

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

2014 JAN 21 AM 10:46

1. Committee Information			
a. Full Name <i>HERRON for Sheriff</i>		c. ID Number <i>ICQB 81</i>	
b. Mailing Address (include City, State and Zip Code) <i>2060 Saponi Village Court Winston-Salem, NC 27127</i>		d. Date Filed	
		e. Phone Number <i>336-785-2502</i>	
2. Report Year <i>2010</i>	3. Period Start Date (mm/dd/yy) <i>01-01-2010</i>	4. Period End Date (mm/dd/yy) <i>04-17-2010</i>	5. Treasurer Full Name
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
☒ Candidate Campaign ☐ PAC ☐ Independent Expenditure ☐ Legal Expense Fund ☐ Party ☐ Referendum ☐ Joint Fundraiser		Municipal ☐ Organizational ☐ Thirty-five day ☐ Pre-primary ☐ Pre-election ☐ Pre-runoff ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special State/County ☐ Organizational ☒ Quarterly ☐ First ☐ Second ☐ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special Referendum ☐ Organizational ☐ Pre-referendum ☐ Final ☐ Supplemental Final ☐ Annual ☐ Special	
7. Type of Fund (if applicable, check one)		10. Special Report Name	
☐ Booster Fund ☐ Building Fund ☒ Other:			
8. Number of Fundraisers this Report <i>FUNDRAISER (2)</i>			
11. Account Information		11. Account Information	
a. Financial Institution Full Name <i>BB&T</i>		a. Financial Institution Full Name	
b. Purpose <i>CAMPAIGN checking ACCOUNT</i>	c. Account Code <i>JWH10</i>	b. Purpose	c. Account Code
	d. Period Begin Balance <i>\$ 1,579.21</i>		d. Period Begin Balance \$
CERTIFICATION			
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.			
<i>BRUCE E. GORGE</i> Printed Name of Signer		<i>Bruce E. Gorge</i> Signature of Appointed Treasurer	
		<i>1/24/2014</i> Date	
FOR OFFICE USE ONLY			
Date Received: <i>1/24/2014</i>	Employee: <i>Judy Spas</i>	Delivery Method ☐ Normal Mail ☐ Registered Mail ☒ Hand Delivered ☐ Electronically Filed	
Date Postmarked:	Employee:		
Date Scanned:	Employee:		
Date Data Entered:	Employee:	☐ 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.			

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
Herron for Sheriff		1st Quarter	ILQB 81
Start of Election Cycle: January 1, 2010		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1,573.21	\$
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 666.67	\$ 1,309.67	
6) Contributions from Individuals (CRO-1210)	\$ 3,235.12	\$ 4,635.12	
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	\$ 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)	\$ 4,101.74	\$ 6,144.79	
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 4,512.67	\$ 4,982.46	
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	\$ 112.09	
17) In-Kind Contributions (CRO-1510)	\$ 490.12	\$ 490.12	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 5,114.88	\$ 5,584.67	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 560.12	\$ 560.12	
ADDITIONAL INFORMATION			
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)	\$	\$	

Disbursements

Pg 1 of 10 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) <u>Heron for Sheriff</u>						2. ID Number <u>ILQB81</u>	
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 Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Clemmons Civic Center</u> <u>P.O. Box 91</u> <u>Clemmons, NC 27012</u>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
<u>JWB10</u>	<u>Check 1005</u>	<u>C</u>	<u>02-05-2010</u>	<u>\$ 100.00</u>	<u>Room Rental</u>		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Forsythe County Board of Elections</u> <u>200 North Chestnut St.</u> <u>Winston-Salem, NC 27120</u>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
<u>JWB10</u>	<u>Check 1006</u>	<u>O</u>	<u>02-09-2010</u>	<u>\$ 992.00</u>	<u>Filing fee</u>		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>FedEx Kinko's #300</u> <u>Winston-Salem, NC</u>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
<u>JWB10</u>	<u>Check CARD</u>	<u>B</u>	<u>02-18-2010</u>	<u>\$ 33.40</u>	<u>Printing</u>		
<u>JWB10</u>	<u>Check CARD</u>	<u>B</u>	<u>02-20-2010</u>	<u>\$ 155.62</u>	<u>Post CARDS</u>		
5. Total only this Page						\$ <u>1,281.02</u>	
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)						\$ <u>4,512.67</u>	
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)							

