COPY

Disclosure Report Cover Sheet

Please note that this cover sheet cannot be used to amend committee information such as the committee address; treasurer, assistant treasurer, or custodian of books information; or depository information. You must amend the Statement of Organization (CRO-2100) to make those kinds of committee changes.

1. Name of Committee or Fund			6. Date
Ron Barker for Sheriff			10/28/02
2. Address			7. ID Number
212 Cokesbury Dr.			
3. City	4. State	5. Zip	8. Phone
Kernersville	N.C.	27284	748-4100

9. Type of Report	10. Period Covered		11. Amendment
2002 Third Quarter Plus Report	Start	8/24/02	☐ Yes
	End	10/19/02	☐ No

12. Type of Committee or Fund *(Check one)*

- ☑ Candidate Campaign
- ☐ PAC
- ☐ Other Fund: _____
- ☐ Party
- ☐ Referendum
- ☐ Joint Fundraiser
- ☐ Soft Money Account
- ☐ "Booster Fund"
- ☐ Building Fund

13. Treasurer Name

Robert F. Joyce 330 Fisher Rd. W.S. 27127

14. Assistant Treasurer Name(s)

N/A

15. Custodian of Books Name

Robert F. Joyce P.O. Box 21049 W.S. 27120

16. Bank/Depository/Credit Account Information

a. Name	b. Purpose	c. Code	d. Period Begin Balance
Wachovia [redacted]	Checking Account		$6857.58
			$
			$
			$
			$
			$

CERTIFICATION

I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct.

Signature of Appointed Treasurer or Candidate — Date: 10/28/02

Detailed Summary

1. Name of Committee or Fund	2. Type of Report	3. ID Number
Ron Barker for Sheriff	2002 Third Quarter Plus	

Start of Election Cycle: January 1, 2002		Total this Period	Total this Election Cycle	For Office Use Only
4) Cash on Hand at Start of Election Cycle			$ 1739.74	
5) Cash on Hand at Start of Present Reporting Period		$ 6,857.58		
RECEIPTS				
6) Contributions from Individuals	(CRO-1210)	$ 7,450.00	$ 54,490.00	
7) Contributions from Political Party Committees	(CRO-1220)	$ 0	$ 0	
8) Contributions from Other Political Committees	(CRO-1230)	$ (400.00)	$ (400.00)	
9) Loan Proceeds	(CRO-1410)	$ 0	$ 0	
10) Refunds & Reimbursements to Committee	(CRO-1240)	$ 0	$ 0	
11) Other Receipt Sources	(CRO-1250)			
11a) Interest on Bank Accounts	(CRO-1250)	$ 0	$ 0	
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	$ 0	$ (100.00)	
11c) Outside Sources of Income	(CRO-1250)	$ 0	$ 0	
12) TOTAL RECEIPTS *(Add lines 6, 7, 8, 9, 10, 11a, 11b, and 11c)*		$ 7,450.00	$ 54,490.00	
EXPENDITURES				
13) Disbursements	(CRO-1310)			
13a) Operating Expenditures	(CRO-1310)	$ 13,927.91	$ 71,850.57	
13b) Contributions to Candidates/Political Committees	(CRO-1310)	$ 0	$ (280.00)	
13c) Coordinated Party Expenditures	(CRO-1310)	$ 0	$ 0	
14) Loan Repayments	(CRO-1420)	$ 0	$ 0	
15) Refunds from Committee	(CRO-1320)	$ 0	$ 0	
16) In-Kind Contributions	(CRO-1510)	$ 0	$ 0	
17) TOTAL EXPENDITURES *(Add lines 13a, 13b, 13c, 14, 15, and 16)*		$ 13,927.91	$ 71,850.57	
18) Cash on Hand at End of Reporting Period *(For this Period, add lines 5 and 12 together, then subtract line 17)* *(For this Election Cycle, add lines 4 and 12 together, then subtract line 17)*		$ 379.67	$ 379.67	
Additional Information				
19) Non-Monetary Gifts Given to Committees	(CRO-1330)	$		
20) Outstanding Loans (including ones from other campaigns)	(CRO-1430)	$		
21) Debts and Obligations owed BY the Committee	(CRO-1610)	$		
22) Debts and Obligations owed TO the Committee	(CRO-1620)	$		
23) Parent Entity's Administrative Support	(CRO-1710)	$		

