

Disclosure Report Cover

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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			c. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE				
b. Mailing Address (include City, State and Zip Code)			d. Date Filed	
3934 SPANISH OAK HILL ROAD SNOW CAMP, NC 27349			11/01/2022	
			e. Phone Number	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name	
2022	07/01/2022	10/22/2022	PAUL E COBB JR	
6. Type of Committee (Check One)		7. Type of Report (Check One and type of report from one category)		
<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		<input type="checkbox"/> Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
<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:		<input type="checkbox"/> State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input checked="" type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
8. Number of Fundraisers this Report		9. Special Report Name		
3				
3. Account Information		3. Account Information		
a. Financial Institution Full Name		a. Financial Institution Full Name		
WELLS FARGO				
b. Purpose	c. Account Code	b. Purpose	c. Account Code	
RECEIVE AND DISBURSE FUNDS	A			
	d. Period Begin Balance		d. Period Begin Balance	
	\$ 114,370.57		\$	
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>PAUL E COBB, JR</u>		<u>Paul E Cobb Jr</u>		<u>11/01/2022</u>
Printed Name of Signer		Signature of Appointed Treasurer		Date
FOR OFFICE USE ONLY				
Date Received:	NOV 10 2022	Employee:	CT	
Date Postmarked:	ALAMANCE COUNTY BOARD OF ELECTIONS	Employee:		
Date Scanned:	DEC 8 2022	Employee:	R	
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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE	2022 Third Quarter		
Start of Election Cycle: January 1, 2019		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 114,370.57	\$ 9,627.14
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 2,352.50	\$ 7,530.00
6) Contributions from Individuals (CRO-1210)		\$ 85,183.50	\$ 326,660.93
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees (CRO-1230)		\$ 250.00	\$ 250.00
9) Loan Proceeds (CRO-1410)		\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00	\$ 0.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00	\$ 0.00
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00	\$ 0.00
11c) Outside Sources of Income (CRO-1250)		\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 87,786.00	\$ 334,440.93
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 120,087.63	\$ 239,222.17
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 320.00	\$ 9,920.00
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 27.50	\$ 119.53
15) Loan Repayments (CRO-1420)		\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00	\$ 5,600.00
17) In-Kind Contributions (CRO-1510)		\$ 4,147.00	\$ 11,631.93
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 124,582.13	\$ 266,493.63
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 77,574.44	\$ 77,574.44
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

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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
3. Contribution 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	A	Check		09/15/2022	\$	12.50
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		09/15/2022	\$	12.50
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		09/01/2022	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/01/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		07/22/2022	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		10/13/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		09/06/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		09/01/2022	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/09/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/01/2022	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		07/22/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		07/29/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		07/29/2022	\$	37.50
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		07/29/2022	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/09/2022	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		07/29/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		07/29/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/01/2022	\$	35.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		09/01/2022	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		07/29/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		07/29/2022	\$	40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		07/29/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		10/03/2022	\$	50.00
4. Total only this Page					\$	\$787.50
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$	\$2,352.50

Aggregated Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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

Committee Full Name (and Fund if applicable)		2. ID Number			
JOHNSON FOR SHERIFF ELECTION COMMITTEE					
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	A	Check		10/03/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/18/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		09/01/2022	\$ 40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/09/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		07/29/2022	\$ 15.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		09/01/2022	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		07/29/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		07/29/2022	\$ 30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/01/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/09/2022	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		07/29/2022	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		10/05/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/01/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/01/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/01/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/01/2022	\$ 30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		07/29/2022	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/01/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/01/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/11/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		07/22/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		07/22/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		09/01/2022	\$ 50.00
4. Total only this Page					\$ 965.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 2,352.50

Aggregated Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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

Committee Full Name (and fund if applicable)		2-D Number			
JOHNSON FOR SHERIFF ELECTION COMMITTEE					
Contribution 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	A	Check		08/18/2022	\$ 30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/09/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		09/28/2022	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/01/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		09/06/2022	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/09/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		07/29/2022	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/09/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/01/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		10/05/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		07/29/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/09/2022	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/09/2022	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		08/01/2022	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		10/13/2022	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		10/13/2022	\$ 25.00
4. Total only this Page					\$ 600.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 2,352.50

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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
WILLIE DALE AARON 1013 EDITH STREET BURLINGTON, NC 27215				UNEMPLOYED		
				c. Employer's Name/Specific Field		
				UNEMPLOYED		
				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"/>	A	Check		07/29/2022	\$ 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	
BARBARA ACOSTA 1347 NORTH SELLARS MILL RD BURLINGTON, NC 27217				REALTOR		
				c. Employer's Name/Specific Field		
				SELF		
				e. Election Sum to Date		
				\$ 540.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/29/2022	\$ 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	
JANICE ALEXANDER 3307 CARRIAGE PLACE BURLINGTON, NC 27215				OFFICE ADMINISTRATION		
				c. Employer's Name/Specific Field		
				DR. ALEX F. ALEXANDER, DDS		
				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"/>	A	Check		09/12/2022	\$ 100.00	
<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)					\$ 85,183.50	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Committee Full Name (and funds if applicable)						2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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 R ALLEN P.O. BOX 83 GRAHAM, NC 27253			PARENTS FRIENDS FREEDOM LOVERS			
			c. Employer's Name/Specific Field			
			SELF		e. Election Sum to Date	
					\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/22/2022	\$ 300.00	
<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	
LINDA ALLISON 102 FERNBROOK COURT ELON, NC 27244			ADMINISTRATIVE			
			c. Employer's Name/Specific Field			
			ALAMANCE COUNTY SHERIFFS OFFICE		e. Election Sum to Date	
					\$ 225.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		08/09/2022	\$ 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	
WILLIAM E APPLE 3429 MAPLE AVENUE BURLINGTON, NC 27215			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		08/01/2022	\$ 75.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 525.00	
5. Total of ALL CRO-1210 Pages (This line must be on the 6 of Detailed Summary Page CRO-1100)					\$ 85,183.50	

Contributions from Individuals

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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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 MARIE ASKEW 342 FOUNTAIN PLACE BURLINGTON, NC 27215				NURSING SUPERVISOR		
				c. Employer's Name/Specific Field		
				KINDRED HOSPITAL, GREENSBORO, NC		
				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	
<input type="checkbox"/>	A	Check		10/03/2022	\$	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
SUE Y BAILEY 2820 RILEY'S TRAIL BURLINGTON, NC 27215				UNEMPLOYED		
				c. Employer's Name/Specific Field		
				UNEMPLOYED		
				e. Election Sum to Date		
				\$		250.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (m/m/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		09/15/2022	\$	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
LINDY BAKATSIAS 142 NORTH GRAHAM HOPEDALE ROAD BULRINGTON, NC 27217				RESTAURANT OWNER		
				c. Employer's Name/Specific Field		
				SELF		
				e. Election Sum to Date		
				\$		4,247.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (m/m/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	In-Kind	MEAL	09/01/2022	\$	4,147.00
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 4,497.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 85,183.50

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 Bond if applicable)					2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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 BARONE 3032 WESTON COURT BURLINGTON, NC 27215			EXECUTIVE ASSISTANT			
			c. Employer's Name/Specific Field			
			LAB CORP		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"/>	A	Check		08/09/2022	\$ 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	
MICHAEL BARONE 3032 WESTON COURT BURLINGTON, NC 27215			FINANCIAL ANALYST			
			c. Employer's Name/Specific Field			
			VIA INVESTMENT MANAGEMENT, LLC		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"/>	A	Check		07/29/2022	\$ 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	
TIMOTHY W BAUGUCESS 504 MACLEAN DRIVE GIBSONVILLE, NC 27249			GENERAL MANAGER			
			c. Employer's Name/Specific Field			
			R.H.BARRINGER DISTRIBUTOR CO. INC.		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"/>	A	Check		07/29/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 300.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 85,183.50	

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

2. Committee Full Name (and fund, if applicable)						2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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 M BELL 5224 BAKER-BELL FARM ROAD BURLINGTON, NC 27217			SALESMAN			
			c. Employer's Name/Specific Field			
			DAVID SPENCER			
					e. Election Sum to Date	
					\$ 720.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/22/2022	\$ 150.00	
<input type="checkbox"/>	A	Check		07/22/2022	\$ 500.00	
<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	
JULE TODD BILLINGS 1750 HANFORD ROAD GRAHAM, NC 27253			TEACHER			
			c. Employer's Name/Specific Field			
			ABSS			
					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"/>	A	Check		08/01/2022	\$ 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	
BONNIE S BLALOCK 215 EAST PINE STREET GRAHAM, NC 27253			NOT EMPLOYED			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED			
					e. Election Sum to Date	
					\$ 225.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		08/01/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 950.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 85,183.50	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 bond if applicable)						2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
PETER TIMOTHY BOORAS 7157 BOBBY JEAN ROAD JULIAN, NC 27283			SALES			
			c. Employer's Name/Specific Field			
			SELF			
					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"/>	A	Check		07/11/2022	\$ 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	
MICHAEL A BORING 947 LONGLEAF PINE PLACE MEBANE27302, NC			SALES			
			c. Employer's Name/Specific Field			
			SELF			
					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"/>	A	Check		07/22/2022	\$ 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	
FAYE W BOSWELL 3405 ELK DR BURLINGTON, NC 27215			NOT EMPLOYED			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED			
					e. Election Sum to Date	
					\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/29/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 475.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1210)</i>					\$ 85,183.50	

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			
JOHNSON FOR SHERIFF ELECTION COMMITTEE					
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		
MICHAEL LEE BRADSHER 8306 A NC HIGHWAY 49 SOUTH BURLINGTON, NC 27217		NOT EMPLOYED			
		c. Employer's Name/Specific Field			
		NOT EMPLOYED			
		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"/>	A	Check		09/06/2022	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
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		
RAY S BROOKS 1160 STONEY CREEK CHURCH ROAD BURLINGTON, NC 27217		UNEMPLOYED			
		c. Employer's Name/Specific Field			
		UNEMPLOYED			
		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 type="checkbox"/>	A	Check		08/12/2022	\$ 80.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
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		
PEGGY C BROTHERS 6710 SOUTH NC HWY 62 BURLINGTON, NC 27215		UNEMPLOYED			
		c. Employer's Name/Specific Field			
		UNEMPLOYED			
		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"/>	A	Check		08/01/2022	\$ 150.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 280.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1210)</i>					\$ 85,183.50

Contributions from Individuals

Amendment
 Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

2. Committee Full Name (and fund if applicable)						2. AD Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
GLORIA BROWN 201 BIDNEY DRIVE BURLINGTON, NC 27215			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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 checked="" type="checkbox"/>	A	Check		03/04/2022	\$ 50.00	
<input type="checkbox"/>	A	Check		07/29/2022	\$ 100.00	
<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	
JENNINGS M BRYAN 143 CRAPE MYRTLE COURT BURLINGTON, NC 27215			MANAGER			
			c. Employer's Name/Specific Field			
			JENNINGS M BRYAN INSURANCE		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"/>	A	Check		08/01/2022	\$ 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	
WILLIAM B BUCHANAN JR 905 ALICE CT HAW RIVER, NC 27215			NOT EMPLOYED			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED		e. Election Sum to Date	
					\$ 450.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/11/2022	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 450.00	
5. Total of ALL CRO 1210 Pages <i>(This line must be on the 6 of Detailed Summary Page CRO-1100)</i>					\$ 85,183.50	

