## **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 I	nfarmation					<del></del>			· · · · · · · · · · · · · · · · · · ·
a. Full Name	mormation	<del></del>						<del></del>	I. ID N
	R SHERIFF E	ELECTION CO	MMIT	TEE				<del></del>	c. ID Number
b. Mailing Addr	ess (include Ci	ity, State and Zi	n Code						d. Date Filed
3530 CARDW		ty, state and za	p Code)						d. Date Filed
	BURLINGTON, NC 27215								
1 Hill 4 18 VI + 1 - 80 VI									e. Phone Number
2. Report Year	3. Period Sta	rt Date (mm/dd/	yy)	4. Period	End Da	ate (m	n/dd/yy)	5. Treasu	rer Full Name
2018	0	7/01/2018			10/20/	2018		PAUL E	COBB JR
6. Type of Com			9. Typ	e of Repor	t (c	heck d	only one	type of rep	ort from one category)
X Candidate Car		-	Munic	ipal			/County		Referendum
Joint Fundrais	lead .			Organizatio	onal	0	rganizatio	nal	Organizational
Referendum	☐ Le	gal Expense Fund		Thirty-five	e day	Q	uarterly		Pre-referendum
7. Type of Fund		le, check one)		Pre-primar	у		First		Final
☐ "Booster Fund	1"	· · · · · · · · · · · · · · · · · · ·		Pre-electio	-	Ī	Second		Supplemental Final
☐ Building Fund				Pre-runoff		ī	Third		Annual
Presidential E	lection Year Can	ndidates Fund		Semi-annua		H	Fourth		Special
	npaign Financin			Mid Y		<b>'</b>	mi-annua	1	C opecial
		B		Year E		_ ``	Mid Ye	-	40.0 . 110
Other:				Final	iiu		Year E	1	10. Special Report Name
8. Number of Fu	mduais sus 4his	n Damand				片		na	
o. Number of Fu	indraisers this	s Report	ليا	Special		Fi	nal		
	1					∟ Sp	ecial		
3. Account Infor	mation			<del>"</del>	3. Acc	ount l	nformati	On	
a. Financial Insti		me						n Full Nam	e
WELLS FARGO	0	·····							
b. Purpose		c. Account Code	e		b. Puri	ose	· ··· · · · · · · · · · · · · · · · ·		c. Account Code
RECEIVE AND	DISBURSE		A						
FUNDS									
		d. Period Begin	ce				ļ	d. Period Begin Balance	
		\$							\$
CERTIFICATIO	N	**************************************			L				
I certify that th	ne Committee o	or Fund is in con	nolianc	e with all a	nplicab	le pro	visions d	of Article 22	2A, 22B & 22D-22M of
Chapter 163 of	the NC Gener	al Statutes and	that no	funds are	commir	ngled v	with prob	ibited or of	ther non-disclosed
funds. I furthe	er certify that t	his report is cor	nnlete	true and c	orrect a	nd tha	t I have !	haan tmina	d by the NC State Board
		ino report is con	присте,		oncei a	nu ma	i i nave i	occii name	u by the NC State Board
tán lá	. Cobb	~/a		Mon	۲. ۶		0.0		10/20/2018
	inted Name of Si		-	Sion	ature of	Annoin	ted Preas	nrer	Date
FOR OFFICE US	FONTY	<u> </u>		~1 <u>6</u> 11		rppom	tou x rous	an or	Date
TOR OFFICE OS	EONLI	1010011				10			
Date Receive	:d:	10/22/18	<u> </u>	Employ	yee: _	06	5		very Method Normal Mail
Date Postmar	rked:			Employ	/ee:				Registered Mail
		alailie	_	—- <b>T</b> ,	_	4		<b>√</b> 2[1	Hand Delivered
Date Scanned	i: <u>[[</u>	0130/18	<del>-</del>	Employ	/ee: _	10	<u>J</u>	<b>.</b> .	Electronically Filed
Date Data En	<del></del>		-	Employ				1	Signer has not received mandatory training
Please Note	: This form ca	innot be used to	ameno	d committe	e inform	nation	such as	the commit	tee address, treasurer,
	assistan	t treasurer, cust	odian c	of books in	formati	on, or	account	information	n.
Yo		the Statement							

