

# COPY

## Disclosure Report Cover

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

Amendment

☐ Yes

☒ No

### 1. Committee Information

<b>a. Full Name</b> Schatzman for Sheriff	<b>c. ID Number</b> _____
<b>b. Mailing Address (include City, State and Zip Code)</b> 1313 Ashleybrook Lane Winston-Salem, NC 27103	<b>d. Date Filed</b> 7/24/07 <b>e. Phone Number</b> (336) 760-4464

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2007	01/01/2007	06/30/2007	Wes Brooks

<b>6. Type of Committee (Check One)</b> <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum	<b>9. Type of Report (check only one type of report from one category)</b> <table style="width: 100%;"> <tr> <th style="width: 33%;">Municipal</th> <th style="width: 33%;">State/County</th> <th style="width: 33%;">Referendum</th> </tr> <tr> <td> <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                 </td> <td> <input type="checkbox"/> Organizational  <input type="checkbox"/> Quarterly  <input type="checkbox"/> First Plus  <input type="checkbox"/> Second  <input type="checkbox"/> Third Plus  <input type="checkbox"/> Fourth  <input checked="" type="checkbox"/> Semi-annual  <input type="checkbox"/> Mid Year  <input type="checkbox"/> Year End  <input type="checkbox"/> Final  <input type="checkbox"/> Special                 </td> <td> <input type="checkbox"/> Organizational  <input type="checkbox"/> Pre-referendum  <input type="checkbox"/> Final  <input type="checkbox"/> Supplemental Final  <input type="checkbox"/> Annual  <input type="checkbox"/> Special                 </td> </tr> </table>	Municipal	State/County	Referendum	<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"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First Plus <input type="checkbox"/> Second <input type="checkbox"/> Third Plus <input type="checkbox"/> Fourth <input checked="" 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"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
Municipal	State/County	Referendum					
<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"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First Plus <input type="checkbox"/> Second <input type="checkbox"/> Third Plus <input type="checkbox"/> Fourth <input checked="" 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"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special					
<b>7. Type of Fund (if applicable, check one)</b> <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> NC Political Party Financing Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:	<b>10. Special Report Name</b> _____						
<b>8. Number of Fundraisers this Report</b> 0							

<b>11. Account Information</b> <b>a. Financial Institution Full Name</b> Southern Community Bank <b>b. Purpose</b> Campaign expenses <b>c. Account Code</b> 100 <b>d. Period Begin Balance</b> \$ 4,577.09	<b>11. Account Information</b> <b>a. Financial Institution Full Name</b> _____ <b>b. Purpose</b> _____ <b>c. Account Code</b> _____ <b>d. Period Begin Balance</b> \$ _____
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### 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 and that I have been trained by the NC State Board of Elections according to Article 163.278.9(k).

WES BROOKS

Printed Name of Signer

[Signature]

Signature of Appointed Treasurer

7/24/2007

Date

### FOR OFFICE USE ONLY

Date Received:	<u>7-24-07</u>	Employee:	<u>Judy Speas</u>	Delivery Method	
Date Postmarked:	_____	Employee:	_____	<input type="checkbox"/> Normal Mail	
Date Scanned:	<u>7-25-07</u>	Employee:	<u>Judy Speas</u>	<input type="checkbox"/> Registered Mail	
Date Data Entered:	<u>7-25-07</u>	Employee:	<u>Judy Speas</u>	<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.

FORSYTH COUNTY BOARD OF ELECTIONS

2007 JUL 24 PM 1:02

# 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) Schatzman for Sheriff	2. Type of Report SEMI-ANNUAL 2007 Mid year	2. ID Number
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Start of Election Cycle: January 1, 2007	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 4577.09	\$ 4577.09

## RECEIPTS

5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$
6) Contributions from Individuals (CRO-1210)	\$ 8000.00	\$ 8000.00
7) Contributions from Political Party Committees (CRO-1220)	\$	\$
8) Contributions from Other Political Committees (CRO-1230)	\$ 500.00	\$ 500.00
9) Loan Proceeds (CRO-1410)	\$	\$
10) Refunds/Reimbursements To the Committee (CRO-1240)	\$	\$
11) Other Receipt Sources		
11a) Interest on Bank Accounts (CRO-1250)	\$ 4.21	\$ 4.21
11b) Contributions from Not-for-Profit Organizations (CRO-1250)	\$	\$
11c) Outside Sources of Income (CRO-1250)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, and 11c)	\$ 8,504.21	\$ 8,504.21