Contributions from Individuals

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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
J BYRON BULLIS 500 WILDWOOD LANE GRAHAM, NC 27253			DEPUTY CLERK			
			c. Employer's Name/Specific Field			
			STATE OF NC			
					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"/>	A	Check		07/29/2022	\$ 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	
EDWARD R BURNS 3322 VAN DRIVE BURLINGTON, NC 27215			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED			
					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"/>	A	Check		07/29/2022	\$ 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	
TEENA M BURTON 605 SELLARS MILL ROAD BURLINGTON, NC 27217			MINISTER OF THE GOSPEL OF JESUS CHRIST			
			c. Employer's Name/Specific Field			
			GOD THE FATHER, SON & HOLY SPIRIT			
					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"/>	A	Check		08/09/2022	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1,225.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Drafted Summary Page CRO-1100)</i>					\$ 85,183.50	

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 unit if applicable)						2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
CLARENCE G BYRD JR 3361-A GARDEN ROAD BURLINGTON, NC 27215			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		09/28/2022	\$ 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	
ALAN G CAPPS 2341 HAW RIVER/HOPEDALE ROAD BURLINGTON, NC 27217			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		09/06/2022	\$ 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	
ANTHONY CAPPS 1504 WHITES KENNEL ROAD BURLINGTON, NC 27215			OWNER			
			c. Employer's Name/Specific Field			
			CAROLINA TANK LINES		e. Election Sum to Date	
					\$ 4,500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		08/01/2022	\$ 1,500.00	
<input type="checkbox"/>	A	Check		09/19/2022	\$ 2,500.00	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 4,350.00	
5. Total of ALL CRO 1210 Pages <i>(This line must be on the 6 of Detailed Summary Page CRO-1100)</i>					\$ 85,183.50	

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 funds if applicable)						2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
RICKY CARVER 522 NORTH CARR STREET MEBANE, NC 27302				OWNER		
				c. Employer's Name/Specific Field		
				CARVERS RESTAURANT		
				e. Election Sum to Date		
				\$ 300.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>	A	Check		03/21/2022	\$ 50.00	
<input type="checkbox"/>	A	Check		07/11/2022	\$ 250.00	
<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	
JOHN F CASEY 303 COLONIAL DRIVE BURLINGTON, NC 27215				UNEMPLOYED		
				c. Employer's Name/Specific Field		
				UNEMPLOYED		
				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"/>	A	Check		07/29/2022	\$ 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	
GREGORY O CHANDLER 1657 OLDE BEECHWOOD COURT MEBANE, NC 27302				UNEMPLOYED		
				c. Employer's Name/Specific Field		
				UNEMPLOYED		
				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"/>	A	Check		08/01/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 475.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on one of Detailed Summary Page CRO-1100)</i>					\$ 85,183.50	

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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
ROBERT CHANDLER 3240 COVENTRT PL BURLINGTON, NC 27215				OWNER		
				c. Employer's Name/Specific Field		
				CHANDLER CONCRETE COMPANY	e. Election Sum to Date	
					\$ 1,600.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/29/2022	\$ 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	
TOM CHANDLER JR 2516 PINEWAY DRIVE BURLINGTON, NC 27215				CONSTRUCTION		
				c. Employer's Name/Specific Field		
				CHANDLER CONCRETE	e. Election Sum to Date	
					\$ 2,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/29/2022	\$ 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	
TOM CHANDLER SR 5348 NC 62 SOUTH BURLINGTON, NC 27215				OWNER		
				c. Employer's Name/Specific Field		
				CHANDLER CONCRETE	e. Election Sum to Date	
					\$ 2,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/29/2022	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 3,000.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 85,183.50

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, Bill Name (and Fund if applicable)						2. ID Number:
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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
ALICE B CHEEK 6734 WHITNEY ROAD STE.E GRAHAM, NC 25273				NOT EMPLOYED		
				c. Employer's Name/Specific Field		
				NOT EMPLOYED		
				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"/>	A	Check		08/01/2022	\$ 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
BOBBY CHIN 386 CAROLINA CIRCLE GRAHAM, NC 27253				UNEMPLOYED		
				c. Employer's Name/Specific Field		
				UNEMPLOYED		
				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"/>	A	Check		07/29/2022	\$ 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
KAREN CHIN 386 CAROLINA CIRCLE GRAHAM, NC 27253				UNEMPLOYED		
				c. Employer's Name/Specific Field		
				UNEMPLOYED		
				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"/>	A	Check		07/29/2022	\$ 75.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 250.00	
5. Total of ALL CRO 1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 85,183.50	

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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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
CLYDE JULIEN CHRISTMAS III 2753 BIRCH LANE BURLINGTON, NC 27215				UNEMPLOYED		
				c. Employer's Name/Specific Field		
				UNEMPLOYED		
				e. Election Sum to Date		
				\$ 275.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		08/11/2022	\$ 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
BRENDA G CLAPP P.O. BOX 133 HAW RIVER, NC 27258				UNEMPLOYED		
				c. Employer's Name/Specific Field		
				UNEMPLOYED		
				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"/>	A	Check		08/09/2022	\$ 50.00	
<input type="checkbox"/>	A	Check		09/06/2022	\$ 50.00	
<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
RICHARD CLARK 2112 WESTOVER TER BURLINGTON, NC 27215				UNEMPLOYED		
				c. Employer's Name/Specific Field		
				UNEMPLOYED		
				e. Election Sum to Date		
				\$ 1,075.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		09/12/2022	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1,175.00	
5. Total of ALL CRO 1210 Pages (This line must be on the 6 of Detailed Summary Page CRO-1210)					\$ 85,183.50	

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
HIRAM N COBLE 125 CARDEN PLACE DRIVE APARTMENT D MEBANE, NC 27302			DEPUTY SHERIFF			
			c. Employer's Name/Specific Field			
			ACSO		e. Election Sum to Date	
					\$ 350.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/29/2022	\$ 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	
JAMES D COBLE P.O. BOX 1213 BURLINGTON, NC 27216			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		09/02/2022	\$ 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	
KENT COBLE 5733 FOSTER STORE ROAD LIBERTY, NC 27298			COBLE LAND FIELD			
			c. Employer's Name/Specific Field			
			SELF		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"/>	A	Check		09/06/2022	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1,650.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on the back of Detailed Summary Page CRO-1100)</i>					\$ 85,183.50	

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
TOM COBLE 4357 A E GREENSBORO CHAPEL HILL RD SNOW CAMP, NC 27349				NOT EMPLOYED		
				c. Employer's Name/Specific Field		
				NOT EMPLOYED		
				e. Election Sum to Date		
				\$ 152.50		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/29/2022	\$ 37.50	
<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	
P CALVIN COBLE JR 1931 TURNER ROAD MEBANE, NC 27302				CPA		
				c. Employer's Name/Specific Field		
				GILLIAM BELL MOSER		
				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"/>	A	Check		08/01/2022	\$ 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	
KIM COCKERHAM 1785 MONARCH LANE ASHEBORO, NC 27205-1464				WEDDING VENUE		
				c. Employer's Name/Specific Field		
				SELF		
				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"/>	A	Check		08/01/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 237.50	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page (CRO-1210))</i>					\$ 85,183.50	

Contributions from Individuals

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 initial applicable)						ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
2. 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
CAROL A COLLINS 4480 NORTH NC HIGHWAY 49 BURLINGTON, NC 27217				OWNER		
				c. Employer's Name/Specific Field		
				GLOBAL HEARING AIDS, INC.		
				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"/>	A	Check		07/29/2022	\$ 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
JASON COPLAND 3156 ABINGTON PL BURLINGTON, NC 27215				UNEMPLOYED		
				c. Employer's Name/Specific Field		
				UNEMPLOYED		
				e. Election Sum to Date		
				\$		270.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		08/01/2022	\$ 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
RUSTY COX 604 GREYROCK ROAD WHITSETT, NC 27377				CAR SALES		
				c. Employer's Name/Specific Field		
				COX TOYOTA AND COX DODGE & JEEP		
				e. Election Sum to Date		
				\$		1,450.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		09/12/2022	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 750.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 85,183.50

Contributions from Individuals

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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
PHILLIP CRABTREE 2560 ADAMS FARM ROAD SNOW CAMP, NC 27349			OWNER/PRESIDENT			
			c. Employer's Name/Specific Field			
			SYSTEM ELECTRIC CORP.		e. Election Sum to Date	
					\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/29/2022	\$ 150.00	
<input type="checkbox"/>	A	Check		09/01/2022	\$ 150.00	
<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	
JAMES CROUCH 2529 PINEWAY DRIVE BURLINGTON, NC 27215			INSURANCE AGENT			
			c. Employer's Name/Specific Field			
			SELF		e. Election Sum to Date	
					\$ 2,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		08/01/2022	\$ 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	
KRISTIE CULLER 118 HOSKINS CIR BURLINGTON, NC 27215			ASSISTANT CLERK OF SUPERIOR COURT			
			c. Employer's Name/Specific Field			
			ALAMANCE COUNTY		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"/>	A	Check		07/29/2022	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 1,500.00
5. Total of ALL CRO-1210 Pages (This line must be on the 6 of Detailed Summary Page CRO-1100)						\$ 85,183.50

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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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 A CUMMINGS 511 ALAMANNI COURT GRAHAM, NC 27253			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		07/29/2022	\$ 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	
MARY JO DAGGITT 200 WALTER HAGEN DRIVE MEBANE, NC 27302			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		10/14/2022	\$ 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	
DAN H DANIELEY 4464 JIMMY BOWLES ROAD ELON, NC 27244			BOARD OF DIRECTORS			
			c. Employer's Name/Specific Field			
			BURLINGTON AVIATION		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"/>	A	Check		07/19/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1210)					\$ 85,183.50	

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 number, applicable)						2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
RANDY S DAVIS 6603 DAVID MOORE ROAD BURLINGTON, NC 27217			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		08/01/2022	\$ 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	
JAMES C DEAN 3602 PREACHER HOLMES ROAD GRAHAM, NC 27253			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		08/01/2022	\$ 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	
JASON S DEW 1718 SWEPSONVILLE ROAD GRAHAM, NC 27253			PHYSICIAN			
			c. Employer's Name/Specific Field			
			CONE HEALTH		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"/>	A	Check		08/09/2022	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 650.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1210)</i>					\$ 85,183.50	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 funds if applicable)						2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE							
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	
GENEVIEVE DICKSON 1021 MARTIN AVENUE GRAHAM, NC 27253				UNEMPLOYED			
				c. Employer's Name/Specific Field			
				UNEMPLOYED		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 checked="" type="checkbox"/>	A	Check		03/04/2022	\$ 50.00		
<input type="checkbox"/>	A	Check		07/29/2022	\$ 100.00		
<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	
KIMBERLY DAAWN DIMURO 729 BANKS STREET GRAHAM, NC 27253				LOAN OFFICER			
				c. Employer's Name/Specific Field			
				ALAN TATE MORTGAGE		e. Election Sum to Date	
				\$		540.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		08/09/2022	\$ 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	
GEOFFREY P DOUCETTE 322 CENTURY COURT BURLINGTON, NC 27215				CAR SALES			
				c. Employer's Name/Specific Field			
				SELF		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"/>	A	Check		07/19/2022	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 600.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1210)</i>						\$ 85,183.50	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Committee Full Name (and number, if applicable)						Committee ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE							
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 J EARLEY 407 ASHLEY WOODS DRIVE GIBSONVILLE, NC 27249				NOT EMPLOYED			
				c. Employer's Name/Specific Field			
				NOT EMPLOYED			
				e. Election Sum to Date			
						\$ 225.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		08/11/2022	\$ 150.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
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	
MILES L ECKARD 600 DRIFTWOOD DRIVE GIBSONVILLE, NC 27249				UNEMPLOYED			
				c. Employer's Name/Specific Field			
				UNEMPLOYED			
				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"/>	A	Check		08/01/2022	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
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	
RUFUS EDMISTEN 2121 LAKE WHEELER ROAD RALEIGH, NC 27603				ATTORNEY AT LAW			
				c. Employer's Name/Specific Field			
				EDMISTEN & WEBB LAW			
				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"/>	A	Check		08/09/2022	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 500.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1210)</i>						\$ 85,183.50	

