

Disclosure Report Cover

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

Amendment
☐ Yes ☒ No

1. Committee Information		c. ID Number
a. Full Name	Committee To Elect Wayne Sasser House Seat 67	82-2481911
b. Mailing Address (include City, State and Zip Code)	PO Box 326 OAKBORO NC 28129	d. Date Filed 4-27-2018
		e. Phone Number 704-485-4664

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2018	01/01/18	04/21/2018	James Ellen Cameron

6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		10. Special Report
☒ Candidate Campaign	☐ Party	☐ Municipal	☐ State/County	☐ Referendum
☐ PAC	☐ Referendum	☐ Organizational	☐ Organizational	☐ Organizational
☐ Independent Expenditure	☐ Joint Fundraiser	☐ Thirty-five day	☐ Quarterly	☐ Pre-referendum
☐ Legal Expense Fund		☐ Pre-primary	☒ First	☐ Final
		☐ Pre-election	☐ Second	☐ Supplemental Final
		☐ Pre-runoff	☐ Third	☐ Annual
		☐ Semi-annual	☐ Fourth	☐ Special
7. Type of Fund (if applicable, check one)		☐ Mid Year	☐ Semi-annual	
☐ Booster Fund		☐ Year End	☐ Mid Year	
☐ Building Fund			☐ Year End	
☒ Other: Election Campaign NC		☐ Final	☐ Final	
8. Number of Fundraisers this Report		☐ Special	☐ Special	
2				

11. Account Information		11. Account Information	
a. Financial Institution Full Name	UWARRIE BANK	a. Financial Institution Full Name	
b. Purpose	For Campaign Donations & Expenses	b. Purpose	
c. Account Code	1	c. Account Code	
d. Period Begin Balance	\$6909.70	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.

James E Cameron
Printed Name of Signer

Signature of Appointed Treasurer

04/27/2018
Date

FOR OFFICE USE ONLY

Date Received:	4-30-18	Employee:	Jes	Delivery Method ☐ Normal Mail ☒ Registered Mail ☐ Hand Delivered ☐ Electronically Filed ☐ Signer has not received mandatory training
Date Postmarked:	4-27-18	Employee:	Jes	
Date Scanned:	5/2/18	Employee:	DP	
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) <i>Committee to Elect Wayne SASSON House Seat 67</i>	2. Type of Report	3. ID Number <i>82-2481911</i>
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Start of Election Cycle: January 1, <i>2018</i>	Total this Reporting Period \$ <i>6909.70</i>	Total this Election Cycle \$
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4) Cash on Hand at Start

RECEIPTS

5) Aggregated Contributions from Individuals (CRO-1205)	\$ <i>1960.40</i>	\$
6) Contributions from Individuals (CRO-1210)	\$ <i>46,267.81</i>	\$
7) Contributions from Political Party Committees (CRO-1220)	\$	\$
8) Contributions from Other Political Committees (CRO-1230)	\$	\$
9) Loan Proceeds (CRO-1410)	\$ <i>20,000.00</i>	\$
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)	\$ <i>75,137.91</i>	\$

EXPENDITURES

13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ <i>52,180.39</i>	\$
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)	\$	\$
17) In-Kind Contributions (CRO-1510)	\$ <i>1994.01</i>	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ <i>54,171.40</i>	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ <i>54,171.40</i>	\$

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)	\$	\$

Aggregated Contributions from Individuals

Page 1 of 3

Amendment

☐ Yes

☒ No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable) <u>Committee To Elect WAYNE SASSER House Seat 67</u>	2. ID Number <u>82-2481911</u>
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3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☒ Add	<u>1</u>	<u>check</u>		<u>03/29/2018</u>	<u>\$ 50.00</u>
☐ Remove					
☒ Add	<u>1</u>	<u>check</u>		<u>03/29/2018</u>	<u>\$ 50.00</u>
☐ Remove					
☒ Add	<u>1</u>	<u>check</u>		<u>03/29/2018</u>	<u>\$ 50.00</u>
☐ Remove					
☒ Add	<u>1</u>	<u>check</u>		<u>03/29/2018</u>	<u>\$ 50.00</u>
☐ Remove					
☒ Add	<u>1</u>	<u>check</u>		<u>03/29/2018</u>	<u>\$ 50.00</u>
☐ Remove					
☒ Add	<u>1</u>	<u>check</u>		<u>03/29/2018</u>	<u>\$ 50.00</u>
☐ Remove					
☒ Add	<u>1</u>	<u>check</u>		<u>03/29/2018</u>	<u>\$ 50.00</u>
☐ Remove					
☒ Add	<u>1</u>	<u>Cash</u>		<u>04/02/2018</u>	<u>\$ 5.00</u>
☐ Remove					
☒ Add	<u>1</u>	<u>Cash</u>		<u>04/02/2018</u>	<u>\$ 50.00</u>
☐ Remove					
☒ Add	<u>1</u>	<u>Cash</u>		<u>04/02/2018</u>	<u>\$ 25.00</u>
☐ Remove					
☒ Add	<u>1</u>	<u>Cash</u>		<u>04/02/2018</u>	<u>\$ 30.00</u>
☐ Remove					
☒ Add	<u>1</u>	<u>Cash</u>		<u>04/02/2018</u>	<u>\$ 40.00</u>
☐ Remove					
☒ Add	<u>1</u>	<u>Cash</u>		<u>04/02/2018</u>	<u>\$ 30.00</u>
☐ Remove					
☒ Add	<u>1</u>	<u>Cash</u>		<u>04/02/2018</u>	<u>\$ 20.00</u>
☐ Remove					
☒ Add	<u>1</u>	<u>Cash</u>		<u>04/02/2018</u>	<u>\$ 25.00</u>
☐ Remove					
☒ Add	<u>1</u>	<u>Cash</u>		<u>04/02/2018</u>	<u>\$ 25.00</u>
☐ Remove					
☒ Add	<u>1</u>	<u>check</u>		<u>04/02/2018</u>	<u>\$ 40.00</u>
☐ Remove					
☒ Add	<u>1</u>	<u>check</u>		<u>04/02/2018</u>	<u>\$ 25.00</u>
☐ Remove					
☒ Add	<u>1</u>	<u>check</u>		<u>04/02/2018</u>	<u>\$ 50.00</u>
☐ Remove					
☒ Add	<u>1</u>	<u>Cash</u>		<u>04/02/2018</u>	<u>\$ 50.00</u>
☐ Remove					
☒ Add	<u>1</u>	<u>Cash</u>		<u>04/02/2018</u>	<u>\$ 50.00</u>
☐ Remove					

4. Total only this Page \$ 890.00

5. Total of ALL CRO-1205 Pages

\$

(This line must be on line 5 of Detailed Summary Page CRO-1100)

Aggregated Contributions from Individuals

Page 2 of 3

Amendment

☐ Yes

☒ No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee To Elect WAYN SASSER House Seat 67				82-2481911	
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☒ Add	1	Cash		04/02/2018	\$ 10.00
☐ Remove					
☒ Add	1	check		04/02/2018	\$ 50.00
☐ Remove					
☒ Add	1	check		04/02/2018	\$ 50.00
☐ Remove					
☒ Add	1	Cash		04/02/2018	\$ 25.00
☐ Remove					
☒ Add	1	Cash		04/02/2018	\$ 25.00
☐ Remove					
☒ Add	1	Cash		04/02/2018	\$ 50.00
☐ Remove					
☒ Add	1	Cash		04/02/2018	\$ 50.00
☐ Remove					
☒ Add	1	check		04/02/2018	\$ 50.00
☐ Remove					
☒ Add	1	Cash		04/02/2018	\$ 25.00
☐ Remove					
☒ Add	1	check		04/17/2018	\$ 50.00
☐ Remove					
☒ Add	1	check		04/16/2018	\$ 50.00
☐ Remove					
☒ Add	1	Cash		04/16/2018	\$ 40.00
☐ Remove					
☒ Add	1	check		04/16/2018	\$ 50.00
☐ Remove					
☒ Add	1	check		04/16/2018	\$ 50.00
☐ Remove					
☒ Add	1	check		04/16/2018	\$ 50.00
☐ Remove					
☒ Add	1	check		04/16/2018	\$ 50.00
☐ Remove					
☒ Add	1	check		04/16/2018	\$ 50.00
☐ Remove					
☒ Add	1	check		04/16/2018	\$ 50.00
☐ Remove					
☒ Add	1	check		04/16/2018	\$ 50.00
☐ Remove					
☒ Add	1	check		04/16/2018	\$ 50.00
☐ Remove					
☒ Add	1	check		04/16/2018	\$ 25.00
☐ Remove					
☒ Add	1	check		04/16/2018	\$ 25.00
☐ Remove					
☒ Add	1	check		04/16/2018	\$ 25.00 25.00
☐ Remove					
4. Total only this Page				\$ 950.00	
5. Total of ALL CRO-1205 Pages				\$	
(This line must be on line 5 of Detailed Summary Page CRO-1100)					

Page 3 of 3 Amendment ☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
Committee To Elect Wayne Sassen House Sept 67	82-2481911

[illegible]

