| Disclosure Re | | | | | | | | dement Yes No |
|--|-------------------------------|-----------------------|------------------------------|-------------|-------------|----------------------|---|--|
| | eral report and committee | informat | ion, must be | signed | and sub | mitted along with | other d | etailed forms. |
| | to update information | | | | | | | |
| 1. Committee Inform | nation | A COURSEA | | | | | c I | D Number |
| a. Full Name Elect Susan D. Johns | son | | | | | | | Divamber |
| Bicci Susuii B. voiiii | | | | | | | | |
| | ide City, State and Zip Code) | | | | | 是一个全国的数字。 | d. I | Date Filed |
| 103 Mallard Dr. Currituck, NC 27929 | | | | | | | | 10/18/2014 |
| 277 Green View Rd. Moyock, NC 27958 | , | | | | | | e. P | Phone Number |
| | | | | | | | | 252-232-3552 |
| 2. Report Year | 3. Period Start Date (mm/c | ld/yy) | 4. Period (mm/dd/yy) | End Da | te | 5. Treasurer Fu | ll Nam | e |
| 2014 | 03/03/2014 | | | 8/2014 | | Lindsay Voorhe | es | the second to a control of the contr |
| 6. Type of Committee | ee (Check One) | 9. Tvi | e of Report | (ci | heck on | ly one type of repo | rt from | one category) |
| Candidate Campa | | Munici | | | State/C | | | ferendum |
| PAC | Referendum | | Organizationa | 1 | \boxtimes | Organizational | | Organizational |
| Independent | Joint Fundraiser | | Thirty-five day | y | | Quarterly | | Pre-referendum |
| Expenditure Legal Expense Fu | nd | | | | | | | |
| 7. Type of Fund | (if applicable, check one) | | Pre-primary | | | First | | Final |
| "Booster Fund" | | | Pre-election | | | Second | | Supplemental Final |
| Building Fund | | | Pre-runoff | | \boxtimes | Third | ᅵ닏 | Annual |
| | | | Semi-annual | | Ш | Fourth | $ \sqcup$ | Special |
| | | lH | Mid Year | - 1 | | Semi-annual Mid Year | 10 | . Special Report Name |
| Other: | | lH | Year End Final | 1 | H | Year End | | Quarter |
| 8. Number of Fundr | raisars this Danart | 11 | Special | | H | Final | ' | Quarter |
| 8. Number of Fundi | | 🗀 | Бреста | | | Special | | |
| 11. Account Informa | 0 | Property of the Party | Participation of the last in | 11 Ac | | Information | | |
| a. Financial Institution F | | | | | | titution Full Name | | |
| LGFCU | un rume | | MARCINES - NOT COST CON | LGFC | | | A 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 | AND AND DEPOSITE OF THE PROPERTY OF THE PROPER |
| b. Purpose | c. Account Code | | | b. Purp | | | c. | Account Code |
| Campaign | 01 | | | Saving | gs | | | 02 |
| Donations & | | | | | | | | |
| Expenses | d. Period Begin Balance | • | | | | | d. | . Period Begin Balance |
| | \$ 75.00 | | | | | | \$ | 25.00 |
| CERTIFICATION | | | | | | | | |
| I certify that the Com | mittee or Fund is in compli | ance wi | th all applica | ible prov | isions | of Article 22A, 22I | 3, & 22 | D-22M of Chapter 163 of |
| the NC General Statu | tes and that no funds are co | mmingl | ed with proh | ibited or | r other | non-disclosed fund | s. I furt | ther certify that this report |
| | correct and that I have been | n trained | by the NC S | State Boa | ard of b | Hections. | | 15/11/11 |
| Lindsay Voc | | | - Au | <u>n as</u> | CALLOIN | ted Treasurer | 2 | Date 10/14 |
| FOR OFFICE LISE O | Printed Name of Signer | 1000000000 | | ignature of | т жруот | ica Treasurer | | Duite 1 |
| FOR OFFICE USE O | 16/11/2014 | | | -1 | Kan | and Paper | Deliv | very Method |
| Date Received: | 10/14/2014 | 1 10 | Employee: | | YOU | July 1 | | Normal Mail |
| Date Postmarked | . A Amendmen | 0 | Employee: | | Keel | lieltaper | J. | Registered Mail |
| Date I Ostillarked | | | | | | | # | Hand Delivered Electronically Filed |
| Date Scanned: | | | Employee: | | | | | Signer has not received |
| | | | | | | | | mandatory training |
| Date Data Entere | d: | | Employee: | | | | | |
| Please Note: This | form cannot be used to am | | | | | | ress, tre | easurer, assistant treasurer, |
| | custodia | 111 OT DO | jks informati | ion, or a | ccount | information. | | |

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

CRO-1000 NC State Board of Elections August 2008

Detailed SummaryUse this form to summarize all disclosure reporting forms and to total monetary information.