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, Ballot Line, and Fund (if applicable)						2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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		
BENJAMIN T EDWARDS 123 BAUMAN COURT GRAHAM, NC 27253			LAW ENFORCEMENT			
			c. Employer's Name/Specific Field			
			GRAHAM POLICE DEPARTMENT			
			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"/>	A	Check		08/09/2022	\$ 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		
JAMES EDWARDS 4175 KEE PEE TRAIL BURLINGTON, NC 27215			LANDSCAPING			
			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"/>	A	Check		07/29/2022	\$ 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		
DOUGLAS P FINCANNON 305 SAWGRASS COURT MEBANE, NC 27302			INSURANCE SALES			
			c. Employer's Name/Specific Field			
			SELF			
			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"/>	A	Check		07/19/2022	\$ 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)						\$ 85,183.50

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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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		
BRAUDIE R FITCH JR 1514 EDGEWOOD AVENUE BURLINGTON, NC 27215			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED	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 checked="" type="checkbox"/>	A	Check		03/21/2022	\$	50.00
<input type="checkbox"/>	A	Check		07/22/2022	\$	50.00
<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		
JACKIE FORTNER 7668 OAK FLAT LANE SNOW CAMP, NC 27349			NOT EMPLOYED			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED	e. Election Sum to Date		
				\$ 495.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		08/03/2022	\$	225.00
<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		
CHRISTOPHER H FOUST 1851 SOUTH MAIN STREET GRAHAM, NC 27253			CONSTRUCTION			
			c. Employer's Name/Specific Field			
			SELF	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"/>	A	Check		10/05/2022	\$	100.00
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$	375.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$	85,183.50

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 branch if applicable)	2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE	

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
THOMAS I FOUST 906 HANFORD ROAD GRAHAM, NC 27253	NOT EMPLOYED	
	c. Employer's Name/Specific Field	
	NOT EMPLOYED	
		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"/>	A	Check		08/01/2022	\$ 75.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
GRANT FOX P.O. BOX 628 ELON, NC 27244	DESIGNER	
	c. Employer's Name/Specific Field	
	SELF	
		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"/>	A	Check		08/01/2022	\$ 75.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
TERESA M FRAZIER 1314 BOONE ROAD BURLINGTON, NC 27217	OWNER/PRESIDENT	
	c. Employer's Name/Specific Field	
	FRAZIER HAULING AND GRADING	
		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"/>	A	Check		08/01/2022	\$ 150.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page \$ 300.00

5. Total of ALL CRO-1210 Pages \$ 85,183.50
(This total must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 funds, if applicable)					2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
STEVEN FRESHWATER 5256 SARTIN ROAD BURLINGTON, NC 27217			NOT EMPLOYED			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED		e. Election Sum to Date	
					\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (m/m/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/29/2022	\$ 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	
ALAN E GANT 1022 W DAVIS ST BURLINGTON, NC 27215			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		e. Election Sum to Date	
					\$ 7,500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (m/m/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/11/2022	\$ 5,000.00	
<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	
NARCIE GARCIA 947 LONGLEAF PINE PLACE MEBANE, NC 27302			RESEARCH PROJECT MANAGER			
			c. Employer's Name/Specific Field			
			UNC CHAPEL HILL		e. Election Sum to Date	
					\$ 75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (m/m/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/22/2022	\$ 75.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 5,275.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1210)					\$ 85,183.50	

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 Board, if applicable)		2. ID Number			
JOHNSON FOR SHERIFF ELECTION COMMITTEE					
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		
KEN GONZALEZ 952 SCENIC DRIVE GRAHAM, NC 27253		UNEMPLOYED			
		c. Employer's Name/Specific Field			
		UNEMPLOYED			
		e. Election Sum to Date			
		\$ 125.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input checked="" type="checkbox"/>	A	Check		03/15/2022	\$ 50.00
<input type="checkbox"/>	A	Check		07/29/2022	\$ 75.00
<input type="checkbox"/>					\$
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		
RICHARD W GUNN JR 2714 WEST FRONT STREET APT. - 4 BURLINGTON, NC 27215		REAL ESTATE BROKER			
		c. Employer's Name/Specific Field			
		GUNN & ASSOCIATES			
		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"/>	A	Check		08/18/2022	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
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		
HERMAN WILLIAM HAFEKEN 2878 GROVE PARK DRIVE BURLINGTON, NC 27215		NOT EMPLOYED			
		c. Employer's Name/Specific Field			
		NOT EMPLOYED			
		e. Election Sum to Date			
		\$ 125.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	A	Check		09/02/2022	\$ 25.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 350.00
5. Total of ALL CRO 1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1300)</i>					\$ 85,183.50

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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/and/or applicable)						2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE							
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	
RONALD LAWRENCE HALL 145 BALMORAL COURT BURLINGTON, NC 27215				LAWYER			
				c. Employer's Name/Specific Field			
				SELF			
						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"/>	A	Check		09/13/2022	\$ 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	
JAMES EDWARD HANFORD 1750 HANFORD ROAD GRAHAM, NC 27253				NOT EMPLOYED			
				c. Employer's Name/Specific Field			
				NOT EMPLOYED			
						e. Election Sum to Date	
						\$ 425.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		08/01/2022	\$ 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	
PHOEBE HARRISON 407 TRUITT DRIVE ELON, NC 27244				RENTAL PROPERTIES			
				c. Employer's Name/Specific Field			
				SELF			
						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"/>	A	Check		07/22/2022	\$ 150.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 400.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Drafted Summary Page CRO-1210)</i>						\$ 85,183.50	

Contributions from Individuals

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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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		
JOSEPH HAYWOOD 7203 MACKINTOSH PL SUMMERFIELD, NC 27358			SALES			
			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"/>	A	Check		08/01/2022	\$ 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		
SUE J HERRING 316 CEDAR STREET GRAHAM, NC 27253			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED			
			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"/>	A	Check		07/29/2022	\$ 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		
ZULA R HINSHAW 8502 KENLY DRIVE LIBERTY, NC 27298			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED			
			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"/>	A	Check		09/28/2022	\$ 100.00	
<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-110)					\$ 85,183.50	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

2. Committee Full Name (and Fund if applicable)						ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
LONNIE W HOLT 3736 BASS MOUNTAIN ROAD GRAHAM, NC 27253			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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 checked="" type="checkbox"/>	A	Check		03/08/2022	\$ 50.00	
<input type="checkbox"/>	A	Check		07/29/2022	\$ 150.00	
<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	
MICHAEL M HOLT 1907 SUNNYBROOK DRIVE BURLINGTON, NC 27215			INSURANCE SALES			
			c. Employer's Name/Specific Field			
			SELF		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"/>	A	Check		08/09/2022	\$ 500.00	
<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	
MIRAM D HOLT 2915 ARMFIELD AVENUE BURLINGTON, NC 27215			MANUFACTURING			
			c. Employer's Name/Specific Field			
			ZIMMERMANN DYNA YARN USA		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"/>	A	Check		08/01/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 800.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on the 6 of Detailed Summary Page CRO-1210)</i>					\$ 85,183.50	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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(s) if applicable)						2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE							
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	
PAUL C HOLT 140 RANDOM LANE BURLINGTON, NC 27215				MANUFACTURING ENGINEER			
				c. Employer's Name/Specific Field			
				BIO UNIV		e. Election Sum to Date	
						\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		08/18/2022	\$ 55.00		
<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 M HOLT 3521 GUILFORD COUNTY FARM ROAD ELON, NC 27244				CONSTRUCTION			
				c. Employer's Name/Specific Field			
				SELF EMPLOYED		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"/>	A	Check		07/19/2022	\$ 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	
ISSAC HOLT III 2730 ISSAC HOLT TRAIL GRAHAM, NC 27253				NOT EMPLOYED			
				c. Employer's Name/Specific Field			
				NOT EMPLOYED		e. Election Sum to Date	
						\$ 2,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		07/11/2022	\$ 1,000.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1,305.00	
5. Total of ALL CRO 1210 Pages						\$ 85,183.50	
<i>(This line must be on the 6. of Detailed Summary Page CRO 1200)</i>							

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)						ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
2. 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 HOOKS 4548 EAST GREENSBORO-CHAPEL HILL ROAD GRAHAM, NC 27253			NOT EMPLOYED			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED		e. Election Sum to Date	
					\$ 225.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/29/2022	\$ 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	
DAVID HORNADAY 7071 COBLE MILL ROAD SNOW CAMP 27349, NC			TEXTILES			
			c. Employer's Name/Specific Field			
			SELF		e. Election Sum to Date	
					\$ 350.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		08/09/2022	\$ 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	
F D HORNADAY III 7162 COBLE MILL RD SNOW CAMP, NC 27349			OWNER			
			c. Employer's Name/Specific Field			
			KNITWEAR FABRICS		e. Election Sum to Date	
					\$ 6,600.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/29/2022	\$ 3,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 3,350.00	
5. Total of ALL CRO-1210 Pages					\$ 85,183.50	
<i>(This line must be on the last Detailed Summary Page CRO-1210)</i>						

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE							
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	
DENIS JEFFERSON 3255 HERRITAGE LANE BURLINGTON, NC 27215				NOT EMPLOYED			
				c. Employer's Name/Specific Field			
				NOT EMPLOYED			
						e. Election Sum to Date	
						\$ 700.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		09/06/2022	\$ 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	
HERMAN JOHNSON P.O. BOX 280 HAW RIVER, NC 27258				CONTRACTOR			
				c. Employer's Name/Specific Field			
				BURLINGTON MECHANICAL CONTRACTORS			
						e. Election Sum to Date	
						\$ 225.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		08/01/2022	\$ 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	
MARK A JOHNSON 4066 SOUTH CHURCH STREET BURLINGTON, NC 27215				DEPUTY SHERIFF			
				c. Employer's Name/Specific Field			
				ACSO			
						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"/>	A	Check		07/29/2022	\$ 150.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 350.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on the 6th Detailed Summary Page CRO-1100)</i>						\$ 85,183.50	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

2. Committee Full Name (and fund if applicable)						2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE							
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	
DORIS L JONES 1701 PARHAM DRIVE GRAHAM, NC 27253				UNEMPLOYED			
				c. Employer's Name/Specific Field			
				UNEMPLOYED		e. Election Sum to Date	
						\$ 225.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		07/29/2022	\$ 225.00		
<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	
RICHARD THOMAS JONES 3067 HERITAGE LANE BURLINGTON, NC 27215				REALTOR			
				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"/>	A	Check		08/09/2022	\$ 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	
JOHN M JORDAN P.O. BOX 128 SAXAPAHAW, NC 27340				NOT EMPLOYED			
				c. Employer's Name/Specific Field			
				NOT EMPLOYED		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"/>	A	Check		08/01/2022	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 575.00	
5. Total of ALL CRO-1210 Pages						\$ 85,183.50	
<i>(This line must be on the 6 of Detailed Summary Page CRO-1100)</i>							

