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 Information											
a. Full Name									c. ID Number		
JOHNSON FO					RE(CEIV	ED_				
b. Mailing Addre			p Code)		IAN	1112	മരു		d. Date Filed		
3934 SPANISH SNOW CAMP,		ROAD						-	01/10/2023		
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2. Report Year	3. Period Star	rt Date (mm/dd/	уу)	4. Period	End Da	te (mm/	dd/yy)	5. Treasur	er Full Name		
2022	10	0/23/2022		12/31/2022 PAUL E				PAUL E C	COBB JR		
6. Type of Comn			9. Typ	e of Repor	t (ci			type of rep	ort from one category)		
X Candidate Can		-	Munic			State/C			Referendum		
Joint Fundraise			12	Organizatio		-	anizatio	nal	Organizational		
Referendum		gal Expense Fund		Thirty-five		1	rterly		Pre-referendum		
7. Type of Fund Booster Fund		le, check one)		Pre-primary Pre-election			First Second		Final Supplemental Final		
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				Year E	nd		Mid Ye	ar	10. Special Report Name		
Other:				Final			Year E	nd			
3. Number of Fundraisers this Report				Special		☐ Fina	d		•		
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	3. Account Information 3. Account Information										
a. Financial Institution Full Name a. Financial Institution Full Name											
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b. Purpose		c. Account Cod	le		b. Purp	oose			c. Account Code		
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		d. Period Begin							d. Period Begin Balance		
		\$	7	7,574.44					\$		
I certify that the Chapter 163 of funds. I further	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 PAULE UBB Printed Name of Signer Signature of Appointed Treasurer Date										
FOR OFFICE US	SEONLY		•								
Date Receive	d: <u>J</u>	ian 11, 202	<u>3</u>	Emplo	vee: _	CM			ivery Method Normal Mail		
Date Postma	rked:			Employ	/ee: _	- w 	<u>.</u>	- (以	Registered Mail Hand Delivered		
Date Scanned	d:			Emplo	/ee: _			ليا -	Electronically Filed		
Date Data En	tered:			Employ	/ee: _				Signer has not received mandatory training		
	assistan	annot be used to the treasurer, cused the Statement	todian	of books i	ıformat	ion, or a	ccoun	t in formatic			

Detailed Summary
Use this form to summarize all disclosure reporting forms and to total monetary information

☐ Yes 🖾 No

3. ID Number 2. Type of Report 1. Committee Full Name (and Fund if applicable) JOHNSON FOR SHERIFF ELECTION COMMITTEE 2022 Fourth Quarter Total this Total this 2019 Start of Election Cycle: January 1, **Election Cycle** Reporting Period 77,574,44 9,627.14 4) Cash on Hand at Start <u>REC</u>EIPTS (CRO-1205) 150.00 5,327.50 5) Aggregated Contributions from Individuals \$ (CRO-1210) 6,705.00 335,718.43 \$ 6) Contributions from Individuals (CRO-1220) 0.00 \$ 0.00 7) Contributions from Political Party Committees (CRO-1230) \$ 0.00 \$ 250.00 8) Contributions from Other Political Committees (CRO-1410) \$ 0.00 \$ 0.00 9) Loan Proceeds (CRO-1240) 323.50 323.50 0) Refunds/Reimbursements to the Committee 1) Other Receipt Sources (CRO-1250) 0.00 0.00 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 \$ 0.00 (CRO-1270) \$ 0.00 11d) Legal Expense Fund - Other Sources 0.00 (CRO-1265) \$ 0.00 \$ 11e) Exempt Purchase Price Sales 2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e) 7,178.50 341,619.43 EXPENDITURES (3) Disbursements (CRO-1310) \$ 58,124.51 \$ 297,374.18 13a) Operating Expenditures (CRO-1310) \$ \$ 13b) Contributions to Candidates/Political Committees 250.00 10,170.00 \$ (CRO-1310) 0.00 13c) Coordinated Party Expenditures 0.00 \$ 4) Aggregated Non-Media Expenditures (CRO-1315) \$ 0.00 92.03 (CRO-1420) \$ \$ 0.00 0.00 5) Loan Repayments (CRO-1320) \$ \$ 5,600.00 6) Refunds/Reimbursements from the Committee 0.00 (CRO-1510) \$ 0.00\$ 11,631.93 7) In-Kind Contributions 8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) \$ \$ 58,374.51 324,868.14 9) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) 26,378.43 26,378.43 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) 0.00 (CRO-1610) \$ 22) Debts and Obligations owed by the Committee (CRO-1620) \$ 0.00 23) Debts and Obligations owed to the Committee (CRO-1720) \$ 0.0024) Account Transfers Within the Committee (CRO-1710) \$ 0.00 \$ 0.00 25) Administrative Support 0.00 \$ (CRO-1440) \$ 0.00 26) Forgiven Loans 0.00 (CRO-2220) \$ 0.00 \$ 27) 48-Hour Notice Reports Sum (CRO-1215) 0.00 \$ 0.00 \$ 28) Contributions to be Refunded