Amendment \boxtimes Yes No

| 1. Committee Full Name (and Fund if applicable) | 2. Type of Report | | 3. ID Number |
|--|--|----------------------------|---------------------------|
| Elect Susan D. Johnson | 2014 Report 3 rd Quarter Report | | |
| Start of Election Cycle: January 1, | 2014 | Total this | Total this |
| | 2014 | Reporting Period \$ 100.00 | |
| 4) Cash on Hand at Start RECEIPTS | | \$ 100.00 | \$ 100.00 |
| 5) Aggregated Contributions from Individuals | (CRO-1205) | \$ 620.00 | \$ 620.00 |
| 6) Contributions from Individuals | (CRO-1210) | \$ 2,499.02 | \$ 2,499.02 |
| 7) Contributions from Political Party Committees | (CRO-1220) | \$ 125.00 | \$ 125.00 |
| 8) Contributions from Other Political Committees | (CRO-1230) | \$ | \$ |
| 9) Loan Proceeds | (CRO-1410) | \$ | \$ |
| 10) Refunds/Reimbursements To the Committee | (CRO-1240) | \$ | \$ |
| 11) Other Receipt Sources | (| | |
| 11a) Interest on Bank Accounts | (CRO-1250) | \$.30 | \$.30 |
| 11b) Contributions from Not-for-Profit Organizati | ons (CRO-1250) | \$ | \$ |
| 11c) Outside Sources of Income | (CRO-1250) | \$ | \$ |
| 11d) Legal Expense Fund – Other Sources | (CRO-1270) | \$ | \$ |
| 11 e) Exempt Purchase Price Sales | (CRO-1265) | \$ | \$ |
| 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11 | c, 11d and 11e) | \$ 3,244.32 | \$ 3,244.32 |
| EXPENDITURES | A CONTRACTOR OF THE STATE OF TH | | |
| 13) Disbursements | | | |
| 13a) Operating Expenditures | (CRO-1310) | \$ 7.00 | \$ 7.00 |
| 13b) Contributions to Candidates/Political Commi | ttees (CRO-1310) | \$ | \$ |
| 13c) Coordinated Party Expenditures | (CRO-1310) | \$ 1,659.33 | \$ 1,659.33 |
| 14) Aggregated Non-Media Expenditures | (CRO-1315) | \$ | \$ |
| 15) Loan Repayments | (CRO-1420) | \$ | \$ |
| 16) Refunds/Reimbursements From the Committee | (CRO-1320) | \$ | \$ |
| 17) In-Kind Contributions | (CRO-1510) | \$ 720.80 | \$ 720.80 |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1 | 5, 16 and 17) | \$ 2,387.13 | \$ 2,387.13 |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then sub | tract line 18) | \$ 957.19 | \$ 957.19 |
| ADDITIONAL INFORMATION | | | |
| 20) Non-Monetary Gifts Given to Other Committees | (CRO-1330) | \$ | |
| 21) Outstanding Loans (incl. ones from other campaig | ns) <i>(CRO-1430)</i> | \$ | Acceptation in the second |
| 22) Debts and Obligations owed By the Committee | (CRO-1610) | \$ | |
| 23) Debts and Obligations owed To the Committee | (CRO-1620) | \$ | |
| 24) Account Transfers Within the Committee | (CRO-1720) | \$ | |
| 25) Administrative Support | (CRO-1710) | \$ | \$ |
| 26) Forgiven Loans | (CRO-1440) | \$ | \$ |
| 27) 48-Hour Notice Reports Sum | (CRO-2200) | \$ | \$ |
| 28) Contributions to be Refunded | (CRO-1215) | \$ | \$ |
| CRO-1100 NC State Board of Ele | ctions | | August 2008 |

Aggregated Contributions from Individuals

Page

l of

Amendment

☐ Yes
☐

No

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

| | ommittee Full I ct Susan D. John | | а и аррисавіе) | | 2. 3 | Ditumber |
|-----------|-------------------------------------|---------------------|--|--|-------------------------|-----------|
| (Parting) | | | | | | |
| 3. C | ontributor Info | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount |
| | Add | | Cash | | 04/04/14 | \$ 20.00 |
| | Remove | 01 | Casii | | | |
| R | Add Remove | - 01 | Check 1053 | | 08/22/2014 | \$ 50.00 |
| 屵 | Add | | | | 00/22/2014 | \$ 50.00 |
| | Remove | 01 | Check 1053 | | 08/22/2014 | \$ 50.00 |
| | Add | — 01 | Cash | | 08/22/2014 | \$ 50.00 |
| | Remove | | | | | |
| | Add | — 01 | Check 2672 | | 09/22/2014 | \$ 50.00 |
| ᆜ | Remove | | | | | |
| ᆜ | Add | — 01 | Check 2672 | | 09/22/2014 | \$ 50.00 |
| ᆜ | Remove | | | | | |
| ᆜ | Add | — 01 | Check 3425 | | 09/27/2014 | \$ 50.00 |
| ᆜ | Remove | | | | | |
| ᆜ | Add | — 01 | Check 3425 | | 09/27/2014 | \$ 50.00 |
| ᆜ | Remove | | | | | |
| ᆜ | Add | — 01 | Check 612 | | 10/07/2014 | \$ 50.00 |
| Щ | Remove | | | | | |
| | Add | — 01 | Check 5820 | | 10/07/2014 | \$ 50.00 |
| | Remove | | | | | |
| | Add | O 1 | Check 5820 | | 10/07/2014 | \$ 50.00 |
| | Remove | | | | | |
| | Add | 01 | Cash | | 10/16/2014 | \$ 50.00 |
| | Remove | | Cubii | | | |
| | Add | O 1 | Cash | | 10/16/2014 | \$ 50.00 |
| | Remove | | Cush | | 10,10,2011 | |
| | Add | _ | | | | \$ |
| <u>Ц</u> | Remove | | | | | |
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| | Remove | | CONTROL DESCRIPTION OF THE PROPERTY OF THE PRO | CONTROL OF THE SECTION OF THE SECTIO | NAMES OF STREET STREET | |
| 4. T | otal only this | s Page | | | \$ | 620.00 |
| 5. T | otal of ALL | CRO-1205 P | ages | M. Charles M. Call | \$ | 620.00 |
| (Th | is line must be on li | ne 5 of Detailed Su | mmary Page CRO-1100) | | | |