isbursements

Name of Committee or Fund

Ron Barker for Sheriff

2. ID Number

Type of Disbursement (Please use separate CRO-1330 forms for each type of Disbursements.)

☐ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee

a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. If Contribution to County Committee, specify:	c. If Coordinated Party Expense, list office:	d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
Vector Survey Supply 327 South Rd. High Point 27262			STAKES	[redacted]	Check	8/26/02	$255.60
							$
							$

i. If Amendment, choose change type: ☐ Add ☐ Delete

j. Election Cycle Sum To Date: $ 1572.27

4. Payee

a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. If Contribution to County Committee, specify:	c. If Coordinated Party Expense, list office:	d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
WSJS Radio PO Box 906005 Charlotte 28290-6005			Radio Ads	[redacted]	Check	8/27/02	$1703.75
							$
							$

i. If Amendment, choose change type: ☐ Add ☐ Delete

j. Election Cycle Sum To Date: $

4. Payee

a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. If Contribution to County Committee, specify:	c. If Coordinated Party Expense, list office:	d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
Excalibur PO Box 7372 WS 27109			Mailing	[redacted]	Check	8/27/02	$2570.65
			Disk	[redacted]	Check	8/28/02	$ 25.00
			Mailing	[redacted]	Check	8/27/02	$1710.00

i. If Amendment, choose change type: ☐ Add ☐ Delete

j. Election Cycle Sum To Date: $ 7651.79

4. Payee

a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. If Contribution to County Committee, specify:	c. If Coordinated Party Expense, list office:	d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
WGHP Fox 8 AP-8 High Point 27261			Increase in Ads	[redacted]	Check	8/28/02	$ 153.00
							$
							$

i. If Amendment, choose change type: ☐ Add ☐ Delete

j. Election Cycle Sum To Date: $ 3387.25

4. Payee

a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. If Contribution to County Committee, specify:	c. If Coordinated Party Expense, list office:	d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
Time Warner Cable Adcast 200 Centre Park Dr. Suite 200 Greensboro 27409			T.V. Trees and Dubs	[redacted]	Check	9/3/02	$ 769.00
							$
							$

i. If Amendment, choose change type: ☐ Add ☐ Delete

j. Election Cycle Sum To Date: $ 8017.00

5. Total only this Page $ 7246.98

6. Total of ALL CRO-1310 Related Pages (only show on last page) $

(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)

isbursements

Name of Committee or Fund

Don Barker for Sheriff

2. ID Number

Type of Disbursement *(Please use separate CRO-1330 forms for each type of Disbursements.)*

☐ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. If Contribution to County Committee, specify:	c. If Coordinated Party Expense, list office:	d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Ramada Plaza 3050 University Pkwy W.S. 27105			Election Party	[redacted]	Check	9/10/02	$1022.40
								$
								$
				i. If Amendment, choose change type: ☐ Add ☐ Delete			j. Election Cycle Sum To Date	$
	Jill Jackson SHB Consulting 2206 Cheverly Ave Cheverly, Maryland			Automated calls	[redacted]	Check	9/13/02	$492.17
								$
								$
				i. If Amendment, choose change type: ☐ Add ☐ Delete			j. Election Cycle Sum To Date	$
	Wooten Graphics P.O. Box 819 Welcome			Yard signs	[redacted]	Check	9/13/02	$1853.10
								$
								$
				i. If Amendment, choose change type: ☐ Add ☐ Delete			j. Election Cycle Sum To Date	$ 5842.59
	Graphic Rewards P.O. Box 1166 King 27021			Printing and Stationary	[redacted]	Check	9/16/02	$183.70
								$
								$
				i. If Amendment, choose change type: ☐ Add ☐ Delete			j. Election Cycle Sum To Date	$ 3550.72
	Rainbow Catering 3140 MacBrandon Ln. Pfafftown 27040-8412			Election day food	[redacted]	Check	9/10/02	$450.00
								$
								$
				i. If Amendment, choose change type: ☐ Add ☐ Delete			j. Election Cycle Sum To Date	$ 6075.00