Contributions from Individuals

Pg 1 of 32 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>Committee To Elect Waynesasser House Seat 67</u>	2. ID Number <u>82-2481911</u>
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3. Contributor Information ☒ Add ☐ Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>David E. Scarboro</u> <u>PO Box 1875</u> <u>Albemarle, NC 28001</u>	b. Job Title/Profession <u>R/E Agent</u> c. Employer's Name/Specific Field d. Comments e. Election Sum to Date <u>\$ 500.00</u>

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	<u>1</u>	<u>check</u>		<u>1-29-2018</u>	<u>\$ 500.00</u>
☐					\$
☐					\$

3. Contributor Information ☒ Add ☐ Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>C. L. Beam Lett</u> <u>PO Box 1175</u> <u>Albemarle, NC 28001</u>	b. Job Title/Profession <u>Sales</u> c. Employer's Name/Specific Field <u>STANES Jewelry</u> d. Comments e. Election Sum to Date <u>\$ 500</u>

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	<u>1</u>	<u>check</u>		<u>01/29/2018</u>	<u>\$ 400</u>
☐					\$
☐					\$

3. Contributor Information ☒ Add ☐ Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Sheila E. Albrighton</u> <u>20683A Running Creek Rd</u> <u>Locust, NC 28097</u>	b. Job Title/Profession <u>NURSE</u> c. Employer's Name/Specific Field d. Comments e. Election Sum to Date <u>\$ 150</u>

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	<u>1</u>	<u>check</u>		<u>02/03/2018</u>	<u>\$ 150</u>
☐					\$
☐					\$

4. Total only this Page \$ 1050.00

5. Total of ALL CRO-1210 Pages \$

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Pg 2 of 32 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>Committee To Elect Wayne Sasser House seat 67</u>					2. ID Number <u>82-2481911</u>	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Deborah J. Bennett</u> <u>34313 Springdale Dr</u> <u>New London NC 28127</u>				b. Job Title/Profession <u>Nurse</u>		d. Comments
				c. Employer's Name/Specific Field		
				e. Election Sum to Date <u>\$ 200</u>		
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>02/06/2018</u>	k. Amount <u>\$ 200</u>	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Thomas K. Taylor</u> <u>1717 Arbor Way</u> <u>Albemarle, NC 28001</u>				b. Job Title/Profession <u>Retiree</u>		d. Comments
				c. Employer's Name/Specific Field		
				e. Election Sum to Date <u>\$ 200</u>		
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>02/22/2018</u>	k. Amount <u>\$ 200</u>	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>GARY S. Lowder</u> <u>20130 NC Hwy 138</u> <u>Albemarle, NC 28001</u>				b. Job Title/Profession <u>NASCAR</u>		d. Comments
				c. Employer's Name/Specific Field		
				e. Election Sum to Date <u>\$</u>		
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>02/22/2018</u>	k. Amount <u>\$ 1000.00</u>	
☐					\$	
☐					\$	
4. Total only this Page					<u>\$ 1,400.00</u>	
5. Total of ALL CRO-1210 Pages					<u>\$</u>	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

Pg 3 of 32 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) <i>Committee To Elect WAYNE SASSER House SEAT 67</i>	2. ID Number <i>84-2481911</i>
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3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Rudy CRANFORD 208 Eagle Pointe Dr Norwood, NC 28128</i>		b. Job Title/Profession <i>Sales</i>		d. Comments	
		c. Employer's Name/Specific Field <i>CROOK MOTORS</i>		e. Election Sum to Date \$	
f. Prior ☐	g. Account Code <i>1</i>	h. Form of Payment <i>check</i>	i. In-Kind Description	j. Date (mm/dd/yyyy) <i>03/13/2018</i>	k. Amount \$ <i>#200</i>
☐					\$
☐					\$

3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Windell Talley 6043 Talley Rd Stanfield, NC 28163</i>		b. Job Title/Profession <i>Farmer</i>		d. Comments	
		c. Employer's Name/Specific Field <i>Self</i>		e. Election Sum to Date \$	
f. Prior ☐	g. Account Code <i>1</i>	h. Form of Payment <i>check</i>	i. In-Kind Description	j. Date (mm/dd/yyyy) <i>03/13/2018</i>	k. Amount \$ <i>500</i>
☐	<i>1</i>	<i>check</i>		<i>04/02/2018</i>	\$ <i>2,500</i>
☐					\$

3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>SCOTT BOOTH PO Box 795 Norwood, NC 28128</i>		b. Job Title/Profession <i>Retired</i>		d. Comments	
		c. Employer's Name/Specific Field		e. Election Sum to Date \$	
f. Prior ☐	g. Account Code <i>1</i>	h. Form of Payment <i>check</i>	i. In-Kind Description	j. Date (mm/dd/yyyy) <i>03/13/2018</i>	k. Amount \$ <i>5,000.00</i>
☐					\$
☐					\$

4. Total only this Page	\$ <i>8,200.00</i>
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$

Contributions from Individuals

Page 4 of 32 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) <i>Committee To Elect Wayne Sasser House Seat 67</i>					2. ID Number <i>82-2481911</i>	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Darlene Hudson 28338 Hatley Farm Rd Albemarle, NC 28001</i>				b. Job Title/Profession <i>Retired</i>		d. Comments
				c. Employer's Name/Specific Field		
						e. Election Sum to Date <i>\$ 2,500.⁰⁰</i>
f. Prior ☐	g. Account Code <i>1</i>	h. Form of Payment <i>check</i>	i. In-Kind Description	j. Date (mm/dd/yyyy) <i>03/13/2018</i>	k. Amount <i>\$ 2,500.⁰⁰</i>	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Roger Hudson 28338 Hatley Farm Rd Albemarle, NC 28001</i>				b. Job Title/Profession <i>Retired</i>		d. Comments
				c. Employer's Name/Specific Field <i>Hudson POC Distributions</i>		
						e. Election Sum to Date <i>\$ 2,900.⁰⁰</i>
f. Prior ☐	g. Account Code <i>1</i>	h. Form of Payment <i>check</i>	i. In-Kind Description	j. Date (mm/dd/yyyy) <i>03/13/2018</i>	k. Amount <i>\$ 2,500.⁰⁰</i>	
☒	<i>1</i>	<i>check</i>		<i>10/26/2017</i>	<i>\$ 400.⁰⁰</i>	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Evan Jordan PO Box 546 Oakboro NC 28129</i>				b. Job Title/Profession <i>Sales</i>		d. Comments
				c. Employer's Name/Specific Field <i>Jordan Trucking</i>		
						e. Election Sum to Date <i>\$ 5,200.⁰⁰</i>
f. Prior ☐	g. Account Code <i>1</i>	h. Form of Payment <i>check</i>	i. In-Kind Description	j. Date (mm/dd/yyyy) <i>03/01/2018</i>	k. Amount <i>\$ 5,200.⁰⁰</i>	
☐					\$	
☐					\$	
4. Total only this Page					<i>\$ 10,200.⁰⁰</i>	
5. Total of ALL CRO-1210 Pages					\$	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

Amendment
Pg 5 of 32 ☐ 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) Committee to Elect Wayne Sasson House Seat 67						2. ID Number 82-2481911	
3. Contributor Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) JERRY JORDAN PO Box 546 OAKBURN NC 28129				b. Job Title/Profession Pres / Sales		d. Comments	
				c. Employer's Name/Specific Field Jordan Trucking		e. Election Sum to Date \$ 5,200.00	
f. Prior ☐	g. Account Code 1	h. Form of Payment check	i. In-Kind Description	j. Date (mm/dd/yyyy) 03/01/2018	k. Amount \$ 5,200.00		
☐					\$		
☐					\$		
3. Contributor Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) DAVID GRIGG 1500 Leelynn Dr A/Be male NC 28001				b. Job Title/Profession Retire Attorney		d. Comments	
				c. Employer's Name/Specific Field		e. Election Sum to Date \$	
f. Prior ☐	g. Account Code 1	h. Form of Payment check	i. In-Kind Description	j. Date (mm/dd/yyyy) 03/01/2018	k. Amount \$ 250.00		
☐					\$		
☐					\$		
3. Contributor Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Ricky Almond 801 LAURA'S LN. A/Be male, NC 28001				b. Job Title/Profession		d. Comments	
				c. Employer's Name/Specific Field STANLY COUNTY		e. Election Sum to Date \$ 50.00	
f. Prior ☐	g. Account Code 1	h. Form of Payment CASH	i. In-Kind Description	j. Date (mm/dd/yyyy) 03/01/2018	k. Amount \$ 50.00		
☐					\$		
☐					\$		
4. Total only this Page					\$ 5,500.00		
5. Total of ALL CRO-1210 Pages					\$		
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

Contributions from Individuals

Amendment
Pg 6 of 32 ☐ 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) <i>Committee To Elect Wayne Sasser House seat 67</i>	2. ID Number <i>82-2481911</i>
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3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Leon Huneycutt PO Box 130 Locust NC 28097</i>		b. Job Title/Profession <i>Pres.</i>		d. Comments	
		c. Employer's Name/Specific Field <i>Locust Lumber Co.</i>		e. Election Sum to Date \$	
f. Prior ☐	g. Account Code <i>1</i>	h. Form of Payment <i>check</i>	i. In-Kind Description	j. Date (mm/dd/yyyy) <i>03/01/2018</i>	k. Amount \$ <i>500.</i>
☐					\$
☐					\$

