

# 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

<b>1. Committee Information</b>	
a. Full Name <u>John Wait for Mayor</u>	c. ID Number
b. Mailing Address (include City, State and Zip Code) <u>6310 Armoby Rd. Clemmons, NC 27012</u>	d. Date Filed <u>1-22-18</u>
	e. Phone Number <u>336-601-8789</u>

<b>2. Report Year</b> <u>2017</u>	<b>3. Period Start Date (mm/dd/yy)</b> <u>10-24-17</u>	<b>4. Period End Date (mm/dd/yy)</b> <u>12-31-17</u>	<b>5. Treasurer Full Name</b> <u>Joanne Holbrook Elliott-Perry</u>
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<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<b>Municipal</b>	<b>State/County</b>	<b>Referendum</b>
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	
<b>7. Type of Fund (if applicable, check one)</b>		<b>10. Special Report Name</b>		
<input type="checkbox"/> Booster Fund				
<input type="checkbox"/> Building Fund				
<input type="checkbox"/> Other:				
<b>8. Number of Fundraisers this Report</b> <u>0</u>				

<b>11. Account Information</b>		<b>11. Account Information</b>	
a. Financial Institution Full Name <u>BB&amp;T</u>		a. Financial Institution Full Name	
b. Purpose <u>Campaign</u>	c. Account Code <u>005206271339</u>	b. Purpose	c. Account Code
	d. Period Begin Balance <u>\$ 604.26</u>		d. Period Begin Balance <u>\$</u>

**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.

<u>Joanne H. Elliott-Perry</u> Printed Name of Signer	<u>Joanne H. Elliott-Perry</u> Signature of Appointed Treasurer	<u>1-19-18</u> Date
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**FOR OFFICE USE ONLY**

Date Received: <u>1/22/18</u>	Employee: <u>[Signature]</u>	Delivery Method <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: _____	

**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	
John Wait for Mayor		Post-Election Final			
Start of Election Cycle: January 1, 2017		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 604.26		\$ 0	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ <del>563.00</del>		\$	
6) Contributions from Individuals (CRO-1210)		\$ 563.00		\$ 2821.39	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$ 625.00		\$ 625.00	
9) Loan Proceeds (CRO-1410)		\$		\$	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$		\$	
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)		\$ 1188.00		\$ 3446.39	
<b>EXPENDITURES</b>					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 1097.49		\$ 2751.62	
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)		\$ 694.77		\$ 694.77	
17) In-Kind Contributions (CRO-1510)		\$		\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ <del>1073.49</del> 1792.26		\$ <del>2751.62</del> 3446.39	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 0		\$ 0	
<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	
John Wait for Mayor							
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	
John Lawrence Wait 6310 Armoby Rd. Clemmons, NC 27012				Attorney			
				c. Employer's Name/Specific Field			
				Martin + Gifford, PLLC		e. Election Sum to Date	
						\$ 1,786.39	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	JW1	Out of Pocket		10/29/2017	\$ 19.00		
<input type="checkbox"/>	JW1	Out of Pocket		11/05/2017	\$ 84.00		
<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	
Lawrence B. Wait 8696 Topper Lake Rd. Lake Odessa, MI 48849				Farmer			
				c. Employer's Name/Specific Field			
				Self Employed		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"/>	JW1	Check		10/30/2017	\$ 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	
Janna Ajam 3918 Burning Tree Ln. Winston-Salem, NC 27106				Physician			
				c. Employer's Name/Specific Field			
				Carolina's Pain Institute		e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	JW1	Website		10/31/2017	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 253.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 1,188.00	

# Contributions from Individuals

Pg 2 of 3

Amendment	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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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	
John Wait for Mayor						
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
John Teggart 6315 Rustinburg Rd. Clemmons, NC 27012				Executive		
				c. Employer's Name/Specific Field		
				XPO Logistics		
				e. Election Sum to Date		
				\$ 250.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	Jwl	check		10/31/2017	\$ 250.00	
<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
Steven Grainger 6591 Gentry Circle Clemmons, NC 27012				Self Employed		
				c. Employer's Name/Specific Field		
				Attorney		
				e. Election Sum to Date		
				\$ 10.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	Jwl	website		11/3/2017	\$ 10.00	
<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
Richard Setaro 709 Hartford Rd. Raleigh, NC 27610				Owner		
				c. Employer's Name/Specific Field		
				Gigis Cupcakes		
				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"/>	Jwl	website		11/7/2017	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1,188.00	



