINGTON, NC 27217				EDUCATOR			
				c. Employer's Name/Specific Field			
				Educational Services			
						e. Election Sum to Date	
						\$ 60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	J2911	Check		02/23/2018		\$ 60.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
EARL MCKEE 5200 KIGER RD ROUGEMONT, NC 27572				INSPECTOR			
				c. Employer's Name/Specific Field			
				Executive, Legislative, and Other General Government Support			
						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	
<input type="checkbox"/>	J2911	Check		02/22/2018		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 260.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 12,952.39	

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)					2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
GEORGE MCLAMB JR 2539 GLENKIRK DR BURLINGTON, NC 27215			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED			
					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	
<input type="checkbox"/>	J2911	Check		04/12/2018	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
SHERON MILES 2632 PEPPERSTONE DR GRAHAM, NC 27253			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election Sum to Date	
					\$ 60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Cash		02/14/2018	\$ 30.00	
<input type="checkbox"/>	J2911	Cash		02/24/2018	\$ 30.00	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
DAVID MUNN 4042 S CHURCH ST BURLINGTON, NC 27215			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election Sum to Date	
					\$ 60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Cash		02/14/2018	\$ 30.00	
<input type="checkbox"/>	J2911	Cash		02/23/2018	\$ 30.00	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 220.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 12,952.39	

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)					2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JERRY MURRALL 6203 FRIEDEN RD GIBSONVILLE, NC 27377			RETIREED			
			c. Employer's Name/Specific Field			
			RETIREED		e. Election Sum to Date	
					\$ 70.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Cash		02/14/2018	\$ 35.00	
<input type="checkbox"/>	J2911	Cash		02/24/2018	\$ 35.00	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
PAT NADOLSKI 613 N GURNEY ST BURLINGTON, NC 27215			DISTRICT ATTORNEY			
			c. Employer's Name/Specific Field			
			ALAMANCE COUNTY		e. Election Sum to Date	
					\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Check		02/22/2018	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JEFF NESBITT 746 STILL RUN LANE GRAHAM, NC 27253			RETIREED			
			c. Employer's Name/Specific Field			
			NESBITT PERFORMANCE ENGINES		e. Election Sum to Date	
					\$ 1,534.55	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Cash		02/15/2018	\$ 30.00	
<input type="checkbox"/>	J2911	In-Kind	12 BANNERS	03/20/2018	\$ 504.55	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 754.55	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 12,952.39	

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)						2. ID Number
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
BILLIE NOLD 3201 OLD INGOLD TRAIL SNOW CAMP, NC 27349				RETIRED		
				c. Employer's Name/Specific Field		
				RETIRED		
				e. Election Sum to Date		
				\$ 130.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Check		02/01/2018	\$ 130.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
BARRY PARKER POB 818 MEBANE, NC 27302				RETIRED		
				c. Employer's Name/Specific Field		
				RETIRED		
				e. Election Sum to Date		
				\$ 60.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Cash		02/21/2018	\$ 30.00	
<input type="checkbox"/>	J2911	Cash		02/24/2018	\$ 30.00	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
PATRICIA RICH 4919 S NC 49 BURLINGTON, NC 27215				RETIRED		
				c. Employer's Name/Specific Field		
				RETIRED		
				e. Election Sum to Date		
				\$ 60.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Check		02/23/2018	\$ 60.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 250.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 12,952.39	

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)						2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DAVID SCOTT 1777 FOXHALL LN MEBANE, NC 27302				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
				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		
<input type="checkbox"/>	J2911	Check		01/24/2018	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
KATHRYN SHOFFNER 3658 LIBERTY DR BURLINGTON, NC 27215				NUTRITIONIST			
				c. Employer's Name/Specific Field			
				SELF			
				e. Election Sum to Date			
				\$		230.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	J2911	Cash		02/12/2018	\$ 30.00		
<input type="checkbox"/>	J2911	Check		02/24/2018	\$ 200.00		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DAVID STEWART 3562 DURHAM ST BURLINGTON, NC 27217				BUSINESS OWNER			
				c. Employer's Name/Specific Field			
				DOTTIES			
				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		
<input type="checkbox"/>	J2911	Check		04/13/2018	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 430.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 12,952.39	