| Contri | ibutions from | n Individuals vidual contributions o | ver \$50 |) or contr | ibution | Pg s under | <u>1</u> of \$50 if form CRO | 3 0 1205 is no | Yes ot used | No No |
|--|-----------------------|--|-------------|-------------------------|-----------|---------------|---------------------------------|-------------------------|------------------------------|-----------------------|
| | | and Fund if applical | | | | | | 2. ID Nun | | |
| | an D. Johnson | | | | | | | | | |
| 3. Contri | ibutor Informatio | on | \boxtimes | Add | | Remo | ve | | | |
| a. Full Nan | ne, Mailing Address & | & Phone | | b. Job Title/Profession | | | | d. Comment | and the second second second | |
| (include | city, state, & zip) | | | Retire | d | | | Check 46 | 13 | |
| Lowell & | Linda Wood | | | | | | | | | |
| 3175 Car | atoke Hwy | | | | - | ame/Spec | ific Field | | | |
| Currituck | x, NC 27929 | | | | of Publ | ic | | V = 200 200 2 | | THE CONTRACTOR OF THE |
| | | | | Safety | | | | e. Election S | ium to Date | |
| | | | | | | | | \$ | 200.00 | |
| | | I P CD | | Cad Deser | intion | 13 1001 | : Data (mm/dd/syr | unu) | k. Amount | |
| f. Prior | g. Account Code | h. Form of Payment | ı. In-l | Kind Descr | iption | · 注: 语。 | j. Date (mm/dd/yy | | - | 200.00 |
| | 01 | Check | | | | | 05/09/20 |)14 | \$ | 200.00 |
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| The state of the s | ne, Mailing Address & | | | b. Job T | itle/Prof | fession | | d. Comment | ts | |
| | city, state, & zip) | | | Busine | ess Ow | ner | | Check# 4 | 348 | |
| Harvey B | | THE PARTY OF THE P | | 1 | | | | | | |
| PO Box 7 | | | | c. Emple | yer's N | ame/Spec | ific Field | | | |
| Maple, N | | | | Corrtr | ac Syst | ems | | | | |
| • | | | | Corp | | | | e. Election Sum to Date | | |
| | | | | | | | | \$ | 250.00 | |
| c n : | | L Farm of Darmant | : I. I | ind Decem | intion | | j. Date (mm/dd/yy | .m/) | k. Amount | |
| f. Prior | g. Account Code | h. Form of Payment | 1. 111-1 | Kind Descr | ipuon | | | | | 2.50.00 |
| | 01 | Check | | | | | 08/15/20 |)14 | \$ | 250.00 |
| | | | | | | | | | \$ | |
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| 3. Contri | ibutor Informatio | on | | Add | | Remo | ve | | | |
| | ne, Mailing Address & | | | b. Job T | itle/Prof | ession | | d. Comment | s | |
| (include | city, state, & zip) | | | Attorn | ey | | | Check # 6 | 5547 | |
| Eddie O'l | Neal | | | | | | | | | |
| 2126 Riv | ershore Rd. | | | c. Emplo | yer's Na | ame/Spec | ific Field | | | |
| Elizabeth | City, NC 27909 | | | Twifo | rd Law | Firm | | | | |
| | | | | | | | | e. Election S | um to Date | |
| | | | | | | | | \$ | 100.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-F | Cind Descr | iption | | j. Date (mm/dd/yy | (y) | k. Amount | 15. E. 475. |
| | 01 | Check | | | | | 08/22/20 |)14 | \$ | 100.00 |
| | | | | | | | | | \$ | |
| | | | | | | | | | \$ | |
| 4. Total | only this Page | e | | | | | | \$ | | 550.00 |

Amendment

\$

2499.02

5. Total of ALL CRO-1210 Pages

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

| | | m Individuals | \$ 51 | Pg | | | Amendment Ves No |
|--|-----------------------------------|-----------------------|--|-------------------------|---------------------|-----------------------|--|
| | | (and Fund if applicat | THE RESERVE AND THE PARTY OF TH | 0 or contributions unde | r \$50 II IOIIII CR | 2. ID Num | |
| | an D. Johnson | | | | | | |
| | ibutor Informatio | nn. | \boxtimes | Add Rem | nove | | |
| | ne, Mailing Address & | | | b. Job Title/Profession | | d. Comments | 3 |
| (include | city, state, & zip) | | | Attorney | | Check# 56 | 515 |
| R. Mark | | | | c. Employer's Name/Spe | ecific Field | | |
| | n Creek Rd. City, NC 27909 | | | Twiford Law Firm | teme ricia | | |
| English City, 110 2110 | | | | | | e. Election St | am to Date |
| | | | | | | \$ | 100.00 |
| f. Prior | g. Account Code | h. Form of Payment | i. In-l | Kind Description | j. Date (mm/dd/yy | yy) | k. Amount |
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| and the second of the second | ne, Mailing Address & | k Phone | | b. Job Title/Profession | | d. Comments | |
| (include Bert Aust | city, state, & zip) | | HARRIE. | Retired | | | |
| 105 Sund | | | | c. Employer's Name/Spe | ecific Field | | |
| Grandy, 1 | NC 27939 | | | Sheriff Dare Co | | e. Election St | to Data |
| | | | | | | \$ | 70.00 |
| f. Prior | g. Account Code | h. Form of Payment | i In-l | Kind Description | j. Date (mm/dd/yy | | k. Amount |
| I. Prior | | | 1. 111-1 | Kind Description | 08/22/20 | | \$ 70.00 |
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| The state of the s | ibutor Informatio | | | Add Rem | nove | | |
| 1 1 2 C 1 1 2 C 1 | ne, Mailing Address & | & Phone | | b. Job Title/Profession | | d. Comments Check# 37 | adaptation and the factors of the fa |
| | city, state, & zip) ay Matusko | | | Clerk of Court | | Check# 37 | 48 |
| | arwood Dr. | | | c. Employer's Name/Spe | ecific Field | | |
| Maple, N | | | | County of Currituck | ζ | | and the are successful to a light of the light of the |
| | | | | | | e. Election St | |
| | | | | | | \$ | 100.00 |
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| | 01 | Check | | | 09/30/20 | 014 | \$ 100.00 |