Amendment

☐ Yes X 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 JOHNSON FOR SHERIFF ELECTION COMMITTEE 2018 Third Ouarter Start of Election Cycle: January 1, Total this Total this Reporting Period **Election Cycle** 4) Cash on Hand at Start \$ 21,421.17 0.00 RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) \$ 0.00 75.00 6) Contributions from Individuals (CRO-1210) 0.00 \$ 9,197.50 7) Contributions from Political Party Committees (CRO-1220) \$ 0.00 \$ 0.00 8) Contributions from Other Political Committees (CRO-1230) \$ \$ 0.00 42,559.17 9) Loan Proceeds (CRO-1410) 0.00 \$ 0.00 0) Refunds/Reimbursements to the Committee (CRO-1240) 0.00 \$ 0.00 1) 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 2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e) 0.00 \$ 51,831.67 EXPENDITURES 3) Disbursements 13a) Operating Expenditures (CRO-1310) \$ 5,845.03 \$ 19,948.03 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ 650.00 9,370.00 13c) Coordinated Party Expenditures (CRO-1310) \$ 0.00 0.00 14) Aggregated Non-Media Expenditures (CRO-1315) \$ \$ 0.00 0.00 15) Loan Repayments (CRO-1420) \$ 0.00 0.00 16) Refunds/Reimbursements from the Committee (CRO-1320) 0.00 \$ 0.00 17) In-Kind Contributions (CRO-1510) \$ 0.00 \$ 7,587.50 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) \$ 6,495.03 36,905.53 9) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) 14,926.14 \$ 14,926.14 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

Die	bursements	
DIS	Dursements	

			Amendment								
Pg	_1_	of	2_	☐ Ye	s X	N					

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

1. Committee I	ull Name (and Fund	lifamicable)	-					A YEAR	
JOHNSON FO	R SHERIFF ELEC	TION COMMIT	TEE			<del></del> .	$\dashv$	2. ID Num	ber
3. Type of Dis b  Operating Ex		use separate Ch	<u> 20-131</u>	) forms for ea	ch type of l				
		tributions to Candid			es [	Coor	dinate	d Party Exp	enditures
4. Payee Inform	ailing Address & Pl			Add 🔲	Remove				
(include city, sta		ione		b. Coordina	ted Commit	ee Nai	ne	d. Commen	ıts
40 WEST GRI			·	4			- 1		
2703 RAMAD				c. Level Reg	stered (Spe				
	BURLINGTON, NC 27215					unty:			
	., =			☐ Federal ☐ State		•	lity:	Hection	Sum to Date
					·				oun to Date
6.4		T					- 1	\$	3,415.03
	g. Form of Payment	<del></del>	i. Date	e (mm/dd/yyyy	) j. Amount	k	. Req	uired Rema	arks
A	Check	0	1	0/08/2018	\$ 3,415	.03 I	ELEC	TION EX	PENSE
					\$				
4. Payee Inform				Add 🔲	Remove				
	iling Address & Ph	one		b. Coordinate		e Nam	e d	. Comment	ts
(include city, sta									
	LAMANCE COUN	ITY							
914 CHAPEL H				c. Level Regi:	tered (Spec	fy)			
BURLINGTON	, NC 27215			☐ Federal ☐ County:					
				☐ State	☐ Mu	nicipali	ty: e.	Dection S	um to Date
								5	800.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	i. Amount	k.	Reau	ired Rema	
Α	Check	0		3/17/2018	\$ 500.			RIBUTIO	
Α	Check	0	<del> </del>	/17/2018	<del> </del>				
. Payee Informa						<i>J</i> 0   C	UNT	RIBUTION	V
	ling Address & Pho	.m.o		Add 🔲	Remove		<del></del>		
include city, state		one	ļ	b. Coordinate	d Committe	Name	e d.	Comments	3
KIDSSPORT CH							-		
370 SOUTH CI			t	c. Level Regis	ered (Speci	v)	$\dashv$		
BURLINGTON,			f	Federal	Cou	ity:			
				State		-	y: e.	Election Su	m to Date
							\$		
Account Code g	. Form of Payment	h. Purpose Code	. Data	(		1.			250.00
A		O						red Remar	
	CHOCK		0 //		\$ 250.0	0 CC	DNTR	UBUTION	I
					\$				
. Total only this	Page				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		\$		4,465.03
Total of ALL C	RO-1310 Pages				<del></del>		+		1,705.05
(This line goes in l	line 13a of Detailed Su	mmary Page CRO-	1100 if O	perating Expen	ses)				1
(This line goes in l	ine 13b of Detailed Su	mmary Page CRO-	1100 if C	ontrib to Candi	dates/Politica	! Comn	, \$		5,845.03
(This line goes in l	ine 13c of Detailed Su	mmary Page CRO-1	100 if C	oordinated Pari	y Expenditur	rs)	1		
Purpose Cod	les (List detailed e	xpenditure code i	n (h.) ab	ove)	F				
* - Media	B* - Printing			draising	D - 7	o And	ther	Candidate	
- Salaries	F* - Equipmer			ical Party				blic Office	Expenses
- Postage	J - Penalties			ice Expenses	Q* -	Donat	ion to	Legal Ex	ense Fund
* Other	LANGE V C				_			T	
Codes require d	etailed explanation	in required rema	rks fiel	d (k)					