5. Total only this Page $563.37

6. Total of ALL CRO-1310 Related Pages *(only show on last page)* $

(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)

Disbursements

1. Name of Committee or Fund

Ron Barker for Sheriff

2. ID Number

3. Type of Disbursement (Please use separate CRO-1330 forms for each type of Disbursements.)

☐ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee

a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. If Contribution to County Committee, specify:	c. If Coordinated Party Expense, list office:	d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount	i. If Amendment, choose change type:	j. Election Cycle Sum To Date
Joyce Brothers 1501 S. Stratford Rd. W-S. 27103			Election day drinks	[redacted]	Check	9/24/02	$ 186.91	☐ Add ☐ Delete	$
							$		
							$		
Hauser Rental 1511 S. Stratford Rd. W-S. 27103			Table clothes for Election	[redacted]	Check	9/24/02	$ 862.65	☐ Add ☐ Delete	$
							$		
							$		
							$	☐ Add ☐ Delete	$
							$		
							$		
							$	☐ Add ☐ Delete	$
							$		
							$		
							$	☐ Add ☐ Delete	$
							$		
							$		
							$	☐ Add ☐ Delete	$

5. Total only this Page $

6. Total of ALL CRO-1310 Related Pages (only show on last page) $ 1049.56

(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) $ 13,927.91

(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

tributions from INDIVIDUALS

m[redacted] Committee or Fund

Ron Barker for Sheriff

2. ID Number

Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
Mario O. Saucedo 2737 London Lane SW W.S. 27103	[redacted]	Check	8/27/02	☐	☐	$ 300.00
				☐	☐	$
				☐	☐	$
b. Job Title/Profession: President				☐	☐	$
c. Employer's Name/Specific Field: Self Radio / Broadcasting	j. If Amendment, choose change type: ☐ Add ☐ Delete			k. Election Cycle Sum to Date $		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
Albert E. Dillon Jr. 940 Walkertown Guthrie Rd W.S. 27101	[redacted]	Check	8/28/02	☐	☐	$ 200.00
				☐	☐	$
				☐	☐	$
b. Job Title/Profession: Deputy Sheriff				☐	☐	$
c. Employer's Name/Specific Field: Sheriff Law Enforcement	j. If Amendment, choose change type: ☐ Add ☐ Delete			k. Election Cycle Sum to Date $ 300.00		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
Teamsters Helper Local 391 Carolina Drive Chapter 1 P.O. Box 35405 Greensboro 27425	[redacted]	Check	8/27/02	☐	☐	$ 200.00
				☐	☐	$
				☐	☐	$
b. Job Title/Profession: Labor Donation				☐	☐	$
c. Employer's Name/Specific Field	j. If Amendment, choose change type: ☐ Add ☐ Delete			k. Election Cycle Sum to Date $ 200.00		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
Daniel L. Tuttle 240 Penner St W.S. 27105	[redacted]	Check	8/28/02	☐	☐	$ 100.00
				☐	☐	$
				☐	☐	$
b. Job Title/Profession				☐	☐	$
c. Employer's Name/Specific Field	j. If Amendment, choose change type: ☐ Add ☐ Delete			k. Election Cycle Sum to Date $ 300.00		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
Guillermo Mendoza 2319 Old Lexington Rd. W.S. 27107	[redacted]	Check	8/27/02	☐	☐	$ 1200.00
				☐	☐	$
				☐	☐	$
b. Job Title/Profession: President / Owner Food Prep. Grocery Stores				☐	☐	$
c. Employer's Name/Specific Field: Self Food Production / Grocery Stores	j. If Amendment, choose change type: ☐ Add ☐ Delete			k. Election Cycle Sum to Date $ 1200.00		