3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>B. A. Smith 12099 Big Lick Rd Stanfield, NC 28163</i>		b. Job Title/Profession <i>Retired</i>		d. Comments	
		c. Employer's Name/Specific Field <i>USAF</i>		e. Election Sum to Date \$ <i>150.00</i>	
f. Prior ☐	g. Account Code <i>1</i>	h. Form of Payment <i>check</i>	i. In-Kind Description	j. Date (mm/dd/yyyy) <i>04/02/2018</i>	k. Amount \$ <i>50.</i>
☐	<i>1</i>	<i>check</i>		<i>03/01/2018</i>	\$ <i>100</i>
☐					\$

3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Phyllis Smith 12099 Big Lick Rd Stanfield NC 28163</i>		b. Job Title/Profession <i>Retired</i>		d. Comments	
		c. Employer's Name/Specific Field		e. Election Sum to Date \$ <i>50</i>	
f. Prior ☐	g. Account Code <i>1</i>	h. Form of Payment <i>check</i>	i. In-Kind Description	j. Date (mm/dd/yyyy) <i>04/02/2018</i>	k. Amount \$ <i>50</i>
☐					\$
☐					\$

4. Total only this Page \$ *700.00*

5. Total of ALL CRO-1210 Pages \$

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Amendment Pg 7 of 32 ☐ 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>Committee To Elect Wayne Sasser House seat 67</u>	2. ID Number <u>82-2481911</u>
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3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Francis Eugene STARNES, Jr</u> <u>PO Box 398</u> <u>Albemarle NC 28001</u>		b. Job Title/Profession <u>Jeweler</u>		d. Comments	
		c. Employer's Name/Specific Field <u>STARNES Jewelry</u>			
				e. Election Sum to Date \$	
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>03/21/2018</u>	k. Amount \$ <u>500.00</u>
☐					\$
☐					\$

3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Michael E. Snyder</u> <u>41362 Mt. View Church Rd</u> <u>Albemarle, NC 28001</u>		b. Job Title/Profession <u>Retired</u>		d. Comments	
		c. Employer's Name/Specific Field			
				e. Election Sum to Date \$	
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>03/21/2018</u>	k. Amount \$ <u>2,500.00</u>
☐					\$
☐					\$

3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>M. W. Mullinix, Sr</u> <u>PO Box 354</u> <u>Rick Field, NC 28137</u>		b. Job Title/Profession <u>Retired</u>		d. Comments	
		c. Employer's Name/Specific Field			
				e. Election Sum to Date \$	
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>03/21/2018</u>	k. Amount \$ <u>200.00</u>
☐					\$
☐					\$

4. Total only this Page \$ 3,200.00

5. Total of ALL CRO-1210 Pages \$

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Pg 8 of 32 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) Committee To Elect Wayne Sasser House Seat 67					2. ID Number 82-2481911	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Leigh Brown 4711 Myers Ln Harrisburg, NC 28075				b. Job Title/Profession Realtor		d. Comments
				c. Employer's Name/Specific Field RE/MAX		
				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	
☐	1	check		03/24/2018	\$ 250. ⁰⁰	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Sammy E. Estridge, Jr PO Box 926 Badin, NC 28009				b. Job Title/Profession Retired		d. Comments
				c. Employer's Name/Specific Field		
				e. Election Sum to Date \$ 200. ⁰⁰		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	check		03/24/2018	\$ 100. ⁰⁰	
☒	1	check		12/06/2017	\$ 100. ⁰⁰	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Marshall Rogers 1520 Holbrook Court Albemarle, NC 28001				b. Job Title/Profession Retired		d. Comments
				c. Employer's Name/Specific Field		
				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	
☐	1	check		03/24/2018	\$ 250. ⁰⁰	
☐					\$	
☐					\$	
4. Total only this Page					\$ 600. ⁰⁰	
5. Total of ALL CRO-1210 Pages					\$	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>						

Contributions from Individuals

Pg 9 of 32 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>Committee To Elect Wayne Sassan House Seat 67</u>					2. ID Number <u>82-2481911</u>	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>DR. ROBERT H. GAITHER</u> <u>602 EAST ST.</u> <u>ALBEMARLE, NC 28001</u>				b. Job Title/Profession <u>MD</u>		d. Comments
				c. Employer's Name/Specific Field <u>Retired</u>		
				e. Election Sum to Date <u>\$ 250.00</u>		
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>03/23/2018</u>	k. Amount <u>\$ 250.00</u>	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>ANNE F GAWAGHAN</u> <u>2530 Glenwood Ave</u> <u>Raleigh, NC 27608</u>				b. Job Title/Profession <u>Retired</u>		d. Comments
				c. Employer's Name/Specific Field		
				e. Election Sum to Date <u>\$ 1,000.00</u>		
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>03/26/2018</u>	k. Amount <u>\$ 1,000.00</u>	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Lindsey R. Dunevant</u> <u>1716 Arbor Way</u> <u>Albemarle, NC 28001</u>				b. Job Title/Profession <u>Retired</u>		d. Comments
				c. Employer's Name/Specific Field		
				e. Election Sum to Date <u>\$ 250.00</u>		
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>03/29/2018</u>	k. Amount <u>\$ 250.00</u>	
☐					\$	
☐					\$	
4. Total only this Page					<u>\$ 1,500.00</u>	
5. Total of ALL CRO-1210 Pages					\$	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

Pr 10 of 32 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>Committee To Elect Wayne Sasser House Seat 67</u>					2. ID Number <u>82-2481911</u>	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Philip Carter</u> <u>3975 Highway 24-27E</u> <u>Midland, NC 28107</u>			b. Job Title/Profession <u>owner</u>		d. Comments	
			c. Employer's Name/Specific Field <u>Midland Mulch</u>		e. Election Sum to Date <u>\$ 250.00</u>	
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>03/29/2018</u>	k. Amount <u>\$ 250.00</u>	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Pamela Carter</u> <u>3975 Highway 24-27E</u> <u>Midland, NC 28107</u>			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field <u>Midland Mulch</u>		e. Election Sum to Date <u>\$ 250.00</u>	
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>03/29/2018</u>	k. Amount <u>\$ 250.00</u>	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Wayne Sasser</u> <u>29013 Jordan Pond Dr</u> <u>Albemarle, NC 28001</u>			b. Job Title/Profession <u>Pharmist</u>		d. Comments	
			c. Employer's Name/Specific Field <u>Retired</u>		e. Election Sum to Date <u>\$</u>	
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>In Kind</u>	i. In-Kind Description <u>Paid sales tax on signs</u>	j. Date (mm/dd/yyyy) <u>03/12/2018</u>	k. Amount <u>\$ 101.25</u>	
☐					\$	
☐					\$	
4. Total only this Page					<u>\$ 601.25</u>	
5. Total of ALL CRO-1210 Pages					<u>\$</u>	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

Pg 11 of 32 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>Committee To Elect WAYNE SASSER House SEAT 67</u>	2. ID Number <u>82-2481911</u>
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3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Beth A. Swanner</u> <u>500 Muirfield Dr</u> <u>Albemarle, NC 28001</u>		b. Job Title/Profession <u>Retired</u>		d. Comments	
		c. Employer's Name/Specific Field		e. Election Sum to Date <u>\$ 500.00</u>	
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>03/26/2018</u>	k. Amount <u>\$ 500.00</u>
☐					\$
☐					\$

3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Tandy L. Carpenter</u> <u>1137 Poe Doe Ave</u> <u>Albemarle, NC 28001</u>		b. Job Title/Profession <u>operations Manager</u>		d. Comments	
		c. Employer's Name/Specific Field <u>WASP ATLANTIC</u> <u>TRANSPORTATION</u> <u>CONCORD NC</u>		e. Election Sum to Date <u>\$ 50.00</u>	
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>03/26/2018</u>	k. Amount <u>\$ 50.00</u>
☐					\$
☐					\$

3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Arthur H. Rogers</u> <u>505 Muirfield Dr</u> <u>Albemarle NC 28001</u>		b. Job Title/Profession <u>Retired</u>		d. Comments	
		c. Employer's Name/Specific Field		e. Election Sum to Date <u>\$ 250.00</u>	
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>03/29/2018</u>	k. Amount <u>\$ 250.00</u>
☐					\$
☐					\$

4. Total only this Page	<u>\$ 800.00</u>
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5. Total of ALL CRO-1210 Pages	\$
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

Contributions from Individuals

Amendment
Pg 12 of 32 ☐ 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) <i>Committee To Elect Wayne Sasson House Seat 67</i>	2. ID Number <i>82-2481911</i>
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3. Contributor Information ☒ Add ☐ Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Kay L. Dennis PO Box 358 Albemarle, NC 28001</i>	b. Job Title/Profession <i>Retired</i> c. Employer's Name/Specific Field
d. Comments	
e. Election Sum to Date \$ <i>250.00</i>	
f. Prior ☐	g. Account Code <i>1</i>
h. Form of Payment <i>check</i>	i. In-Kind Description
j. Date (mm/dd/yyyy) <i>03/29/2018</i>	k. Amount \$ <i>250.00</i>