Disbursements

Pg 2 of 10 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) <u>Heron Fox Sheriff</u>						2. ID Number <u>ICQB 81</u>	
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 Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
<u>WAL-MART # 3626</u> <u>Winston-Salem, NC</u>				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:			
f. Account Code		g. Form of Payment		h. Purpose Code		i. Date (mm/dd/yyyy)	
<u>JWARD</u>		<u>CHECK CARD</u>		<u>K</u>		<u>02-20-2010</u>	
						j. Amount	
						<u>\$ 57.01</u>	
						k. Required Remarks	
						<u>Office Supplies</u>	
<u>JWARD</u>		<u>CHECK CARD</u>		<u>K</u>		<u>03-10-2010</u>	
						<u>\$ 47.35</u>	
						<u>Office Supplies</u>	
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
<u>SAM'S Club # 8228</u> <u>Winston-Salem, NC</u>				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:			
f. Account Code		g. Form of Payment		h. Purpose Code		i. Date (mm/dd/yyyy)	
<u>JWARD</u>		<u>CHECK CARD</u>		<u>L</u>		<u>03-04-2010</u>	
						j. Amount	
						<u>\$ 225.18</u>	
						k. Required Remarks	
						<u>Supplies</u>	
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
<u>Office Depot</u> <u>Winston-Salem, NC</u>				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:			
f. Account Code		g. Form of Payment		h. Purpose Code		i. Date (mm/dd/yyyy)	
<u>JWARD</u>		<u>CHECK CARD</u>		<u>K</u>		<u>03-04-2010</u>	
						j. Amount	
						<u>\$ 19.84</u>	
						k. Required Remarks	
						<u>Supplies</u>	
5. Total only this Page						<u>\$ 349.38</u>	
6. Total of ALL CRO-1310 Pages						<u>\$ 4,512.67</u>	
(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)							
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)							

Disbursements

Amendment
Pg 3 of 10 ☒ 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) Horton For Sheriff						2. ID Number ICQB 81	
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 Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Clemmons Civic Center P.O. Box 91 Clemmons, NC 27012				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
IWA10	Check 1007	C	03-11-2010	\$ 125.00	Room Rental		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Chef Smart Institution Food House Winston-Salem, NC				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
IWA10	Check CARD	C	03-12-2010	\$ 306.04	Supplies		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) M & M Engraving Winston-Salem, NC				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
IWA10	Check CARD	B	03-11-2010	\$ 118.53	Magnetic Signs		
				\$			
5. Total only this Page						\$ 549.57	
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)						\$ 4,512.67	
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)							

Disbursements

Pg 4 of 10 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	
Heron for Sheriff						ICQB 81	
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 Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Mr BBQ Winston-Salem, NC							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JWHD	Check CARD	C	03-12-2006	\$ 46.01	Supplies		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Four Brothers #217 Wakeletown, NC							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JWHD	Check CARD	C	03-12-2006	\$ 49.08	Supplies		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Food Lion #1386 Kernersville, NC							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JWHD	Check CARD	C	03-12-2006	\$ 9.67	Supplies		
				\$			
5. Total only this Page						\$ 98.76	
6. Total of ALL CRO-1310 Pages						\$ 4,512.67	
(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)							
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)							

Disbursements

Page 5 of 10 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) <u>Herron for Sheriff</u>						2. ID Number <u>ICQB 81</u>	
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 Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Office Depot #321</u> <u>Winston-Salem, NC</u>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$	
f. Account Code <u>JWA10</u>	g. Form of Payment <u>Check CARD</u>	h. Purpose Code <u>B</u>	i. Date (mm/dd/yyyy) <u>03-15-2010</u>	j. Amount \$ <u>99.09</u>	k. Required Remarks <u>Tickets</u>		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>WALMART #3626</u> <u>Winston-Salem, NC</u>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$	
f. Account Code <u>JWA10</u>	g. Form of Payment <u>Check CARD</u>	h. Purpose Code <u>K</u>	i. Date (mm/dd/yyyy) <u>03-17-2010</u>	j. Amount \$ <u>23.67</u>	k. Required Remarks <u>Supplies</u>		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Vista Printing</u> <u>on-line</u> <u>866-893-6743</u>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$	
f. Account Code <u>JWA10</u>	g. Form of Payment <u>Check CARD</u>	h. Purpose Code <u>B</u>	i. Date (mm/dd/yyyy) <u>03-22-2010</u>	j. Amount \$ <u>118.15</u>	k. Required Remarks <u>Business CARDS</u>		
				\$			
5. Total only this Page						\$ <u>240.91</u>	
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)						\$ <u>4,512.67</u>	
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)							

Disbursements

Pg 6 of 10 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	
Helen Fox Sheriff						ICQB 81	
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 Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
William Capens 4830 Westway Lane WALKERTOWN, NC							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JWA10	CHECK 1008	C	03-22-2010	\$ 44.37	Hot Dog Buns		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
FedEx Kinko's #300							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JWA10	CHECK CARD	B	03-26-2010	\$ 158.33	Flyers		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
WAL-MART #3626							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JWA10	CHECK CARD	K	03-26-2010	\$ 51.66	Supplies		
				\$			
5. Total only this Page						\$ 254.33	
6. Total of ALL CRO-1310 Pages						\$ 4,512.67	
(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)							
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)							