00 0		outions from I	•	of	1	Amendmer Yes	nt X No
	_		From Individuals of \$	50 or less			
1. Committe	e Full Name (and	Fund if applicable)			2. ID !	Number	
JOHNSON	FOR SHERIFF E	LECTION COMMIT	TTEE				
3. Contribut	or Information		· .		L		
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd	/уууу)	f. Amount	
☐ Add ☐ Remove	A	Check		10/26/2022		\$	25.00
☐ Add ☐ Remove	A	Check		10/26/202	10/26/2022		25.00
Add Remove	A	Check		10/31/202	22	\$	50.00
☐ Add ☐ Remove	A	Check		10/31/202	22	\$	50.00
4. Total or	nly this Page			•	\$	•	\$150.00
5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)							\$150.00

CRO-1205

NC State Board of Elections

April 2007

Contributions from Individuals Pg

Pg 1 of 4 Amendment Yes No

Use thi	s form to report in	dividual contribution	s over \$50 or co	ontributions ur	nder \$50 if form CRO 1	1205	j is not use	d
1. Com	mittee Full Name	(and Fund if applicab	le)			2.	ID Number	•
JOHNS	SON FOR SHERI	IFF ELECTION COM	4MITTEE					
3. Cont	ributor Informati	on		Add 🔲 Re	emove			
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(incl	ude city, state, & zi	ip)		NOT EMPLO	OYED			,
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	OLONIAL DRIVE		•	c. Employer's	Name/Specific Field	4		
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(inclu	ide city, state, & zi	ip)		MAYOR				
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Contributions from Individuals

Pg 2 of 4 Yes No

Use	this	form to re	port indi	vidual	contributions	over \$50 o	r contributions	under \$50	if form (TRO 1205	is not used

	mittee Full Name		2. ID Number					
JOHNS	SON FOR SHERI	IFF ELECTION COM	4MITTEE					
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_		om individuals		Pg		1004	∐ Yes	Xi No	
		dividual contribution (and Fund if applicab		ontributions u	nder \$50 if form CRO			1	
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JOHN	SON FOR SHERE	IFF ELECTION CON	MILLIEE						
3. Cont	ributor Informati	on		Add 🔲 Re	emove	•			
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Contributions from Individuals

Pg 4 of 4 Yes X No

Contributions from marviagais	rg .		01			res	Δ
Use this form to report individual contributions over \$50 or contribution	s und	er \$50	if form	CRO 12	205 is no	t used	
1. Committee Full Name (and Fund if applicable)					2. ID Nu	ımber	
JOHNSON FOR SHERIFF ELECTION COMMITTEE							

