Statement of Organization - Candidate Committee

Is	this s	tatemei	ıt:	
	New	Z A	mended	

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by form CRO-3500. An amended form is required for each new election year.

PO Box 283 Burglington NC 27216 c. Committee Website (Optional) ALAMANCE COUNTY BOARD OF FLECTIONS 2. Candidate Information a. Full Name c. Party Affiliation Kelly Tyrone White b. Mailing Address (include City, State, and Zip Code) PO Box 283 Burlington NC 27216 C. Phone Number d. Email Address g. Next Election Year h. Jurisdiction Sheriff c. Phone Number d. Email Copy of report notices 3. Treasurer Information a. Full Name Kelly Tyrone White Dwayne Deloatch						
Committee To Elect White for Sheriff b. Mailing Address (include City, State and Zip Code) PO Box 283 Burglington NC 27216 c. Committee Website (Optional) ALAMANCE COUNTY BOARD OF FLECTIONS a. Full Name Kelly Tyrone White b. Mailing Address (include City, State, and Zip Code) PO Box 283 Burlington NC 27216 c. Phone Number d. Email Address whiteforsheriff1@gmail.com Alamance J. Email copy of report notices Treasurer Information a. Full Name Kelly Tyrone White Democratic Party Alamance Alamance 4. Assistant Treasurer Information a. Full Name Kelly Tyrone White Dwayne Deloatch						
b. Mailing Address (include City, State and Zip Code) PO Box 283 Burglington NC 27216 c. Committee Website (Optional) ALAMANCE COUNTY BOARD OF FLECTIONS 2. Candidate Information a. Full Name c. Party Affiliation Kelly Tyrone White Democratic Party b. Mailing Address (include City, State, and Zip Code) PO Box 283 Burlington NC 27216 Sheriff c. Phone Number d. Email Address g. Next Election Year Alamance Pemail copy of report notices 3. Treasurer Information a. Full Name Kelly Tyrone White Dwayne Deloatch	, ,					
PO Box 283 Burglington NC 27216 c. Committee Website (Optional) ALAMANCE COUNTY BOARD OF FLECTIONS 2. Candidate Information a. Full Name c. Party Affiliation Democratic Party b. Mailing Address (include City, State, and Zip Code) PO Box 283 Burlington NC 27216 Sheriff c. Phone Number d. Email Address g. Next Election Year h. Jurisdiction Safe-517-7415 whiteforsheriff1@gmail.com Democratic Party f. Office Sought Sheriff c. Phone Number d. Email Address g. Next Election Year h. Jurisdiction 2022 Alamance Alamance A. Assistant Treasurer Information a. Full Name Kelly Tyrone White Dwayne Deloatch						
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Kelly Tyrone White Dwayne Deloatch						
b. Mailing Address (include City, State, and Zip Code) b. Mailing Address (include City, State and Zip Code)						
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PO Box 283 Burlington NC 27216 PO Box 283 Burlington NC 27216	PO Box 283 Burlington NC 27216					
c. Phone Number d. Email Address c. Phone Number d. Email Address						
whiteforsheriff1@gmail.com 336-601-1889 deloatchinc@gmail.com	tchinc@gmail.com					
Send report notices by email Yes No Email copy of report notices						
5. Custodian of Books Information (Keeper of Records) 6. Account Information (incl. CRO-3500)						
	a. Financial Institution Full Name					
Kelly Tyrone White Truist Bank	Truist Bank					
b. Mailing Address (include City, State, and Zip Code)						
PO Box 283 Burlington NC 27216						
c. Phone Number d. Email Address b. Account Code c. Type						
whiteforsheriff1@gmail.com						
✓ Email copy of report notices 1 Campaign Business Ch	ecking					
I certify that the Committee is in compliance with all applicable provisions of Article 22A of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify the this report is complete, true and correct. Kelly Tyrone White						
Printed Name of Treasurer Signature of Appointed Treasurer	ate					
I certify that the information above is correct, and I, as the candidate, appoint said treasurer to personally full duties and responsibilities imposed upon the appointed treasurer and subject to the penalties in Article 22A of 163 of the NC General Statutes.						
Kelly Tyrone White 5/6	/2022					
Printed Name of Candidate Signature of Candidate D	1					

