Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. 3 0 2018 Do not use this form to update information.

1. Committee In	formation							TEACHER STEACH		D	
a. Full Name							and the law of the law		c. ID Number	Room	rt County
COMMITTEE TO	D ELECT WILI	JAM CHRISMC	N SHE	RIFF					ODCJOF		Elections
b. Mailing Addre	d. Date Filed										
PO BOX 157		04/29/20	10								
WASHINGTON,	NC 27889										
									e. Phone Numbe	er	
				,					252-944-4921		
2. Report Year	3. Period Star	t Date (mm/dd/)	y)	4. Period	End Da	ite (i	mm/dd/yy)	5. Treasu	rer Full Name		
2018	0	3/01/2018			04/21/2	2018		GARY CH	IRISMON		
6. Type of Comn		One)	9. Typ	e of Repor	t (c	heci	c only one	type of rep	port from one cat	egory)	
Candidate Can		-	Munic	ipal		Sta	te/County		Referendum		
Joint Fundraise	er 🔲 PA	C		Organizatio	mal		Organizatio	nal	Organization:	1	
☐ Referendum	PANELS -	al Expense Fund		Thirty-five	day		Quarterly		Pre-referendo	m	
7. Type of Fund		le, check one)		Pre-primar	y	X	First		☐ Final		
"Booster Fund	Water to the state of the state			Pre-election	n		Second		Supplemental	Final	
Building Fund				Pre-runoff			Third		☐ Annual		
Presidential El				Semi-annua	1		Fourth		Special Special		
☐ NC Public Carr	npaign Financing	Fund		Mid Ye	ear		Semi-annua	1			
				Year E	nd		Mid Ye	ar	10. Special Rep	ort Name	
Other:				Final			Year Es	nd			
8. Number of Fu	ndraisers this	Report		Special			Final				
	1						Special				
3. Account Infor					3. Acc	:OUR	t Informati	on			
a. Financial Insti	tution Full Na	me			a. Fins	ınci	al Institutio	on Full Naz	ne		
FIRST BANK											
b. Purpose		e. Account Cod	e		b. Pur	pose			c. Account Code		
COMMITTEE 1	TO ELECT		1								
WILLIAM	CHRISMON										
SHERIFF		d. Period Begin	Balan	ce					d. Period Begin	Balance	
		\$ 4,300.00							S		
CERTIFICATIO					warmen and and	POPULATION AND ADDRESS OF THE POPULA			I.		
I certify that th	ie Committee o	or Fund is in co	mpliand	ce with all a	pplical	ble p	provisions	of Article	22A, 22B & 22D-2	22M of	
Chapter 163 of	the NC Gener	al Statutes and	that no	funds are	commi	ngle	d with pro	hibited or	other non-disclo	ed	ĺ
funds. I furthe	er certify that t	his report is co	mplete,	true and c	orrect a	and	that I have	been train	ed by the NC Sta	te Board	
		1000		1		2		/			
	ARY CHRISMON	<u> </u>		CAM			SMON	/	04/29/20	18	
THE RESIDENCE OF THE PARTY OF T	inted Name of Si	igner	INCOMEDISTRATION OF THE PARTY O	Sign	ature of	App	ointed Treas	surer	Date		
FOR OFFICE US	SE ONLY										
Date Receive	-d:		-	Emplo	yee .		St		livery Method Normal Mail		
Date Postmar	rked:		onarie .	Emplo	yee .	-		- 8	Registered Mail Hand Delivered		
Date Scanner	d:			Employ	URR			i	Electronically Fi	led	
		**************************************	nona			-			Signer has not r	eceived	
Date Data En				Employ					mandatory train	ing	
Please Note	: This form ca	annot be used t	o amen	d committe	e info	mati	ion such as	the comm	iittee address, tre	asurer,	
	assistar	it treasurer, cus	todian	of books is	nformat	tion	, or accoun	t informati	on.	To the same of the	
Ye	ou must amen	d the Statement	of Org	anization (CRO-21	1004	A-E) to mak	e committe	ee changes.		