## EXPENDITURES

13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 8841.82	\$ 8841.82
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$
14) Loan Repayments (CRO-1420)	\$	\$
15) Refunds/Reimbursements From the Committee (CRO-1320)	\$	\$
16) In-Kind Contributions (CRO-1510)	\$	\$
17) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, and 16)	\$ 8,841.82	\$ 8,841.82
18) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 17)	\$ 4239.48	\$ 4239.48

## ADDITIONAL INFORMATION

19) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$	
20) Outstanding Loans (incl. 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) Account Transfers Within the Committee (CRO-1720)	\$	
24) Administrative Support (CRO-1710)	\$	\$
25) Forgiven Loans (CRO-1440)	\$	\$
26) 48-Hour Notice Reports Sum	\$	\$

# Contributions from Individuals

Pg 1 of 2 Amendment ☐ Yes ☒ No

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Schatzman for Sheriff						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Betty Ann Runnion 1244 Arbor Rd WS, NC 27104				<b>b. Job Title/Profession</b> RETIRED  <b>c. Employer's Name/Specific Field</b>  		<b>d. Comments</b>   <b>e. Election Sum to Date</b> \$ 1,000.00
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	100	Check		01/17/2007	\$ 1,000.00	
<input type="checkbox"/>	100	Check			\$	
<input type="checkbox"/>	100	Check			\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Donald K Tisdale Sr 280 Stanton Dr WS, NC 27106				<b>b. Job Title/Profession</b> ATTORNEY  <b>c. Employer's Name/Specific Field</b> ATTORNEY		<b>d. Comments</b>   <b>e. Election Sum to Date</b> \$ 1,250.00
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	100	Check		01/17/2007	\$ 1,250.00	
<input type="checkbox"/>	100	Check			\$	
<input type="checkbox"/>	100	Check			\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  D Kenneth Tisdale Jr 1250 Yorkshire Rd WS, NC 27106				<b>b. Job Title/Profession</b> ATTORNEY  <b>c. Employer's Name/Specific Field</b> ATTORNEY		<b>d. Comments</b>   <b>e. Election Sum to Date</b> \$ 1,000.00
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	100	Check		01/17/2007	\$ 1,000.00	
<input type="checkbox"/>	100	Check			\$	
<input type="checkbox"/>	100	Check			\$	
<b>4. Total only this Page</b>					\$ 3,250.00	
<b>5. Total of ALL CRO-1210 Pages</b>					\$ 8,000.00	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>						

# Contributions from Individuals

Pg 2 of 2 Amendment ☐ Yes ☒ No

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Schatzman for Sheriff						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Richard Childress 9160 Hampton Rd Lexington, NC 27295				<b>b. Job Title/Profession</b>		<b>d. Comments</b>
				CEO		
				<b>c. Employer's Name/Specific Field</b>		
		RC RACING		<b>e. Election Sum to Date</b>		
				\$ 2,000.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	100	Check		01/17/2007	\$ 2,000.00	
<input type="checkbox"/>	100	Check			\$	
<input type="checkbox"/>	100	Check			\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Christopher Clifton 3740 Kirklees Rd WS, NC 27104				<b>b. Job Title/Profession</b>		<b>d. Comments</b>
				ATTORNEY		
				<b>c. Employer's Name/Specific Field</b>		
		ATTORNEY		<b>e. Election Sum to Date</b>		
				\$ 1,000.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	100	Check		01/17/2007	\$ 1,000.00	
<input type="checkbox"/>	100	Check			\$	
<input type="checkbox"/>	100	Check			\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Michael Grace 390 Gaither Rd WS, NC 27101				<b>b. Job Title/Profession</b>		<b>d. Comments</b>
				ATTORNEY		
				<b>c. Employer's Name/Specific Field</b>		
		ATTORNEY		<b>e. Election Sum to Date</b>		
				\$ 1,750.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	100	Check		01/17/2007	\$ 1,750.00	
<input type="checkbox"/>	100	Check			\$	
<input type="checkbox"/>	100	Check			\$	
<b>4. Total only this Page</b>					\$ 4,750.00	
<b>5. Total of ALL CRO-1210 Pages</b>					\$ 8,000.00	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>						