Disbursen	ments						Amendmer	
		C 41	•	-	Pg1 _ 6	)f _	1 Yes	No No
committees an	to report expenditure d coordinated party	s from the commu	tee for	operating expe	enses, contribu	tions	to candidate/poli	itical
1. Committee J	Full Name (and Fund	diformicable)		-	<del></del>			·
IOHNSON FO	OR SHERIFF ELEC	TION COMMIT					2. ID Number	
	ACOHEMIT DELL	HON COMMINT I	EE					
3. Type of Disb	ursement (Please	e use separate CR(	<u>0-131</u>	A forms for ea	ch tung of Diel		1	
Operating Ex		tributions to Candida	ates/Pol	itical Committee			nent.) ated Party Expendit	
4. Payee Inform					Remove	JULUM	ted raity Expendi	ures
	Mailing Address & Ph	none			ted Committee N	Name	d. Comments	
(include city, sta		, 5		D. C. C	ed Committee .	tame	G. Comments	
	DLE FOR NC HOUS	SE		1				
6343 BEALE R	RD	~~			istered (Specify)	,	1	
SNOW CAMP,	, NC 27349			☐ Federal	☐ County	y:	1	
				X State	☐ Munic	ipality:	e. Dection Sum	to Date
							s	···
f Account Code	Ta Form of Doymani	The number Code	1. 5.		<del></del>		1	500.00
A Account Code	g. Form of Payment		,				equired Remarks	
	Check	D	0	09/24/2018	\$ 500.00			
,	1	1			\$			
4. Payee Inform	ation	<u> </u>		Add 🔲	Remove			<del></del>
	ailing Address & Pho	one			ed Committee N	I o m o	d. Comments	·
(include city, stat		3120		Di Courani	a Committee 1.	Ain t	d. Comments	
MEREDITH ED		<del></del>		1		,		
123 BAUMAN	CT			c. Level Regis	stered (Specify)		1	
GRAHAM, NC			1	☐ Federal	County:		1	
				State	☐ Municip		e. Election Sum	to Date
			1					
A	- CB	T					\$	150.00
	g. Form of Payment					k. Re	quired Remarks	
A	Check	D	- 08	8/24/2018	\$ 150.00			
1	,		i		\$			
. Total only this	Page	•			<u> </u>	1 1		
					<u></u>		\$	650.00
	CRO-1310 Pages	- CDA		·		1	ı	
(Into une goes in	n line 13a of Detailed St n line 13b of Detailed St	ummary Page CKU-1	1100 ij e	Operating Expen	ıses)		\$	650.00
(This line goes in	n line 13b of Detailed St n line 13c of Detailed Su	ummary rage CRO-1	/100 y • 1100 if	Contrib to Canai	dates/Political Co	)mm) [		000.
. Purpose Co					ty Expenattures)			
<del></del>		expenditure code in				- "		77, *. <del>.</del>
A* - Media C - Salaries	B* - Printing	_		undraising			er Candidate	
- Salanes - Postage	F* - Equipme J - Penalties	_		litical Party	H* - H0		Public Office Ex	
- IUSIAKU	J " Fulianies	, ,	ベ* - リァ	ffice Expenses	O* - D/	anatio	n to I agal Eman	<b>17</b>