# 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

<b>1. Committee Full Name (and Fund if applicable)</b> <u>John Wait for Mayor</u>					<b>2. ID Number</b>	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Clemmons Citizens Want A Voice</u> <u>5931 Greenhaven Dr.</u> <u>Winston-Salem, NC 27103</u>				b. Job Title/Profession <u>Political Committee</u>		d. Comments
				c. Employer's Name/Specific Field <u>Political Committee</u>		e. Election Sum to Date \$ <u>625.00</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>In Kind</u>	<u>2 Ads Clemmons Courier</u>	<u>10/29+31/17</u>	\$ <u>100.00</u>	
<input type="checkbox"/>		<u>In Kind</u>	<u>Postcards</u>	<u>10/30/17</u>	\$ <u>175.00</u>	
<input type="checkbox"/>		<u>In Kind</u>	<u>Ad Winston-Salem Jnl</u>	<u>11/1/17</u>	\$ <u>350.00</u>	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
				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"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
				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"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ <u>625.00</u>	
<b>5. Total of ALL CRO-1210 Pages</b> <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					\$ <u>1,188.00</u>	

# Disbursements

Pg 1 of 3 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	
John Wait for Mayor							
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. Coordinated Committee Name		d. Comments	
Spotio spotio.com							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 19.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
Jw1	out of pocket	0	10/29/2017	\$ 19.00	website		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
StripeX Payment Processor johnwait.org							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 18.53	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
Jw1	Deduction from Contributions	0	10/31-11/7/2017	\$ 8.74	Payment Processing		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
<del>The Salisbury Post</del> Clemmons Courier P.O. Box 765 Clemmons, NC 27012							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ <del>599.75</del> 649.75	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
Jw1	check	A	11/2/2017	\$ 324.75	Magazine Ad		
	In Kind	A	10/24/17+9/17	\$ 100.00	Magazine Ad		
5. Total only this Page						\$ 452.49	
6. Total of ALL CRO-1310 Pages						\$ 1097.49	
(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 2 of 3

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	
John Wait for Mayor							
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. Coordinated Committee Name		d. Comments	
Staples 2509A Lewisville-Clemmons Rd. Clemmons, NC 27012							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 84.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JW1	Out of Pocket	B	11/05/2017	\$ 84.00	Flyers		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
BB+T Bank 2629 Lewisville-Clemmons Rd. Clemmons, NC 27012							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 36.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JW1	Bank Debit	O	11/21/2017	\$ 12.00	Bank fee		
JW1	Bank Debits	O	12/2017	\$ 24.00	Bank fee		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Postcards Unknown							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 175.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	In Kind	B	10/30/2017	\$ 175.00	Postcards		
				\$			
5. Total only this Page						\$ 271.00	
6. Total of ALL CRO-1310 Pages						\$ 1098.49	
(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 3 of 3 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>	
John Wait for Mayor						
<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						
a. Full Name, Mailing Address & Phone (include city, state, & zip)  Winston-Salem Journal 2051 E. 5th St. Winston-Salem, NC 27101				b. Coordinated Committee Name		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		\$ 350.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	In Kind	A	11/1/2017	\$ 350.00	Newspaper Ad	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		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. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		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. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
<b>5. Total only this Page</b>						\$ 350.00
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 1097.49
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						<del>989.49</del>
<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     Q* - Donation to Legal Expense Fund O* Other						
* Codes require detailed explanation in required remarks field (k)						