Contributions from Individuals

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 legal name if applicable)						2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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 A KEIMIG 445 FOE;DSTPME DRIVE BURLINGTON, NC 27215			CONSULTANT			
			c. Employer's Name/Specific Field			
			THE KEIMIG GROUP			
			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"/>	A	Check		08/11/2022	\$ 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		
MICHAEL TODD KING 1140 GIBSONVILLE-OSSIPEE ROAD ELON, NC 27244			HVAC SERVICE MANAGER			
			c. Employer's Name/Specific Field			
			CHISHOLM SERVICE, INC.			
			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"/>	A	Check		08/01/2022	\$ 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		
LISA F KIRKPATRICK 2040 ENGLEMAN COURT BURLINGTON, NC 27215			NOT EMPLOYED			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED			
			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"/>	A	Check		08/09/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on the 6 of Detailed Summary Page CRO-1100)</i>					\$ 85,183.50	

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)						ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
HENRY K KIRKPATRICK JR 318 WEST ELM STREET GRAHAM, NC 27253			CONSTRUCTION			
			c. Employer's Name/Specific Field			
			TRIANGLE GRADING AND PAVING, 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"/>	A	Check		09/19/2022	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
5. 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	
RONALD G KIRKPATRICK JR 1987 S MAIN ST GRAHAM, NC 27253			OWNER			
			c. Employer's Name/Specific Field			
			TRIANGLE GRADING			
			e. Election Sum to Date			
					\$ 10,650.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		08/01/2022	\$ 300.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
9. 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	
MICKEY KLUTTZ 2611 SUMAC LANE BURLINGTON, NC 27215			CPA			
			c. Employer's Name/Specific Field			
			STOUT STUART MCGOWEN & KING LLP			
			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"/>	A	Check		08/09/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1,450.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 85,183.50	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Ball Name (and Fund if applicable)						2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE							
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	
ERNEST A KOURY JR P.O. BOX 850 BURLINGTON, NC 27215				OWNER			
				c. Employer's Name/Specific Field			
				CAROLINA HOSIERY MILLS			
						e. Election Sum to Date	
						\$ 4,500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		08/01/2022	\$ 2,000.00		
<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	
MARY ANN KOURY 510 ENGLEMAN AVE BURLINGTON, NC 27215				UNEMPLOYED			
				c. Employer's Name/Specific Field			
				UNEMPLOYED			
						e. Election Sum to Date	
						\$ 4,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		07/01/2022	\$ 2,000.00		
<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	
TENNA M KOURY P.O. BOX 850 BURLINGTON, NC 27215				CO-OWNER CAROLINA HOSIERY MILLS			
				c. Employer's Name/Specific Field			
				CAROLINA HOSIERY MILLS			
						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"/>	A	Check		07/01/2022	\$ 1,000.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 5,000.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on the 6 of Detailed Summary Page CRO-1100)</i>						\$ 85,183.50	

Contributions from Individuals

Amendment
 Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

2. Committee Full Name (and fund applicable)						3. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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		
BRANDY HANFORD LAMBERT 1237 HANFORD HILLS ROAD GRAHAM, NC 27253			TEACHER			
			c. Employer's Name/Specific Field			
			ABSS	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"/>	A	Check		08/09/2022	\$ 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		
THOMAS A LANDER IV 2905 SOUTH FAIRWAY DRIVE BURLINGTON, NC 27215			BIO TECH			
			c. Employer's Name/Specific Field			
			TG THERAPUETICS	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"/>	A	Check		07/22/2022	\$ 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		
LISA FOSTER LANE 1045 BRIARCLIFF ROAD BURLINGTON, NC 27215			ADMINISTRATIVE ASSISTANT			
			c. Employer's Name/Specific Field			
			ELON 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	
<input type="checkbox"/>	A	Check		10/14/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 275.00
5. Total of ALL CRO 1210 Pages (This line must be on the 6 of Detailed Summary Page CRO-1100)						\$ 85,183.50

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

2. Committee Full Name (and fund if applicable)						ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
STAN LASHLEY 3474 OLD HILLSBOROUGH ROAD MEBANE, NC 27302				UNEMPLOYED		
				c. Employer's Name/Specific Field		
				UNEMPLOYED		
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"/>	A	Check		07/29/2022	\$ 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	
ARLENE S LASSITER 2773 UNION RIDGE ROAD BURLINGTON, NC 27217				FRONT OFFICE		
				c. Employer's Name/Specific Field		
				CLOVER GARDEN SCHOOL		
e. Election Sum to Date						
						\$ 85.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>	A	Check		08/31/2021	\$ 35.00	
<input type="checkbox"/>	A	Check		07/22/2022	\$ 50.00	
<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	
KENT LASSITER 3450 COUNTRY HILL LANE BURLINGTON, NC 27217				NOT EMPLOYED		
				c. Employer's Name/Specific Field		
				NOT EMPLOYED		
e. Election Sum to Date						
						\$ 65.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>	A	Check		08/31/2021	\$ 40.00	
<input type="checkbox"/>	A	Check		07/29/2022	\$ 25.00	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 150.00
5. Total of ALL CRO-1210 Pages						\$ 85,183.50
<i>This line must be on line C of Detailed Summary Page CRO-1200</i>						

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
MICHAEL EUGENE LASSITER 708 W. WILLOWBROOK DRIVE BURLINGTON, NC 27215			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED			
					e. Election Sum to Date	
					\$ 275.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/19/2022	\$ 125.00	
<input type="checkbox"/>	A	Check		07/29/2022	\$ 150.00	
<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	
RHONDA B LASSITER 708 W WILLOWBROOK DRIVE BURLINGTON, NC 27215			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED			
					e. Election Sum to Date	
					\$ 125.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/19/2022	\$ 125.00	
<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 G LAWS 2113 WALKER AVENUE BURLINGTON, NC 27215			CITY OF BURLINGTON RECREATION DEPARTMENT			
			c. Employer's Name/Specific Field			
			CITY OF BURLINGTON			
					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"/>	A	Check		10/02/2022	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1,400.00	
5. Total of ALL CRO-1210 Pages (This line must be on the last of Detailed Summary Page CRO-1210)					\$ 85,183.50	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 individual applicant)						2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE							
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	
MARTHA K LEATH 1620 LOY LANE BURLINGTON, NC 27215				UNEMPLOYED			
				c. Employer's Name/Specific Field			
				UNEMPLOYED		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"/>	A	Check		08/09/2022	\$ 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	
LARRY LEE 2334 IRIS DRIVE HAW RIVER, NC 27258				SOFTWARE ENGINEER			
				c. Employer's Name/Specific Field			
				LEIDOS		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"/>	A	Check		08/01/2022	\$ 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	
SANGHO LEE 793 BOONE STATION DRIVE BURLINGTON, NC 27215				OWNER			
				c. Employer's Name/Specific Field			
				LEE BROTHERS		e. Election Sum to Date	
						\$ 275.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		07/29/2022	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 550.00	
5. Total of ALL CRO-1210 Pages (This line must be on the 6 of Detailed Summary Page CRO-1210)						\$ 85,183.50	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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			
JOHNSON FOR SHERIFF ELECTION COMMITTEE					
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		
VICTORIA S LEWIS 2255 SADDLE CLUB ROAD BURLINGTON, NC 27215		UNEMPLOYED			
		c. Employer's Name/Specific Field			
		UNEMPLOYED			
		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"/>	A	Check		07/22/2022	\$ 150.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
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		
LEE LINENS 207 NORTH GURNEY STREET BURLINGTON, NC 27215		SALES REPRESENTATIVE			
		c. Employer's Name/Specific Field			
		BRAME			
		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"/>	A	Check		07/29/2022	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
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		
LARRY LOVE 1837 MORGAN HILL TRAIL BURLINGTON, NC 27217		NOT EMPLOYED			
		c. Employer's Name/Specific Field			
		NOT EMPLOYED			
		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"/>	A	Money Order		08/01/2022	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 300.00
5. Total of ALL CRO-1210 Pages <i>(This amount includes multiple entries on this page, CRO-1210)</i>					\$ 85,183.50

Contributions from Individuals

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 fundal app. name)						ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
2. 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	
CHRIS LOY 4740 FRIENDSHIP PATTERSON MILL ROAD BURLINGTON, NC 27215			SOFTWARE SALES			
			c. Employer's Name/Specific Field			
			BROADCOM INC.			
					e. Election Sum to Date	
					\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (m/m/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/29/2022	\$ 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	
MILLIE C LOY 2731 SOUTH CEDAR ROAD ALAMANCE, NC 27201			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED			
					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	
<input type="checkbox"/>	A	Check		09/19/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. 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	
LOUIS K LUDWIG 2144 CARROLL DR ELON, NC 27244			MANAGEMENT			
			c. Employer's Name/Specific Field			
			GLEN RAVEN MILLS			
					e. Election Sum to Date	
					\$ 625.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (m/m/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/11/2022	\$ 250.00	
<input type="checkbox"/>	A	Check		08/01/2022	\$ 150.00	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 650.00	
5. Total of ALL CRO-1210 Pages					\$ 85,183.50	
<i>(This line must be on line 6 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

2. Committee Full Name (and fund if applicable)						ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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 S LYNCH 2197 HOSKINS RD BURLINGTON, NC 27215				NOT EMPLOYED		
				c. Employer's Name/Specific Field		
				NOT EMPLOYED		
e. Election Sum to Date						
\$ 525.00						
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/22/2022	\$ 100.00	
<input type="checkbox"/>	A	Check		08/09/2022	\$ 100.00	
<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	
BILL MANESS 7561 RAYFIELD RD SNOW CAMP, NC 27349				OWNER		
				c. Employer's Name/Specific Field		
				POTHOLES USA LLC		
e. Election Sum to Date						
\$ 375.00						
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/29/2022	\$ 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	
STEVEN A MANN 3985 SOUTHERN MOORE TRAIL BURLINGTON, NC 27215				FIREFIGHTER		
				c. Employer's Name/Specific Field		
				CITY OF BURLINGTON		
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"/>	A	Check		08/01/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 500.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1210)</i>						\$ 85,183.50

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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)						ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
2. 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	
BARBARA MANTZ 1003 DUNLEIGH DRIVE BURLINGTON, NC 27215			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED			
					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"/>	A	Check		08/09/2022	\$ 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	
PHILLIP L MARTIN 3380 BASON ROAD MEBANE, NC 27302			SELF EMPLOYED			
			c. Employer's Name/Specific Field			
			SELF EMPLOYED			
					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"/>	A	Check		07/29/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. 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	
PRESTON MASSEY 185 TROLLINGWOOD ROAD HAW RIVER, NC 27258			CONSTRUCTION			
			c. Employer's Name/Specific Field			
			DODSON & COMPANY CONSTRUCTION			
					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"/>	A	Check		08/09/2022	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 750.00	
5. Total of ALL CRO 1210 Pages <i>(This line must be on the 6 of 6 pagged Summary Page CRO 1210)</i>					\$ 85,183.50	

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 kind if applicable)						2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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 C MAY P.O. BOX 178 ALAMANCE, NC 27201			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		07/29/2022	\$ 500.00	
<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	
CYNTHIA C MCINTYRE 2415 BLANCHE DRIVE BURLINGTON, NC 27215			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		07/29/2022	\$ 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	
GEORGE T MCLAMB JR 2539 GLENKIRK DR BURLINGTON, NC 27215			NOT EMPLOYED			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED		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"/>	A	Check		07/29/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 725.00	
5. Total of ALL CRO 1210 Pages <i>(This line must be on the 6th detailed Summary Page CRO 1210)</i>					\$ 85,183.50	