Disbursements

Pg 7 of 10 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) Herron Fox Sheriff						2. ID Number ICQB 81	
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 Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) M & M Engraving 2116 S. Main Street Winston-Salem, NC 27127				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$	
f. Account Code		g. Form of Payment		h. Purpose Code		i. Date (mm/dd/yyyy)	
JWA10		Check CARD		B		03-29-2010	
		Check CARD		B		04-02-2010	
						\$	
j. Amount		k. Required Remarks					
\$239.21		Post CARD					
\$668.05		YARD SIGNS					
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Office Depot 1235 S. Las Creek Parkway Winston-Salem, NC				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$	
f. Account Code		g. Form of Payment		h. Purpose Code		i. Date (mm/dd/yyyy)	
JWA10		Check CARD		K		03-29-2010	
						\$	
j. Amount		k. Required Remarks					
\$151.52		Supplies					
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Post MARK 390 Cassell Street Winston-Salem, NC 27107				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$	
f. Account Code		g. Form of Payment		h. Purpose Code		i. Date (mm/dd/yyyy)	
JWA10		Check 1009		I		04-06-2010	
						\$	
j. Amount		k. Required Remarks					
\$302.40		Bulk Mailing					
5. Total only this Page						\$ 1,361.18	
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)						\$ 4,512.67	
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)							

Disbursements

Pg 8 of 10 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	
Heron Fox Sheriff				ICQB 81	
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 Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
1MR BBQ Peters Creek Parkway Winston-Salem, NC					
		c. Level Registered (Specify)		e. Election Sum to Date	
		☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
JWA10	CHECK CARD	C	04-09-2010	\$ 29.85	STAW 3 Onions
				\$	
4. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Walmart H3626					
		c. Level Registered (Specify)		e. Election Sum to Date	
		☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
JWA10	CHECK CARD	K	04-09-2010	\$ 20.85	SD CARD
				\$	
4. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Chef Smart Institution Food House					
		c. Level Registered (Specify)		e. Election Sum to Date	
		☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
JWA10	CHECK CARD	C	04-09-2010	\$ 17.40	Supplies
				\$	
5. Total only this Page				\$ 68.10	
6. Total of ALL CRO-1310 Pages				\$ 4,512.67	
(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)					
7. Purpose Codes (List detailed expenditure code in (h.) above)					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
O* Other		D - To Another Candidate		H* - Holding Public Office Expenses	
				Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k)					

Disbursements

Pg 9 of 10 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	
HERRON FOR SHERIFF					
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 Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
DOLLAR TREE #00996 1054 HANES MAN BLVD WINSTON-SALEM, NC					
			c. Level Registered (Specify)		e. Election Sum to Date
			☐ Federal ☐ County: ☐ State ☐ Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
JWAID	CHECK CARD	C	04-09-2010	\$ 9.70	Supplies
				\$	
4. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
KERNERSVILLE SENIOR CENTER 130 E. MOUNTAIN STREET KERNERSVILLE, NC 27285					
			c. Level Registered (Specify)		e. Election Sum to Date
			☐ Federal ☐ County: ☐ State ☐ Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
JWAID	CHECK 1004		01-20-2010	\$ 100.00	Room Rental
				\$	
4. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
TONY'S HELP 1217 ABBOTTS CREEK CIRCLE KERNERSVILLE, NC 27284					
			c. Level Registered (Specify)		e. Election Sum to Date
			☐ Federal ☐ County: ☐ State ☐ Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
JWAID	CHECK 1010	A	04-15-2010	\$ 132.00	website
				\$	
5. Total only this Page					\$ 242.31
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)					\$ 4,512.67
7. Purpose Codes (List detailed expenditure code in (h.) above)					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
O* Other				D - To Another Candidate	
				H* - Holding Public Office Expenses	
				Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k.)					

Disbursements

Page 10 of 10 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) <u>Herron for Sheriff</u>						2. ID Number <u>ELQB 81</u>	
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 Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>William Capens</u> <u>P.O. Box 1605</u> <u>WALKERTOWN, NC</u>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
<u>JWH10</u>	<u>Check 1011</u>	<u>C</u>	<u>04-15-2010</u>	<u>\$ 67.72</u>	<u>Supplies</u>		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				\$			
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				\$			
				\$			
5. Total only this Page						\$	
6. Total of ALL CRO-1310 Pages						\$ <u>4,512.67</u>	
(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)							
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 6 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	
Committee to Elect Herron for Sheriff		ILQB81	
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
JERRY HERRON 2060 Saponi Village Ct. Winston-Salem, NC 27127		☐ Individual ☒ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Event Tickets		01-25-2010	\$ 99.09
Office Supplies		01-25-2010	\$ 46.31
Postcards		02-05-2010	\$ 152.41
d. Election Sum to Date \$ 297.81			
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
Michael Scriven 3201 Cumberland Road Winston-Salem, NC 27105		☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Postcards		01-25-2010	\$ 80.22
			\$
			\$
d. Election Sum to Date \$ 80.22			
3. Contributor Information ☒ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
William Capens P.O. Box 1005 WALKERTOWN, NC		☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Hot Dog Buns		03-12-2010	\$ 44.37
Supplies		04-15-2010	\$ 67.72
			\$
4. Total only this Page		\$ 490.12	
5. Total of ALL CRO-1510 Pages		\$ 490.12	