4. Total only this Page

5. Total of ALL CRO-1210 Pages

\$

\$

270.00

2499.02

\$

\$

Amendment **Contributions from Individuals** Yes No Pg 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) Elect Susan D. Johnson Add Remove 3. Contributor Information d. Comments a. Full Name, Mailing Address & Phone b. Job Title/Profession Cash (include city, state, & zip) James Ferebee c. Employer's Name/Specific Field PO Box 1 Self Employed Shawboro, NC 27973 e. Election Sum to Date 100.00 j. Date (mm/dd/yyyy) k. Amount i. In-Kind Description h. Form of Payment f. Prior g. Account Code \$ 100.00 10/07/2014 01 Cash \$ \$ Add Remove 3. Contributor Information b. Job Title/Profession d. Comments a. Full Name, Mailing Address & Phone Cash Farmer (include city, state, & zip) Joel Ferebee c. Employer's Name/Specific Field PO Box 1 Self Employed Shawboro, NC 27973 e. Election Sum to Date \$ 100.00 k Amount a Account Code | h Form of Payment | i In-Kind Description i Date (mm/dd/yyyy)

| f. Prior | g. Account Code | h. Form of Payment | i. In-l | Kind Description | j. Date (mm/dd/y | ууу) | k. Amount | | |
|-------------|-------------------------------------|--------------------------------------|----------|----------------------------|------------------|----------------|------------|-----------|--|
| | 01 | Cash | | | 10/07/ | 2014 | \$ | 100.00 | |
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| 3. Contri | ibutor Informatio | on | | Add Ren | move | | | | |
| a. Full Nan | ne, Mailing Address | & Phone | | b. Job Title/Profession | | d. Comments | | | |
| (include | city, state, & zip) | | | Sheriff | | Business c | | | |
| Susan D. | Johnson | | | | | Banners, I | Door Mag | nets | |
| 103 Malla | ard Dr. | | | c. Employer's Name/Sp | pecific Field | | | | |
| Currituck | urrituck, NC 27929 Currituck County | | | | | | | | |
| | | | | | | e. Election St | ım to Date | | |
| | | | | | | \$ | 1,479.02 | 2 | |
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| | 01 | Cash | | | 04/04/2 | 2014 | \$ | 1,479.02 | |
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| | | | | | | | \$ | | |
| 4. Total | only this Pag | e | | | | \$ | | 1,679.02 | |
| | of ALL CRO | 0-1210 Pages Detailed Summary Page C | CRO-1100 |)) | | \$ | | 2499.0 | |
| CRO-121 | | | | NC State Board of Election | ons | | | April 200 | |

| • | T7. | | 4 | 4: | |
|-----|-------|-------|------|---------|--|
| In. | -Kınc | i Con | trii | outions | |

3. Contributor Information

Amendment 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. 2. ID Number 1. Committee Full Name (and Fund if applicable) Elect Susan D. Johnson Remove Add 3. Contributor Information c. Comments b. Type of Contributor a. Full Name, Mailing Address & Phone 100 Signs \boxtimes Individual (include city, state, & zip) w/metal stands Candidate Michael Zirpoli Party J's Auto Cleaning Service, INC. PAC 1001-A North Battlefield Blvd. d. Election Sum to Date Referendum Chesapeake, VA 23320 Other Receipt Source 720.80 f. Date (mm/dd/yyyy) g. Fair Market Amount e. Description 100-signs w/metal stands 720.80 10/10/2014 "keep Susan Johnson" \$ \$ Add Remove 3. Contributor Information b. Type of Contributor c. Comments a. Full Name, Mailing Address & Phone Individual (include city, state, & zip) Candidate Party PAC Referendum d. Election Sum to Date Other Receipt Source f. Date (mm/dd/yyyy) g. Fair Market Amount e. Description \$

| a. Full Name, Mailing Address & Phone | b. Type of Contributor | | | c. Comments | | |
|---|------------------------|-------|-------------------|-------------|-----------------------|--|
| (include city, state, & zip) | | Indiv | vidual | | | |
| | | Cano | didate | | | |
| | | Party | y | | | |
| | | PAC | ; | | | |
| | | Refe | rendum | d. Ele | ction Sum to Date | |
| | | Othe | er Receipt Source | \$ | | |
| e. Description | | | f. Date (mm/dd/yy | yy) | g. Fair Market Amount | |
| | | | | | \$ | |
| | | | | | \$ | |
| | | | | | \$ | |
| 4. Total only this Page | | | | \$ | 720.80 | |
| 5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100) | | | | \$ | 720.80 | |

Remove

Add

Contributions from Political Party Committees

| | | | | Ame | ndment | | |
|----|---|----|---|-----|--------|-------------|----|
| Pg | 1 | of | 1 | | Yes | \boxtimes | No |

Use this form to report contributions from a political party

| 1. Committee Fu | | 2. ID Number | | | | | | |
|--|-----------------------------|------------------------|-------|-----|-----------------------|------------------------------------|-------------|-------------------------------------|
| Elect Susan D. Jo | | | | | | | | |
| 3. Contributor In | formation | | Add | Rei | move | | | |
| a. Full Name, Mailing (include city, state, Democratic Party | g Address & Phone & zip) | | | | | b. Comments Ad for School Program | | |
| 128 Chatman Eth Moyock, NC 279 | | | | | | c. Elec | tion Sum to | Date |
| | | | | | I D. | \$ | 125.00 | ar can be an action of the contract |
| d. Account Code | e. Form of Payment | f. In-Kind Description | n | | g. Date (mm/dd/yyy | yy) | h. Amour | |
| 01 | Cash | | | | 07/14/2 | 2014 | \$ 1 | 25.00 |
| | | | | | | | \$ | |
| | | | | | | | \$ | |
| 3. Contributor In | formation | | Add | Rei | move | | | |
| a. Full Name, Mailing (include city, state, | | | | | | b. Com | iments | |
| d. Account Code | e. Form of Payment | f. In-Kind Description | n | | g. Date (mm/dd/yy | \$ | h. Amour | |
| | | | | | | | \$ | |
| | | | | | | | \$ | |
| | | | A 1.1 | D | | | \$ | |
| a. Full Name, Mailing | | | Add | Kei | move | b. Com | iments | |
| (include city, state, | & zip) | | | | | c. Elect | tion Sum to | Date |
| d. Account Code | e. Form of Payment | f. In-Kind Description | n | | g. Date (mm/dd/yyy | yy) | h. Amour | nt |
| | | | | | | | \$ | |
| | | | | | | | \$ | |
| | | | | | | | \$ | |
| 4. Total only t | his Page | | | | | \$ | 125.00 | |
| | L CRO-1220 Pag | | | | | \$ | 125.00 | |