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
2. 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 I MCLEAN 416 CEDARWOOD DRIVE BURLINGTON, NC 27215				UNEMPLOYED		
				c. Employer's Name/Specific Field		
				UNEMPLOYED		
				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"/>	A	Check		07/29/2022	\$ 500.00	
<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 RAYMOND MCPHERSON 121 VICTORIA LANE GIBSONVILLE, NC 27249				OWNER		
				c. Employer's Name/Specific Field		
				MCPHERSONS CLEANERS		
				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"/>	A	Check		07/11/2022	\$ 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	
CHAPMAN T MCQUEEN 1002 E. WILLOWBROOK DRIVE BULRINGTON, NC 27215				DOCTOR		
				c. Employer's Name/Specific Field		
				LALMANCE EAR, NOSE AND THROAT		
				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"/>	A	Check		07/29/2022	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1,000.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1210)</i>					\$ 85,183.50	

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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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 MERRITT 972 A ELON OSSIPEE RD ELON, NC 27244			NOT EMPLOYED			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED	e. Election Sum to Date		
				\$ 650.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/19/2022	\$ 250.00	
<input type="checkbox"/>	A	Check		08/09/2022	\$ 150.00	
<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 P MONTGOMERY 1453 NORTH NC HWY 87 ELON, NC 27244			ASPHALT PAVER			
			c. Employer's Name/Specific Field			
			PRO-PAVE	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"/>	A	Check		08/01/2022	\$ 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		
RICHARD N MORGAN 2225 IRIS DRIVE HAW RIVER, NC 27258			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED	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"/>	A	Check		07/29/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 700.00	
5. Total of ALL CRO-1210 Pages (This line must be on the 6. of Recalled Statement Page (CRO-1200))					\$ 85,183.50	

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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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 CURTIS MORRIS 4673 STAFFORD MILL RD LIBERTY, NC 27298			MAJOR ALAMANCE COUNTY SHERIFFS OFFICE			
			c. Employer's Name/Specific Field ALAMANCE COUNTY SHERIFFS OFFICE			
					e. Election Sum to Date	
					\$ 790.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/29/2022	\$ 150.00	
<input type="checkbox"/>	A	Check		08/01/2022	\$ 150.00	
<input type="checkbox"/>					\$	
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 MORTON 1509 CHARLEIGH COURT ELON, NC 27244			SELF			
			c. Employer's Name/Specific Field DAVE'S DISCOUNT FURNITURE			
					e. Election Sum to Date	
					\$ 3,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/11/2022	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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	
JACK MORTON 3336 WATERFORD PLACE BURLINGTON, NC 27215			GENERAL CONTRACTOR			
			c. Employer's Name/Specific Field SELF			
					e. Election Sum to Date	
					\$ 600.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		08/01/2022	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1,500.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be an integer. Do not include Summary Page CRO-1210)</i>					\$ 85,183.50	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE							
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 D MOSER JR 1772 BELMONT ALAMANCE RD BURLINGTON, NC 27215				NOT EMPLOYED			
				c. Employer's Name/Specific Field			
				NOT EMPLOYED		e. Election Sum to Date	
						\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		08/01/2022	\$ 100.00		
<input type="checkbox"/>	A	Check		09/07/2022	\$ 100.00		
<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	
JUAN MUENCH 4 WINDSOR PLACE MEBANE, NC 27302				UNEMPLOYED			
				c. Employer's Name/Specific Field			
				UNEMPLOYED		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"/>	A	Check		08/01/2022	\$ 50.00		
<input type="checkbox"/>	A	Check		09/06/2022	\$ 50.00		
<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	
LISA NICHOLS 609 TRUITT DR ELON, NC 27244				UNEMPLOYED			
				c. Employer's Name/Specific Field			
				UNEMPLOYED		e. Election Sum to Date	
						\$ 8,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		07/01/2022	\$ 5,000.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 5,300.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on the 6 of Detailed Summary Page CRO-1210)</i>						\$ 85,183.50	

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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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
BRENDA NIPARTS 3311 COVENTRY PLACE BURLINGTON, NC 27215				UNEMPLOYED		
				c. Employer's Name/Specific Field		
				UNEMPLOYED		
						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"/>	A	Check		07/22/2022	\$ 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
HERB NIPARTS 3311 COVENTRY PLACE BURLINGTON, NC 27215				UNEMPLOYED		
				c. Employer's Name/Specific Field		
				UNEMPLOYED		
						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"/>	A	Check		07/22/2022	\$ 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
NANETTE NOEL 213 EVA DRIVE GIBSONVILLE, NC 27249				REALTOR		
				c. Employer's Name/Specific Field		
				EXP REALTY		
						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"/>	A	Check		08/01/2022	\$ 75.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 225.00
5. Total of ALL CRO 1210 Pages <i>(This line must be on the 6 of Detailed Summary Page CRO 1210)</i>						\$ 85,183.50

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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
MITCHELL OAKLEY 3605 BARNETT RD MEBANE, NC 27302			SELF			
			c. Employer's Name/Specific Field			
			MITCH OAKLEY TRUCKING			
			e. Election Sum to Date			
					\$ 470.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		08/01/2022	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. 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	
ROGER E OWENS 8110 COBLE MILL ROAD SNOW CAMP, NC 27349			FARMER			
			c. Employer's Name/Specific Field			
			SELF			
			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"/>	A	Check		07/11/2022	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
5. 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	
D DALE PAGE 359 ROBERTA DRIVE BURLINGTON, NC 27217			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED			
			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"/>	A	Check		08/01/2022	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 700.00	
5. Total of ALL CRO-1210 Pages (This line must be on the 6 of Detailed Statement Page CRO-1210)					\$ 85,183.50	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 candidate, if applicable)						2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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 PAPADIS 238 WEST FRONT STREET BURLINGTON, NC 27215			SELF			
			c. Employer's Name/Specific Field			
			BOSTON SANDWICH SHOP			
					e. Election Sum to Date	
					\$ 825.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/22/2022	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. 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 S PATTERSON 1395 FARM HOUSE TRAIL BURLINGTON, NC 27215			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED			
					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"/>	A	Check		10/12/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
5. 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	
JOHN W PATTERSON 4565 REID ROAD ELON, NC 27244			SALESMAN			
			c. Employer's Name/Specific Field			
			WORD ROCK DRILLS			
					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"/>	A	Check		07/22/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 500.00	
5. Total of ALL CRO-1210 Pages					\$ 85,183.50	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1210)</i>						

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 funds, if applicable)						2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE							
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	
JEREMY L PAUL 408 WESTRIDGE DRIVE BURLINGTON, NC 27215				DEPUTY SHERIFF			
				c. Employer's Name/Specific Field			
				ACSO		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"/>	A	Check		07/22/2022	\$ 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	
THERESA PAVONI 1140 KELSIO LANE BURLINGTON, NC 27215				NOT EMPLOYED			
				c. Employer's Name/Specific Field			
				NOT EMPLOYED		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"/>	A	Check		08/09/2022	\$ 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	
RICHARD W PHILLIPS 906 PARK DRIVE GIBSONVILLE, NC 27249				CONSTRUCTION			
				c. Employer's Name/Specific Field			
				SELF		e. Election Sum to Date	
						\$ 225.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		08/09/2022	\$ 150.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 425.00	
5. Total of ALL CRO-1210 Pages <i>(This line matches the total of Detailed Summary Page (CRO-110))</i>						\$ 85,183.50	

Contributions from Individuals

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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
C GORDON PIKE 3955 EULISS ROAD BURLINGTON, NC 27215			CLEARLAND WITH MACHINERY			
			c. Employer's Name/Specific Field			
			SELF		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"/>	A	Check		07/29/2022	\$ 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	
KATHY PIKE 2065 SOUTH NC HWY 54 GRAHAM, NC 27253			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		08/09/2022	\$ 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	
DAVID M PINSON 2305 SADDLE CLUB ROAD BURLINGTON, NC 27215			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		09/19/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 350.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on the 1st of Detailed Summary Page CRO-1210)</i>					\$ 85,183.50	

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 Election if applicable)						2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
RICKY PORTER 1008 EAST JOYNER STREET GIBSONVILLE, NC 27249			PLANT MANAGER			
			c. Employer's Name/Specific Field			
			GREEN LIFE WASTE		e. Election Sum to Date	
					\$ 2,189.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		10/12/2022	\$ 2,189.00	
<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	
SAM POWELL 1097 EAST LAKE DR BURLINGTON, NC 27215			OWNER			
			c. Employer's Name/Specific Field			
			POWELL ENTERPRISES		e. Election Sum to Date	
					\$ 5,250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/19/2022	\$ 250.00	
<input type="checkbox"/>	A	Check		07/29/2022	\$ 1,000.00	
<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	
DEWEY L RAINEY P. O. BOX 371 HAW RIVER, NC 27258			PRESIDENT			
			c. Employer's Name/Specific Field			
			SOUTHERN MICROSCOPE INC.		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"/>	A	Check		08/01/2022	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 3,689.00	
5. Total of ALL CRO-1210 Pages (This line must be on the 6 of Detailed Summary Page CRO-1100)					\$ 85,183.50	

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Pg 57 of 77

Amendment
 Yes No

1. Candidate Full Name (and Fund if applicable)
 JOHNSON FOR SHERIFF ELECTION COMMITTEE

2. ID Number

3. Contributor Information

Add Remove

a. Full Name, Mailing Address & Phone
 (include city, state, & zip)

H DEAN RAINEY
 2720 KINGSBURY COURT
 BURLINGTON, NC 27215

b. Job Title/Profession
 UNEMPLOYED

d. Comments

c. Employer's Name/Specific Field
 UNEMPLOYED

e. Election Sum to Date
 \$ 350.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	A	Check		07/29/2022	\$ 150.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information

Add Remove

a. Full Name, Mailing Address & Phone
 (include city, state, & zip)

MICHAEL DOC REAVES
 1810 BROADWAY DRIVE
 GRAHAM, NC 27253

b. Job Title/Profession
 BAILBONDS / REALTOR

d. Comments

c. Employer's Name/Specific Field
 SELF

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"/>	A	Check		07/29/2022	\$ 75.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information

Add Remove

a. Full Name, Mailing Address & Phone
 (include city, state, & zip)

FAIRFAX REYNOLDS
 P.O. BOX 1432
 BLOWING ROCK, NC 28605

b. Job Title/Profession
 NOT EMPLOYED

d. Comments

c. Employer's Name/Specific Field
 NOT EMPLOYED

e. Election Sum to Date
 \$ 1,500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	A	Check		08/01/2022	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line must be on the 6th Detailed Summary Page CRO-1210)