K\* - Office Expenses

NC State Board of Elections

Q\* - Donation to Legal Expense Fund

December 2009

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

O\* Other

CRO-1310

-	•						
-1)	10	h	ırs	101	m	m	te
	13						1.7

			Amendment							
Pg	2	of	2_		Yes	X	No			

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

1. Committee l	Full Name (and Fund	if applicable)						2. ID N	umber
	OR SHERIFF ELEC		TEE	<del></del>				2.10	umoci
3. Type of Dish	wireament (Plansa	usa sananata CI	20 121	0.6		454			
Operating Ex		use separate Ch tributions to Candid	(U-131)	<u>U forms for ea</u>	ch t			The second second	
4. Payee Inform		trioditions to Candic		· · · · · · · · · · · · · · · · · · ·			oordina	ited Party	Expenditures
	lailing Address & Pl			Add 🗆		emove	: : ·		
(include city, st		ione		b. Coordinat	ed C	ommittee !	Vame	d. Com	ments
NBC OUTREA				-∤					
	NINGSIDE DR			c. Level Regi	gtor	ed (Specify)		4	
BURLINGTO				Federal	3101	County		-	
	11, 110 27217			State		☐ Munic		e. Decti	on Sum to Date
							7 7 -		
£ A		1						\$	200.0
	g. Form of Payment	<del>                                     </del>	+	e (mm/dd/yyyy	) j. <i>i</i>	Amount	k. R	equired R	emarks
A	Check	0	0	7/12/2018	\$	200.00	CO	NTRIBU	ΓΙΟΝ
					\$				······································
4. Payee Inform				Add 🔲	Re	move	<del></del>		
	ailing Address & Ph	one		b. Coordinate	d C	ommittee N	ame	d. Comm	ents
(include city, sta									
	PING SISTERS								
SOUTHERN P	INES, NC			c. Level Registered (Specify)				}	
				☐ Federal		County			
				☐ State		☐ Munici	pality:	e. Election	on Sum to Date
								\$	900.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	li. A	mount	k. Re	quired Re	marks
Α	Check	0		8/10/2018	\$	400.00		TRIBUT	
					s				
. Payee Inform	etion			A 1.1 (T)	Ľ.		ļ.,	<del> </del>	·
	iling Address & Pho	ne		Add D		nove		1.6	<u> </u>
include city, stat	_	, iic		b. Cooldinate	u Co	mmittee Ni	ıme	d. Comm	ents
	LAMANCE HIGH S	CHOOL ATHU	RTICS						
31 SOUTHER	N ALAMANCE HIC	H SCHOOL RO	DAD	c. Level Regis	terec	(Specify)			
GRAHAM, NC				☐ Federal		County:			
				☐ State		☐ Municip	ality:	e. Electio	n Sum to Date
								\$	780.00
Account Code	g. Form of Payment	h. Purpose Code	l. B.d.	<i>(</i>					
A	· ····			(mm/dd/yyyy)	-			uired Re	
		0	08	/27/2018	\$	280.00	CON	TRIBUT	ION
Α	Check	0	09	/04/2018	\$	500.00	CON	ributi	ON
. Total only this	Page		1 11				T	\$	1,380.00
. Total of ALL C	CRO-1310 Pages						-	<u> </u>	1,500.00
(This line goes in	line 13a of Detailed Su	mmary Page CRO-	1100 if (	Operating Expen	ses)		1	_	
(This line goes in	line 13b of Detailed Su	mmary Page CRO-	1100 if C	Contrib to Candi	dates	Political Co	mm)	\$	5,845.03
(This line goes in	line 13c of Detailed Su	mmary Page CRO-	1100 if (	Coordinated Part	ty Ex	penditures)			
	des (List detailed e								
* - Media	B* - Printing			ndraising	·	<b>D</b> - To A	noth	er Candid	ate
- Salaries	F* - Equipmen			tical Party					ffice Expenses
- Postage	J - Penalties			fice Expenses		Q* - Do	nation	to Legal	Expense Fund
* Other				=		-			I
Codes require	detailed explanation								* .
**********		NIC CL	ata Dace	d of Elections					