		(and Fund II applicab				Z	ID Number	<u>r</u>
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	al of ALL CRO	D-1210 Pages 6 of Detailed Summary P	age CRO-1100)			\$		6,705.00
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				_					Amendm	ent
Refunds/Re	eimbu	ırsements	To the Comr	nittee	Pg	1	of _	<u>l</u>	☐ Yes	No No
Use this form to r	eport re	funds received	by the committee of	r reimburseme	ents for	a pre	vious ex	pendi	ture.	
1. Committee Ful	Name	(and Fund if ap	plicable)					2. ID	Number	
JOHNSON FOR	SHERI	FF ELECTION	N COMMITTEE							
3. Contributor In	formatio	on		Add 🔲	Remov	/e		<u> </u>		
a. Full Name, Mail	ling Add	lress & Phone		d. Type of Committee g. Comments						·
(include city, sta	(include city, state, & zip)					PA	С			
WESTERN WOL	VESTERN WORLD INSURANCE COMPANY				m 🗌	Par	ty			
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4. Total only tl	his Pag	ge						\$		323.50
5. Total of AL (This line must be		_	S mmary Page CRO-110	0)				\$		323.50

NC State Board of Elections

Disbursen	nents .				Pg	of	1	∐ ☐ Yes	X No
	report expenditures coordinated party ex		ee for o	perating exper	ises.	contributi	ons to	candidate/p	olitical
1. Committee F	ull Name (and Fund	f applicable)						2. ID Numb	er
	R SHERIFF ELECT		EE						
3. Type of Disbu	irsement (Please	use separate CR()-131 <i>0</i>	forms for each	h typ	e of Disbu	rseme	nt.)	
Operating Exp		ributions to Candidat	es/Polit	ical Committees		Co	отdinat	ed Party Expe	nditures
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(include city, sta	9						····		
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ALAMANCE,	NC 27409			☐ Federal		X County:		<u> </u>	
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E - Salaries	F* - Equipme			litical Party			_	Public Offi	-
I - Postage	J - Penaltie	S	K* - C	ffice Expenses	3	Q* - D	onatio	on to Legal E	xpense Fund
O* Other									
	e detailed explanatio								
CRO-1310		NC S	tate Boa	rd of Elections					December 2009

	report expenditures		ee for c	pperating expe	•		ons to		X No
committees and	l coordinated party e	xpenditures							
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	OR SHERIFF ELECT			· · · · · · · · · · · · · · · · · · ·					
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X Operating Ex		ributions to Candida					огшпа	ed Party Expen	ditures
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a. Full Name, M (include city, sta	ailing Address & Ph	one		b. Coordinate	d C	ommittee N	am e	d. Comments	3
	ED GRAPHICS, LLO	<u> </u>		†					
P. O. BOX 265	-			c. Level Regis	ter	ed (Specify)		1	
BURLINGTON				☐ Federal		County:			
1	•			☐ State		Municip	ality:	e. Election Si	ım to Date
					٠			\$	8,909.06
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j	Amount	k. Re	quired Remai	ks
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(include city, sta	ite, & zip)								
ALAMANCE N									
114 WEST ELI				c. Level Regis	ter				
GRAHAM, NC	27253			☐ Federal ☐ State		County:		e. Election Su	to Date
				LI State		Municip	anty.	e. Mection St	im to Date
								\$	14,283.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. /	Amount	k. Re	quired Remar	ks
Α	Check	Α	11	1/15/2022	\$	799.00	NEV	VSPAPER AI)
A	Check	A	12	2/19/2022	\$	500.00	NEW	/SPAPER AI)
4. Payee Inform	ation			Add 🔲	Re	move			
	ailing Address & Pho	one		b. Coordinate			ıme	d. Comments	
(include city, sta	-								
ARROWHEAD	GRAPHICS								
508 HOUSTON				c. Level Regist	tere				
GREESBORO,	NC 27349			☐ Federal ☐ State		☐ County: ☐ Municip		e. Election Su	m to Data
			,	State	_	1.3 Withhelp	anty.	e. Mechon Su	in to Date
								\$	86,912.38
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. /	Amount	k. Re	quired Remar	ks
A	Check	В	10)/27/2022	\$	13,299.74	SIGN	IS AND MAI	LERS
A	Check	В	11	/10/2022	\$			L CARDS,	
5 T-4-11-44	- D						POS	CARDS, SIC	
5. Total only this	 			· · · · · · · · · · · · · · · · · · ·		,		\$	23,569.60
	CRO-1310 Pages		1100 10	0 d - E					
	(This line goes in line 13a of Detailed Summary Page CRO-1100 (This line goes in line 13b of Detailed Summary Page CRO-1100							\$	58,124.51
	n line 13c of Detailed Si						muni)		
	des (List detailed								
A* - Media	B* - Printing			undraising		D - To /	Anoth	ner Candidate	
E - Salaries				litical Party				Public Office	Expenses