\$ 725.00
 \$ 85,183.50

CRO-1210

NC State Board of Elections

April 2007

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 Individual Appointments)						2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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		
JANICE A RICHARDSON 1541 GIBSONVILLE/OSSIPEE ROAD ELON, NC 27244 (336) 212-2257			OWNER			
			c. Employer's Name/Specific Field	e. Election Sum to Date		
			BEST ELECTRIC OF BURLINGTON, INC.			
				\$ 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"/>	A	Check		08/11/2022	\$ 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		
DENNIS P RIDDELL 6343 BEALE ROAD SNOW CAMP, NC 27349			NC HOUSE OF REPRESENTATIVES			
			c. Employer's Name/Specific Field	e. Election Sum to Date		
			STATE OF NC			
				\$ 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"/>	A	Check		08/09/2022	\$ 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		
RICHARD LYNN RINEY 4056 JIMMY BOWLES ROAD ELON, NC 27244			UNEMPLOYED			
			c. Employer's Name/Specific Field	e. Election Sum to Date		
			UNEMPLOYED			
				\$ 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"/>	A	Check		08/11/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 500.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on the Confidential Summary Page, CRO-1100)</i>					\$ 85,183.50	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 home telephone)						2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
2. 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	
PETER G RITZ 205 SERENDIPITY DRIVE GRAHAM, NC 27253			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		07/29/2022	\$ 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	
CAM C ROBERTS 4144 RURAL RETREAT ROAD BURLINGTON, NC 27215			CONSTRUCTION			
			c. Employer's Name/Specific Field			
			C.C.ROBERTS CONSTRUCTION		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"/>	A	Check		08/01/2022	\$ 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	
TINA ROBERTS 1892 ELMWOOD DRIVE GRAHAM, NC 27253			HAVAC			
			c. Employer's Name/Specific Field			
			SELF - RJR ELECTRIC HEATING& AIR		e. Election Sum to Date	
					\$ 225.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		08/03/2022	\$ 225.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 550.00	
5. Total of ALL CRO-1210 Pages <i>(this line must be on line for Detailed Summary Page CRO-1100)</i>					\$ 85,183.50	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
EDDIE ROGERS 409 SOUTH MAPLE STREET GRAHAM, NC 27253			LOAN OFFICER			
			c. Employer's Name/Specific Field			
			AMERICAN NATIONAL BANK		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"/>	A	Check		08/01/2022	\$ 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	
HOLLY W ROSE 1017 GEORGETOWNE DRIVE ELON, NC 27244			REALTOR			
			c. Employer's Name/Specific Field			
			ROSE REALTY GROUP		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"/>	A	Check		08/01/2022	\$ 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	
MARSHA WILSON RUDD 1854 BILLY T. TRAIL MEBANE, NC 27302			HOUSE CLEANER			
			c. Employer's Name/Specific Field			
			SELF		e. Election Sum to Date	
					\$ 3,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		10/12/2022	\$ 3,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 3,150.00	
5. Total of ALL CRO 1210 Pages (This line must be on the 5 of Detailed Summary Page CRO 1100)					\$ 85,183.50	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Committee Full Name (and kind if applicable)						ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
HARRY W SANFORD JR 1973 SHIRLEY DRIVE BURLINGTON, NC 27215 (336) 706-9723			REALTOR			
			c. Employer's Name/Specific Field			
			ADVANTAGE HOMEBUYERS		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"/>	A	Check		08/09/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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 F SAUNDERS 1826 SONJA COURT GRAHAM, NC 27253			TEACHER			
			c. Employer's Name/Specific Field			
			ALAMANCE COMMUNITY COLLEGE		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"/>	A	Check		08/01/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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	
LONNIE RAY SCHMID 1828 ROBBIE COURT GRAHAM, NC 27253			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		07/29/2022	\$ 50.00	
<input type="checkbox"/>	A	Check		09/12/2022	\$ 25.00	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 375.00	
5. Total of ALL CRO 1210 Pages <i>(This line must be on the 6 of Details Summary Page (CRO 1210))</i>					\$ 85,183.50	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
DONNELL E SCOTT III 601 E COLLEGE AVENUE ELON, NC 27244			TEXTILE SALES			
			c. Employer's Name/Specific Field			
			AMERITECH		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"/>	A	Check		08/01/2022	\$ 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	
RICHARD R SELF 3230 PREACHER HOLMES ROAD GRAHAM, NC 27253			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		08/01/2022	\$ 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	
MELVA SHARPE 603 NEWBERN COURT BURLINGTON, NC 27215			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		08/09/2022	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 550.00	
5. Total of ALL CRO 1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO 1210)</i>					\$ 85,183.50	

Contributions from Individuals

Amendment
 Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Committee Full Name (and fund if applicable)						ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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 SHARPE 2824 HUFFMAN MILL RD BURLINGTON, NC 27215			SELF			
			c. Employer's Name/Specific Field			
			BYNAM SHARPE MOTORS		e. Election Sum to Date	
					\$ 475.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/11/2022	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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	
BYNUM D SHARPE SR 2432 NORTH CHURCH STREET BURLINGTON, NC 27217			OWNER			
			c. Employer's Name/Specific Field			
			DOUG SHARPES CAROLINA HOMES OF BURLINGTON		e. Election Sum to Date	
					\$ 575.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		10/05/2022	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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	
EDDIE L SHATTERLY 2414 BLANCHE DRIVE BURLINGTON, NC 27215			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		08/01/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 850.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on last of Detailed Summary Page, CRO-1210)</i>						\$ 85,183.50

Contributions from Individuals

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, Ball Name, and Individual Name						ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
2. Contributor Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
DALE T SIMPSON 3925 YOUNT COURT BURLINGTON, NC 27215 (336) 227-5921			INSPECTOR			
			c. Employer's Name/Specific Field			
			SOUTHERN EXPOSURE USA, INC	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"/>	A	Check		08/18/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
SANDRA SMALL 221 SMALL CT BURLINGTON, NC 27215			NOT EMPLOYED			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED	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"/>	A	Check		08/09/2022	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
BRENDA K SMITH 3859 QUAIL RUN LANE BURLINGTON, NC 27215			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED	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"/>	A	Check		08/01/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 500.00
5. Total of ALL CRO 1210 Pages						\$ 85,183.50
<i>(This line must be on the 6th Detailed Summary Page (CRO-1210))</i>						

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Committee Full Name (and Fund if applicable)						ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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 I SMITH P.O. BOX 1854 BURLINGTON, NC 27217			NOT EMPLOYED			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED		e. Election Sum to Date	
					\$ 450.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/11/2022	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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 N SMITH 410 BROWN BARK LANE GIBSONVILLE, NC 27249			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		08/09/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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	
EDWARD P SOMERS 513 STILL RUN LANE GRAHAM, NC 27253			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		07/29/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 500.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on the last Detailed Summary Page CRO-1210)</i>					\$ 85,183.50	

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 Name and Contact Information						2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
SAMUEL STUBBLEFIELD 3216 COVENTRY PLACE BURLINGTON, NC 27215				VP		
				c. Employer's Name/Specific Field		
				STRATGIC BRANDS COMPANY		
				e. Election Sum to Date		
				\$ 800.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/19/2022	\$ 250.00	
<input type="checkbox"/>	A	Check		07/29/2022	\$ 150.00	
<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	
BEVERLY JEAN SUTTON 3711 MINE CREEK ROAD BURLINGTON, NC 27217				UNEMPLOYED		
				c. Employer's Name/Specific Field		
				UNEMPLOYED		
				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"/>	A	Check		07/22/2022	\$ 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	
MARY E TALTON 1921 BRIAR LANE GRAHAM, NC 27253				NOT EMPLOYED		
				c. Employer's Name/Specific Field		
				NOT EMPLOYED		
				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"/>	A	Check		07/22/2022	\$ 100.00	
<input type="checkbox"/>	A	Check		09/06/2022	\$ 100.00	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 700.00
5. Total of ALL CRO 1210 Pages						\$ 85,183.50

(This line must be on line 6 of Detailed Summary Page CRO-1210)

Contributions from Individuals

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 (Additions in blue)						ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
2. 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	
KENNETH T TEAGUE 800 ARBOR ROAD WINSTON SALEM, NC 27104			LEASING			
			c. Employer's Name/Specific Field SALEM LEASING TRAILER RENTALS			
					e. Election Sum to Date	
					\$ 5,600.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (m/m/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/19/2022	\$ 5,600.00	
<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	
RANDY TEAGUE 3341 PREACHER HOLMES ROAD GRAHAM, NC 27253			RANCHER			
			c. Employer's Name/Specific Field THOMAS TEAGUE			
					e. Election Sum to Date	
					\$ 125.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (m/m/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>	A	Check		03/04/2022	\$ 50.00	
<input type="checkbox"/>	A	Check		08/01/2022	\$ 75.00	
<input type="checkbox"/>					\$	
4. Total only this Page						
					\$ 6,175.00	
5. Total of ALL CRO-1210 Pages (This sum must be on line 5 of Detailed Summary Page CRO-1100)						
					\$ 85,183.50	

Contributions from Individuals

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 Name if Applicable) **JOHNSON FOR SHERIFF ELECTION COMMITTEE** ID Number

2. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) ROBIN R THOMAS 326 JUDGE SHARPE ROAD GRAHAM, NC 27253	b. Job Title/Profession UNEMPLOYED	d. Comments
	c. Employer's Name/Specific Field UNEMPLOYED	
	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"/>	A	Check		09/13/2022	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) CRAIG THOMPSON 2222 DELANEY DRIVE BURLINGTON, NC 27215	b. Job Title/Profession ATTORNEY AT LAW	d. Comments
	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"/>	A	Check		08/01/2022	\$ 150.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) MARY THOMPSON 804 W DAVIS ST BURLINGTON, NC 27215	b. Job Title/Profession SECRETARY	d. Comments
	c. Employer's Name/Specific Field LANDMARK SURVEYING INC	
	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"/>	A	Check		08/09/2022	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page **\$ 300.00**

5. Total of ALL CRO-1210 Pages **\$ 85,183.50**
(This line must be on the 6th Detailed Summary Page CRO-1210)

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Committee Full Name (and Fund) (Applicable)						ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
TIMOTHY THOMPSON 526 JUDGE SHARPE ROAD GRAHAM, NC 27253			RANCHER			
			c. Employer's Name/Specific Field			
			THOMAS TEAGUE FARMS		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"/>	A	Check		08/01/2022	\$ 175.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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	
DONALD BRUCE TICHY P.O. BOX 220 ALAMANCE, NC 27201-0220			SELF			
			c. Employer's Name/Specific Field			
			TICHY TRAIN GROUP		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"/>	A	Check		07/19/2022	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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	
KIMBERLY B TRAYNHAM 201 COACHLIGHT TRAIL BURLINGTON, NC 27215			SALES			
			c. Employer's Name/Specific Field			
			ALAMANCE GLASS		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"/>	A	Check		08/01/2022	\$ 75.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 500.00	
5. Total of ALL CRO 1210 Pages <i>(This line must be on the 6 of Detailed Summary Page (CRO-1210))</i>					\$ 85,183.50	

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, Ballot Name, and Candidate Name						2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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
VAN TURNER 642 SPANISH OAK ROAD ELON, NC 27244 (336) 213-1027				UNEMPLOYED		
				c. Employer's Name/Specific Field		
				UNEMPLOYED		
				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"/>	A	Check		08/18/2022	\$ 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
ZULMA VILA 3581 COPPER TRACE DRIVE HAW RIVER, NC 27258				UNEMPLOYED		
				c. Employer's Name/Specific Field		
				UNEMPLOYED		
				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"/>	A	Check		07/29/2022	\$ 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
DAVID PAUL WALKER 1722 JIMMIE KERR ROAD HAW RIVER, NC 27258				UNEMPLOYED		
				c. Employer's Name/Specific Field		
				UNEMPLOYED		
				e. Election Sum to Date		
				\$ 185.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>	A	Check		03/25/2022	\$ 25.00	
<input type="checkbox"/>	A	Check		08/01/2022	\$ 160.00	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 410.00	
5. Total of All CRO-1210 Pages (This line must be on line 5 of Detailed Summary Form CRO-1100)					\$ 85,183.50	

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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
JOSEPH STEVEN WALKER 2605 ELDERWOOD LANE BURLINGTON, NC 27215				RESOURCE SPECIALIST		
				c. Employer's Name/Specific Field		
				DUKE ENERGY CO.		
				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"/>	A	Check		07/22/2022	\$ 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	
RONALD DALE WALKER 824 INDIAN VALLEY DRIVE BURLINGTON, NC 27217				SECOND VICE PRESIDENT		
				c. Employer's Name/Specific Field		
				WELLS FARGO		
				e. Election Sum to Date		
				\$ 600.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/19/2022	\$ 250.00	
<input type="checkbox"/>	A	Check		08/01/2022	\$ 150.00	
<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	
RONNIE WALL 613 MEADOWOOD DR BURLINGTON, NC 27215				EDUCATOR		
				c. Employer's Name/Specific Field		
				THE BURLINGTON SCHOOL		
				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"/>	A	Check		08/09/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 600.00	
5. Total of ALL CRO 1210 Pages <i>(This line must be carried on Detailed Summary Page CRO-1100)</i>					\$ 85,183.50	

