Do not use this form to  1. Committee Informa				Hevr	U October		
a. Full Name				TO OF	H COUNTY FLECTIVE	C I	D Number
John Wait for Mayor					to be be be to be properly		o i tumber
			4	2019 OCT 28	PM 3: 11		
b. Mailing Address (include	City, State and Zip Code)	1				d. I	ate Filed
6310 Armsby Rd. Clemmons, NC 27012			PECEIVED				10/28/19
Ciemmons, 14C 27012						e P	hone Number
							336-601-8789
2. Report Year 3. 1	Period Start Date (mm/d	d/yy)	4. Period End Date 5. Treasurer F			ull Nam	e
2019	9/25/19		10/	21/19	Joanne Elliott-	Perry	
6. Type of Committee (	Check One)	9. Typ	e of Report	(check of	nly one type of rep	ort from	one category)
Candidate Campaign	Party	Munici			County		erendum
PAC	Referendum		Organizational		Organizational		Organizational
Independent Expenditure	Joint Fundraiser		Thirty-five day	,	Quarterly		Pre-referendum
Legal Expense Fund		_					
	'applicable, check one)		Pre-primary		First		Final
"Booster Fund"		$\boxtimes$	Pre-election		Second		Supplemental Final
Building Fund			Pre-runoff		Third		Annual
		П	Semi-annual Mid Year	.   🗆	Fourth Semi-annual		Special
Other:		Н	Year End		Mid Year	10.	Special Report Name
		$\Box$	Final		Year End	200	opecial report rame
8. Number of Fundrais	ers this Report		Special		Final		
0					Special		
11. Account Informatio	n			11. Account	Information	V. Barrier	
. Financial Institution Full !	Name		17 18 19	a. Financial Ins	titution Full Name		
First National Bank							
b. Purpose	c. Account Code			b. Purpose		c.	Account Code
Committee	JW	I					
	d. Period Begin Balance					d.	Period Begin Balance
	6 1012 67						
	\$ 1013.67					\$	
CERTIFICATION			1.6	e in the first light	(September 1997)	- 4	
							D-22M of Chapter 163 of
						ids. I furt	her certify that this report
s complete, true and cor Joanne Elliott-F	rect and that I have been	trained	by the NC	tate Board of	Elections.	10/28	/10
	rinted Name of Signer		- Si	gnature of Appoir	nted Treasurer	10/20/	Date
FOR OFFICE USE ONLY	Y			1			
Date Received:	0 28/19		Employee:	12			ery Method
Date Received.			Employee.		<del>)                                    </del>		Normal Mail
Date Postmarked:			Employee:				Registered Mail Hand Delivered
						1	Electronically Filed
Date Scanned: 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

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

Amendment Yes  $\boxtimes$ No

1: Committee Full Name (and Fund if applicable)	2. Type of Report		3. ID Number
John Wait for Mayor	Pre-Election		
Start of Election Cycle: January 1,	2019	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1,013.67	\$ 0.00
RECHIZE	ter some terms	<u> </u>	
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 110.00	\$ 2,562.82
6) Contributions from Individuals	(CRO-1210)	\$	\$
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)	\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Organizati	ons <i>(CRO-1250)</i>	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 1)	c, 11d and 11e)	\$ 110.00	\$ 2,562.82
DESCRIPTION OF SECTION			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 825.00	\$ 2,264.15
13b) Contributions to Candidates/Political Commi	ttees <i>(CRO-1310)</i>	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	<u> </u>	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)	\$ 825.00	\$ 2,264.15
19) Cash on Hand at End (Add lines 4 and 12 together, then sub		\$ 298.67	\$ 298.67
ADDITIONALINEORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaig	ns) <i>(CRO-1430)</i>	\$	
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)	\$	\$
CD 0 4400	<u>-</u>		