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)						2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
TROY STONE 451 LEGEND OAKDS DR CHAPEL HILL, NC 27215				ASSISTANT DISTRICT ATTORNEY			
				c. Employer's Name/Specific Field			
				STATE OF NC			
						e. Election Sum to Date	
						\$ 190.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	J2911	Cash		02/24/2018	\$ 40.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
KAREN STRAWTHER 1237 PEBBLE DR GRAHAM, NC 27253				ACCOUNT EXECUTIVE			
				c. Employer's Name/Specific Field			
				Management of Companies and Enterprises			
						e. Election Sum to Date	
						\$ 170.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	J2911	Check		02/01/2018	\$ 100.00		
<input type="checkbox"/>	J2911	Check		02/14/2018	\$ 60.00		
<input type="checkbox"/>	J2911	Cash		02/24/2018	\$ 10.00		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CHERYL SURLS 1153 VILLA DRIVE GRAHAM, NC 27253				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						e. Election Sum to Date	
						\$ 130.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	J2911	Cash		02/16/2018	\$ 30.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 240.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 12,952.39	

Contributions from Individuals

Pg 19 of 21

Amendment
 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	
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JENNIFER TALLEY POB 872 GRAHAM, NC 27253			OWNER			
			c. Employer's Name/Specific Field			
			EP GATES		e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Check		03/26/2018	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
BELINDA THOMAS 2466 A BARBER RD ELON, NC 27244			PARALEGAL			
			c. Employer's Name/Specific Field			
			VERNON LAW FIRM		e. Election Sum to Date	
					\$ 80.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>	J2911	Check		11/28/2017	\$ 50.00	
<input type="checkbox"/>	J2911	Check		02/21/2018	\$ 30.00	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
DONNA TORIAN 505 WESTHAMPTON CT BURLINGTON, NC 27215			RETIRED			
			c. Employer's Name/Specific Field			
			NORTHEAST FAMILY PODIATRY		e. Election Sum to Date	
					\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Check		01/18/2018	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 730.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 12,952.39	

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)						2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
THOMAS TUCK 241 RIDGEWAY AVE STATESVILLE, NC 28677				SALES MANAGER			
				c. Employer's Name/Specific Field			
				CR ONSIND 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		
<input type="checkbox"/>	J2911	Check		01/15/2018	\$ 1,000.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CRAIG TURNER 4117 DUNLEVY CT BURLINGTON, NC 27215				ATTORNEY			
				c. Employer's Name/Specific Field			
				ALAMANCE COUNTY DA'S OFFICE		e. Election Sum to Date	
						\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	J2911	Check		01/02/2018	\$ 150.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
TONY VELEZ 1945 WEBSTER GROVE DR MEBANE, NC 27302				CEO			
				c. Employer's Name/Specific Field			
				SELF		e. Election Sum to Date	
						\$ 60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	J2911	Check		02/21/2018	\$ 60.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1,210.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 12,952.39	

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)					2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
CARLY WARING 9 WAXWING CT SIMPSONVILLE, SC 29681 (864) 640-3679			PATIENT LIAISON			
			c. Employer's Name/Specific Field			
			GREENVILLE HEALTH SYSTEM		e. Election Sum to Date	
				\$ 400.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Check		03/15/2018	\$ 400.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
LORI WICKLINE 477 RETREAT LN APT 2F BURLINGTON, NC 27215			PROSECUTOR			
			c. Employer's Name/Specific Field			
			Executive, Legislative, and Other General Government Support		e. Election Sum to Date	
				\$ 130.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	J2911	Cash		02/14/2018	\$ 30.00	
<input type="checkbox"/>	J2911	Check		04/13/2018	\$ 100.00	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 530.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 12,952.39	

Contributions from Other Political Committees Pg 1 of 1

Amendment Yes No

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS					
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
JOHNSON FOR SHERIFF COMMITTEE 3530 CARDWELL DR BURLINGTON, NC 27215			<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
			Alamance		e. Election Sum to Date \$ 120.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
J2911	Check		02/23/2018	\$ 120.00	
				\$	
				\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
SOUTHERN STATES PBA 2155 HIGHWAY 42 SOUTH MCDONOUGH, GA 30252 (770) 389-5391			<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum		
			c. Level Registered (Specify)		
			<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Sum to Date \$ 926.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
J2911	In-Kind	RADIO AD @ WBAG	04/10/2018	\$ 426.00	
J2911	Check		04/16/2018	\$ 500.00	
				\$	
4. Total only this Page				\$ 1,046.00	
5. Total of ALL CRO-1230 Pages <i>(This line must be on line 8 of Detailed Summary Page CRO-1100)</i>				\$ 1,046.00	