3. Contributor Information ☒ Add ☐ Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Cindy Beane 1522 Hyman Dr Albemarle, NC 28001</i>	b. Job Title/Profession <i>CPA</i> c. Employer's Name/Specific Field <i>Beane + Swearingen</i>
d. Comments	
e. Election Sum to Date \$ <i>250.00</i>	
f. Prior ☐	g. Account Code <i>1</i>
h. Form of Payment <i>check</i>	i. In-Kind Description
j. Date (mm/dd/yyyy) <i>04/02/2018</i>	k. Amount \$ <i>250.00</i>

3. Contributor Information ☒ Add ☐ Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Thomas M. Hearn, Jr 402 Woodcrest Lane Albemarle, NC 28001</i>	b. Job Title/Profession <i>Retired</i> c. Employer's Name/Specific Field <i>NC DOT</i>
d. Comments	
e. Election Sum to Date \$ <i>100.00</i>	
f. Prior ☐	g. Account Code <i>1</i>
h. Form of Payment <i>check</i>	i. In-Kind Description
j. Date (mm/dd/yyyy) <i>04/02/2018</i>	k. Amount \$ <i>100.00</i>

4. Total only this Page \$ *600.00*

5. Total of ALL CRO-1210 Pages \$

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Page 13 of 32 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>Committee To Elect Wayne Sasser House Seat 67</u>	2. ID Number <u>82-2481911</u>
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3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>HARRY M. Becklen</u> <u>165 CRAWLEY AVE</u> <u>NORWOOD NC 28128</u>		b. Job Title/Profession <u>Retired</u>		d. Comments	
		c. Employer's Name/Specific Field		e. Election Sum to Date \$ <u>100.00</u>	
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>Check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/02/2018</u>	k. Amount \$ <u>100.00</u>
☐					\$
☐					\$

3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Reggie Medlin</u> <u>36804 Mauldin Rd</u> <u>Albemarle, NC 28001</u>		b. Job Title/Profession <u>Retired</u>		d. Comments	
		c. Employer's Name/Specific Field		e. Election Sum to Date \$ <u>500.00</u>	
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>Check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/02/2018</u>	k. Amount \$ <u>250.00</u>
☒	<u>1</u>	<u>check</u>		<u>10/26/2017</u>	\$ <u>250.00</u>
☐					\$

3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Darrell Almond</u> <u>186 Allenton St.</u> <u>Norwood, NC 28128</u>		b. Job Title/Profession <u>Retired</u>		d. Comments	
		c. Employer's Name/Specific Field		e. Election Sum to Date \$ <u>100.00</u>	
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>Check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/02/2018</u>	k. Amount \$ <u>100.00</u>
☐					\$
☐					\$

4. Total only this Page \$ 450.00

5. Total of ALL CRO-1210 Pages \$

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Page 14 of 32 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>Committee To Elect Wayne Sassen House Seat 67</u>	2. ID Number <u>82-2481911</u>
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3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>John D. Griffin</u> <u>12942 Big Lick Rd</u> <u>OAKBORO, NC 28129</u>		b. Job Title/Profession <u>Retired</u>		d. Comments	
		c. Employer's Name/Specific Field		e. Election Sum to Date \$ <u>250.00</u>	
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>Check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/02/2018</u>	k. Amount \$ <u>250.00</u>
☐					\$
☐					\$

3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>MAX T. Fesperman</u> <u>105 WALNUTCREEK RD</u> <u>LOCUST, NC 28097</u>		b. Job Title/Profession <u>Retired</u>		d. Comments	
		c. Employer's Name/Specific Field		e. Election Sum to Date \$ <u>500.00</u>	
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>Check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/02/2018</u>	k. Amount \$ <u>500.00</u>
☐					\$
☐					\$

3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>LARRY HATLEY</u> <u>2353 STONY RUN DR</u> <u>OAKBORO, NC 28129</u>		b. Job Title/Profession <u>BANKER</u>		d. Comments	
		c. Employer's Name/Specific Field <u>FIRST BANK</u> <u>LOCUST, NC</u>		e. Election Sum to Date \$ <u>100.00</u>	
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>Check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/02/2018</u>	k. Amount \$ <u>100.00</u>
☐					\$
☐					\$

4. Total only this Page \$ 850.00

5. Total of ALL CRO-1210 Pages \$

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Page 15 of 32 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>Committee to Elect Wayne Sasser House seat 67</u>						2. ID Number <u>82-2481911</u>	
3. Contributor Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Gail Lawton</u> <u>49295 Swift Water Rd</u> <u>Albemarle, NC 28001</u>				b. Job Title/Profession <u>Retired</u>		d. Comments	
				c. Employer's Name/Specific Field		e. Election Sum to Date <u>\$ 100.00</u>	
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/02/2018</u>	k. Amount <u>\$ 100.00</u>		
☐					\$		
☐					\$		
3. Contributor Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Ronnie Michael</u> <u>1007 Elaine Dr</u> <u>Albemarle NC 28001</u>				b. Job Title/Profession <u>Retired</u>		d. Comments	
				c. Employer's Name/Specific Field		e. Election Sum to Date <u>\$ 100.00</u>	
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/02/2018</u>	k. Amount <u>\$ 100.00</u>		
☐					\$		
☐					\$		
3. Contributor Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Rebecca Goss</u> <u>9063 B Griffin Grove Blvd</u> <u>Stanfield, NC 28163</u>				b. Job Title/Profession <u>Retired</u>		d. Comments	
				c. Employer's Name/Specific Field		e. Election Sum to Date <u>\$ 100.00</u>	
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/02/2018</u>	k. Amount <u>\$ 100.00</u>		
☐					\$		
☐					\$		
4. Total only this Page					<u>\$ 300.00</u>		
5. Total of ALL CRO-1210 Pages					\$		
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

Contributions from Individuals

Pg 16 of 32 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>Committee To Elect Wayne Sasser House Seat 67</u>	2. ID Number <u>82-2481911</u>
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3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Raggye Simpson</u> <u>9169 Richard Sandy Rd</u> <u>OAKGrove, NC 2812</u>			b. Job Title/Profession <u>Welder</u>		d. Comments
			c. Employer's Name/Specific Field		
					e. Election Sum to Date \$ <u>100.00</u>
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/02/2018</u>	k. Amount \$ <u>100.00</u>
☐					\$
☐					\$

3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Paul E. Carpenter</u> <u>1000 North Brook St</u> <u>Albemarle, NC 28001</u>			b. Job Title/Profession <u>Retired</u>		d. Comments
			c. Employer's Name/Specific Field		
					e. Election Sum to Date \$
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/02/2018</u>	k. Amount \$ <u>100.00</u>
☐					\$
☐					\$

3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Johnny L. Tucker</u> <u>12574 Oak Grove Rd</u> <u>Stanfield, NC 28163</u>			b. Job Title/Profession <u>Retired</u>		d. Comments
			c. Employer's Name/Specific Field		
					e. Election Sum to Date \$ <u>100.00</u>
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/02/2018</u>	k. Amount \$ <u>100.00</u>
☐					\$
☐					\$

4. Total only this Page \$ 300.00

5. Total of ALL CRO-1210 Pages \$

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Amendment
Pg 17 of 32 ☐ 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	
Committee To Elect Wayne Sasser House Seat 64					82-2481911	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
JACOB V. NANCE 8368 B Love Mill Rd STANFIELD, NC 28163				Retired		
				c. Employer's Name/Specific Field		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	
☐	1	check		04/02/2018	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
DONALD W. BEAM 6539 SPYGLASS CIRCLE FERNANDINA BEACH, FL. 32034				Pharmacist		
				c. Employer's Name/Specific Field		e. Election Sum to Date
						\$ 200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	check		04/02/2018	\$ 200.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
J. G. Blount, Sr 201 Blount St Edenton, NC 27932				Pharmacist		
				c. Employer's Name/Specific Field		e. Election Sum to Date
				Blount's mutual Pharmacy		\$ 100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	1	check		04/17/2018	\$ 100.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages					\$	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

Amendment Pg 18 of 32 ☐ 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) Committee To Elect Wayne Sasser House Seat 67	2. ID Number 82-2481911
--	----------------------------

3. Contributor Information		☒ Add ☐ Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip) Roland V. Wood 1197 Wood Lee Rd Four Oaks, NC 27524	b. Job Title/Profession Pharmist c. Employer's Name/Specific Field Wood Pharmacy	d. Comments e. Election Sum to Date \$ 250.00
f. Prior ☐	g. Account Code 1	h. Form of Payment check
i. In-Kind Description		j. Date (mm/dd/yyyy) 04/17/2018
		k. Amount \$ 250.00
		\$
		\$

3. Contributor Information		☒ Add ☐ Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip) Sherrill Aldridge 1010 N. 11th St. Albemarle, NC 28001	b. Job Title/Profession Retired c. Employer's Name/Specific Field	d. Comments e. Election Sum to Date \$ 100.00
f. Prior ☐	g. Account Code 1	h. Form of Payment check
i. In-Kind Description		j. Date (mm/dd/yyyy) 04/16/2018
		k. Amount \$ 100.00
		\$
		\$

3. Contributor Information		☐ Add ☐ Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip) David W. Norton 1617 Arbor Way Albemarle, NC 28001	b. Job Title/Profession SA/OS c. Employer's Name/Specific Field CROOK Motor Co Albemarle NC	d. Comments e. Election Sum to Date \$ 250.00
f. Prior ☐	g. Account Code 1	h. Form of Payment check
i. In-Kind Description		j. Date (mm/dd/yyyy) 04/16/2018
		k. Amount \$ 250.00
		\$
		\$