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Committee Name (and Fund, if applicable)						2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
Contributor Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
STEVE WALL 3538 SWEPSONVILLE-SAXAPAHAW ROAD GRAHAM, NC 27253			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		09/06/2022	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
Contributor Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JODY PAUL WALLACE 3249 CAPE FEAR TRAIL GRAHAM, NC 27253			DENTIST			
			c. Employer's Name/Specific Field			
			SELF		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"/>	A	Check		08/01/2022	\$ 75.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
Contributor Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
TONYA M WARREN 1699 WARREN FARM DRIVE BURLINGTON, NC 27217			VICE PRESIDENT			
			c. Employer's Name/Specific Field			
			AMWINS GROUP		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"/>	A	Check		08/01/2022	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 325.00	
5. Total of ALL CRO-1210 Pages					\$ 85,183.50	
<i>This line must be on the 6 of Detailed Summary Page (CRO-1210)</i>						

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 kind of committee)						2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE							
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 B WATKINS 2109 WRENN STREET BURLINGTON, NC 27215				UNEMPLOYED			
				c. Employer's Name/Specific Field			
				UNEMPLOYED			
				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"/>	A	Check		09/12/2022	\$ 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	
PAMELA C WELBORN P.O. BOX 593 ALAMANCE, NC 27201				NOT EMPLOYED			
				c. Employer's Name/Specific Field			
				NOT EMPLOYED			
				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"/>	A	Check		09/28/2022	\$ 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	
JAMES WHITE 4252 DICKEY MILL ROAD MEBANE, NC 27302				SALES			
				c. Employer's Name/Specific Field			
				SELF			
				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"/>	A	Check		08/01/2022	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 250.00	
5. Total of ALL CRO 1210 Pages <i>(This line must be on the 6 of Detailed Summary Page CRO 1210)</i>						\$ 85,183.50	

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 Identification						2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
FRANCES WILLIAMS 2124 CRESCENT DRIVE GRHAM, NC 27253			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		07/29/2022	\$ 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	
ROMAN WILLIAMS 2124 CRESCENT DRIVE GRAHAM, NC 27253			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		07/29/2022	\$ 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	
CAROL WILLIAMSON 2802 SNUG HARBOR BURLINGTON, NC 27215			NOT EMPLOYED			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED		e. Election Sum to Date	
					\$ 140.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>	A	Check		12/02/2021	\$ 50.00	
<input type="checkbox"/>	A	Check		08/09/2022	\$ 50.00	
<input type="checkbox"/>	A	Check		09/06/2022	\$ 40.00	
4. Total only this Page					\$ 240.00	
5. Total of ALL CRO 1210 Pages					\$ 85,183.50	
<i>(This line must be on back of Detailed Summary Page CRO 1210)</i>						

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Committee Full Name (and fund, if applicable)						P.D. Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE							
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 V WISDO JR 1205 COPPERSTONE VILLAGE DRIVE MEBANE, NC 27302				UNEMPLOYED			
				c. Employer's Name/Specific Field			
				UNEMPLOYED		e. Election Sum to Date	
						\$ 125.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input checked="" type="checkbox"/>	A	Check		03/15/2022		\$ 50.00	
<input type="checkbox"/>	A	Check		08/01/2022		\$ 75.00	
<input type="checkbox"/>						\$	
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	
CAROLYN WOOD 104 TURNBURY PLACE ELON, NC 27244				UNEMPLOYED			
				c. Employer's Name/Specific Field			
				UNEMPLOYED		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"/>	A	Check		07/29/2022		\$ 75.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
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	
JOSEPH WOOD 104 TURNBURY PLACE ELON, NC 27244				UNEMPLOYED			
				c. Employer's Name/Specific Field			
				UNEMPLOYED		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"/>	A	Check		07/29/2022		\$ 75.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 225.00	
5. Total of ALL CRO 1210 Pages (This line must be on the 6th Detailed Summary Page, CRO 1210)						\$ 85,183.50	

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
ELAINE WORDSWORTH 111 WEST CHURCH STREET NASHVILLE, NC 27856				UNEMPLOYED		
				c. Employer's Name/Specific Field		
				UNEMPLOYED		
				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"/>	A	Check		10/03/2022	\$ 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	
STEVE WORDSWORTH 111 WEST CHURCH STREET NASHVILLE, NC 27856				SELF		
				c. Employer's Name/Specific Field		
				CPFRM LLC		
				e. Election Sum to Date		
				\$		4,000.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		10/03/2022	\$ 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	
DOYLE DEAN WYRICK 2020 MILLS BASON COURT GRAHAM, NC 27253				UNEMPLOYED		
				c. Employer's Name/Specific Field		
				UNEMPLOYED		
				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"/>	A	Check		07/29/2022	\$ 150.00	
<input type="checkbox"/>	A	Check		09/28/2022	\$ 100.00	
<input type="checkbox"/>	A	Check		10/05/2022	\$ 150.00	
4. Total only this Page					\$ 2,400.00	
5. Total of ALL CRO 1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO 1210)</i>					\$ 85,183.50	

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 Kind (if applicable)						2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
MATTHEW OWEN YATES 614 KIRBY STREET RALEIGH, NC 27606			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		08/09/2022	\$ 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	
SARAH ZIMMERMAN 427 COOK ROAD ELON, NC 27244 (336) 449-5752			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		08/09/2022	\$ 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	
WORTH ZIMMERMAN 427 COOK ROAD ELON, NC 27244			UNEMPLOYED			
			c. Employer's Name/Specific Field			
			UNEMPLOYED		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"/>	A	Check		08/09/2022	\$ 75.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 250.00	
5. Total of ALL CRO 1210 Pages (this line must be in line 1 of Detailed Summary Page CRO 1210)					\$ 85,183.50	

Contributions from Other Political Committees pg 1 of 1

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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

Committee Name (Candidate or Issue)		ID Number		
JOHNSON FOR SHERIFF ELECTION COMMITTEE				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		
COMMITTEE TO ELECT JIM BUTLER 520 MEADOWOOD DRIVE BURLINGTON, NC 27215		c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
		d. Comments		
		e. Election Sum to Date \$ 250.00		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
A	Check		08/01/2022	\$ 250.00
				\$
				\$
Total on this page				\$ 250.00
Total of ALL CRO-1230 pages				\$ 250.00

CRO-1230

NC State Board of Elections

April 2007

Disbursements

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

Committee Full Name (and fund if applicable)						ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
<input type="checkbox"/> Operating Expenses <input checked="" type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
a. Full Name, Mailing Address & Phone (include city, state, & zip) DENNIS RIDDELL FOR NC HOUSE 64 6343 BEALE RD SNOW CAMP, NC 27349						
b. Coordinated Committee Name						d. Comments
c. Level Registered (Specify)						
<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:						e. Election Sum-to-Date
						\$ 2,570.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	D	10/18/2022	\$ 320.00		
				\$		
Total on this page						\$ 320.00
(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)						\$ 320.00
PURPOSE CODES (see detailed expenditure code in (c))						
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						
(This line requires detailed explanation in required remarks item (k))						

Disbursements

Amendment
 Yes No

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)
 JOHNSON FOR SHERIFF ELECTION COMMITTEE

2. ID Number

3. Type of Disbursement (Please list separate CRO-1310 forms for each type of disbursement)
 Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) ACCELERATED GRAPHICS, LLC P. O. BOX 2658 BURLINGTON, NC 27216	b. Coordinated Committee Name	d. Comments
	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
		\$ 4,263.06

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A	Check	O	08/29/2022	\$ 2,017.04	HATS/SHIRTS
A	Check	O	09/15/2022	\$ 1,349.32	NAIL FILES

5. Payee Information Add Remove

ADVERTISING

a. Full Name, Mailing Address & Phone (include city, state, & zip) ACCELERATED GRAPHICS, LLC P. O. BOX 2658 BURLINGTON, NC 27216	b. Coordinated Committee Name	d. Comments
	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
		\$ 4,263.06

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A	Check	O	10/14/2022	\$ 691.74	HATS
				\$	

6. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) ALAMANCE COUNTY CATTLEMENS ASSOCIATION 3624 DR. PICKETT ROAD BURLINGTON, NC 27215	b. Coordinated Committee Name	d. Comments
	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
		\$ 750.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A	Check	C	08/24/2022	\$ 250.00	BUILDING RENT FOR
A	Check	O	10/03/2022	\$ 500.00	FUNDRAISING EVENT RENT FOR FUNDRAISING EVENT

5. Total only this Page \$ 4,808.10

6. Total of ALL CRO-1310 Pages \$ 120,087.63

(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)

- 7. Purpose Codes (List detailed expenditure code in the 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

Disbursements

Amendment
 Yes No

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)						ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
2. Type of Disbursement (Please use separate sheets 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						
3. 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	
ALAMANCE NEWS 114 WEST ELM STREET GRAHAM, NC 27253						
			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:			
					\$ 12,984.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	A	09/12/2022	\$ 1,598.00	ADVERTISING	
A	Check	A	10/01/2022	\$ 6,093.00	ADVERTISING	
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	
ALAMANCE NEWS 114 WEST ELM STREET GRAHAM, NC 27253						
			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:			
					\$ 12,984.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	A	10/13/2022	\$ 2,397.00	ADVERTISING	
				\$		
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	
ARROWHEAD GRAPHICS 508 HOUSTON ST GREENSBORO, NC 27349						
			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:			
					\$ 69,287.78	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	B	07/19/2022	\$ 9,701.50	FUNDRAISER	
A	Check	B	08/31/2022	\$ 822.06	INVITATIONS/HANDOUT VOLUNTEER	
PACKETS AND POSTAGE						
5. Total only this Page					\$ 20,611.56	
6. Total of ALL CRO-1310 Pages					\$ 120,087.63	
<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 (Use 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

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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/Party Code)						2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
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	
ARROWHEAD GRAPHICS 508 HOUSTON ST GREENSBORO, NC 27349						
			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:			
					\$ 69,287.78	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	IO	10/10/2022	\$ 16,576.31	POATGE FOR PRINTED	
A	Check	B	10/10/2022	\$ 26,105.03	MATERIAL PRINTING FOR MAILERS	
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	
BENBASSAT DIGITAL CONSULTANTS 1852 BANKING STREET GREENSBORO, NC 27408						
			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:			
					\$ 800.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	A	08/31/2022	\$ 800.00	FULL PAGE AD -	
				\$	ADVERTISING	
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	
BURLINGTON SHRINE CLUB PLANTATION DRIVE BURLINGTON, NC 27253						
			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:			
					\$ 2,100.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	O	08/31/2022	\$ 1,000.00	DONATION	
5. Total only this Page					\$ 44,481.34	
6. Total of ALL CRO-1310 Pages					\$ 120,087.63	
(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)						
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						
Only require detailed explanation in comments field (k)						