Disbursements

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

1. Committee Full Name (and Fund if applicable)						2. ID Number
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments	
AL VANS ADVERTISING COMPANY 3290 VANS DR BURLINGTON, NC 27215						
			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 7,946.64	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
J2911	Debit Card	B	02/20/2018	\$ 5,305.48	POLITICAL SIGNS	
J2911	Debit Card	O	04/20/2018	\$ 2,641.16	POSTCARDS, POSTAGE & SORTING	

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments	
ALAMANCE CHAMBER OF COMMERCE 610 S LEXINGTON AVE BURLINGTON, NC 27215						
			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 450.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
J2911	Debit Card	O	01/25/2018	\$ 300.00	MEMBERSHIP TO LOCAL	
J2911	Debit Card	O	02/28/2018	\$ 150.00	CHAMBER OF CONFERENCE FEE	

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments	
ALAMANCE COUNTY BOARD OF ELECTIONS 115 S MAPLE ST GRAHAM, NC 27253 (336) 570-6755						
			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 1,105.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
J2911	Check	O	02/12/2018	\$ 1,105.00	FILING FEE	
				\$		

5. Total only this Page					\$ 9,501.64	
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 17,054.48	

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)			

Disbursements

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

1. Committee Full Name (and Fund if applicable)						2. ID Number
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
ALAMANCE NEWS 114 W ELM ST GRAHAM, NC 27253 (336) 228-7851						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						e. Election Sum to Date
						\$ 788.13
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
J2911	Check	A	03/06/2018	\$ 62.94	NEWS AD	
J2911	Check	A	04/12/2018	\$ 257.35	NEWSPAPER ADS	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
ALAMANCE NEWS 114 W ELM ST GRAHAM, NC 27253 (336) 228-7851						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						e. Election Sum to Date
						\$ 788.13
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
J2911	Check	A	04/18/2018	\$ 267.84	NEWSPAPER AD	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
BRENNA BARNES 7056 RAYMON RD GRAHAM, NC 27253						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						e. Election Sum to Date
						\$ 100.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
J2911	Check	O	02/24/2018	\$ 100.00	EVENT SERVICE	
				\$		
5. Total only this Page						\$ 688.13
6. Total of ALL CRO-1310 Pages						\$ 17,054.48
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						
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
I - Postage	J - Penalties	K* - Office Expenses	H* - Holding Public Office Expenses	O* Other	Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k)						

Disbursements

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

1. Committee Full Name (and Fund if applicable)						2. ID Number
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments	
BRADFORD ACADEMY 939 S 3RD ST MEBANE, NC 27302						
			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
					\$ 60.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
J2911	Check	O	03/20/2018	\$ 60.00	GALA TICKETS	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments	
ROSE BROWN 1706 SYKES ST BURLINGTON, NC 27215						
			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
					\$ 77.40	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
J2911	Check	O	03/11/2018	\$ 77.40	REIMBURSE FOR MEET & GREET DECORATIONS	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments	
FACEBOOK ADS 1 HACKER WAY MENLO PARK, CA 94205						
			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
					\$ 104.21	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
J2911	Debit Card	A	02/12/2018	\$ 25.00	FACEBOOK ADS	
J2911	Debit Card	A	02/28/2018	\$ 25.00	FACEBOOK ADS	
5. Total only this Page						\$ 187.40
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						\$ 17,054.48
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)						

Disbursements

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT MEREDITH EDWARDS							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
FACEBOOK ADS 1 HACKER WAY MENLO PARK, CA 94205							
				c. Level Registered (Specify)			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
						\$ 104.21	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
J2911	Debit Card	A	03/18/2018	\$ 49.94	FACEBOOK ADS		
J2911	Debit Card	A	03/31/2018	\$ 4.27	FACEBOOK ADS		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
JOHN FLEMING 2462 SOUTHMONT DR APT 207 WINSTON SALEM, NC 27103							
				c. Level Registered (Specify)			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
						\$ 100.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
J2911	Check	O	02/24/2018	\$ 100.00	EVENT SERVICE		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
GRAHAM CINEMA 119 N MAIN ST GRAHAM, NC 27253							
				c. Level Registered (Specify)			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
						\$ 150.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
J2911	Check	A	02/02/2018	\$ 150.00	3 MONTH ADVERTISEMENT		
				\$			
5. Total only this Page						\$ 304.21	
6. Total of ALL CRO-1310 Pages						\$ 17,054.48	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
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)							