Other Receipt Sources

Pg $\underline{1}$ of $\underline{3}$ Amendment \underline{N} No

| Use this form to report | income not reported | on another form. | i.e. interes | t income, n | ot for profit | contributions etc. |
|-------------------------|---------------------|------------------|--------------|-------------|---------------|--------------------|
|-------------------------|---------------------|------------------|--------------|-------------|---------------|--------------------|

| 1. Committee F | | ID Number | | | |
|-----------------------------------|--------------------|--|---------------|--|--------------------------------|
| Elect Susan D. J | ohnson | | | | |
| | | | | | |
| 3. Type of Rece | ipt Source | (Please use separate CRO-1 | | | Outside Sources of Income |
| Interest | | Contributions from Not-for | -Profit Orgar | programme and the second secon | |
| 4. Contributor | | ☐ Add | 1 | Remov | |
| | ng Address & Phone | | b. Not-fo | r-Profit Federal ID # | d. Comments Interest |
| (include city, stat | e, & zip) | 100 | = | | Interest |
| LGFCU | Jou | | c Outsid | le Source Explanation | n |
| 3949 Caratoke I Barco, NC 2791 | | | c. Outsid | ie Source Explanation | ******* |
| Baico, NC 2791 | . 1 | | | | e. Election Sum to Date |
| | | | | | \$.30 |
| | | | | | \$.50 |
| f. Account Code | g. Form of Payment | h. In-Kind Description | | i. Date (mm/dd/yyy | y) j. Amount |
| 01 | Credit | | | 03/26/2014 | \$.01 |
| | | | | | \$ |
| 4. Contributor | Information | Add | | Remov | ve |
| | ng Address & Phone | | b. Not-fo | r-Profit Federal ID # | d. Comments |
| (include city, stat | | | | | Interest |
| LGFCU | | | | | |
| 3949 Caratoke I | Hgy | | c. Outsid | le Source Explanation | n |
| Barco, NC 2791 | 7 | | | | |
| | | | | | e. Election Sum to Date |
| | | | | | \$.30 |
| f. Account Code | g. Form of Payment | h. In-Kind Description | THE WAR | i. Date (mm/dd/yyy | y) j. Amount |
| 01 | Credit | | | 4/28/2014 | \$.01 |
| | | | | | \$ |
| 4. Contributor | Information | □ Add | | Remov | ve |
| a. Full Name, Maili | ng Address & Phone | | b. Not-fo | r-Profit Federal ID # | d. Comments |
| (include city, stat | e, & zip) | 新工作的 | | | Interest |
| LGFCU | | | | | |
| 3949 Caratoke I | | | c. Outsid | le Source Explanation | 1 |
| Barco, NC 2791 | 7 | | | | Election Country Death |
| | | | | | e. Election Sum to Date \$.30 |
| f. Account Code | g. Form of Payment | h. In-Kind Description | | i. Date (mm/dd/yyy | |
| 01 | Credit | | | 05/28/2014 | \$.03 |
| | | | | 05/28/2014 | |
| | | | | | \$ |
| 5. Total only | this Page | | | | \$.05 |
| 6. Total of Al | LL CRO-1250 Pag | zes | | | |
| | | ary Page CRO-1100 if Interest) | | | ¢ 20 |
| | | ary Page CRO-1100 if Not-for-Profit Co | ntribution) | | \$.30 |
| | | ary Page CRO-1100 if Outside Sources | | | |

Other Receipt Sources

Pg 2 of 3 Amendment No

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

| 1. Committee F | D Number | | | | | | |
|-----------------------------------|--|--|--------------------------------|----------------------|-------------------------|--|--|
| Elect Susan D. J | | | | | | | |
| 3. Type of Rece | int Course | (Please use senarate CRO-1 | 250 forms | for each type of Re | ceint Source.) | | |
| Interest | ipt Source | (Please use separate CRO-1250 forms for each type of Receipt Source.) Contributions from Not-for-Profit Organizations Outside Sources of Income | | | | | |
| 4. Contributor | Information | Add | 5 | Remove | | | |
| | ing Address & Phone | | b. Not-fo | r-Profit Federal ID# | d. Comments | | |
| (include city, stat | | | | | Interest | | |
| LGFCU | A Commence of the Control of the Con | | | | | | |
| 3949 Caratoke I | Hgy | | c. Outsid | e Source Explanation | | | |
| Barco, NC 2791 | 17 | | | | | | |
| | | | | | e. Election Sum to Date | | |
| | | | | | \$.30 | | |
| f. Account Code | g. Form of Payment | h. In-Kind Description | | i. Date (mm/dd/yyyy) | j. Amount | | |
| 01 | Credit | | | 06/25/2014 | \$.03 | | |
| | | | | | \$ | | |
| | | | | Remove | | | |
| 4. Contributor | | ☐ Add | | | | | |
| 그를 시작하는 경기, 작용하다 | ing Address & Phone | | b. Not-fo | r-Profit Federal ID# | d. Comments | | |
| (include city, stat | te, & zip) | A CONTRACTOR OF THE PROPERTY O | - | | Interest | | |
| LGFCU | (T | | a Outsid | e Source Explanation | | | |
| 3949 Caratoke I | | | c. Outsid | e Source Explanation | | | |
| Barco, NC 2791 | 17 | | | | e. Election Sum to Date | | |
| | | | | | \$.30 | | |
| f. Account Code | g. Form of Payment | h. In-Kind Description | | i. Date (mm/dd/yyyy) | j. Amount | | |
| 01 | Credit | | | 7/28/2014 | \$.04 | | |
| | | | | | \$ | | |
| | | | | | Ψ | | |
| 4. Contributor | | ☐ Add | | Remove | | | |
| | ng Address & Phone | | b. Not-for-Profit Federal ID # | | d. Comments | | |
| (include city, stat | te, & zip) | | 3 | | Interest | | |
| LGFCU | Lav | | c Outsid | e Source Explanation | | | |
| 3949 Caratoke I Barco, NC 2791 | | | C. Outsid | e Source Explanation | | | |
| Baico, NC 2791 | 17 | | | | e. Election Sum to Date | | |
| | | | | | \$.30 | | |
| f. Account Code | g. Form of Payment | h. In-Kind Description | | i. Date (mm/dd/yyyy) | j. Amount | | |
| 01 | Credit | an in rains Description | 10.47 MARCH 13. 10. 5. | | | | |
| 01 | Credit | | | 8/27/2014 | \$.06 | | |
| | | | | | \$ | | |
| 5. Total only | this Page | | | | \$.13 | | |
| 6. Total of Al | LL CRO-1250 Pag | ges | | | | | |
| | | ary Page CRO-1100 if Interest) | | | \$.30 | | |
| | | ary Page CRO-1100 if Not-for-Profit Co | ontribution) | | ψ .50 | | |
| (This line goes in | | | | | | | |