Amendment

Disclosure Report Cover

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

1. Committee In	aformation								
a. Full Name									c. ID Number
COMMITTEE	TO ELECT W	/HITE FOR SH	ERIFF						
b. Mailing Addre	ess (include Cit	ty, State and Zij	p Code))	1-0-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		- uthesters		d. Date Filed
P.O. BOX 283 BURLINGTON		CONTROL OF THE PARTY OF THE PAR		<u> </u>			artikon	eli eli arianten en	05/07/2022
DOIGH, C.	1,110 m							ŗ	e. Phone Number
									(336)517-7415
2. Report Year	3. Period Star	rt Date (mm/dd/	уу)	4. Period	End Da	ite (m m/dd/	I/ <u>yy)</u>	5. Treasur	er Full Name
2022		1/01/2022		<u> </u>	04/30/2	:022		KELLY W	/HITE
6. Type of Comn				pe of Report					ort from one category)
X Candidate Cam	mpaign 🔲 Part	rty	Munic	cípal		State/Cou	unty		Referendum
☐ Joint Fundraise	السما			Organizatio		Organi		nal	Organizational
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7. Type of Fund		le, check one)		Pre-primary	· 1	1 <u>122</u>	irst	1	Final
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Building Fund		,		Pre-runoff			hird	1	Annual
_	Election Year Cand			Semi-annua			ourth		☐ Special
NC Public Can	mpaign Financing	g Fund		Mid Ye		Semi-a		-	
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8. Number of Fu	ındraisers this	s Report		Special	}	Final		J	1
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_		\$	_	1,000.00					\$
Chapter 163 of funds. I further Kelly	the Committee of the NC General er certify that the White Interest Name of Signature	ral Statutes and this report is cor	l that no	o funds are, true and co	commin	ngled with	h proh have i	hibited or ot been trained	2A, 22B & 22D-22M of ther non-disclosed ad by the NC State Board 05/07/2022 Date
FOR OFFICE US	SEONLY								
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Date Postman	rked:		_	Employ	yee: _			- 🔲 1	Registered Mail Hand Delivered Electronically Filed
Date Scanned			—	Employ	-	<u></u>		-	Signer has not received
Date Data En	itered:			Employ	yee: _			_	mandatory training
	assistan	annot be used to nt treasurer, cus	stodian	of books ir	informati	tion, or acc	count	t informatio	

Amendment **Detailed Summary** ☐ 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 COMMITTEE TO ELECT WHITE FOR SHERIFF 2022 First Quarter Total this Total this 2019 Start of Election Cycle: January 1, Reporting Period **Election Cycle** 4) Cash on Hand at Start 0.00 0.00 RECEIPTS (CRO-1205) 185.00 185.00 5) Aggregated Contributions from Individuals (CRO-1210) \$ \$ 1,500.00 1,500.00 6) Contributions from Individuals \$ \$ (CRO-1220) 0.00 0.00 7) Contributions from Political Party Committees (CRO-1230) \$ 0.00 \$ 0.00 8) Contributions from Other Political Committees 9) Loan Proceeds (CRO-1410) \$ 0.00 \$ 0.00 (CRO-1240) 0) Refunds/Reimbursements to the Committee 0.00 0.00 1) Other Receipt Sources (CRO-1250) \$ 11a) Interest on Bank Accounts \$ 0.00 0.00 11b) Contributions from Not-For-Profit Organizations (CRO-1250) \$ 0.00 \$ 0.00 \$ (CRO-1250) \$ 11c) Outside Sources of Income 0.00 0.00 \$ (CRO-1270) \$ 0.00 0.00 11d) Legal Expense Fund - Other Sources \$ 11e) Exempt Purchase Price Sales (CRO-1265) \$ 0.00 0.002) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e) 1,685.00 1,685.00 EXPENDITURES 3) Disbursements (CRO-1310) \$ 13a) Operating Expenditures 847.00 847.00 (CRO-1310) 13b) Contributions to Candidates/Political Committees \$ 0.00 0.00 (CRO-1310) \$ 13c) Coordinated Party Expenditures 0.00 0.00 (CRO-1315) \$ 4) Aggregated Non-Media Expenditures 14.34 14.34 (CRO-1420) \$ \$ 5) Loan Repayments 0.00 0.00 (CRO-1320) \$ 6) Refunds/Reimbursements from the Committee 0.00 0.00 (CRO-1510) \$ \$ 7) In-Kind Contributions 0.000.00 8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) \$ \$ 861.34 861.34 9) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) \$ \$ 823.66 823.66 ADDITIONAL INFORMATION (CRO-1330) 0.00 20) Non-Monetary Gifts Given to Other Committees (CRO-1430) 0.00 \$ 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1610) 0.00 \$ 22) Debts and Obligations owed by the Committee (CRO-1620) 0.00 23) Debts and Obligations owed to the Committee 24) Account Transfers Within the Committee (CRO-1720) \$ 0.00 (CRO-1710) \$ 0.00 \$ 25) Administrative Support 0.00