Disbursements

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

1. Committee Full Name (and Fund if applicable)						2. ID Number
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
INTERNATIONAL MINUTE PRESS 236 RIVERBEND ROAD GRAHAM, NC 27253						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County:		
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 333.87
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
J2911	Debit Card	C	01/31/2018	\$ 57.15	TICKETS FOR WINTER	
J2911	Debit Card	B	02/20/2018	\$ 73.00	BLUES EVENT POSTERS	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
INTERNATIONAL MINUTE PRESS 236 RIVERBEND ROAD GRAHAM, NC 27253						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County:		
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 333.87
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
J2911	Debit Card	B	02/23/2018	\$ 96.08	FOAM CORE POSTERS	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
LAMAR 516 ENGLISH RD ROCKY MOUNT, NC 27804 (252) 443-0521						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County:		
				<input type="checkbox"/> State <input type="checkbox"/> 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	
J2911	Debit Card	A	04/11/2018	\$ 2,000.00	DIGITAL BILLBOARD AD	
				\$		
5. Total only this Page						\$ 2,226.23
6. Total of ALL CRO-1310 Pages						\$ 17,054.48
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>						
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>						
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						
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)						

Disbursements

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

1. Committee Full Name (and Fund if applicable)						2. ID Number
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
LOWES HOME CENTERS, LLC 125 HUFFMAN MILL RD BURLINGTON, NC 27215 (336) 226-5656						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County:		
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 284.90
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
J2911	Debit Card	O	03/09/2018	\$ 139.07	FENCE POST	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
MASON TABASCO LODGE #271 201 E MAIN ST GIBSONVILLE, NC 27249						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County:		
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 100.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
J2911	Check	O	04/13/2018	\$ 100.00	AD FOR GOLF TOURNAMENT	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
MEBANE ENTERPRISE 106 N FOURTH ST MEBANE, NC 27302						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County:		
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 155.40
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
J2911	Debit Card	A	04/16/2018	\$ 155.40	NEWSPAPER AD	
				\$		
5. Total only this Page						\$ 394.47
6. Total of ALL CRO-1310 Pages						\$ 17,054.48
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>						
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>						
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						
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)						

Disbursements

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

1. Committee Full Name (and Fund if applicable)						2. ID Number
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
THE BROWNSTONE AT GLENCOE MILL 2378 RIVER RD BURLINGTON, NC 27217				c. Level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						\$ 1,247.50
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
J2911	Debit Card	C	01/26/2018	\$ 1,247.50	WINTER BLUES EVENT	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
TIMES-NEWS PO BOX 481 BURLINGTON, NC 27215				c. Level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						\$ 1,538.58
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
J2911	Debit Card	A	03/05/2018	\$ 916.28	NEWSPAPER ADS	
J2911	Debit Card	A	04/12/2018	\$ 305.70	NEWS AD	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
TIMES-NEWS PO BOX 481 BURLINGTON, NC 27215				c. Level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						\$ 1,538.58
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
J2911	Debit Card	A	04/20/2018	\$ 316.60	NEWSPAPER AD	
				\$		
5. Total only this Page						\$ 2,786.08
6. Total of ALL CRO-1310 Pages						\$ 17,054.48
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						
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
I - Postage	J - Penalties	K* - Office Expenses	H* - Holding Public Office Expenses	O* Other	Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k)						

Disbursements

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

1. Committee Full Name (and Fund if applicable)						2. ID Number
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name	d. Comments	
TRACTOR SUPPLY 3129 GARDEN RD BURLINGTON, NC 27215 (336) 586-9222				c. Level Registered (Specify)	e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 483.32	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
J2911	Debit Card	O	02/28/2018	\$ 368.24	FENCE POST	
J2911	Debit Card	O	04/02/2018	\$ 115.08	SIGN POSTS	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name	d. Comments	
USPS 112 S MARSHALL ST GRAHAM, NC 27253 (800) 275-877				c. Level Registered (Specify)	e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 150.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
J2911	Debit Card	I	03/14/2018	\$ 150.00		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name	d. Comments	
WBAG 1745 Burch Bridge Road BURLINGTON, NC 27217 (336) 226-1150				c. Level Registered (Specify)	e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 333.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
J2911	Check	A	02/16/2018	\$ 333.00	RADIO AD	
				\$		
5. Total only this Page					\$ 966.32	
6. Total of ALL CRO-1310 Pages (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 in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$ 17,054.48	
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)						