4. Total only this Page	$ 2000.00
5. Total of ALL CRO-1210 Pages *(only show on last page)* *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$

3. Contributor

ributions from INDIVIDUALS

ac[redacted] Committee or Fund	2. ID Number
Ron Barker for Sheriff	

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
James G Chrysson 1045 Burke St W.S. 27101	[redacted]	Check	8/27/02	☐	☐	$ 1000.00
				☐	☐	$
				☐	☐	$
b. Job Title/Profession President \ Owner Developer				☐	☐	$
c. Employer's Name/Specific Field Self Developer - Real Estate	j. If Amendment, choose change type: ☐ Add ☐ Delete			k. Election Cycle Sum to Date $ 2000.00		

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
Jesus Ruiz 150 Almont Forest Dr Clemmons. 27012	[redacted]	Check	8/26/02	☐	☐	$ 500.00
				☐	☐	$
				☐	☐	$
b. Job Title/Profession President \ Owner Restaurants				☐	☐	$
c. Employer's Name/Specific Field Self Food Service	j. If Amendment, choose change type: ☐ Add ☐ Delete			k. Election Cycle Sum to Date $ 500.00		

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
Chauffeurs Teasters and Helpers Local 391 P.O. Box 35406 Greensboro 27425	[redacted]	Check	8/27/02	☐	☐	$ 200.00
				☐	☐	$
				☐	☐	$
b. Job Title/Profession Labor Donation				☐	☐	$
c. Employer's Name/Specific Field	j. If Amendment, choose change type: ☐ Add ☐ Delete			k. Election Cycle Sum to Date $ 200.00		

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
Jerry W. Smith 7617 Riverview Knoll Ct Clemmons 27012	[redacted]	Check	8/21/02	☐	☐	$ 200.00
				☐	☐	$
				☐	☐	$
b. Job Title/Profession				☐	☐	$
c. Employer's Name/Specific Field	j. If Amendment, choose change type: ☐ Add ☐ Delete			k. Election Cycle Sum to Date $ 2000.00		

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
Gerri Leigh Pratt 1000 W. 5th St W.S. 27101	[redacted]	Check	9/9/02	☐	☐	$ 500.00
				☐	☐	$
				☐	☐	$
b. Job Title/Profession President / Owner Land Developer				☐	☐	$
c. Employer's Name/Specific Field Self Land Developer / Real Estate	j. If Amendment, choose change type: ☐ Add ☐ Delete			k. Election Cycle Sum to Date $ 500.00		

4. Total only this Page	$ 4200.00
5. Total of ALL CRO-1210 Pages *(only show on last page)* *(This line must be on line 6 of Detailed Summary Page CRO-1180)*	$

