

**Disclosure Report Cover****COPY**

Amendment

☐ Yes ☐ No

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

<b>1. Committee Information</b>						
a. Full Name <b>Committee to Elect HERRON for Sheriff</b>		c. ID Number <b>ELQ B81</b>				
b. Mailing Address (include City, State and Zip Code) <b>2060 Saponi Village Ct. Winston-Salem, NC. 27127</b>		d. Date Filed <b>7/6/2010</b>				
		e. Phone Number <b>336-785-2502</b>				
2. Report Year <b>2010</b>	3. Period Start Date (mm/dd/yy) <b>04-18-2010</b>	4. Period End Date (mm/dd/yy) <b>06-30-2010</b>	5. Treasurer Full Name <b>Bruce E. Gouge</b>			
<b>6. Type of Committee (Check One)</b> <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Legal Expense Fund		<b>9. Type of Report (check only one type of report from one category)</b> <table border="1"><tr><td><b>Municipal</b> <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><b>State/County</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special</td><td><b>Referendum</b> <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>		<b>Municipal</b> <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	<b>State/County</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<b>Referendum</b> <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>Municipal</b> <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	<b>State/County</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<b>Referendum</b> <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"/> Other:		<b>10. Special Report Name</b> <b>2010 EL-6 PM 1:38</b>				
<b>8. Number of Fundraisers this Report</b> <b>0</b>						
<b>11. Account Information</b>		<b>11. Account Information</b>				
a. Financial Institution Full Name <b>BB &amp; T</b>		a. Financial Institution Full Name				
b. Purpose <b>CAMPAIGN CHECKING ACCOUNT</b>	c. Account Code <b>JWH 10</b>	b. Purpose	c. Account Code			
	d. Period Begin Balance <b>\$ 770.94</b>		d. Period Begin Balance			
<b>CERTIFICATION</b>						
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.						
<b>BRUCE E. GOUGE</b> Printed Name of Signer		<b>Bruce E. Gouge</b> Signature of Appointed Treasurer				
		<b>7/6/2010</b> Date				
<b>FOR OFFICE USE ONLY</b>						
Date Received: <b>7/6/10</b>	Employee: <b>Judy Spears</b>	<b>Delivery Method</b> <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed				
Date Postmarked:	Employee:	<input type="checkbox"/> Signer has not received mandatory training				
Date Scanned:	Employee:					
Date Data Entered:	Employee:					
<b>Please Note:</b> This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.						

# Detailed Summary

Amendment

☐ Yes ☐ No

Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
ELECT HERRON FOR SHERIFF		2ND QUARTER		ICQB 81	
Start of Election Cycle: January 1, 2010		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 770.94		\$	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$ 1,309.67	
6) Contributions from Individuals (CRO-1210)		\$ 1,076.97		\$ 5,712.09	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$		\$	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$		\$ 200.00	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$		\$	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$		\$	
11e) Exempt Purchase Price Sales (CRO-1265)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 1,076.97		\$ 7,221.76	
<b>EXPENDITURES</b>					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 460.84		\$ 5,831.64	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
13c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$		\$	
15) Loan Repayments (CRO-1420)		\$		\$	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$		\$ 112.09	
17) In-Kind Contributions (CRO-1510)		\$ 376.97		\$ 867.09	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 837.85		\$ 6,210.82	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1,010.06		\$ 1,010.94	
<b>ADDITIONAL INFORMATION</b>					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$			
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-2220)		\$		\$	
28) Contributions to be Refunded (CRO-1215)		\$		\$	

# Contributions from Individuals

Pg 1 of 3 Amendment ☐ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
ELECT HERRON For Sheriff					ICQB 81	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
MAL WEATHERMAN 4306 OLD BELEWS CRK. RD WINSTON-SALEM, NC 27104				President / CEO		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				Safety Tech Consultants, Inc		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	JWH10	Check		05-21-2010	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
MARY DICKINSON 3720 KIRKLEES ROAD WINSTON-SALEM, NC 27104				Retired		
				c. Employer's Name/Specific Field		e. Election Sum to Date
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	JWH10	Check		06-03-2010	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
RONALD H. WINDSOR 3441 GELADSTONE ST. WINSTON-SALEM, NC 27104				Retired		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				F. C. Sheriff's Office, Reserve		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	JWH10	Check		06-12-2010	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 200.00	
5. Total of ALL CRO-1210 Pages					\$ 1,076.97	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

# Contributions from Individuals

Pg 2 of 3 Amendment ☐ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Elect HERRON for Sheriff					ILQB 81	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
DHHO McMANUS 4755 COUNTRY Club Rd. A114J WINSTON-SALEM, NC 27104			Retired			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
					\$ 176.05	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		CASH	POSTCARDS	05-28-2010	\$ 126.05	
<input type="checkbox"/>	JWH10	CASH		05-06-2010	\$ 50.00	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Geetruce McMANUS 4755 COUNTRY Club Rd. A114J WINSTON-SALEM, NC 27104			Retired			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	JWH10	CASH		05-06-2010	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
William P. CARERS 4830 WESTRAY LANE WALKERTOWN, NC 27051			Retired			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			FORSYTH CO. Sheriff's Office		\$ 207.09	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check	Rental Fee	06-10-2010	\$ 45.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 271.05	
5. Total of ALL CRO-1210 Pages					\$ 1,076.97	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