Aggregated Non-Media Expenditures

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

1. Committee Full Name (and Fund if applicable)						2. ID Number
COMMITTEE TO ELECT MEREDITH EDWARDS						
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Debit Card	K	01/21/2018	\$ 31.47	AVERY LABELS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Debit Card	K	03/06/2018	\$ 24.99	ENVELOPES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Debit Card	O	02/28/2018	\$ 9.34	RIBBONS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Debit Card	O	04/12/2018	\$ 9.60	ROPE FOR SIGNS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Debit Card	C	02/02/2018	\$ 29.36	TICKETS FOR WINTER BLUES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Money Order	B	02/28/2018	\$ 45.35	MEET & GREET HANDOUTS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Debit Card	B	03/07/2018	\$ 32.93	DONATION CARDS, LETTERS &
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Debit Card	O	02/28/2018	\$ 34.01	SUPPLIES FOR POLITICAL SIGNS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Debit Card	O	03/14/2018	\$ 18.15	ZINC FENCE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Debit Card	O	03/15/2018	\$ 15.51	WOOD STUD
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Debit Card	O	03/19/2018	\$ 37.34	POLITICAL SIGN TIES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Debit Card	O	03/20/2018	\$ 30.59	SIGN POSTS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Debit Card	O	04/16/2018	\$ 10.23	SUPPLIES FOR SIGNS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Debit Card	K	02/20/2018	\$ 23.46	LABELS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Debit Card	K	03/07/2018	\$ 18.14	LABELS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check	O	03/15/2018	\$ 50.00	ADVERTISEMENT
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Debit Card	O	03/15/2018	\$ 7.00	WOOD STUD
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Debit Card	B	03/07/2018	\$ 15.65	INTERNET PHOTO
<input type="checkbox"/> Add <input type="checkbox"/> Remove	J2911	Check	O	03/20/2018	\$ 25.00	REIMBURSEMENT FOR VOTER
4. Total only this Page					\$	468.12
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$	468.12
6. Purpose Codes (List detailed expenditure code in (d) above)						
B* - Printing		C* - Fundraising		D - To Another Candidate		
E - Salaries		G - Political Party		H* - Holding Public Office Expenses		
I - Postage		K* - Office Expenses		Q* - Donations to Legal Expense Fund		
O* - Other						
* Codes require detailed explanation in required remarks field (g)						

In-Kind Contributions

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	
COMMITTEE TO ELECT MEREDITH EDWARDS			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
JENNIFER BALL 719 HAWTHORN RIDGE DR WHITSETT, NC 27377 (910) 617-2271		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
		\$	2,549.00
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
WINTER BLUE EVENT AT THE BROWNSTONE		02/27/2018	\$ 2,549.00
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
CHRISTIE DOSS 1230 WALNUT COVE LN SNOW CAMP, NC 27349		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
		\$	93.84
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
T-SHIRTS		03/27/2018	\$ 88.26
FACEBOOK ADS		03/31/2018	\$ 5.58
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
JEFF NESBITT 746 STILL RUN LANE GRAHAM, NC 27253		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
		\$	1,534.55
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
12 BANNERS		03/20/2018	\$ 504.55
			\$
			\$
4. Total only this Page			\$ 3,147.39
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>			\$ 3,573.39

In-Kind Contributions

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	
COMMITTEE TO ELECT MEREDITH EDWARDS			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor		c. Comments
SOUTHERN STATES PBA 2155 HIGHWAY 42 SOUTH MCDONOUGH, GA 30252 (770) 389-5391	<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source		
			d. Election Sum to Date
			\$ 926.00
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount	
RADIO AD @ WBAG	04/10/2018	\$ 426.00	
		\$	
		\$	
4. Total only this Page		\$ 426.00	
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 3,573.39	