26) Forgiven Loans

27) 48-Hour Notice Reports Sum

8) Contributions to be Refunded

(CRO-1440)

(CRO-2220)

(CRO-1215)

\$

0.00

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Aggrega	ated Contrik	outions from I	ndividuals _{Page}	_1 of _1	Amendment D Yes X No
Optional fo	rm used to repor	t NC Contributions	From Individuals of \$	50 or less	
. Committe	e Full Name (and	Fund if applicable)	· · · · · · · · · · · · · · · · · · ·	2. ID I	Number
COMMITT	EE TO ELECT W	HITE FOR SHERIF	Ŧ		
3. Contribut	or Information				
. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
Add Remove	1	Credit Card		03/27/2022	\$ 15.0
Add Remove	1	Credit Card		03/29/2022	\$ 10.0
Add Remove	1	Credit Card		03/28/2022	\$ 50.0
Add Remove	1	Credit Card		04/22/2022	\$ 25.0
Add Remove	1	Credit Card		03/15/2022	\$ 25.0
Add Remove	1	Credit Card		04/07/2022	\$ 25.0
Add Remove	1	Credit Card		04/02/2022	\$ 25.0
Add Remove	1	Credit Card		03/22/2022	\$ 5.0
Add	1	Credit Card		04/22/2022	\$ 5.0

5. Total of ALL CRO-1205 Pages
(This line must be on line 5 of Detailed Summary Page CRO-1100) CRO-1205

Remove

4. Total only this Page

NC State Board of Elections

\$185.00 April 2007

\$185.00

\$

\$

Amendment **Contributions from Individuals** 1 of ☐ Yes No 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 WHITE FOR SHERIFF 3. Contributor Information ☐ Add ☐ Remove b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) NIGHT AUDITOR DREAMA CALDWELL c. Employer's Name/Specific Field 3701 COSTWOLD TERRANCE UNIT 5 HILTON DURHAM e. Election Sum to Date GREENSBORO, NC 27410 100.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Credit Card 1 04/28/2022 100.00 \$ \$ \$ ☐ Add ☐ Remove 3. Contributor Information a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) SCHOOL COUNSELOR ADENIKE DAWKINS c. Employer's Name/Specific Field 4340 CLOVELLY DRIVE GREENSBORO, NC 27406 GUILFORD COUNTY 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 Credit Card 1 03/27/2022 \$ 100.00 \$ \$ ☐ Add ☐ Remove 3. Contributor Information a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) NO JOB TITLE HATTIE DOWNING c. Employer's Name/Specific Field 2004B HANCOCK LANE EDENTON, NC 27932 NOT WORKING e. Election Sum to Date 100.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (m m/dd/yyyy) k. Amount Check 1 04/30/2022 \$ 100.00 \$ \$