# Contributions from Individuals

Pg 3 of 3 Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable) <u>Elect HERRON for Sheriff</u>					2. ID Number <u>ICQ 881</u>	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>JERRY HERRON</u> <u>2060 SARDONI VILLAGE CT</u> <u>WINSTON-SALEM, NC 27127</u>				b. Job Title/Profession <u>Retired</u>		d. Comments
				c. Employer's Name/Specific Field <u>Forsyth Co.</u> <u>Sheriff's Office</u>		
				e. Election Sum to Date <u>\$ 703.73</u>		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		<u>Debit</u>	<u>BRUNCHURES</u>	<u>06-27-2010</u>	<u>\$ 84.94</u>	
<input type="checkbox"/>		<u>Debit</u>	<u>BUSINESS CARDS</u>	<u>05-28-2010</u>	<u>\$ 120.98</u>	
<input type="checkbox"/>					<u>\$</u>	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>CARL F. PARRISH</u> <u>120 AFTONSHIRE CT.</u> <u>WINSTON-SALEM, NC 27104</u>				b. Job Title/Profession <u>ATTORNEY</u>		d. Comments
				c. Employer's Name/Specific Field <u>Self Employed</u>		
				e. Election Sum to Date <u>\$ 300.00</u>		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	<u>JWH10</u>	<u>Check</u>		<u>06-29-2010</u>	<u>\$ 300.00</u>	
<input type="checkbox"/>					<u>\$</u>	
<input type="checkbox"/>					<u>\$</u>	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>TONY D. YOUNG</u> <u>1125 OLD PAMPECO BEACH RD, W</u> <u>BEHAVEN, NC 27810</u>				b. Job Title/Profession <u>Retired</u>		d. Comments
				c. Employer's Name/Specific Field <u>FORSYTH COUNTY</u>		
				e. Election Sum to Date <u>\$ 100.00</u>		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	<u>JWH10</u>	<u>Check</u>		<u>06-28-2010</u>	<u>\$ 100.00</u>	
<input type="checkbox"/>					<u>\$</u>	
<input type="checkbox"/>					<u>\$</u>	
4. Total only this Page					<u>\$ 665.92</u>	
5. Total of ALL CRO-1210 Pages					<u>\$ 1,076.97</u>	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

# Disbursements

Pg 1 of 2

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>ELECT HERRON FOR SHERIFF</b>						2. ID Number <b>ICQB-81</b>	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>Office Debot 1235 Silas Creek Parkway WINSTON-SALEM, NC 27127</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>\$ 581.01</b>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
<b>JWH10</b>	<b>Debit</b>	<b>B</b>	<b>05-10-2010</b>	<b>\$258.17</b>	<b>POSTCARDS</b>		
<b>JWH10</b>	<b>Debit</b>	<b>I</b>	<b>05-25-2010</b>	<b>\$52.39</b>	<b>POSTAGE</b>		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>BILE SHOTZ STAFFORD ROAD WINSTON-SALEM, NC</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>\$ 31.08</b>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
<b>JWH10</b>	<b>Debit</b>	<b>B</b>	<b>05-13-2010</b>	<b>\$31.08</b>	<b>MEETING</b>		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>M &amp; M ENTERPRISE 2116 S. MAIN ST. WINSTON-SALEM, NC 27127</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>\$ 1,442.79</b>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
<b>JWH10</b>	<b>Debit</b>	<b>B</b>	<b>05-20-2010</b>	<b>\$59.24</b>	<b>STENS</b>		
				\$			
5. Total only this Page						<b>\$ 460.00</b>	
6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						<b>\$ 460.88</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		Q* - Donation to Legal Expense Fund	
O* Other							
8. Codes require detailed explanation in required remarks field (k)							

# Disbursements

Pg 2 of 2

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>ELECT HERRON FOR SHERIFF</b>						2. ID Number <b>ICQB 81</b>	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>WAL-MART STORE # 3626, HWY 150 WINSTON-SALEM, NC 27127</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>\$ 242.36</b>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
<b>JWH10</b>	<b>Debit</b>	<b>K</b>	<b>06-14-2010</b>	<b>\$35.35</b>	<b>Office Supplies</b>		
<b>JWH10</b>	<b>Debit</b>	<b>K</b>	<b>06-19-2010</b>	<b>\$ 6.47</b>	<b>Office Supplies</b>		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>WAL-MART STORE # 3626, HWY 150 WINSTON-SALEM, NC 27127</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>\$ 256.34</b>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
<b>JWH10</b>	<b>Debit</b>	<b>D</b>	<b>06-19-2010</b>	<b>\$13.98</b>	<b>Pepsi Products</b>		
				<b>\$</b>			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>MURPHY USA # 7420 3470 PARKWAY VILLAGE CR. WINSTON-SALEM, NC 27127</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>\$ 4.08</b>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
<b>JWH10</b>	<b>Debit</b>	<b>D</b>	<b>06-19-2010</b>	<b>\$4.08</b>	<b>Ice</b>		
				<b>\$</b>			
5. Total only this Page						<b>\$ 59.88</b>	
6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						<b>\$ 460.78</b> <b>460.88</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		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

# In-Kind Contributions

Pg 1 of 1

Amendment

☐ Yes ☐ 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.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Elect HERRON for Sheriff		JLQB 81	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
JERRY HERRON 2060 SAGONI VILLAGE LT WINSTON-SALEM, NC 27127		<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 503.73	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Brochures		06-27-2010	\$ 84.94
Business CARDS		05-28-2010	\$ 120.98
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
WILLIAM CABERH 4830 WESTRAY LN. WALKERTOWN, NC 27051		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 157.09	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Rental fee for Picnic shelter		06-10-2010	\$ 45.00
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
DIXIE MC MANUS 4755 COUNTRY CLUB RD, A1145 WINSTON-SALEM, NC 27104		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 126.05	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
POSTCARDS		05-28-2010	\$ 126.05
			\$
			\$
4. Total only this Page		\$ 376.97	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 376.97	