4. Total only this Page	\$ 600.00
5. Total of ALL CRO-1210 Pages	\$

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Pg 19 of 32

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) Committee To Elect Wayne Sasser House SEAT 67	2. ID Number 82-248911
--	---------------------------

3. Contributor Information ☒ Add ☐ Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) William Stephen Aldridge PO Box 207 Albemarle NC 28001	b. Job Title/Profession Funeral Director c. Employer's Name/Specific Field STANLY Funeral Home d. Comments e. Election Sum to Date \$ 100.00
f. Prior ☐	g. Account Code 1
h. Form of Payment check	i. In-Kind Description
j. Date (mm/dd/yyyy) 04/16/2018	k. Amount \$ 100.00
☐	\$
☐	\$

3. Contributor Information ☒ Add ☐ Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Jacqueline Barbee PO Box 700 Locust NC 28097	b. Job Title/Profession Ins. Agent c. Employer's Name/Specific Field BARBEE Insurance Agency d. Comments e. Election Sum to Date \$ 100.00
f. Prior ☐	g. Account Code 1
h. Form of Payment check	i. In-Kind Description
j. Date (mm/dd/yyyy) 04/16/2018	k. Amount \$ 100.00
☐	\$
☐	\$

3. Contributor Information ☒ Add ☐ Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Richard RAINS 6309 POINTE LANE Rocky Mount, NC	b. Job Title/Profession Pharmist c. Employer's Name/Specific Field d. Comments e. Election Sum to Date \$ 100.00
f. Prior ☐	g. Account Code 1
h. Form of Payment check	i. In-Kind Description
j. Date (mm/dd/yyyy) 04/16/2018	k. Amount \$ 100.00
☐	\$
☐	\$

4. Total only this Page

\$ 300.00

5. Total of ALL CRO-1210 Pages

\$

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Page 20 of 32 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>Committee To Elect Wayne Sasser House Seat 67</u>	2. ID Number <u>82-2481911</u>
---	-----------------------------------

3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>WALTER P. ONEAL III</u> <u>116 DOWRY CREEK EAST</u> <u>BEHAVEN, NC 27810</u>	<table border="1"> <tr> <td>b. Job Title/Profession <u>Pharmist</u></td> <td>d. Comments</td> </tr> <tr> <td>c. Employer's Name/Specific Field</td> <td>e. Election Sum to Date \$ <u>100.00</u></td> </tr> </table>	b. Job Title/Profession <u>Pharmist</u>	d. Comments	c. Employer's Name/Specific Field	e. Election Sum to Date \$ <u>100.00</u>
b. Job Title/Profession <u>Pharmist</u>	d. Comments				
c. Employer's Name/Specific Field	e. Election Sum to Date \$ <u>100.00</u>				
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/16/2018</u>	k. Amount <u>\$100.00</u>
☐					\$
☐					\$

3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>HENRY H. HERRING, JR</u> <u>1919 KNOXWOOD RD</u> <u>WILINGTON, NC 28403</u>	<table border="1"> <tr> <td>b. Job Title/Profession <u>Pharmist</u></td> <td>d. Comments</td> </tr> <tr> <td>c. Employer's Name/Specific Field</td> <td>e. Election Sum to Date \$ <u>100.00</u></td> </tr> </table>	b. Job Title/Profession <u>Pharmist</u>	d. Comments	c. Employer's Name/Specific Field	e. Election Sum to Date \$ <u>100.00</u>
b. Job Title/Profession <u>Pharmist</u>	d. Comments				
c. Employer's Name/Specific Field	e. Election Sum to Date \$ <u>100.00</u>				
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/16/2018</u>	k. Amount <u>\$100.00</u>
☐					\$
☐					\$

3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>RALPH H. ASHWORTH</u> <u>110 GREENOCK ST</u> <u>CARY, NC 27511</u>	<table border="1"> <tr> <td>b. Job Title/Profession <u>Pharmist</u></td> <td>d. Comments</td> </tr> <tr> <td>c. Employer's Name/Specific Field</td> <td>e. Election Sum to Date \$ <u>100.00</u></td> </tr> </table>	b. Job Title/Profession <u>Pharmist</u>	d. Comments	c. Employer's Name/Specific Field	e. Election Sum to Date \$ <u>100.00</u>
b. Job Title/Profession <u>Pharmist</u>	d. Comments				
c. Employer's Name/Specific Field	e. Election Sum to Date \$ <u>100.00</u>				
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/16/2018</u>	k. Amount <u>\$100.00</u>
☐					\$
☐					\$

4. Total only this Page \$ 300.00

5. Total of ALL CRO-1210 Pages \$
(This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Amendment
Pg 21 of 32 ☐ 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) Committee To Elect Wayne Sasser House Seat 67	2. ID Number 82-2481911
--	----------------------------

3. Contributor Information		☒ Add ☐ Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Gregory L. Southern PO Box 300 King, NC 27021	b. Job Title/Profession Pharmist	c. Employer's Name/Specific Field	d. Comments
			e. Election Sum to Date \$ 100.00
f. Prior ☐	g. Account Code 1	h. Form of Payment check	i. In-Kind Description
			j. Date (mm/dd/yyyy) 04/16/2018
			k. Amount \$ 100.00

3. Contributor Information		☒ Add ☐ Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Russell E. Mitchell 812 Morgan Rd Eden, NC 27288	b. Job Title/Profession Pharmist	c. Employer's Name/Specific Field	d. Comments
			e. Election Sum to Date \$ 100.00
f. Prior ☐	g. Account Code 1	h. Form of Payment check	i. In-Kind Description
			j. Date (mm/dd/yyyy) 04/16/2018
			k. Amount \$ 100.00

3. Contributor Information		☒ Add ☐ Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) William R. Futrell, Jr PO Box 768 Jackson, NC 27845	b. Job Title/Profession Pharmist	c. Employer's Name/Specific Field	d. Comments
			e. Election Sum to Date \$ 250.00
f. Prior ☐	g. Account Code 1	h. Form of Payment check	i. In-Kind Description
			j. Date (mm/dd/yyyy) 04/16/2018
			k. Amount \$ 250.00

4. Total only this Page

\$ 450.00

5. Total of ALL CRO-1210 Pages

\$

(This line must be on line 6 of Detailed Summary Page CRO-1100)

CRO-1210

NC State Board of Elections

April 2007

Contributions from Individuals

Pg 22 of 32 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>Committee To Elect Wayne Sasser House SEAT 67</u>	2. ID Number <u>82-2481911</u>
---	-----------------------------------

3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Myra C. Brickell</u> <u>6221 Bramblewood Dr</u> <u>Raleigh, NC 27612</u>			b. Job Title/Profession <u>Pharmist</u>		d. Comments
			c. Employer's Name/Specific Field		e. Election Sum to Date <u>\$ 100.⁰⁰</u>
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/16/2018</u>	k. Amount <u>\$ 100.⁰⁰</u>
☐					\$
☐					\$

3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>LARRY O. SPARS</u> <u>107 LIVE OAK PK.</u> <u>ROANOKE RAPIDS NC 27870</u>			b. Job Title/Profession <u>Pharmist</u>		d. Comments
			c. Employer's Name/Specific Field		e. Election Sum to Date <u>\$ 200.⁰⁰</u>
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/16/2018</u>	k. Amount <u>\$ 200.⁰⁰</u>
☐					\$
☐					\$

3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Richard G. Damon</u> <u>201 McArthur ST</u> <u>Tabor City NC 28463</u>			b. Job Title/Profession <u>Pharmist</u>		d. Comments
			c. Employer's Name/Specific Field		e. Election Sum to Date <u>\$ 100.⁰⁰</u>
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/16/2018</u>	k. Amount <u>\$ 100.⁰⁰</u>
☐					\$
☐					\$

4. Total only this Page

\$ 400.⁰⁰

5. Total of ALL CRO-1210 Pages

\$

(This line must be on line 6 of Detailed Summary Page CRO-1100)

CRO-1210

NC State Board of Elections

April 2007

Contributions from Individuals

Amendment
Pg 23 of 32 ☐ 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>Committee To Elect Wayne Sasser House Seat 67</u>					2. ID Number <u>82-2481911</u>	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>MARK F. HARTSHILL</u> <u>8419 Talley Rd</u> <u>Stanfield NC 27163</u>				b. Job Title/Profession <u>UWHARRIS</u> <u>BANK</u>		d. Comments
				c. Employer's Name/Specific Field		e. Election Sum to Date <u>\$ 500.00</u>
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>Check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/16/2018</u>	k. Amount <u>\$ 500.00</u>	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>ARNOLD WALKER</u> <u>1636 Lakefield Circle</u> <u>GASTONIA, NC 28056</u>				b. Job Title/Profession <u>PHARMIST</u>		d. Comments
				c. Employer's Name/Specific Field		e. Election Sum to Date <u>\$ 100.00</u>
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>Check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/16/2018</u>	k. Amount <u>\$ 100.00</u>	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>MARY WALL L. FISCHER</u> <u>PO Box 2886</u> <u>SHALLOTTE, NC 28459</u>				b. Job Title/Profession <u>PHARMIST</u>		d. Comments
				c. Employer's Name/Specific Field		e. Election Sum to Date <u>\$ 100.00</u>
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>Check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/16/2018</u>	k. Amount <u>\$ 100.00</u>	
☐					\$	
☐					\$	
4. Total only this Page					<u>\$ 700.00</u>	
5. Total of ALL CRO-1210 Pages					\$	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