4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

1,500.00

300.00

\$

\$

Contributions from Individuals

Pg 2 of 3 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 WHITE FOR SHERIFF 3. Contributor Information ☐ Add ☐ Remove b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) CASHIER OLYMPSIE JOHNSON c. Employer's Name/Specific Field **4811 CHAUCER DRIVE** GREENSBORO, NC 27407 WHOLE FOODS e. Election Sum to Date 100.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description . Date (mm/dd/yyyy) k. Amount Credit Card 1 04/08/2022 \$ 100.00 \$ \$ 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) CHIEF OF POLICE HENRY KING c. Employer's Name/Specific Field 105 CYPRESS DRIVE EDENTON, NC 27933 EDENTON POLICE e. Dection Sum to Date DEPARTMENT 100.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description . Date (mm/dd/yyyy) k. Amount Credit Card 03/28/2022 100.00 \$ \$ \$ 3. Contributor Information ☐ Add ☐ Remove b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) ADMINISTRATOR ELFRIDA MENSAH c. Employer's Name/Specific Field 1630 PENNY ROAD HIGH POINT, NC 27265 NC A&T STATE UNIVERSITY 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 Credit Card 1 04/04/2022 \$ 100.00 \$ \$ 300.00 4. Total only this Page \$ 5. Total of ALL CRO-1210 Pages \$ 1,500.00 (This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Pg 3 of 3 Yes No

		ndividual contributions		ontributions ur	1der \$50 if form CRO				
		(and Fund if applicabl				2.	ID Number		
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	ıll Name (and Fund i							2. ID Numb	ær
COMMITTEE	TO ELECT WHITE	FOR SHERIFF							
3. Type of Disbu	rs ement <i>(Please i</i>	ise separate CRO)-131 <u>0</u>	forms for each	h typ	e of Disbu	rseme	nt.)	
X Operating Exp		ibutions to Candidat	es/Polit	ical Committees		Coc	rdinat	ed Party Expe	enditures
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(include city, sta	=								
	OUNTY BOARD C	F ELECTIONS]	
115 S. MAPLE				c. Level Regis	terec				
GRAHAM, NC 27253				☐ Federal		County:			
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7. Purpose Co	des (List detailed	expenditure code	in (h.)	above)					
A* - Media	B* - Printin	g	C* - F	undraising		D - To	Anotl	her Candida	te
E - Salaries	F* - Equipm	ent	G-Po					g Public Office Expenses	
I - Postage	J - Penaltie	s	K* - 0	Office Expense	s	Q* - D	onatio	on to Legal l	Expense Fund
O* Other									;
	e detailed explanatio	n in required rem	narks i	ield (k)					D1 0000
CRO-1310		NC S	tate Bo	ard of Elections					December 2009

Aggregated Non-Media Expenditures

Aggreg	ateu mon-iv	iedia Expendi	nures	Page	of		⊔ Yes	X	No	
Optional fo	orm used to repo	ort NC Non-Media	Expenditures o	of \$50 or less.						
1. Committ	ee Full Name (an	d Fund if applicable)			2. ID 1	Number-			de gra	
COMMIT	TEE TO ELECT	WHITE FOR SHER	IFF							
3. Payee In	formation									
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amo	unt	g. Required	Remark	S	
Add Remove	1	Electric Funds Tran	О	04/01/2022	\$	14.34	SERVICE F	EE		
4. Total only this Page					\$		•	1	4.34	
5. Total of ALL CRO-1315 Pages (This line must be on line 14 of Detailed Summary Page CRO-1100)					\$			1	4.34	
6. Purpos	e Codes (List o	detailed expenditur	re code in (d) a	bove)				4.0		
	B*	- Printing	C* - Fundr	aising D -	To Ano	ther Car	ndidate			
E - Salar	ies F*	- Equipment	G - Political	Andrews a second particular and an experience of the second secon			* - Holding Public Office Expenses			
I - Posta	ge J-	Penalties	K* - Office	Expenses Q*	- Dona	tions to	Legal Exp	ense l	Fund	
O* - Ot	her (2							

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

RO-1315

NC State Board of Elections

December 2009

Amendment