I - Postage

O* Other

J - Penalties

K* - Office Expenses

Q* - Donation to Legal Expense Fund

ni	sbu	rce	me	nte
171	200	156		

			Ame	namei	ıτ	
Pg	 of-	6		Yes	X	No

1. Committee Fr	uli Name (and Fund	if applicable)						2. ID Nu	mber
	R SHERIFF ELEC		EE						
3. Type of Disbu	irsement (Please	use separate CRO	<u> </u>	forms for eac	h type	e of Disbu	rseme	nt.)	
X Operating Exp		tributions to Candidat	tes/Polit	ical Committees	1	Cod	ordinat	ed Party E	xpenditures
4. Payee Inform				Add 🔲	Rem	юче			
	ailing Address & Ph	ione		b. Coordinate	d Cor	nmittee Na	am e	d. Com m	ents
(include city, sta	te, & zip)								
BOSTON SAN	DWICH SHOP							1	
238 WEST FRO			ı	c. Level Regis					
BURLINGTON	I, NC 27215		ı	Federal	I.	County:		Ed a séin	2
			Ī	☐ State		Municip	anty:	е. шесио	on Sum to Date
	Y	1					·	\$	350.00
	g. Form of Payment		 	(mm/dd/yyyy)	Ť		 	quired Re	•
Α	Check	0	17	1/08/2022	\$	350.00	1	ALS FOR	POLL
					\$		WOI	RKERS	
4. Payee Informa	ation	<u></u>		Add 🗆	Rem	ove	<u> </u>		
	ailing Address & Ph	one		b. Coordinate			am e	d. Comm	ents
(include city, stat	•	on -							
	IITED CHURCH O	F CHRIST		1					
734 APPLE ST			ļ	c. Level Regist	tered	(Specify)			
	JRLINGTON, NC 27217								
	State 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. An	ount	k. Re	quired Re	
A	Check	0	T			1,000.00		· · · · · · · · · · · · · · · · · · ·	E DONATION
					\$				
4. Payee Informa	ation			Add 🔲	Reme	ove			
	ailing Address & Ph	one		b. Coordinated	d Con	amittee Na	ım e	d. Comm	ents
(include city, stat	te, & zip)								
JACKIE FORTI	NER							l	
7668 OAK FLA			}	c. Level Regist					
SNOW CAMP,	NC 27349			☐ Federal ☐ State	L	County:	L	- Destin	n Sum to Date
			}	∐ State		Municip	anty.	e. Electio	a Sum to Date
ł								\$	3,624.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Am	ount	k. Re	quired Re	marks
A	Check	О					PLA	CING AN	1D
					\$				CAMPAIGN
1			<u></u>		2				
5. Total only this	Page						-	\$	4,974.00
6. Total of ALL (CRO-1310 Pages				_		_	_	
(This line goes in	n line 13a of Detailed S	Summary Page CRO-	·1100 if	Operating Expe	nses)			\$	58,124.51
· -	n line 13b of Detailed S		_				mm)	Ψ	J0,14T.J1
(This line goes in	n line 13c of Detailed S	lummary Page CRO-	1100 if	Coordinated Par	ty Exp	enditures)			· <u> </u>
7. Purpose Co	des (List detailed	expenditure code	in (h.) a	ibove)					
A* - Media	B* - Printin	 	- `` ´	undraising		D - To .	Anoth	er Candid	date
E - Salaries	F* - Equipm	_		litical Party					office Expenses
I - Postage	J - Penaltie			ffice Expenses	j				l Expense Fund
O* Other				-		-		-	•
* Codes require	e detailed explanatio	n in required rem	arks fi	eld (k)					