Page 24 of 32 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>Committee To Elect Wayne Sasser House Seat 67</u>					2. ID Number <u>82-2481911</u>	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Kathy A. Eudy</u> <u>348 Sunset Lake Rd</u> <u>Stanfield, NC 28163</u>				b. Job Title/Profession <u>MPG -</u>		d. Comments
				c. Employer's Name/Specific Field <u>Eudy's Cabinet</u>		
				e. Election Sum to Date <u>\$ 1,000.00</u>		
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/16/2018</u>	k. Amount <u>\$ 1,000.00</u>	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Kay Baucom</u> <u>PO Box 310</u> <u>Locust NC 28097</u>				b. Job Title/Profession <u>Retired</u>		d. Comments
				c. Employer's Name/Specific Field		
				e. Election Sum to Date <u>\$ 100.00</u>		
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/16/2018</u>	k. Amount <u>\$ 100.00</u>	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>David Odom</u> <u>2504 W. MAIN ST.</u> <u>Albemarle, NC 28001</u>				b. Job Title/Profession <u>CPA</u>		d. Comments
				c. Employer's Name/Specific Field		
				e. Election Sum to Date <u>\$ 500.00</u>		
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/16/2018</u>	k. Amount <u>\$ 500.00</u>	
☐					\$	
☐					\$	
4. Total only this Page					<u>\$ 1,600.00</u>	
5. Total of ALL CRO-1210 Pages					\$	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

Amendment
Pg 25 of 32 ☐ 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>Committee To Elect Wayne Sasser House Seat 67</u>					2. ID Number <u>82-2481911</u>	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Louise P. Hunter</u> <u>20413 Austin Rd</u> <u>OAKLAND, NC 28129</u>				b. Job Title/Profession <u>Retired</u>		d. Comments
				c. Employer's Name/Specific Field		
				e. Election Sum to Date <u>\$ 500.00</u>		
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/16/2018</u>	k. Amount <u>\$ 300.00</u>	
☒	<u>1</u>	<u>check</u>		<u>09/12/2017</u>	<u>\$ 200.01</u>	
☐					<u>\$</u>	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Thomas R. Thutt</u> <u>1603 Crawford St</u> <u>Kinston, NC 28504</u>				b. Job Title/Profession <u>Pharmist</u>		d. Comments
				c. Employer's Name/Specific Field		
				e. Election Sum to Date <u>\$ 250.00</u>		
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/17/2018</u>	k. Amount <u>\$ 250.00</u>	
☐					<u>\$</u>	
☐					<u>\$</u>	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Manilex E. Reed</u> <u>3608 Wilfred Lane</u> <u>Raleigh, NC 27609</u>				b. Job Title/Profession <u>Pharmist</u>		d. Comments
				c. Employer's Name/Specific Field		
				e. Election Sum to Date <u>\$ 100.00</u>		
f. Prior ☐	g. Account Code <u>1</u>	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>04/17/2018</u>	k. Amount <u>\$ 100.01</u>	
☐					<u>\$</u>	
☐					<u>\$</u>	
4. Total only this Page					<u>\$ 650.00</u>	
5. Total of ALL CRO-1210 Pages					<u>\$</u>	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

PR 26 of 32 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) Committee To Elect WAYNE SASSER House seat 67						2. ID Number 82-2481911	
3. Contributor Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Don M Russell PO Box 153 OAKLAND, NC 28129				b. Job Title/Profession Pres. c. Employer's Name/Specific Field Rusco Fixture Co. OAKLAND NC		d. Comments	
				e. Election Sum to Date \$ 1,000.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	1	check		04/16/2018	\$1,000.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) NANCY SASSER 29013 JORDAN BLVD RD ALBEMARLE, NC 28001				b. Job Title/Profession Retired c. Employer's Name/Specific Field		d. Comments	
				e. Election Sum to Date \$ 545.67			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	1	In Kind	Table Donations for Fund Raiser	03/26/2018	\$280.73		
☒	1	In Kind	Thank you notes	10/29/2017	\$ 17.94		
☒	1	In Kind	Candy for Parade	12/01/2017	\$ 186.30		
☒	1	In Kind	Candy for Parade	11/22/2017	\$ 60.70		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) SONIA HUNYECUTT 226 LOCUST AVE LOCUST NC 28097				b. Job Title/Profession Retired c. Employer's Name/Specific Field		d. Comments	
				e. Election Sum to Date \$ 500.00 500.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	1	In Kind	use of Bg. 1 day for Fund Riser	04/02/2018	\$ 500.00		
☐					\$		
☐					\$		
4. Total only this Page					\$ 1,780.73		
5. Total of ALL CRO-1210 Pages					\$		
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

Contributions from Individuals

Amendment Pg 27 of 32 ☐ 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	
Committee To Elect Wayne Sasser House Seat 67						82-2481911	
3. Contributor Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Ronnie Lowden 21118 Austin Rd Albemarle, NC 28001				Retired			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	1	In Kind	BBQ For Fund Raiser	04/02/2018	\$ 300.00		
☐					\$		
☐					\$		
3. Contributor Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Dean Scott 21343 Carriken Rd Albemarle NC 28001				Retired			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	1	In Kind	DJ service for Fund Raiser	04/02/2018	\$ 300.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
David Almond 138 Danielle Dr. Stanfield NC 28163				Ins. Agent			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				NY Life		\$ 1000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	1	check		03/19/2018	\$ 500		
☒	1	check		10/16/2017	\$ 500.00		
☐					\$		
4. Total only this Page						\$ 1,100.00	
5. Total of ALL CRO-1210 Pages						\$	
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

Contributions from Individuals

Pg 28 of 32 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	
Committee To Elect Wayne Sassen House Seat 67				82-2481911	
3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
Wayne Sassen #9013 Jordan Pond Rd Albemarle NC 28001			Retired c. Employer's Name/Specific Field Pharmacist		
			e. Election Sum to Date		\$ 549.52
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	In Kind	List of NC Pharmacist	03/09/2018	\$ 300.03
☐					\$
☐					\$
3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
Louis Mizelle 133 Ruffel Grove Chapel Hill NC 27517			Retired c. Employer's Name/Specific Field		
			e. Election Sum to Date		\$ 95.70
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Ach		04/17/2018	\$ 95.70
☐					\$
☐					\$
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
Barry Westen 160 Teachers Cv Bath, NC 27808			Pharmacist c. Employer's Name/Specific Field		
			e. Election Sum to Date		\$ 95.70
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	1	Ach		04/17/2018	\$ 95.70
☐					\$
☐					\$
4. Total only this Page					491.43 \$ 491.43
5. Total of ALL CRO-1210 Pages					\$
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

Contributions from Individuals

Amendment
Pg 29 of 32 ☐ 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) Committee To Elect Wayne Sassen House Seat 67					2. ID Number 82-2481911	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) JINA Chang 2104 BLUFF OAK Dr. CARY NC 27519				b. Job Title/Profession Pharmacist		d. Comments
				c. Employer's Name/Specific Field		
				e. Election Sum to Date \$ 23.70		
f. Prior ☐	g. Account Code 1	h. Form of Payment Ach	i. In-Kind Description	j. Date (mm/dd/yyyy) 04/17/2018	k. Amount \$ 23.70	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Drew Huggins 414 MARLOWE Rd Raleigh, NC 27609				b. Job Title/Profession Pharmacist		d. Comments
				c. Employer's Name/Specific Field		
				e. Election Sum to Date \$ 95.70		
f. Prior ☐	g. Account Code 1	h. Form of Payment Ach	i. In-Kind Description	j. Date (mm/dd/yyyy) 04/17/2018	k. Amount \$ 95.70	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) GRAHAM Pigg 1601 OLD MILL Rd LINCOLTON NC 28092				b. Job Title/Profession Pharmacist		d. Comments
				c. Employer's Name/Specific Field		
				e. Election Sum to Date \$ 95.70		
f. Prior ☐	g. Account Code 1	h. Form of Payment Ach	i. In-Kind Description	j. Date (mm/dd/yyyy) 04/17/2018	k. Amount \$ 95.70	
☐					\$	
☐					\$	
4. Total only this Page					\$ 215.10	
5. Total of ALL CRO-1210 Pages					\$	
Note: This amount is on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

Pg 30 of 32 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) Committee To Elect Wayne Sassen House Seat 67					2. ID Number 82-2481911	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) James Bowman 1210 Merrigbrook Dr Matthews, NC 28105				b. Job Title/Profession Pharmacist		d. Comments
				c. Employer's Name/Specific Field		
				e. Election Sum to Date \$ 95.70		
f. Prior ☐	g. Account Code 1	h. Form of Payment ACH	i. In-Kind Description	j. Date (mm/dd/yyyy) 04/17/2018	k. Amount \$ 95.70	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Robert Stanley 564 Wolfpen Rd Purlear NC 28665				b. Job Title/Profession Pharmacist		d. Comments
				c. Employer's Name/Specific Field		
				e. Election Sum to Date \$ 95.70		
f. Prior ☐	g. Account Code 1	h. Form of Payment ACH	i. In-Kind Description	j. Date (mm/dd/yyyy) 04/17/2018	k. Amount \$ 95.70	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Gary Bowman 4102 Salem Farms Rd Oxford, NC 27565				b. Job Title/Profession Pharmacist		d. Comments
				c. Employer's Name/Specific Field		
				e. Election Sum to Date \$ 191.70		
f. Prior ☐	g. Account Code 1	h. Form of Payment ACH	i. In-Kind Description	j. Date (mm/dd/yyyy) 04/17/2018	k. Amount \$ 191.70	
☐					\$	
☐					\$	
4. Total only this Page					383.10	\$ 383.10
5. Total of ALL CRO-1210 Pages						\$
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