# Contributions from Other Political Committees

Pg 1 of 1 Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable) <b>SCHATZMAN FOR SHERIFF</b>				2. ID Number	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>FORTH CO. REPUBLICAN MEET CLUB 4587 OLD WINSTON RD KERNERVILLE NC 27284 336 784 - 4392</b>			b. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		d. Comments
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
			e. Election Sum to Date \$ <b>500.00</b>		
f. Account Code <b>100</b>	g. Form of Payment <b>CHECK</b>	h. In-Kind Description	i. Date (mm/dd/yyyy) <b>01/10/2007</b>	j. Amount \$ <b>500.00</b>	
				\$	
				\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		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 \$		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount \$	
				\$	
				\$	
				\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		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 \$		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount \$	
				\$	
				\$	
				\$	
4. Total only this Page				\$ <b>500.00</b>	
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$ <b>500.00</b>	

# Other Receipt Sources

Pg 1 of 1 Amendment ☐ Yes ☒ No

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

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
Schatzman for Sheriff					
<b>3. Type of Receipt Source (Please use separate CRO-1250 forms for each type of Receipt Source.)</b>					
<input checked="" type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input type="checkbox"/> Outside Sources of Income					
<b>4. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Southern Community Bank PO Box 26134 Winston-Salem, NC 27114 (336) 765-8500			<b>b. Not-for-Profit Federal ID #</b>		<b>d. Comments</b>
			<b>c. Outside Source Explanation</b>		
			<b>e. Election Sum to Date</b>		
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. In-Kind Description</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
100	Bank credit		01/31/2007	\$ 1.06	
100	Bank credit		02/28/2007	\$ .90	
<b>4. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Southern Community Bank PO Box 26134 Winston-Salem, NC 27114 (336) 765-8500			<b>b. Not-for-Profit Federal ID #</b>		<b>d. Comments</b>
			<b>c. Outside Source Explanation</b>		
			<b>e. Election Sum to Date</b>		
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. In-Kind Description</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
100	Bank credit		03/30/2007	\$ .58	
100	Bank credit		04/30/2007	\$ .59	
<b>4. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Southern Community Bank PO Box 26134 Winston-Salem, NC 27114 (336) 765-8500			<b>b. Not-for-Profit Federal ID #</b>		<b>d. Comments</b>
			<b>c. Outside Source Explanation</b>		
			<b>e. Election Sum to Date</b>		
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. In-Kind Description</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
100	Bank credit		05/31/2007	\$ .57	
100	Bank credit		06/29/2007	\$ .51	
<b>5. Total only this Page</b>				\$ 4.21	
<b>6. Total of ALL CRO-1250 Pages</b>				\$ 4.21	
(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest) (This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution) (This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)					

# Disbursements

Pg 1 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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
Schatzman for Sheriff							
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
THE BROOKSTOWN INN 200 BROOKSTOWN AVE WSN 27101 336-772-0147							
				<b>c. Level Registered (Specify)</b>			
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						<b>e. Election Sum to Date</b>	
						\$ 340.64	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
100	Check	0	01/12/2007	\$ 340.64	ELECTION NIGHT PARTY		
100	Check			\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
Bill Schatzman 3450 Kirklees Rd Winston Salem, NC 27104 336-794-0988							
				<b>c. Level Registered (Specify)</b>			
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						<b>e. Election Sum to Date</b>	
						\$ 228.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
100	Check	0	01/25/2007	\$ 150.00	ELECTION NIGHT PARTY GRATUITA		
100	Check	I	01/25/2007	\$ 78.00	POSTAGE		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
Bill Schatzman 3450 Kirklees Rd Winston Salem, NC 27104 336-794-0988							
				<b>c. Level Registered (Specify)</b>			
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						<b>e. Election Sum to Date</b>	
						\$ 1028.10	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
100	Check	0	01/25/2007	\$ 281.61	CAMPAIGN COMMITTEE GIFTS		
100	Check	K	01/25/2007	\$ 518.49	OFFICE SUPPLIES		
<b>5. Total only this Page</b>						\$ 1368.74	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 8841.82	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
<b>7. Purpose Codes</b> (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		O* - Other	
* Codes require detailed explanation in required remarks field (k)							