n	ic	h	11	re	Δ	m	Δ1	nts
1,	11.5	D	u	rs	e	ш	eı	

				Amename	en r
Pg	3	of	6_	☐ Yes	X No

1. Committee F	ull Name (and Fund i	if applicable)		•			2. ID Number			
JOHNSON FOR SHERIFF ELECTION COMMITTEE										
3. Type of Disbu	rsement <i>(Please</i>	use separate CRO	<u> </u>	forms for eac	h type of Disbu	<u>rseme</u>	nt.)			
Operating Exp	penses Cont	ributions to Candida	tes/Polit	ical Committees	Co.	ordinat	ed Party Expend	itures		
4. Payee Inform	ation			Add 🔲	Remove					
a. Full Name, M	ailing Address & Ph	one		b. Coordinate	d Committee N	ame	d. Comments			
(include city, sta	ite, & zip)									
GRILL 584										
710 HUFFMAN					tered (Specify)					
BURLINGTON	I, NC 27215			☐ Federal ☐ State	☐ County: ☐ Municip		e. Election Sui	n to Data		
				ii state	L Municip	ality.	e. Mection Sui	n to Date		
							\$	12,128.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Remark	s		
Α	Check	0	1	1/08/2022	\$ 12,128.00	l .	D AND SERV			
					\$	ELE	CTION EVEN	T		
4. Payee Inform	ation			Add 🔲	Remove					
a. Full Name, Ma	ailing Address & Pho	one		b. Coordinate	d Committee Na	ame	d. Comments			
(include city, sta	te, & zip)									
SAM HUNT										
61 VIA PALMA c. Level Registered (Specify)										
PALM BEACH	ALM BEACH, FL 33480									
\$ 450.00										
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Remark	s		
A	Check	О	10	1/01/2022	\$ 450.00		UND FOR EX	CESS		
					\$	CON	TRIBUTION			
4. Payee Inform	ation	<u></u>		Add 🔲	Remove					
a. Full Name, Ma	ailing Address & Pho	one		b. Coordinate	d Committee Na	ıme	d. Comments			
(include city, sta	te, & zip)									
TERRY JOHNS	SON									
	OAK HILL ROAD			c. Level Regist	tered (Specify) County:					
SNOW CAMP,	NC 27349			State			e. Election Sun	n to Date		
			;		тишкор	uity.	\$	1,871.86		
f Assammt Code	g. Form of Payment	h. Purpose Code	: Dota	(mm/dd/yyyy)	: 44	l Do	quired Remark	,		
A Account Code	Check	O)/24/2022	\$ 284.44		L FOR VOLU			
Α	Check	0	11	/02/2022	\$ 537.44		VER FOR POL	L		
						WOR	KERS	1		
5. Total only this					·		\$	13,399.88		
	CRO-1310 Pages									
	n line 13a of Detailed S		-				\$	58,124.51		
(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)										
	des (List detailed				ty Exeptitude Coy					
A* - Media	B* - Printing			undraising	D - To	Anoth	er Candidate			
E - Salaries	F* - Equipme	•		litical Party			Public Office	Expenses		
I - Postage	J - Penalties			office Expenses		_	n to Legal Exp	- 1		
O* Other					•		<i>o</i> 7			
* Codes require	e detailed explanation	n in required rem	arks fi	eld (k)						