3. Contributor

tributions from INDIVIDUALS

Committee or Fund: Ron Barker for Sheriff

2. ID Number:

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
Jim Memory 413 Wesly Park Dr. Kernersville 27284 b. Job Title/Profession c. Employer's Name/Specific Field	[redacted]	Check	8/25/02	☐	☐	$ 100.00
				☐	☐	$
				☐	☐	$
				☐	☐	$
	j. If Amendment, choose change type: ☐ Add ☐ Delete			k. Election Cycle Sum to Date $		
a. Full Name, Mailing Address & Phone (include city, state, & zip) Eldridge C. Hanes 111 Cloverleaf Dr. W.S. 27107 b. Job Title/Profession c. Employer's Name/Specific Field	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	[redacted]	Check	9/5/02	☐	☐	$ 100.00
				☐	☐	$
				☐	☐	$
				☐	☐	$
	j. If Amendment, choose change type: ☐ Add ☐ Delete			k. Election Cycle Sum to Date $		
a. Full Name, Mailing Address & Phone (include city, state, & zip) Joseph Landon Sr. P.O. Box 5892 W.S. 27113 b. Job Title/Profession c. Employer's Name/Specific Field	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	[redacted]	Check	8/22/02	☐	☐	$ 10.00
				☐	☐	$
				☐	☐	$
				☐	☐	$
	j. If Amendment, choose change type: ☐ Add ☐ Delete			k. Election Cycle Sum to Date $		
a. Full Name, Mailing Address & Phone (include city, state, & zip) Cash b. Job Title/Profession c. Employer's Name/Specific Field	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
				☐	☐	$ 40.00
				☐	☐	$
				☐	☐	$
				☐	☐	$
	j. If Amendment, choose change type: ☐ Add ☐ Delete			k. Election Cycle Sum to Date $		
a. Full Name, Mailing Address & Phone (include city, state, & zip) Paul G Chrysson 1045 Burke St W.S 27101 b. Job Title/Profession Vice President / Owner Developer c. Employer's Name/Specific Field Self Developer / Real Estate	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	[redacted]	Check	8/27/02	☐	☐	$ 1000.00
				☐	☐	$
				☐	☐	$
				☐	☐	$
	j. If Amendment, choose change type: ☐ Add ☐ Delete			k. Election Cycle Sum to Date $ 2000.00		

3. Contributor

4. Total only this Page	$250.00
5. Total of ALL CRO-1210 Pages *(only show on last page)* *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$2450.00

In-Kind Contributions

1. Name of Committee or Fund	2. ID Number
Roy Barker for Sheriff	

3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)	e. Fair Market Amount
	N/A			$
				$
				$
				$
	b. Type of Contributor: ☐ Individual ☐ Party Committee ☐ Other Political Committee ☐ Other Receipt Source	f. If Amendment, choose change type: ☐ Add ☐ Delete	g. Election Cycle Sum to Date	$

3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)	e. Fair Market Amount
				$
				$
				$
				$
	b. Type of Contributor: ☐ Individual ☐ Party Committee ☐ Other Political Committee ☐ Other Receipt Source	f. If Amendment, choose change type: ☐ Add ☐ Delete	g. Election Cycle Sum to Date	$

3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)	e. Fair Market Amount
				$
				$
				$
				$
	b. Type of Contributor: ☐ Individual ☐ Party Committee ☐ Other Political Committee ☐ Other Receipt Source	f. If Amendment, choose change type: ☐ Add ☐ Delete	g. Election Cycle Sum to Date	$

3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)	e. Fair Market Amount
				$
				$
				$
				$
	b. Type of Contributor: ☐ Individual ☐ Party Committee ☐ Other Political Committee ☐ Other Receipt Source	f. If Amendment, choose change type: ☐ Add ☐ Delete	g. Election Cycle Sum to Date	$

3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)	e. Fair Market Amount
				$
				$
				$
				$
	b. Type of Contributor: ☐ Individual ☐ Party Committee ☐ Other Political Committee ☐ Other Receipt Source	f. If Amendment, choose change type: ☐ Add ☐ Delete	g. Election Cycle Sum to Date	$

4. Total only this Page	$
5. Total of ALL CRO-1510 Pages *(only show on last page)* *(This line must be on line 16 of Detailed Summary Page CRO-1100)*	$