Amendment APR 3 0 2018 **Detailed Summary** ☐ Yes □ No Use this form to summarize all disclosure reporting forms and to total monetary information Beaufort County 3. D Number Board of Elections 1. Committee Full Name (and Fund if applicable) 2. Type of Report COMMITTEE TO ELECT WILLIAM 2018 First Quarter **ODCJOF** CHRISMON SHERIFF Total this Total this 2018 Start of Election Cycle: January 1, Reporting Period **Election Cycle** 4) Cash on Hand at Start 4.300.00 \$ 0.00 RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) \$ 138.00 138.00 6) Contributions from Individuals (CRO-1210) S 2.400.00 6,700.00 7) Contributions from Political Party Committees (CRO-1220) S 0.00 0.00 8) Contributions from Other Political Committees (CRO-1230) \$ 0.00 0.00 9) Loan Proceeds (CRO-1410) S \$ 0.00 0.00 (0) Refunds/Reimbursements to the Committee (CRO-1240) 5 0.00 0.00 11) Other Receipt Sources 11a) Interest on Bank Accounts 0.00 \$ (CRO-1250) \$ 0.00 11b) Contributions from Not-For-Profit Organizations \$ (CRO-1250) 5 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 8 0.00 11e) Exempt Purchase Price Sales 5 (CRO-1265) 5 0.00 0.00 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e) 2,538.00 6,838.00 EXPENDITURES 13) Disbursements 13a) Operating Expenditures (CRO-1310) S 5,550.46 5,550.46 13b) Contributions to Candidates/Political Committees (CRO-1310) 0.00 0.00 13c) Coordinated Party Expenditures (CRO-1310) 5 0.00 0.00 14) Aggregated Non-Media Expenditures (CRO-1315) \$ 0.00 0.00 15) Loan Repayments (CRO-1420) \$ 0.00 0.00 16) Refunds/Reimbursements from the Committee (CRO-1320) 0.00 0.00 17) In-Kind Contributions (CRO-1510) 5 S 0.00 0.00 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) S 5.550.46 5,550.46 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) \$ 1,287.54 \$ 1,287.54 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) S 0.00 0.00 26) Forgiven Loans (CRO-1440) 3 \$ 0.00 0.00 27) 48-Hour Notice Reports Sum (CRO-2220) 5 \$ 0.00 0.00

28) Contributions to be Refunded

(CRO-1215)

0.00

5 0.00

		outions from I	ndividuals Page From Individuals of \$	lof	1	Amendm Ves	ent No
1. Committe	e Full Name (and	Fund if applicable)		THE RESIDENCE OF THE PERSON OF THE	2. ID 1	Vumber	
COMMITTE	E TO ELECT WILI	LIAM CHRISMON SH	ERIFF		00	OCJOF	
3. Contribut	or Information						
a. Amend	h. Account Code	c. Form of Payment	d. In-Kind Description	a. Date (mm/dd	/yyyy)	f. Amoun	t
Add Remove	1	Cash		03/31/201	8	\$	40.00
Add Remove	1	Cash		03/27/201	8	\$	48.00
Add Remove	1	03/18/2018		50.00			
4. Total or	aly this Page				\$		\$138.00
	FALL CRO-12 tust be on line 5 of D	05 Pages etailed Summary Page	CRO-1100)		\$		\$138.00
CRO-1205		N	C State Board of Elections				April 2007



APR 3 0 2018

Beaufort County Board of Elections



Amendment APR 3 0 2018 **Contributions from Individuals** Pg 1 of Yes No Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used Beaufort County 2. ID Number Board of Flections 1. Committee Full Name (and Fund if applicable) COMMITTEE TO ELECT WILLIAM CHRISMON SHERIFF **ODCJOF** 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) RETIRED DERYL BASS c. Employer's Name/Specific Field 100 SEVERN CIRCLE CHOCOWINITY, NC 27817 NC HIGHWAY PATROL 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 Check 03/02/2018 5 200.00 5 5 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) RETIRED BILLY BROWN c. Employer's Name/Specific Field 7093 SLATESTONE ROAD WASHINGTON, NC 27889 NC HIGHWAY PATROL 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 Check 03/21/2018 250.00 5 5 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) COMPUTER CONSULTANT THOMAS CARTER c. Employer's Name/Specific Field 524 EAST 9TH STREET WASHINGTON, NC 27889 STRATIEGIC NETWORK e. Election Sum to Date CONSULTANTS 250.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k Amount Check 1 5 03/18/2018 250.00 S