Contr	ibutions fro	m Individuals			Pg / o	r /	Amendmen Yes	t No
		ividual contributions		or contributions u	nder \$50 if form Cl	•		No. both with the print to the All the
		(and Fund if applica	ble)	and the state of t	e con resident a constant of the constant of t	2. ID Nun	aber	<u></u>
John Wa	it for Mayor							
3. Contr	ibutor, Informati	on a		Add 🔲, İ	Remove			and the second s
1	me, Mailing Address	& Phone		b. Job Title/Professi	on	d. Comment	ts ,	- ' '
	city, state, & zip)		<u></u>	Banker				
Rishi Ha	mbri ssmore Road			c. Employer's Name	ÆiC Field			
	ns, NC 27012			c. Employer's Name	*Specific Fleid	<del>-</del>		
<b>V1011111</b>	, 110 2, 012					e. Election S	um to Date.	
						\$	10.00	
e nati	TO THE LABOR OF	h. Form of Payment	The william		* La mari Arribidă St.			, , , , ,
f. Prior	g. Account Code		ı. ın-ı	Kind Description	j. Date (mm/dd/y	<u> </u>	k. Amount	
$\Box$	JW1	Squarespac			10/6	/19	\$	10.00
							\$	
							\$	
3: Contr	ibutor Informatio	On?		Add II I	Remove		and the second	
a. Full Na	ne, Mailing Address	& Phone		b. Job Title/Professi	on	d. Comment	is.	
	city, state, & zip)	K & No. 277 F		Government Off	ficial			
Asa Swa				c. Employer's Name	/Specific Field	_		
410 Broo	t, KY 40601			c. Employer's Name	aspecine Field			
114424201	, 121 10001					e. Election S	um to Date	-
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/y	ууу)	.k. Amount	
	'JW1	Squarespac			10/21	/19	\$	100.00
							\$	
							\$	
3. Contr	ibutor Informatio	ON .	γ. 	Add 🔲 I	Rémove			
a. Full Nai	me, Mailing Address	& Phone		b. Job Title/Professi	on ,	d. Comment	ts	
(include	city, state, & zip)			1				
				c. Employer's Name	/Specific Field			
				C. Employer s Name	aspecine Field			
						e. Election S	Sum to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i, In-l	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
							\$	
						_	\$	
							\$	
4. Tota	l only this Pag	je	-			\$	<u> </u>	110.00
	l of ALL CRO			- 40	-	\$		110.00
		Detailed Summary Page (	CRO-110	0	صد مرف ح	,		110.00

D	is	h	11	rs	em	en	ts
v	T/3	v	ч	T O		VII	U

Pg 1 Yes

Amendment

No

of  $\underline{1}$ 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.)							
Operating Ex	rpenses	Contributions to Can	didates/Political Committees		ordinated Party Expenditures		
4. Payee Inform	ation		Add Remove				
a. Full Name, Mailir	ig Address & Phone		b. Coordinated Committee Na	me	d. Comments		
(include city, state, & Facebook, Inc. 1 Hacker Way Menlo Park, CA			c. Level Registered (Specify)  Federal	County:	Budget Blog Boost, Median Blog Boost		
, ,			State	Municipality:	e. Election Sum to Date		
					\$ 131.10		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JW1			9/26/19	\$20.00	Budget Blog Post		
JW1	Out of Pocke	A	10/4/19	\$70.00	Median Blog Post		
4. Payee Inform	ation		Add	Remove			
	ng Address & Phone		b. Coordinated Committee Na		d. Comments		
(include city, state, of Clemmons Cour	& zip)			Ads			
P O Box 765			c. Level Registered (Specify)	el-tipeda an an			
Clemmons, NC	27012		Federal County:		TI O C D		
			State	Municipality:	e. Election Sum to Date		
					\$ 709.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JW1	Out of Pocke	A	10/4/19	\$709.00	2 ads & Web Impressions		
				\$			
4. Payee Inform	ation		Add	Remove			
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Na	ame	d. Comments		
(include city, state,					Website		
Squarespace, In-							
225 Varick St.,			c. Level Registered (Specify)				
New York, NY			Federal	County:			
,			State	Municipality:	e. Election Sum to Date		
					\$ 78.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JW1	Out of Pocke	A	10/21/19	\$26.00	Website		
				\$			
5. Total only th	is Page		\$ 825.00				
	CRO-1310 Pages	_					
(This line goes in	line 13a of Detailed Sun line 13b of Detailed Sun	cal Comm)	\$ 825.00				
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
	es (List detailed ex						
A* - Media E - Salaries I - Postage	B* - Printing F* - Equipment J - Penalties	C* - Fun G - Politi	draising	H* - Holding	ner Candidate g Public Office Expenses on to Legal Expense Fund		
O* - Other  * Codes require detailed explanation in required remarks field (k)							