-	•	*			4	
I)	IS	hii	ırsa) M	ent	S

				Amendm	ent	
Pg	4	of	6	Yes Yes	X	No

1. Committee F	ull Name (2	end Fund	if applicable)						2. ID Nu	ımber
JOHNSON FO	R SHERIF	F ELECT	TION COMMITT	EE						
3. Type of Disbu	arsement	(Please	use separate CRC	<u>)-1310</u>	forms for eac	h typ	e of Disbu	rseme	nt.)	
X Operating Exp			ributions to Candidat							Expenditures
4. Payee Inform	ation				Add 🔲	Ren	nove			
a. Full Name, Ma	ailing Addr	ess & Ph	one		b. Coordinate	d Co	mmittee N	ame	d. Comn	aents
(include city, sta	ite, & zip)						_			
KENYON'S MI					7 I Danie	1	10 103			
1915 SOUTH N		/AY0119)		c. Level Regis		County:		1	
MEBANE, NC	27302				State		☐ County:		a Flecti	on Sum to Date
					LI bear		11100000-7	micy.	\$	324.06
f. Account Code	σ. Form of	Pavment	h. Purpose Code	i. Date	l : (mm/dd/yyyy)	li. Aı	mount	k. Re	quired R	emarks
A	Che		0		1/02/2022	\$	324.06		CH FOR	
			 	1	1/ 4/4/4/4/4		324.00	1	RKERS	
	<u> </u>				<u> </u>	\$. 022
4. Payee Inform					Add 🔲	Rem				
a. Full Name, Ma	•	ess & Ph	one		b. Coordinate	d Cor	mmittee Na	am e	d. Comn	ients
(include city, sta										
RONALD G KI		CK JR		1	- Tarrel Dagia	4 d	(6alfa)		ĺ	}
1987 S MAIN S				ļ	c. Level Regis Federal		(Specify) County:			
GRAHAM, NC	27253			ļ	State		☐ County:		a Mactic	on Sum to Date
					LI State		winnerp	anty.		JR Sum to Date
				ļ					\$	300.00
f. Account Code	g. Form of	Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Ar	nount	k. Re	quired R	emarks
A	Che		0	t	1/01/2022	\$	300.00	REF	UND DO	ONATION
	<u> </u>					\$				USINESS
4. Payee Inform	etion		<u> </u>		Add 🔲	Rem	MIZA			
a. Full Name, Ma		ese & Pho	One		b. Coordinate			me	d. Comm	ents
(include city, sta	-	733 CC 1 II.	ne	l	Di Coorana,	u 0	H MILLES V	-	u. com	C II CS
LIVING FREE										
1230 WALNUT		ANE		ļ	c. Level Regist	te re d	(Specify)			
SNOW CAMP,				,	Federal		County:			
,				ļ	☐ State	[☐ Municip	ality:	e. Electic	on Sum to Date
								_	\$	3,000.00
f. Account Code	g. Form of I	Pavment	h. Purpose Code	i. Date	(mm/dd/yyyy)	i. An	nount	k. Re	quired Re	emarks
Α	Chec		0		2/19/2022	+	2,000.00			E DONATION
			 	1-	// 17/2022		2,000.00			<u> </u>
	<u> </u>			L		\$		<u> </u>		
5. Total only this	s Page		<u></u>				·		\$	2,624.06
6. Total of ALL	CRO-1310	Pages								
(This line goes is	n line 13a of	Detailed S	Summary Page CRO-	1100 if	Operating Expen	nses)			¢	58,124.51
(This line goes is	n line 13b of	Detailed S	Summary Page CRO-	1100 if	Contrib to Cand	idates	Political Co	omm)	\$	30,124.31
(This line goes is	n line 13c of	Detailed Si	ummary Page CRO	1100 if	Coordinated Par	ty Ex	penditures)			
7. Purpose Co	des (List	detailed	expenditure code	in (h.) a	ibove)					
A* - Media		- Printing		• •	undraising		D - To .	Anoth	er Candi	date
E - Salaries		- Equipme	_		litical Party					Office Expenses
I - Postage		Penalties			ffice Expenses	š				al Expense Fund
O* Other					-		=		-	·
* Codes require	a detailed ex	xplanatio	n in required rem	arks fi	eld (k)					