Outstanding Loans

1. Name of Committee or Fund	2. ID Number
Ron Barker for Sheriff	

3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate	h. Original Loan Amount
3. Lender	N/A			%	$
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
		g. Security Pledged			$
		j. If Amendment, choose change type: ☐ Add ☐ Delete			
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	h. Original Loan Amount $
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
		g. Security Pledged			$
		j. If Amendment, choose change type: ☐ Add ☐ Delete			
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	h. Original Loan Amount $
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
		g. Security Pledged			$
		j. If Amendment, choose change type: ☐ Add ☐ Delete			
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	h. Original Loan Amount $
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
		g. Security Pledged			$
		j. If Amendment, choose change type: ☐ Add ☐ Delete			
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	h. Original Loan Amount $
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
		g. Security Pledged			$
		j. If Amendment, choose change type: ☐ Add ☐ Delete			
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	h. Original Loan Amount $
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
		g. Security Pledged			$
		j. If Amendment, choose change type: ☐ Add ☐ Delete			

4. Total only this Page	$
5. Total of ALL CRO-1430 Pages *(only show on last page)* *(This line must be on line 20 of Detailed Summary Page CRO-1100)*	$

Loan Repayments

1. Name of Committee or Fund	2. ID Number
Ron Barker for Sheriff	

3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/yyyy)	g. Account Number/Code
3. Lender	N/A			
		d. Original Loan Amount	e. Remaining Balance of Loan	h. Form of Payment
		$	$	
		f. If Amendment, choose change type: ☐ Add ☐ Delete		i. Repayment Amount $
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/yyyy)	g. Account Number/Code
		d. Original Loan Amount	e. Remaining Balance of Loan	h. Form of Payment
		$	$	
		f. If Amendment, choose change type: ☐ Add ☐ Delete		i. Repayment Amount $
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/yyyy)	g. Account Number/Code
		d. Original Loan Amount	e. Remaining Balance of Loan	h. Form of Payment
		$	$	
		f. If Amendment, choose change type: ☐ Add ☐ Delete		i. Repayment Amount $
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/yyyy)	g. Account Number/Code
		d. Original Loan Amount	e. Remaining Balance of Loan	h. Form of Payment
		$	$	
		f. If Amendment, choose change type: ☐ Add ☐ Delete		i. Repayment Amount $
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/yyyy)	g. Account Number/Code
		d. Original Loan Amount	e. Remaining Balance of Loan	h. Form of Payment
		$	$	
		f. If Amendment, choose change type: ☐ Add ☐ Delete		i. Repayment Amount $
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/yyyy)	g. Account Number/Code
		d. Original Loan Amount	e. Remaining Balance of Loan	h. Form of Payment
		$	$	
		f. If Amendment, choose change type: ☐ Add ☐ Delete		i. Repayment Amount $

4. Total only this Page	$
5. Total of ALL CRO-1420 Pages *(only show on last page)* *(This line must be on line 14 of Detailed Summary Page CRO-1100)*	$

Loan Proceeds

1. Name of Committee or Fund	2. ID Number
Ron Barker for Sheriff	

3. Lender				
a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	i. Account Number/Code
N/A	e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
	g. Security Pledged			k. Amount $
	h. If Amendment, choose change type: ☐ Add ☐ Delete			
a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	i. Account Number/Code
	e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
	g. Security Pledged			k. Amount $
	h. If Amendment, choose change type: ☐ Add ☐ Delete			
a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	i. Account Number/Code
	e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
	g. Security Pledged			k. Amount $
	h. If Amendment, choose change type: ☐ Add ☐ Delete			
a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	i. Account Number/Code
	e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
	g. Security Pledged			k. Amount $
	h. If Amendment, choose change type: ☐ Add ☐ Delete			
a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	i. Account Number/Code
	e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
	g. Security Pledged			k. Amount $
	h. If Amendment, choose change type: ☐ Add ☐ Delete			
a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	i. Account Number/Code
	e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
	g. Security Pledged			k. Amount $
	h. If Amendment, choose change type: ☐ Add ☐ Delete			

4. Total only this Page	$
5. Total of ALL CRO-1410 Pages *(only show on last page)* *(This line must be on line 9 of Detailed Summary Page CRO-1100)*	$