Disbursements

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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 Email, if applicable)						2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE							
3. Type of Disbursement (Please check appropriate CRO-1310 form for details on disbursements)							
<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	
COURTNEY GEELS FOR CONGRESS POST OFFICE BOX 995 HILLSBOROUGH, NC 27278							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 1,000.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
A	Check	D	08/12/2022	\$ 1,000.00			
				\$			
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	
PHILLIP CRABTREE 2560 ADAMS FARM ROAD SNOW CAMP, NC 27349							
				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		
A	Check	O	09/12/2022	\$ 150.00	REFUND OF DONATION		
				\$	WRITTEN ON BUSINESS		
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	
CUMMINGS HIGH SCHOOL BAND BOOSTERS 2200 NORTH MEBANE STREET 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:			
						\$ 2,000.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
A	Check	O	08/24/2022	\$ 2,000.00	DONATION		
				\$			
5. Total only this Page						\$ 3,150.00	
6. Total of ALL CRO-1310 Pages						\$ 120,087.63	
(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)							
7. Purpose Codes (list detailed expenditure code math 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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
3. Type of Disbursement (Please indicate ALL that apply to 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	
EMILY PIERCE 534 SPAULDING STREET 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:			
					\$ 340.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	O	10/03/2022	\$ 340.00	ADVERTISING - GOLF TOURNAMENT	
				\$		
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	
FRIENDS OF NRA 11250 WAPLES MILL ROAD FAIRFAX, VA 22030						
			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:			
					\$ 1,500.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	O	08/18/2022	\$ 1,500.00	DONATION	
				\$		
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	
GOD ENCOUNTERS 519 HATCH STREET 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:			
					\$ 250.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	O	09/08/2022	\$ 250.00	DONATION	
				\$		
5. Total on this Page						\$ 2,090.00
6. Total of ALL CRO-1310 Pages						\$ 120,087.63
(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)						
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						
8. Code expense detailed explanation in required remarks field (k)						

Disbursements

Amendment
 Yes No

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

Committee Full Name (and Fund if applicable) JOHNSON FOR SHERIFF ELECTION COMMITTEE						ID Number
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) GRAHAM CINEMA POST OFFICE BOX 872 GRAHAM, NC 27253			b. Coordinated Committee Name		d. Comments	
			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 \$ 55.19	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	A	08/31/2022	\$ 55.19	ADVERTISING	
				\$		
Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) KIMBERS RESTAURANT 230 WEST MAIN STREET GIBSONVILLE, NC 27249			b. Coordinated Committee Name		d. Comments	
			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 \$ 1,535.06	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	C	07/19/2022	\$ 1,535.06	CAMPAIGN VOLUNTEERS DINNER	
				\$		
Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) TAYLOR E KIMREY 1942 SWEPSONVILLE ROAD GRAHAM, NC 27253 (336) 264-7286			b. Coordinated Committee Name		d. Comments	
			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 \$ 1,250.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	B	09/15/2022	\$ 1,250.00	CUSTOMIZING CUPS	
				\$		
7. Total only this Page					\$ 2,840.25	
8. 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)					\$ 120,087.63	
Purpose Codes (list detailed expenditure code in (k) 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(s)						

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 name if applicable)						ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
2. Type of Disbursement (Check one - multiple if applicable) (Use 01-03 for cash, 04-05 for disbursements)						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
3. Payer 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	
MAVERICK RADIO 1183 UNIVERSITY DRIVE #105-419 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:			
						\$ 2,305.20
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	A	09/06/2022	\$ 1,305.20	ADVERTISING	
				\$		
4. Payer 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	
MURRAY WILLIAMS 5176 LOWDER ROAD 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:			
						\$ 2,500.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	C	10/03/2022	\$ 2,500.00	BBQ FOR FUNDRAISER	
				\$		
4. Payer 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	
NEXT GENERATION GRIZZLIES % MONTREL WORTH 2708 FRESHWATER ROAD HAW RIVER, NC 27258			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:			
						\$ 2,500.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	O	09/06/2022	\$ 2,500.00	ADVERTISING	
				\$		
5. Total only this Page						\$ 6,305.20
6. Total of ALL CRO-1310 Pages						\$ 120,087.63
(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)						
7. Purpose Codes (List detailed expenditure code in (k) 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) (CRO-1100)	2. ID Number
JOHNSON FOR SHERIFF ELECTION COMMITTEE	

3. Type of Disbursement *(Please do not submit CRO-1100 forms for each type of Disbursement)*

Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

4. Payer Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
NORTH TOWER BAND 4609 THENDARA WAY RALEIGH, NC 27612		
	c. Level Registered (Specify)	
	<input type="checkbox"/> Federal <input type="checkbox"/> County:	e. Election Sum to Date
	<input type="checkbox"/> State <input type="checkbox"/> Municipality:	
		\$ 2,000.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A	Check	C	08/08/2022	\$ 2,000.00	BAND FOR FUNDRAISER
				\$	

4. Payer Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
OPERATION NORTH STATE 151 WINDEMERE COURT WINSTON SALEM, NC 27127		
	c. Level Registered (Specify)	
	<input type="checkbox"/> Federal <input type="checkbox"/> County:	e. Election Sum to Date
	<input type="checkbox"/> State <input type="checkbox"/> Municipality:	
		\$ 1,000.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A	Check	O	07/28/2022	\$ 1,000.00	DONATION
				\$	

4. Payer Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
ALAN PAGE 2300 YORK ROAD BURLINGTON, NC 27215		
	c. Level Registered (Specify)	
	<input type="checkbox"/> Federal <input type="checkbox"/> County:	e. Election Sum to Date
	<input type="checkbox"/> State <input type="checkbox"/> Municipality:	
		\$ 3,499.30

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A	Check	C	09/15/2022	\$ 2,418.34	VOTER LISTS AND INSURANCE
				\$	

5. Total only this Page \$ 5,418.34

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)

\$ 120,087.63

7. Purpose Codes (List detailed expenditure code in (k) 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 candidate, if applicable)						2. ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE							
3. Type of Disbursement (check one box) <i>(Use "Other" for all other disbursements)</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	
PIP PRINTING 825 S MAIN 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:			
						\$ 6,245.70	
5. Transaction Details							
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
A	Check	B	09/23/2022	\$ 1,692.79	FLYERS		
				\$			
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	
POYTHRESS TABLES TENTS AND CHAIRS P.O. BOX 56 GIBSONVILLE, NC 27249							
				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:			
						\$ 1,813.69	
5. Transaction Details							
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
A	Check	C	10/14/2022	\$ 1,813.69	TENT AND STAGE FOR FUNDRAISING 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	
SHRINE CLUB 904 PLANTATION 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:			
						\$ 2,600.00	
5. Transaction Details							
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
A	Check	O	09/12/2022	\$ 600.00	ADVERTISING		
				\$			
5. Total of this Page						\$ 4,106.48	
6. Total of ALL CRO-1310 Pages						\$ 120,087.63	
<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 (use detailed expenditure code in (b) 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							
8. Provide detailed explanation in required remarks in (k) above							

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	
JOHNSON FOR SHERIFF ELECTION COMMITTEE							
3. Type of Disbursement <i>(All disbursements are reported on this form except public disbursements)</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	
SINCLAIR BROADCAST GROUP 10706 BEAVER DAM ROAD HUNT VALLEY, MD 21030 (410) 568-1500				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:			
f. Account Code		g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A		Check	A	09/29/2022	\$ 15,000.00	TV ADVERTISING	
					\$		
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	
SOUTHERN ALAMANCE HIGH SCHOOL BAND BOOSTERS 631 SOUTHERN ALAMANCE HIGH SCHOOL ROAD GRAHAM, NC 27253				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:			
f. Account Code		g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A		Check	O	07/28/2022	\$ 500.00	DONATION	
					\$		
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	
SOUTHERN ALAMANCE HIGH SCHOOL BOOSTERS 631 SOUTHERN HIGH SCHOOL ROAD GRAHAM, NC 27253				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:			
f. Account Code		g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A		Check	O	09/06/2022	\$ 280.00	GOLF TOURNAMENT TEAM	
					\$		
5. Total only this Page						\$ 15,780.00	
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)						\$ 120,087.63	
7. Purpose Codes (Use detailed expenditure code in (b) 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							
8. Check, require detailed explanation in required remarks, if applicable							

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
JOHNSON FOR SHERIFF ELECTION COMMITTEE						
3. Type of Disbursement (Check <u>ONE</u> category. <u>ADD</u> or <u>REMOVE</u> for multiple disbursements)						
<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	
SPECTRUM REACH 200 CENTREPORT DRIVE SUITE 250 GREENSBORO, NC 27400			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:			
				\$ 4,999.70		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	A	10/06/2022	\$ 4,999.70	ADVERTISING	
				\$		
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	
SPRINGDALE AME CHURCH 5554 SOUTH NC 62 HIGHWAY 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:			
				\$ 380.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	O	08/01/2022	\$ 380.00	ADVERTISING AT GOLF TOURNAMENT	
				\$		
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	
STEVE ROSS FOR HOUSE 1314 MCCUISTON DRIVE BURLINGTON, NC 27215			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:			
				\$ 1,200.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	D	09/15/2022	\$ 1,000.00		
				\$		
5. Total only this Page					\$ 6,379.70	
6. Total of ALL CRO-1310 Pages					\$ 120,087.63	
<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 (Use detailed expenditure code in (b) 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(s)						

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) JOHNSON FOR SHERIFF ELECTION COMMITTEE						2. ID Number
3. Type of Disbursement (Please use separate sheets for items 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) THE CUTTING BOARD 2699 RAMADA ROAD BURINGTON, NC 27215				b. Coordinated Committee Name		d. Comments
				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 \$ 312.90
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	O	10/05/2022	\$ 312.90	ROOM RENTAL AND MEETING FOR	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) THE MEBANE ENTERPRISE 106 NORTH FOURTH STREET MEBANE, NC 27302				b. Coordinated Committee Name		d. Comments
				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 \$ 1,165.26
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	A	10/10/2022	\$ 1,165.26	ADVERTISING	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) WBAG RADIO PO BOX 2450 BURLINGTON, NC 27216				b. Coordinated Committee Name		d. Comments
				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 \$ 2,915.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	A	08/08/2022	\$ 200.00	ADVERTISING	
A	Check	A	09/02/2022	\$ 2,115.00	ADVERTISING	
5. Total only this Page						\$ 3,793.16
6. Total of ALL CRO-1310 Pages						\$ 120,087.63
(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)						
7. Purpose Codes (Use detailed expenditure code in (b.) 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

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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

Committee Name (Print and Attach Affidavit)						ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
WESTERN WORLD INSURANCE COMPANY 300 KIMBALL DRIVE SUITE 500 PARSIPPANY, NY 07054							
				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	
						\$ 323.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
A	Check	O	08/24/2022	\$ 323.50	INSURANCE FOR		
				\$	BUILDING FOR EVENT		
						\$ 323.50	
<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>						\$ 120,087.63	
PURPOSE CODES (Use detailed explanation in required attachment (b))							
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							

Aggregated Non-Media Expenditures

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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

JOHNSON FOR SHERIFF ELECTION COMMITTEE						
<input type="checkbox"/> Add	A	Draft	O	07/29/2022	\$ 11.00	BANK SERVICE CHARGE FOR JULY
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	A	Draft	O	08/31/2022	\$ 16.50	BANK FEE
<input type="checkbox"/> Remove						
					\$	27.50
					\$	27.50
E - Salaries		B* - Printing		D - To Another Candidate		
				G - Political Party		
		J - Penalties		Q* - Donations to Legal Expense Fund		
O* - Other						
* Codes require detailed explanation in required remarks field (g)						

In-Kind Contributions

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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.

Committee, Ballot Line, and District Name		ID Number	
JOHNSON FOR SHERIFF ELECTION COMMITTEE			
<input type="checkbox"/> Full Name, Mailing Address & Phone <input type="checkbox"/> Type of Contributor			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
LINDY BAKATSIAS 142 NORTH GRAHAM HOPEDALE ROAD BULRINGTON, NC 27217		<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	
		c. Comments	
		d. Election Sum to Date	
		\$ 4,247.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
MEAL		09/01/2022	\$ 4,147.00
			\$
			\$
Total only this Page		\$ 4,147.00	
Total of ALL CRO-1510 Pages		\$ 4,147.00	