4. Total only this Page

5. Total of ALL CRO-1210 Pages

700.00

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Amendmen PR 3 0 2018 **Contributions from Individuals** Pg 2 of 4 Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used uport County 2. ID Numbeard of Elections 1. Committee Full Name (and Fund if applicable) COMMITTEE TO ELECT WILLIAM CHRISMON SHERIFF ODCJOF 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) RETIRED WILLIAM COCHRAN JR c. Employer's Name/Specific Field 402 OAK DRIVE WASHINGTON, NC 27889 **TEACHER** 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 Check 04/05/2018 100.00 5 П S 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) FARMER STEVE GRIFFIN c. Employer's Name/Specific Field 1694 AVENUE ROAD WASHINGTON, NC 27889 **GRIFFIN 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 Check 03/07/2018 5 250.00 S S 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) FARMER FORREST HOWELL c. Employer's Name/Specific Field 1446 RIPP HIGHWAY PLYMOUTH, NC 27962 **HOWELL FARMS** 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 Check 1 П 03/21/2018 5 300.00 5 S

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650.00

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i. Comi	nutee Full Name	dividual contribution (and Fund if applicab	(e)				Z. III IVEE	aper		
COMMI	TTEE TO ELECT	WILLIAM CHRISMO	N SHERIFF				ODCJO	-		
	ributor Informati			Add						
	ame, Mailing Add de city, state, & z					ofession	d. Comme	ents		
	R MELTON			RETIR	ED					
	ST 2ND STREET			c. Emp	loyer's	Name/Specific Field	1			
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		h. Form of Payment	i. In-Kind Des	cription	1	j. Date (mm/dd/yyyy)	k. Am	ount		
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	AS OLSEN ST 2ND STREET			c. Emp	loyer's	Name/Specific Field	1			
	NGTON, NC 2788	89		HILLSIDE FUNERAL HOME						
							e. Election Sum to Date			
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(include city, state, & zip)					FD					

KEVIN DAIL OWENS 4103 LIDAS FARM ROAD LA GRANGE, NC 28551				***************************************	r's Name/Specific Field WAY PATROL	e. Election Sum to Date		to Date
						S		250.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind De	cription	j. Date (mm/dd/yyyy))	k. Amount	
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							S	
				-			S	
4. Tot	al only this Pa	ge				S		950.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)								2,400.00



2,400.00

April 2007

\$

Amendment APR 3 0 2018 Contributions from Individuals Contributions from Individuals

Pg 4 of 4 Yes Beaufort County

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used. 2. ID Number 1. Committee Full Name (and Fund if applicable) COMMITTEE TO ELECT WILLIAM CHRISMON SHERIFF ODCJOF 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) ENGINEER ROBERT REES c. Employer's Name/Specific Field 24 ROBBINS LANE WASHINGTON, NC 27889 NAVAL RESEARCH e. Election Sum to Date **FACILITY** 100.00 £ Prior g. Account Code h. Form of Payment L In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check 03/23/2018 \$ 100.00 \$ \$ 4. Total only this Page 100.00 \$

NC State Board of Elections

5. Total of ALL CRO-1210 Pages

CRO-1210

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



APR 3 0 2018

Disbursements Use this form to report expenditures from the committee for operating committees and coordinated party expenditures	Pg 1 of 4 Yes RealFort Count g expenses, contributions to candidate/political d of Election
L. Committee Full Name (and Fund if applicable)	2. ID Number
COMMITTEE TO ELECT WILLIAM CHRISMON SHERIFF	ODCJOF