							Am en dn	_
Disbursen		•	-		Pg5 of			No No
	o report expenditures I coordinated party ex		ee for o	perating exper	ıses, contribut	ions to	o candidate/p	olitical
	i coordinated party ex full Name (and Fund i						2. ID Numb	er
	OR SHERIFF ELECT		EE					
3. Type of Disbu		use separate CRC						<u> </u>
Operating Exp	penses	tributions to Candidat					ted Party Expe	nditures
4. Payee Inform				Add 🔲	Remove			
ł	ailing Address & Pho	one		b. Coordinate	d Committee N	ame	d. Comment	ts .
(include city, sta	ite, & zip)			-				
ALAN PAGE	040			e. Level Regis	tered (Specify)		4	
2300 YORK ROBURLINGTON				Federal	County		-	
DORAMOTO.	4, 140 21213			☐ State	Munici		e. Election S	um to Date
						-	\$	9,901.63
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	e (mm/dd/yyyy)	i. Amount	k. Re	equired Rema	rks
A	Check	0	+		\$ 2,215.89		ECTION DAY	· · · · · · · · · · · · · · · · · · ·
A	Check	A	 		\$ 4,186.44	Ros	BORALIONS	
						PAL	M CARDS	
4. Payee Inform					Remove	* : n	1. 0	,
=	ailing Address & Pho	one	,	b. Coordinated	d Committee N	am e	d. Comment	<u> </u>
(include city, sta	rte, & zip) TENTS, TABLES A	MIN CHAIDS		1				
P.O.BOX 55	LENIS, IMPLES A	ND CHAIR	,	c. Level Regist	tered (Specify)		1	
GIBSONVILLE	E, NC 27249		,	☐ Federal	County		İ	
	•		1	☐ State	☐ Munici	pality:	e. Election S	um to Date
	***						\$	2,840.97
1			1		f e	+	equired Rema	·····
A	Check	0	11	1/02/2022	\$ 1,349.99	1	GE FOR EL	ECTION
		,			\$	EVE	NI	
4. Payee Inform	estion			Add □	Remove	Ь		
	ailing Address & Pho	one			d Committee N	ame	d. Comment	s
(include city, sta	_							
SHRINE CLUB								
904 PLANTAT			1	c. Level Regist Federal	tered (Specify)		1	
BURLINGTON	i, NC 27215		1	Federal State	☐ County ☐ Municip		e. Election S	to Date
				L. State	1723H-14-7-7	itiney.		
<u> </u>				<u> </u>		<u> </u>	\$	3,600.00
	<u> </u>	1			j. Amount	+	quired Remai	
A	Check	О	10	0/25/2022	\$ 1,000.00	CHA	ARITABLE D	ONATION
					\$	<u></u>		
5. Total only this	s Page			· · · · · · · · · · · · · · · · · · ·	· · · <u>Lui</u>	!	\$	8,752.32
6. Total of ALL	CRO-1310 Pages	' <u></u>				1		
	in line 13a of Detailed Si		-			1	\$	58,124.51
_	n line 13b of Detailed Si	• •	-			- 1	-	 ,
(This line goes w	n line 13c of Detailed Si	ummary Page CKU-	1100 g	Coordinated Par	ty Expenditures)	,		ļ