# Contributions from Other Political Committees

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Amendment  
☐ Yes ☒ No

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

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
John Wait for Mayor					
<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)			<b>b. Type of Committee</b>		<b>d. Comments</b>
Clemmons Citizens Want a Voice 5931 Greenhaven Dr. Winston-Salem, NC 27103 336-813-0469			<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum		
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		
			Clemmons		<b>e. Election Sum to Date</b> \$ 625.00
<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>
N/A	In Kind	2 ads Clemmons Courier	10/24/17 10/31/17		\$ 100.00
N/A	In Kind	Post Card	10/30/17		\$ 175.00
N/A	In Kind	Ad Winston-Salem Journal	11/1/17		\$ 350.00
<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)			<b>b. Type of Committee</b>		<b>d. Comments</b>
			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<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>
					\$
					\$
					\$
<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)			<b>b. Type of Committee</b>		<b>d. Comments</b>
			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<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>
					\$
					\$
					\$
<b>4. Total only this Page</b>					\$ 625.00
<b>5. Total of ALL CRO-1230 Pages</b> (This line must be on line 8 of Detailed Summary Page CRO-1100)					\$ 625.00

# Refunds/Reimbursements From the Committee

Pg 1 of 1

Amendment  
☐ Yes ☒ No

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

1. Committee Full Name (and Fund if applicable) <u>John Wait for Mayor</u>			2. ID Number	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>John Wait</u> <u>6310 Armsby Rd.</u> <u>Clemmons, NC 27012</u>		d. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party		h. Original Receipt Date <u>Various</u>
		e. Level Registered <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		i. Original Receipt Amount \$ <u>1,786.39</u>
		f. Purpose Code <u>L</u>		j. Election Sum to Date \$ <u>1,786.39</u>
b. Job Title/Profession <u>Attorney</u>	c. Employer's Name/Specific Field <u>Martin+Gifford, PLC</u>	g. Comments		k. Account Code <u>JWL</u>
l. Form of Payment <u>Withdrawal</u>	m. Required Remarks	n. Date (mm/dd/yyyy) <u>12/31/17</u>	o. Amount \$ <u>694.77</u>	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party		h. Original Receipt Date
		e. Level Registered <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		i. Original Receipt Amount \$
		f. Purpose Code		j. Election Sum to Date \$
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount \$	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party		h. Original Receipt Date
		e. Level Registered <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		i. Original Receipt Amount \$
		f. Purpose Code		j. Election Sum to Date \$
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount \$ <u><del>249.37</del></u>	
4. Total only this Page			\$ <u>694.77</u>	
5. Total of ALL CRO-1320 Pages (This line must be on line 16 of Detailed Summary Page CRO-1100)			\$ <u>694.77</u>	
6. Purpose Codes (List detailed disbursement code in (f) above)				
L - Returned to Contributor      M - Overpayment for Service      N - Exceeded Contribution Limit P* - Reimbursement of In-Kind      O* Other				
* Codes require detailed explanation in required remarks field (m)				





North Carolina  
State Board of Elections  
441 N Harrington Street  
Raleigh, NC 27603

Kim Westbrook Strach  
Executive Director

Mailing Address  
PO Box 27255  
Raleigh, NC 27611-7255  
(919) 733-7173

### Certification to Close Committee

This Certification is used to express the intent to close the committee after all funds have been properly disbursed.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

#### FILED BY:

Committee Name: John Wait for Mayor  
Treasurer Name: Joanne Elliott-Perry  
Treasurer Address: 6415 Rustinburg Rd.  
(include city, state, & zip) Clemmons, NC 27012  
  
Treasurer Phone: 757-338-3760

I certify that the above mentioned Committee intends to close and cease existence. Upon signing this certification, I declare that all funds have been distributed and reported (if required). In addition, no contributions will be accepted or disbursements made after the "Final Report" is filed or this form is signed. If the Committee at any future time intends to accept or spend funds in support or opposition of any candidate or ballot issue, a new political committee must be formed and registered with the Board of Elections before such activities may commence.

Committees that have filed under the \$1,000 threshold will only be required to sign this Certification. No "Final Report" will be required for committees meeting this criterion. Any Committee that did not file under the \$1,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

1-19-18  
Date Signed

Joanne Elliott-Perry  
Signature