| Other | Receipt | Sources |
|-------|---------|----------------|
|-------|---------|----------------|

| | | | Ame | ndment | | |
|----|---|----|----------|--------|-------------|----|
| Pg | 3 | of | <u>3</u> | Yes | \boxtimes | No |

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

| | ull Name (and Fund i | f applicable) | | 2. II |) Number | | | |
|--|----------------------------|---|---|----------|--|--|--|--|
| Elect Susan D. | Johnson | | | | | | | |
| 3. Type of Rece | eipt Source | (Please use separate CRO-1250 forms for each type of Receipt Source.) | | | | | | |
| Interest | | Contributions from Not-for | | | itside Sources of Income | | | |
| 4. Contributor | | Add Remo | | | | | | |
| | ing Address & Phone | | b. Not-for-Profit Federa | al ID# | d. Comments | | | |
| (include city, sta | te, & zip) | | <i>E</i> . | | Interest | | | |
| LGFCU | Hav | | c. Outside Source Expla | nation | - | | | |
| 3949 Caratoke Barco, NC 279 | •• | | c. Outside Source Expir | | 1 | | | |
| Barco, NC 277 | 17 | | | | e. Election Sum to Date | | | |
| | | | | | \$.30 | | | |
| f. Account Code | g. Form of Payment | h. In-Kind Description | h. In-Kind Description i. Date (mm/dd/yyyy) | | | | | |
| 01 | Credit | | 09/25/2 | 2014 | \$.12 | | | |
| | | | | | \$ | | | |
| 4. Contributor | Information | ☐ Add | R | emove | The state of the s | | | |
| a. Full Name, Mail | ing Address & Phone | | b. Not-for-Profit Federa | al ID# | d. Comments | | | |
| (include city, sta | te, & zip) | | 1 | | | | | |
| | | | c. Outside Source Expla | nation | - | | | |
| | | | C. Guiside Source Expir | | 1 | | | |
| | | | | | e. Election Sum to Date | | | |
| | | | | | \$ | | | |
| f. Account Code | g. Form of Payment | h. In-Kind Description | i. Date (mm/e | dd/yyyy) | j. Amount | | | |
| | | | | | \$ | | | |
| | | | | | \$ | | | |
| 4. Contributor | Information | ☐ Add | ☐ R | emove | | | | |
| a. Full Name, Mail | ing Address & Phone | | b. Not-for-Profit Federa | al ID# | d. Comments | | | |
| (include city, sta | te, & zip) | | <u> </u> | | | | | |
| | | | c. Outside Source Expla | ination | | | | |
| | | | | | e. Election Sum to Date | | | |
| | | | | | \$ | | | |
| f. Account Code | g. Form of Payment | h. In-Kind Description | i. Date (mm/c | ld/yyyy) | j. Amount | | | |
| | B | | | | \$ | | | |
| | | | | | \$ | | | |
| 5. Total only | this Page | | | | \$.12 | | | |
| (This line goes in (This line goes in | line 11b of Detailed Summe | ges ary Page CRO-1100 if Interest) ary Page CRO-1100 if Not-for-Profit Co ary Page CRO-1100 if Outside Sources | | | \$.30 | | | |

| Dis | biii | rsem | ents |
|--------------------|------|------|------|
| $\boldsymbol{\nu}$ | vu. | | CHU |

Pg 1

of 4

 \boxtimes

Amendment

No

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

| | ull Name (and Fun | d if applicable) | | | 2. ID Number | | |
|--|--|-------------------|--|-------------------|--------------------------------------|--|--|
| Elect Susan D. J | | | no 1210 f | CD: I | | | |
| 3. Type of Disbu | | | RO-1310 forms for each t | type of Disbursen | nent.) pordinated Party Expenditures | | |
| Operating E | | | ndidates/Political Committees | | bordinated Party Expenditures | | |
| 4. Payee Inform | AND THE REPORT OF THE PARTY AND THE PARTY OF | | Add | Remove | d. Comments | | |
| 그는 그리는 어떤 학교에 나는 사람들이 없어 살아갔다. | ng Address & Phone | | b. Coordinated Committee N | ame | u. Comments | | |
| (include city, state, | & zip) | | - | | | | |
| LGFCU | I | | c. Level Registered (Specify) | | | | |
| 3949 Caratoke I Barco, NC 2791 | - | | Federal | County: | | | |
| Barco, NC 2791 | 7 | | State | Municipality: | e. Election Sum to Date | | |
| | | | | | \$ 7.00 | | |
| | en | h. Purpose Code | : Data (mm/dd/mm) | j. Amount | k. Required Remarks | | |
| f. Account Code | g. Form of Payment | n. r ur pose Code | i. Date (mm/dd/yyyy) | J. Amount | Fee for Ck bal | | |
| 01 | Debit | О | 03/26/2014 | \$1.00 | Tee for ex our | | |
| | | | | \$ | | | |
| 4. Payee Inform | ation | | Add | Remove | | | |
| | ng Address & Phone | | b. Coordinated Committee N | | d. Comments | | |
| (include city, state, | 어디에 내 보다를 보다면서 보다면서 되었다. | | And a set in decision of the set | | | | |
| LGFCU | C 2.1p) | | 1 | | | | |
| 3949 Caratoke I | Hwy | | c. Level Registered (Specify) | | | | |
| Barco, NC 2791 | • | | Federal County: | | | | |
| , i | | | State | Municipality: | e. Election Sum to Date | | |
| | | | | | \$ 7.00 | | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| 01 | Debit | 0 | 04/28/2014 | \$1.00 | Fee for Ck bal | | |
| | | | | | | | |
| | | | | \$ | | | |
| 4. Payee Inform | ation | | Add | Remove | | | |
| a. Full Name, Maili | ng Address & Phone | | b. Coordinated Committee N | ame | d. Comments | | |
| (include city, state, | & zip) | | | | | | |
| LGFCU | | | * * * * * * * * * * * * * * * * * * * | | | | |
| 3949 Caratoke I | • | | c. Level Registered (Specify) Federal County: State Municipality: | | | | |
| Barco, NC 2791 | 7 | | | | e. Election Sum to Date | | |
| | | | | | e. Election Sum to Date | | |
| | | | | | \$ 7.00 | | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| 01 | Debit | О | 05/28/2014 | \$1.00 | Fee for Ck bal | | |
| | | | | \$ | | | |
| 5 To tall and the | - D | | | | \$ 3.00 | | |
| 5. Total only th | | | | | 3.00 | | |
| 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100) | | | 0 if Operating Expenses) | | 0 1666.22 | | |
| | | | | cal Comm) | \$ 1666.33 | | |
| (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) | | | | | | | |
| , , | es (List detailed ex | | | | | | |
| A* - Media | B* - Printing | C* - Fun | draising | | her Candidate | | |
| E - Salaries | F* - Equipment | | the contract of the contract o | | g Public Office Expenses | | |
| I - Postage | J - Penalties | K* - Offi | ce Expenses | Q* - Donati | on to Legal Expense Fund | | |
| O* - Other * Codes requir | e detailed explanat | ion in required r | emarks field (k) | | | | |
| Coucs requir | * Codes require detailed explanation in required remarks field (k) | | | | | | |