O* Other

A* - Media

E - Salaries

I - Postage

C* - Fundraising

G - Political Party

K* - Office Expenses

7. Purpose Codes (List detailed expenditure code in (h.) above) B* - Printing

F* - Equipment

J - Penalties

D - To Another Candidate

H* - Holding Public Office Expenses

Q* - Donation to Legal Expense Fund

D	ie	hu	re	em	en	te
v	19	บน	пэ	CHI	СH	13

				Amend	ment	
Pg	6	of	6	☐ Yes	X	No

1. Committee F	ull Name (and Fund	if applicable)						2. ID N	umber
	R SHERIFF ELECT		EE						
3. Type of Disbu	rsement (Please	use separate CR()-131 <i>0</i>	forms for eac	h ty	e of Disbu	rseme	nt.)	
Operating Exp	enses Cont	ributions to Candida	tes/Polit	ical Committees		☐ Coc	ordinat	ed Party	Expenditures
4. Payee Inform	ation			Add 🔲		move			
a. Full Name, Ma	ailing Address & Ph	one		b. Coordinate	d Co	mmittee N	ame	d. Com	ments
(include city, sta				-				ļ	
	LAMAMCE HIGH	SCHOOL SOFT	BALL	c. Level Regis	+a.wa	1 (Cma al 6a)			
BOOSTERS	NT 4 T 4 N 4 4 N 100 T 100	2475		Federal	ше	County:			
GRAHAM, NC	N ALAMANCE RO	JAD		State				e. Electi	on Sum to Date
GRAHAWI, NC	27233					<u> </u>		\$	880.00
f Account Code	g. Form of Payment	h Purnose Cade	li Dota	(mm/dd/yyyy)	I: A		lı Da	quired R	
A Account Code		O	1		\$		· · · · · · · · · · · · · · · · · · ·		
A	Check	10	1	1/15/2022	╄	880.00	СПА	ICI I Ab.	LE DONATION
		<u></u>			\$				·
4. Payee Inform						nove			
•	ailing Address & Ph	one		b. Coordinate	d Co	mmittee Na	am e	d. Com	nents
(include city, sta									
THE OZ AGEN P. O. BOX 2750				c. Level Regis	tere	d (Specify)			
RALEIGH, NC				☐ Federal		County:			
101221011,110	2.011			☐ State		Municip	ality:	e. Electi	on Sum to Date
								\$	6,000.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(m m/dd/vvvv)	i. A	mount	k. Re	quired R	
Α	Check	0		0/25/2022	\$	3,500.00	 		NIGHT EVENT
				······································	\$				
4. Payee Informa	etion	<u> </u>		Add 🔲	Rer	nove			
	iling Address & Ph	one		b. Coordinate			me	d. Com n	nents
(include city, sta	•								
THE STITCH P									
1812 ANTHON	-			c. Level Regis	tere				
BULRINGTON	, NC 27215			☐ Federal		County:			
				☐ State		Municip	ality:	e. Hecti	on Sum to Date
								\$	5,017.67
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Re	quired R	emarks
Α .	Check	В	13	1/22/2022	\$	424.65	TEE	SHIRTS	S FOR
	····				\$			UNIEE	
F Total aulusthia	. D				Ψ			Φ	4 004 65
5. Total only this		· · · · · · · · · · · · · · · · · · ·						\$	4,804.65
	CRO-1310 Pages					·			
	line 13a of Detailed S		-			m 21.4 1.60		\$	58,124.51
	ı line 13b of Detailed S ı line 13c of Detailed S						omm)		
	des (List detailed						٠		· · · · · · · · · · · · · · · · · · ·
A* - Media	B* - Printin		 	undraising		D - To	Anoth	er Cand	idate
E - Salaries	F* - Equipm	_		litical Party					Office Expenses
I - Postage	J - Penaltie			ffice Expenses	3		_		al Expense Fund
O* Other				-		=			-
* Codes require	detailed explanatio	n in required rem	arks fi	eld (k)					