1. Committee Fr	all Name (and Fund i	if applicable)							2. ID Number	
COMMITTEE TO	ODCJOF									
3. Type of Disbu	rsement (Please	use separate CRC)-1310	forms f	or eac	k typ	e of Disbu	rseme	nt)	
Operating Exp	enses 🔲 Cont	ributions to Candidat	es/Polit	ical Com	mittees		☐ Coc	ordinat	ed Party Expenditu	res
4. Payee Inform:				-	Access to the second		nove			
	ailing Address & Ph	one		b. Coor	dinate	d Co	mmittee Na	ame	d. Comments	
(include city, sta	te, & zip)									
AMAZON				-	- W1 - F		10 10 1			
SOUTH LAKE U				c. Level Registered (Specify) Federal County:						
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				Resett bracket			had atablearange	MALIE V.		***************************************
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The second secon	ailing Address & Pho	one	and the same of the same of				mmittee Na	ıme	d. Comments	
(include city, sta	te, & zip)				***************************************	***************************************				
BAKER BUILDIN	NG SUPPLY									
685 HWT 264 BY						tered	d (Specify)			
BELHAVEN, NC	27810			☐ Fed ☐ Stat			County:			·
				LI Stat	.e	·····	LI Municip	ality:	e. Election Sum	to Date
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4. Payee Informa				Add		Ren	nove			
	ailing Address & Pho	one		b. Coor	dinate	d Co	mmittee Na	ıme	d. Comments	
(include city, stat	te, & zip)				Milan					
BUILD A SIGN							- 10 (0)			
11525A STONE H	HOLLOW DRIVE			c. Level Registered (Specify) Grederal County:						
SUITE 100	7.50								e. Election Sum t	to Thata
AUSTIN, TX 787	58			bed Usas			had 1410thresp	anty.		10 Date
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	des (List detailed		in (h.)	above)						
A* - Media	B* - Printin	100		undrais	Sept.				her Candidate	
E - Salaries	F* - Equipme			litical Pa	-				Public Office Ex	
I - Postage O* Other	J - Penaltie	5	K* - U	Office Ex	penses	\$	Q* - De	onatio	on to Legal Expen	se Fund
	detailed explanation	n in required rem	arks f	ield (k)						



Disbursem	ients					pg	2 of	4	Amendmen	APR 30
Use this form to	report expenditures coordinated party ex	from the committe	ee for o	peratir	ng exper	ises, c	ontributi	ons to	candidate/polit	eaufort Co
committees and	coordinated party ex	penditures	anno anno pion			CANAL MANAGEMENT	Allere General Services		10)	oard of Elec
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ull Name (and Fund i	***************************************				***************************************			2. ID Number	
COMMITTEE	COMMITTEE TO ELECT WILLIAM CHRISMON SHERIFF									
3. Type of Disbu	rzement (Please	use separate CRO	1-1310	forms	for eac	h type	of Disbu	rseme	nt.)	
Operating Exp	penses 🔲 Cont	ributions to Candidat	es/Polit	ical Cor	nmittees	profesionario	☐ Co	ordinat	ed Party Expendit	vres
4. Payee Inform				Add		Remo	ve			
a. Full Name, M	ailing Address & Ph	one		b. Coo	rdinate	d Com	mittee N	ame	d. Comments	
(include city, sta	ite, & zip)	***************************************							Proceedings of the All Secretarion (Association (Association)	
BUILD A SIGN 11525A STONE SUITE 100 AUSTIN, TX 787	HOLLOW DRIVE			c. Lero	deral	Ľ	Specify) County Municip		e. Election Sum	471.28
6 Assaunt Cada	g. Form of Payment	h Purnosa Coda	2 Date		I.I./ammin.)	1: 3		l. D.	quired Remarks	
I LICCOLLE COLE	Debit Card		1	***************************************		1		1		
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Martin Company of the						S				
4. Payee Inform				Add		Remo	ve			
a. Full Name, Ma (include city, sta	ailing Address & Ph	one		b. Coo	rdinate	d Com	mittee N	ame	d. Comments	
1701 CAROLINA WASHINGTON				☐ Fe	deral	Ľ	Specify) I County I Municip		e. Election Sum	185.16
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AND THE REAL PROPERTY AND PROPERTY AND PERSONS ASSESSED.	ailing Address & Pho	one	- Bank		rdinate		mittee N	ime	d. Comments	
include city, sta		2- 120				***************		***********		1
LOWES 1701 CAROLINA WASHINGTON,	NC 27889			Fe Sta	deral ite	tered (Specify) County: Municip		e. Election Sum	711.02
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	des (List detailed	A CONTRACTOR OF THE PARTY OF TH	THE RESERVE THE REAL PROPERTY.	The second section is a second	The state of the s					
- Salaries F*-Equipment G			G - Po	Political Party H* - Holding				ner Candidate Public Office I n to Legal Expe		
* Codes require	detailed explanation	a in required rem	arks fi	ield (k)						