| | | | | | Amend | lment | |
|---|---------|--------|------------|----------|---------------|-------|---|
| Disbursements | Pg | 2 | of | <u>-</u> | | Yes | N |
| Use this form to report expenditures from the committee for; operating ex | penses, | contri | butions to | candi | idate/politic | cal | |
| committees and coordinated party expenditures. | | | | | | | |

| 1. Committee F | ull Name (and Fun | d if applicable) | | | 2. ID Number |
|--|---------------------------------|----------------------|------------------------------------|------------------|---|
| | | | NO 1210 6 - 6 - 1 4 | of Distance | |
| 3. Type of Disb | | | RO-1310 forms for each t | ype of Disbursen | oordinated Party Expenditures |
| Operating E | | Contributions to Car | ndidates/Political Committees | | bordinated Party Expenditures |
| 4. Payee Inform | nation | | Add | Remove | |
| a. Full Name, Maili (include city, state, | ing Address & Phone & zin) | | b. Coordinated Committee N | ame | d. Comments |
| LGFCU | | | 1 | | |
| 3949 Caratoke l | Hgv | | c. Level Registered (Specify) | | A |
| Barco, NC 2791 | | | Federal | County: | 7 |
| Bureo, 110 277 | • | | State | Municipality: | e. Election Sum to Date |
| | | | | | \$ 7.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| | | 0 | | 61.00 | Ck acct fee |
| 01 | Debit | О | 06/25/2014 | \$1.00 | |
| | | | | \$ | |
| 4. Payee Inform | nation | | Add | Remove | |
| | ing Address & Phone | | b. Coordinated Committee N | ame | d. Comments |
| (include city, state, | | | | | |
| LGFCU | | | | | |
| 3949 Caratoke l | Hgy | | c. Level Registered (Specify) | | |
| Barco, NC 2791 | | | Federal | County: | |
| , | | | State | Municipality: | e. Election Sum to Date |
| | | | | \$ 7.00 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| 01 | Debit | 0 | 7/28/2014 | \$1.00 | Ck acct fee |
| | | | | | |
| | | | | \$ | |
| 4. Payee Inform | ation | | Add | Remove | |
| a. Full Name, Maili | ng Address & Phone | | b. Coordinated Committee N | ame | d. Comments |
| (include city, state, | & zip) | | | | |
| LGFCU | | | | | |
| 3949 Caratoke l | Hgy | | c. Level Registered (Specify) | | |
| Barco, NC 2791 | | | Federal | County: | |
| , | | | State | Municipality: | e. Election Sum to Date |
| | | | | | \$ 7.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| 01 | Debit | О | 8/27/2014 | \$1.00 | Ck acct fee |
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| | | | | _ | \$ 2.00 |
| 5. Total only th | | | | | \$ 3.00 |
| | CRO-1310 Pages | D CDO 110 | | | |
| | | | 0 if Operating Expenses) | aal Comm) | \$ 1666.33 |
| | | | 0 if Contrib to Candidates/Politic | | |
| | | | 0 if Coordinated Party Expenditu | ires) | |
| | es (List detailed ex | | | D T | har Candidata |
| A* - Media | B* - Printing | C* - Fund | | | her Candidate g Public Office Expenses |
| E - Salaries | F* - Equipment J - Penalties | | cal Party ce Expenses | | on to Legal Expense Fund |
| I - Postage O* - Other | J - renames | K" - OIII | ce Expenses | Q - Donati | on to Degui Dapense I und |
| and the second section of the s | e detailed explanat | ion in required r | emarks field (k) | | |