Amendment Pg 31 of 32 ☐ 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) Committee To Elect Wayne Sasser House seat 67				2. ID Number 82-2481911	
3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) P. David Smith 2384 Quail Dr Graham, NC 27253			b. Job Title/Profession Retired		d. Comments
			c. Employer's Name/Specific Field		
					e. Election Sum to Date \$ 95.70
f. Prior ☐	g. Account Code 1	h. Form of Payment ACH	i. In-Kind Description	j. Date (mm/dd/yyyy) 04/17/2018	k. Amount \$ 95.70
☐					\$
☐					\$
3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Anna Ferguson 24 Commerce Dr Taylorsville NC 28681			b. Job Title/Profession Pharmacist		d. Comments
			c. Employer's Name/Specific Field		
					e. Election Sum to Date \$ 95.70
f. Prior ☐	g. Account Code 1	h. Form of Payment ACH	i. In-Kind Description	j. Date (mm/dd/yyyy) 04/17/2018	k. Amount \$ 95.70
☐					\$
☐					\$
3. Contributor Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Jacqueline Gorman 8700 Twin Trail Rd Huntersville NC 28078			b. Job Title/Profession Pharmacist		d. Comments
			c. Employer's Name/Specific Field		
					e. Election Sum to Date \$ 71.70
f. Prior ☐	g. Account Code 1	h. Form of Payment ACH	i. In-Kind Description	j. Date (mm/dd/yyyy) 04/17/2018	k. Amount \$ 71.70
☐					\$
☐					\$
4. Total only this Page					\$ 263.10
5. Total of ALL CRO-1210 Pages					\$
(This line must be on line 6 of Detailed Summary Page CRO-1100)					

Contributions from Individuals

Amendment
Pg 32 of 32 ☐ 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) Committee To Elect Wayne Sassen House Seat 67					2. ID Number 82-2481911	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Bill Browning 1259 Andover Rd Charlotte, NC 28211			b. Job Title/Profession Sales		d. Comments	
			c. Employer's Name/Specific Field Summitt Diagnostics		e. Election Sum to Date \$ 191.70	
f. Prior ☐	g. Account Code 1	h. Form of Payment ACH	i. In-Kind Description	j. Date (mm/dd/yyyy) 04/17/2018	k. Amount \$ 191.70	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Angelia Coggins 907 Stonybrook Dr Roanoke Rapids NC 28762			b. Job Title/Profession Pharmacist		d. Comments	
			c. Employer's Name/Specific Field		e. Election Sum to Date \$ 95.70	
f. Prior ☐	g. Account Code 1	h. Form of Payment ACH	i. In-Kind Description	j. Date (mm/dd/yyyy) 04/17/2018	k. Amount \$ 95.70	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Jesse Pike 2133 Shamrock Dr. Charlotte, NC 28205			b. Job Title/Profession Pharmacist		d. Comments	
			c. Employer's Name/Specific Field		e. Election Sum to Date \$ 95.70	
f. Prior ☐	g. Account Code 1	h. Form of Payment ACH	i. In-Kind Description	j. Date (mm/dd/yyyy) 04/10/2018	k. Amount \$ 95.70	
☐					\$	
☐					\$	
4. Total only this Page					\$ 383.10	
5. Total of ALL CRO-1210 Pages					\$	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Loan Proceeds

Pg 1 of 1 Amendment ☐ Yes ☒ No

Use this form to report proceeds from a loan and loan endorser's information

A loan proceeds statement must accompany each loan that is from an individual

1. Committee Full Name (and Fund if applicable) <i>Committee To Elect Wayne Sasser House Seat 67</i>				2. ID Number <i>82-2481911</i>	
3. Lender Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Wayne Sasser 29013 Jordan Pond Rd Albemarle NC 28001</i>		b. Job Title/Profession <i>Retired</i>		d. Comments	
		c. Employer's Name/Specific Field <i>Pharmist</i>		e. Start Date (mm/dd/yyyy) <i>02/07/2018</i>	
				f. End Date (mm/dd/yyyy)	
g. Rate <i>0 %</i>	h. Security Pledged <i>NONE</i>	i. Account Code <i>1</i>	j. Form of Payment <i>check</i>	k. Amount <i>\$20,000.00</i>	
l. Full Name of Lending Institution <i>CLAYTON WAYNE SASSER</i>				m. Loan Number	
4. Endorsers/Makers (The people who guarantee the loan.)					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage %		e. Amount \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage %		e. Amount \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage %		e. Amount \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage %		e. Amount \$	
5. Total of ALL CRO-1410 Pages (This line must be on line 9 of Detailed Summary Page CRO-1100) <i>\$20,000.00</i>					

Disbursements

Amendment
Pg 1 of ☐ 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	
COMM TTEE TO Elect WAYNE SASSAR House SEAT 67				82-2481911	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
☒ 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
VAC + DASH 154 S. FIRST ST ALBEMARLE, NC 28001					Printed Campaign T-shirts For Advertising
			c. Level Registered (Specify)		e. Election Sum to Date
			☐ Federal ☐ County ☐ State ☐ Municipality		\$ 741.91
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	A	01/29/2018	\$ 741.91	T-Shirts
4. Payee Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Community Concerts PO Box 1142 ALBEMARLE, NC 28001					Sponsorship of a concert Advertising
			c. Level Registered (Specify)		e. Election Sum to Date
			☐ Federal ☐ County ☐ State ☐ Municipality		\$ 150.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	A	02/02/2018	\$ 150.00	CONCERT Sponsorship
4. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Sign Masters 314 B Depot ST MONROE, NC 28112					PRINTING 750 YARD signs
			c. Level Registered (Specify)		e. Election Sum to Date
			☐ Federal ☐ County ☐ State ☐ Municipality		\$ 2562.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	B	02/07/2018	\$ 1,300.00	PRINTING 750 yard signs
1	check	B	02/12/2018	\$ 1262.00	PRINTING 750 yard sign
5. Total only this Page				3453.91	
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)					
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 2 of ☐ 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) <i>Committee To Elect WAYNE SASSER House seat 67</i>				2. ID Number <i>82-2481911</i>	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> ☒ 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) <i>Dyce Communications LLC 15105D JOHN J Delaney Dr #166 Charlotte, NC 28277</i>			b. Coordinated Committee Name		d. Comments <i>Retainer for Campaign Manager</i>
			c. Level Registered (Specify) ☐ Federal ☐ County ☐ State ☐ Municipality		
					e. Election Sum to Date <i>\$2,000.00</i>
f. Account Code <i>1</i>	g. Form of Payment <i>Check</i>	h. Purpose Code <i>0</i>	i. Date (mm/dd/yyyy) <i>02/26/2018</i>	j. Amount <i>\$2,000.00</i>	k. Required Remarks <i>Retainer Campaign Manager</i>
4. Payee Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Walter Painting PO Box 10 Albemarle NC 28001</i>			b. Coordinated Committee Name		d. Comments <i>Campaign Adverts - placemats for ROSOGRIAN RESTAURANT</i>
			c. Level Registered (Specify) ☐ Federal ☐ County ☐ State ☐ Municipality		
					e. Election Sum to Date <i>\$573.78</i>
f. Account Code <i>1</i>	g. Form of Payment <i>Check</i>	h. Purpose Code <i>B</i>	i. Date (mm/dd/yyyy) <i>03/01/2018</i>	j. Amount <i>\$573.78</i>	k. Required Remarks <i>Printing - Advertis</i>
4. Payee Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Sign Masters 314 B Depot St. Monroeville, NC 28112</i>			b. Coordinated Committee Name		d. Comments <i>Print Campaign yard signs</i>
			c. Level Registered (Specify) ☐ Federal ☐ County ☐ State ☐ Municipality		
					e. Election Sum to Date <i>\$4,062.00</i>
f. Account Code <i>1</i>	g. Form of Payment <i>Check</i>	h. Purpose Code <i>B</i>	i. Date (mm/dd/yyyy) <i>03/13/2018</i>	j. Amount <i>\$1,500.00</i>	k. Required Remarks <i>Campaign signs</i>
5. Total only this Page					<i>\$4073.78</i>
6. Total of ALL CRO-1310 Pages <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>					
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		D - To Another Candidate	
I - Postage		J - Penalties		G - Political Party	
O* Other				H* - Holding Public Office Expenses	
				K* - Office Expenses	
				Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k)					