# Disbursements

Pg 2 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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
Schatzman for Sheriff							
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
Horn & Stronach 315 N Spruce St Winston Salem, NC 27101 336-721-2992				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b> \$ 5,567.78	
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
100	Check	A	02/06/2007	\$ 5,567.78	TV RADIO DIRECT MAIL		
100	Check			\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
Bill Schatzman 3450 Kirklees Rd Winston Salem, NC 27104 336-794-0988				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b> \$ 1,800.30	
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
100	Check	G	02/07/2007	\$ 500.00	LINCOLN - REASON DINNER		
100	Check	K	02/07/2007	\$ 272.20	OFFICE JUDICIAL		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
Bill Schatzman 3450 Kirklees Rd Winston Salem, NC 27104 336-794-0988				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b> \$ 1,978.30	
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
100	Check	O	02/07/2007	\$ 178.00	CAMPAIGN COMMITTEE MEETING		
100	Check			\$			
<b>5. Total only this Page</b>						\$ 6,517.98	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 8,841.82	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
<b>7. Purpose Codes</b> (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		O* - Other	
* Codes require detailed explanation in required remarks field (k)							



# Disbursements

Pg 3 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) <b>Schatzman for Sheriff</b>						2. ID Number	
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 checked="" type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <span style="float:right"><input type="checkbox"/> Add <input type="checkbox"/> Remove</span>							
a. Full Name, Mailing Address & Phone (include city, state, & zip)  <b>LINCOLN - REGAN DAY DINNER</b> <b>2110 CLOVERDALE AVE</b> <b>WIS, NC 27103</b> <b>336-724-6000</b>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ <b>500.00</b>	
f. Account Code <b>100</b>	g. Form of Payment <b>Check</b>	h. Purpose Code <b>G</b>	i. Date (mm/dd/yyyy) <b>02/07/2007</b>	j. Amount <b>\$500.00</b>	k. Required Remarks		
100	Check			\$			
4. Payee Information <span style="float:right"><input type="checkbox"/> Add <input type="checkbox"/> Remove</span>							
a. Full Name, Mailing Address & Phone (include city, state, & zip)  <b>Bill Schatzman</b> <b>3450 Kirklees Rd</b> <b>Winston Salem, NC 27104</b> <b>336-794-0988</b>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ <b>2014.11</b>	
f. Account Code <b>100</b>	g. Form of Payment <b>Check</b>	h. Purpose Code <b>C</b>	i. Date (mm/dd/yyyy) <b>03/27/2007</b>	j. Amount <b>\$35.81</b>	k. Required Remarks <b>DONOR DINNER</b>		
100	Check			\$			
4. Payee Information <span style="float:right"><input type="checkbox"/> Add <input type="checkbox"/> Remove</span>							
a. Full Name, Mailing Address & Phone (include city, state, & zip)  <b>Bill Schatzman</b> <b>3450 Kirklees Rd</b> <b>Winston Salem, NC 27104</b> <b>336-794-0988</b>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ <b>2116.30</b>	
f. Account Code <b>100</b>	g. Form of Payment <b>Check</b>	h. Purpose Code <b>C</b>	i. Date (mm/dd/yyyy) <b>04/16/2007</b>	j. Amount <b>\$102.19</b>	k. Required Remarks <b>DONOR DINNER</b>		
100	Check			\$			
5. Total only this Page						\$ <b>638.00</b>	
6. Total of ALL CRO-1310 Pages (This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						\$ <b>8841.82</b>	
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		O* - Other	
* Codes require detailed explanation in required remarks field (k)							

# Disbursements

Pg 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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
Schatzman for Sheriff							
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
Bill Schatzman 3450 Kirklees Rd Winston Salem, NC 27104 336-794-0988				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b> \$ 2,320.88	
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
100	Check	C	05/21/2007	\$204.58	DONOR DINNER		
100	Check			\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
Wes Brooks 1313 Ashleybrook Lane Winston Salem, NC 27103 336-760-4464				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b> \$ 112.52	
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
100	Check	O	05/20/2007	\$112.52	TRAVEL - TREASURER'S MEETING - RALEIGH		
100	Check			\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b> \$	
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
100	Check			\$			
100	Check			\$			
<b>5. Total only this Page</b>						\$ 317.10	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 8,841.82	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
<b>7. Purpose Codes</b> (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		O* - Other	
* Codes require detailed explanation in required remarks field (k)							