| Disbursements |
|---------------|
|---------------|

Amendment

Yes

| No |
|-----|
| 110 |

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

| 1. Committee F | ull Name (and Fun | d if applicable) | | | 2. ID Number |
|--------------------------------|----------------------------|--|---|--|------------------------------|
| Elect Susan D. | | | | | |
| 3. Type of Disb | | se use senarate C | RO-1310 forms for each t | pe of Disbursem | ent.) |
| Operating E | | | ndidates/Political Committees | Со | ordinated Party Expenditures |
| 4. Payee Inform | | | Add | Remove | |
| | ing Address & Phone | | b. Coordinated Committee Na | | d. Comments |
| | 네트 시간 아이들이 없는 것이 되었다면 하다 것 | | 5. Cool annual contract of the cool annual contract of t | The late of the la | - |
| (include city, state, LGFCU | & Zip) | ASSESSMENT OF THE PROPERTY OF THE PARTY OF T | 1 | | |
| 3949 Caratoke | Цау | | c. Level Registered (Specify) | | 1 |
| Barco, NC 279 | | | Federal | County: | 1 |
| Baico, NC 219 | 1 / | | State Municipality: | | e. Election Sum to Date |
| | | | | | |
| | | | | | \$ 7.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| 1. Account Code | a couc ground or anymous | | Ck acct fee | | |
| 01 | Debit | О | 9/25/2014 | \$1.00 | |
| | | | | | |
| | | | | \$ | |
| 4 Davis Inform | nation | | Add | Remove | |
| 4. Payee Inform | | | b. Coordinated Committee Na | | d. Comments |
| | ing Address & Phone | | b. Coordinated Committee 13 | | Ad for School |
| (include city, state, | | | - | | Program |
| Currituck Coun | • | | c. Level Registered (Specify) | | Trogram |
| 2958 Caratoke | • | | Federal | County: | - |
| Currituck, NC | 27929 | | | Municipality: | e. Election Sum to Date |
| | | | State | Municipanty. | e. Election Sum to Date |
| | | | | | \$ 125.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| 0.4 | 0.1 | | 7/14/2014 | 6125.00 | Ad for School |
| 01 | Cash | A | 7/14/2014 | \$125.00 | Program |
| | | | | 6 | |
| | | | | \$ | |
| 4. Payee Inform | nation | | Add | Remove | |
| a. Full Name, Mail | ing Address & Phone | | b. Coordinated Committee Na | ame | d. Comments |
| (include city, state, | & zip) | | | | |
| | | | | | |
| | | | c. Level Registered (Specify) | | |
| | | | Federal | County: | |
| | | | State | Municipality: | e. Election Sum to Date |
| | | | | | \$ |
| | | | | | 3 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
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| | | | | Ф | |
| | | | | \$ | |
| | | | | J \$ | |
| 5. Total only th | is Page | | | | \$ 126.00 |
| | CRO-1310 Pages | | | | |
| | line 13a of Detailed Sun | | | | \$ 1,666.33 |
| | | | 0 if Contrib to Candidates/Politic | | 1,000.00 |
| | | | 0 if Coordinated Party Expenditu | res) | |
| | es (List detailed ex | | | | |
| A* - Media | B* - Printing | C* - Fund | | D - To Anoth | |
| E - Salaries | F* - Equipment | | | | Public Office Expenses |
| I - Postage O* - Other | J - Penalties | K* - Offic | ce Expenses | Q" - Donatio | n to Legal Expense Fund |
| | e detailed explanat | ion in required r | emarks field (k) | | |

Ρσ 4

of 4

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) 2. ID Number | | | | | | |
|---|--|--------------------------------|-------------------------------|---------------|-------------------------|--|
| Elect Susan D. Johnson | | | | | | |
| 3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) | | | | | | |
| Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures | | | | | | |
| 4. Payee Inform | | | Add Remove | | | |
| a. Full Name, Mailing Address & Phone | | | b. Coordinated Committee Name | | d. Comments | |
| (include city, state, & zip) | | | | | Radio | |
| Gregory Gospel | | AL | 1 | | Ad | |
| George Gregory | | | c. Level Registered (Specify) | | | |
| 444 NW Backwoods Rd. | | | Federal County: | | 1 | |
| Moyock, NC 27958 | | | State | Municipality: | e. Election Sum to Date | |
| Moyock, NC 27938 | | | | | | |
| | | | | | \$ 500.00 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | |
| 0.1 | Check | A | 09/23/2014 | \$500.00 | Radio | |
| 01 | CHECK | A | 09/23/2014 | Ψ500.00 | Advertisement | |
| | | | | \$ | Check # 1001 | |
| 4 Days Inform | ation. | | Add | Remove | | |
| 4. Payee Inform | CONTRACTOR OF STUDY STATE OF STUDY | | b. Coordinated Committee Name | | d. Comments | |
| | ng Address & Phone | | b. Coordinated Committee Name | | T-shirts | |
| (include city, state, & zip) | | | | | 1-3111113 | |
| Atlantic Screen | | | Level Designand (Specific) | | - | |
| RO Givens Sigr | 1S | | c. Level Registered (Specify) | | | |
| PO Box 8 | | | Federal 🖂 | County: | Election Compate Date | |
| Elizabeth City, NC 27909 | | | State | Municipality: | e. Election Sum to Date | |
| | | | | | \$ 368.31 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | |
| | | _ | 10/05/2014 | 02 (0.21 | Printing for Ts | |
| 01 | Check | В | 10/06/2014 | \$368.21 | Check# 1002 | |
| | | | | s | | |
| | | | | | | |
| 4. Payee Information | | | Add Remove | | | |
| a. Full Name, Maili | ng Address & Phone | | b. Coordinated Committee Name | | d. Comments | |
| (include city, state, | & zip) | | | | Staples-213.49 | |
| Staples-Online | | | | | Vista-170.50 | |
| Vista Prints-Online | | | c. Level Registered (Specify) | | Coinjock-282.03 | |
| Coinjock Signs | | | Federal County: | | | |
| 381 Waterlily Rd. Coinjock, NC | | | State | Municipality: | e. Election Sum to Date | |
| | | | | | \$ 666.02 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | |
| 1. Account Code | g. Form of Fayment | Olice 1982 - 1800 (1887) 10 70 | ii Date (iiiii da jijij) | J Linount | Printing Costs | |
| 01 | Cash | В | 05/01/2014 | \$666.02 | Trinking costs | |
| | | | | \$ | | |
| | | | |] \$ | 0 1524.22 | |
| 5. Total only this Page | | | | | \$ 1,534.33 | |
| 6. Total of ALL CRO-1310 Pages | | | | | | |
| (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) | | | | | \$ 1,666.33 | |
| (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 | | | | | | |
| | * Codes require detailed explanation in required remarks field (k) | | | | | |