APR 3 0 2018 Amendment Disbursements Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political eaufort County Board of Elections committees and coordinated party expenditures I. Committee Full Name (and Fund if applicable) 2. ID Number COMMITTEE TO ELECT WILLIAM CHRISMON SHERIFF **ODCJOF** 3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) Contributions to Candidates/Political Committees Operating Expenses Coordinated Party Expenditures 4. Payee Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) LUKE DONAHUE c. Level Registered (Specify) 11205 HELBER ROAD ___ Federal County: LOGAN, OH 43138 ☐ State Municipality: e. Election Sum to Date (740) 385-6626 752.37 f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks 1 Debit Card В 03/29/2018 752.37 RULERS FOR ADVERT. 4. Payee Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) SIGNSONTHECHEAP.COM c. Level Registered (Specify) 11525A STONE HOLLOW DRIVE _ Federal County: SUITE 100 C State Municipality: e. Election Sum to Date AUSTIN, TX 78758 5 524.12 f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks Debit Card A S 03/29/2018 524.12 SIGNS S 4. Payee Information □ Add □ Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) US POST OFFICE c. Level Registered (Specify) 222 WEST 2ND STREET ☐ Federal County: WASHINGTON, NC 27889 ☐ State Municipality: e. Election Sum to Date (800) 275-8777 50.00 f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks Debit Card 04/03/2018 5 50.00 S 5. Total only this Page 5 1,326.49 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) 5,550.46 (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) B* - Printing A* - Media C* - Fundraising D - To Another Candidate E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses

O* Other

I - Postage

J - Penalties

K* - Office Expenses

Q* - Donation to Legal Expense Fund



PROVINCE OF THE PROPERTY OF TH	o report expenditures d coordinated party e		ee for operating exper	Pg4 of	lund	APR 3 0 201 adment Beaution Count Beginical Electio
	full Name (and Fund				2. ID Nu	mber
COMMITTEE	TO ELECT WILLIAM	CHRISMON SHER	RIFF			ODCJOF
3. Type of Dish		use separate CR(0-1310 forms for eacl	type of Disbu	rsement.)	
Operating Ex	openses 🔲 Cont	ributions to Candida	tes/Political Committees	□ Co	ordinated Party E	xpenditures
4. Payee Inform	nation		☐ Add ☐	Remove		SECRETARIA DE LA CONTRACTORIA DE
a. Full Name, N	failing Address & Ph	one	b. Coordinate	d Committee N	ame d. Comm	ents
(include city, st	ate, & zip)					
PO BOX 1788	NEWSMEDIA, LLC 1, NC 27889-1788	c. Level Regis Federal State	tered (Specify) County Municip		n Sum to Date 1,087.40	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	i. Amount	k Required Re	marks
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5. Total only th	is Page				5	1,087.40
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A*-Media E - Salaries	B* - Printin F* - Equipme	g	C* - Fundraising G - Political Party		Another Candi olding Public C	date Office Expenses

* Codes require detailed explanation in required remarks field (k) CRO-1310

I - Postage

O* Other

J - Penalties

NC State Board of Elections

K* - Office Expenses

December 2009

Q* - Donation to Legal Expense Fund