Disbursements

Amendment
Pg 3 of ☐ 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>Committee To Elect Wayne Sasser House Seat 67</u>						2. ID Number <u>82-2481911</u>	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> ☒ 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>Dyce Communications LLC</u> <u>15105D John J Delaney Dr #166</u> <u>Charlotte, NC 28277</u>				b. Coordinated Committee Name 		d. Comments <u>DIRECT MAIL</u> <u>CAMPAIGN MATERIAL</u>	
				c. Level Registered (Specify) ☐ Federal ☐ County ☐ State ☐ Municipality		e. Election Sum to Date <u>\$27,000.00</u>	
f. Account Code <u>1</u>	g. Form of Payment <u>Check</u>	h. Purpose Code <u>A</u>	i. Date (mm/dd/yyyy) <u>03/13/2018</u>	j. Amount <u>\$25,000.00</u>	k. Required Remarks <u>DIRECT MAILING</u>		
4. Payee Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Troy Thomas Photography</u> <u>207 Camden St.</u> <u>Raleigh, NC 27601</u>				b. Coordinated Committee Name 		d. Comments <u>Photo Shoot for</u> <u>CAMPAIGN Ads</u> <u>+ Fund Raising</u> <u>Events</u>	
				c. Level Registered (Specify) ☐ Federal ☐ County ☐ State ☐ Municipality		e. Election Sum to Date <u>\$800.00</u>	
f. Account Code <u>1</u>	g. Form of Payment <u>check</u>	h. Purpose Code <u>C</u>	i. Date (mm/dd/yyyy) <u>03/19/2018</u>	j. Amount <u>\$800.00</u>	k. Required Remarks <u>Photo shoot for Ads</u> <u>for Fund Raising</u>		
4. Payee Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Impact Mailing Services Inc</u> <u>100 Forsyth Hall Dr. Ste A1</u> <u>Charlotte, NC 28273</u>				b. Coordinated Committee Name 		d. Comments <u>MAILING FOR</u> <u>FUND RAISING</u>	
				c. Level Registered (Specify) ☐ Federal ☐ County ☐ State ☐ Municipality		e. Election Sum to Date <u>\$354.66</u> <u>4,279.78</u>	
f. Account Code <u>1</u>	g. Form of Payment <u>check</u>	h. Purpose Code <u>C</u>	i. Date (mm/dd/yyyy) <u>03/19/2018</u>	j. Amount <u>\$354.66</u>	k. Required Remarks <u>mailing for Fundraising</u>		
f. Account Code <u>1</u>	g. Form of Payment <u>check</u>	h. Purpose Code <u>C</u>	i. Date (mm/dd/yyyy) <u>03/28/2018</u>	j. Amount <u>\$3925.12</u>	k. Required Remarks <u>MAILING FOR FUND RAISING</u>		
5. Total only this Page						<u>\$30,679.78</u>	
6. Total of ALL CRO-1310 Pages <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>							
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>							
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 4 of ☐ 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	
Committee To Elect Wayne SASSEN House Seat 67					82-2481911	
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) Molly Halfacre 7109 Moores Creek Rock Hill, S.C. 29732				b. Coordinated Committee Name		d. Comments Design Layout For Invite & Reply Card Fundraiser
				c. Level Registered (Specify) ☐ Federal ☐ County ☐ State ☐ Municipality		
				e. Election Sum to Date		
						\$ 227.50
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	C	03/14/2018	\$ 227.50	Design Layout For Fund Raising, MAY	
				\$		
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Dyce Communications, LLC 15105 D John J Delaney Dr #166 Charlotte NC 28227				b. Coordinated Committee Name		d. Comments Direct Mail Campaign
				c. Level Registered (Specify) ☐ Federal ☐ County ☐ State ☐ Municipality		
				e. Election Sum to Date		
						\$ 34.750.
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	A	03/21/2018	\$ 7.750.00	Direct Mail Campaign	
				\$		
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Bouley Printing Co. Inc PO Box 7284 Charlotte, NC 28241				b. Coordinated Committee Name		d. Comments Printing Material For Fund Raiser
				c. Level Registered (Specify) ☐ Federal ☐ County ☐ State ☐ Municipality		
				e. Election Sum to Date		
						\$ 516.95
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	C	03/21/2018	\$ 516.95	Printing - Fundraiser	
				\$		
5. Total only this Page					\$ 8494.45	
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)						
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 5 of ☐ 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	
Committee To Elect WAYNE SASSER House seat 67				82-2481911	
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) Boulevard Printing Co Inc PO Box 7284 Charlotte NC 28241			b. Coordinated Committee Name		d. Comments PRINT LETTER FOR FUND RAISING
			c. Level Registered (Specify) ☐ Federal ☐ County ☐ State ☐ Municipality		
					e. Election Sum to Date \$2,150.37
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	C	03/28/2018	\$1,633.42	PRINT LETTER FOR FUND RAISING
4. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Dyce Communications LLC 15105D John S Delaney Dr. #166 Charlotte, NC 28277			b. Coordinated Committee Name		d. Comments Reimburse for Postage for Fund Raising mailing for Rotary for Camp manager
			c. Level Registered (Specify) ☐ Federal ☐ County ☐ State ☐ Municipality		
					e. Election Sum to Date \$36,950.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	C	04/01/2018	\$200.00	Reimburse for Postage
1	check	D	04/01/2018	\$2000.00	Returner - Camp Manager
4. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) SIGN MASTERS 314B Depot ST Monroe NC 28112			b. Coordinated Committee Name		d. Comments PRINTING LARGE CAMPAIGN SIGNS
			c. Level Registered (Specify) ☐ Federal ☐ County ☐ State ☐ Municipality		
					e. Election Sum to Date \$5,407.05
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	B	04/13/2018	\$1345.05	PRINTING SIGNS
5. Total only this Page					\$ 5178.42
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)					
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 6 of ☐ 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>Committee To Elect Wayne Sassan House Seat 67</u>						2. ID Number <u>82-2481911</u>	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> ☒ 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>WSPC Radio</u> <u>1234 Magnolia St</u> <u>Albemarle, NC 28001</u>				b. Coordinated Committee Name c. Level Registered (Specify) ☐ Federal ☐ County ☐ State ☐ Municipality		d. Comments <u>Campaign Radio Ads</u> e. Election Sum to Date <u>\$ 900.00</u>	
f. Account Code <u>1</u>	g. Form of Payment <u>check</u>	h. Purpose Code <u>A</u>	i. Date (mm/dd/yyyy) <u>04/18/2018</u>	j. Amount <u>\$ 900.00</u>	k. Required Remarks <u>Campaign Radio Ads</u>		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name c. Level Registered (Specify) ☐ Federal ☐ County ☐ State ☐ Municipality		d. Comments e. Election Sum to Date <u>\$</u>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount <u>\$</u>	k. Required Remarks		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name c. Level Registered (Specify) ☐ Federal ☐ County ☐ State ☐ Municipality		d. Comments e. Election Sum to Date <u>\$</u>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount <u>\$</u>	k. Required Remarks		
5. Total only this Page <u>\$ 900.00</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>\$</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)							

In-Kind Contributions

Amendment
Pg 1 of ☐ 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) <u>Committee To Elect Wayne Sasser House Seat 67</u>		2. ID Number <u>82-2481911</u>
3. Contributor Information ☒ Add ☐ Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>WAYNE SASSER</u> <u>29013 Jordan Pond Dr</u> <u>Albemarle NC 28001</u>	b. Type of Contributor ☐ Individual ☒ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	c. Comments d. Election Sum to Date \$
e. Description <u>PAID SALE TAX ON SIGNS @ SIGN MASTERS</u>	f. Date (mm/dd/yyyy) <u>03/12/2018</u>	g. Fair Market Amount \$ <u>101.25</u>
		\$
		\$
3. Contributor Information ☒ Add ☐ Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>SONIA HUNYECUTT</u> <u>226 Locust Ave</u> <u>STATFORD NC 28097</u>	b. Type of Contributor ☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	c. Comments d. Election Sum to Date \$ <u>500.00</u>
e. Description <u>USE OF BUILDING FOR FUND</u>	f. Date (mm/dd/yyyy) <u>04/02/2018</u>	g. Fair Market Amount \$ <u>500.00</u>
<u>RAISE</u>		\$
		\$
3. Contributor Information ☒ Add ☐ Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>RONNIE LOWDER</u> <u>2118 Austin Rd</u> <u>Albemarle NC 28001</u>	b. Type of Contributor ☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	c. Comments d. Election Sum to Date \$ <u>300.00</u>
e. Description <u>BARBQUE FOR FUND RAISE</u>	f. Date (mm/dd/yyyy) <u>04/02/2018</u>	g. Fair Market Amount \$ <u>300.00</u>
		\$
		\$
4. Total only this Page		\$ <u>901.25</u>
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$

In-Kind Contributions

Pg 2 of 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) Committee To Elect Wayne Sasser House Seat 67		2. ID Number 82-2481911					
3. Contributor Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) H D. EFird, JR 4599 Renee Ford Rd STANFIELD, NC 28163		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">b. Type of Contributor ☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source</td> <td style="width:40%;">c. Comments</td> </tr> <tr> <td colspan="2">d. Election Sum to Date \$ 212.00</td> </tr> </table>		b. Type of Contributor ☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	c. Comments	d. Election Sum to Date \$ 212.00	
b. Type of Contributor ☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	c. Comments						
d. Election Sum to Date \$ 212.00							
e. Description CAKES FOR FUND RAISER		f. Date (mm/dd/yyyy) 04/02/2018	g. Fair Market Amount \$ 212.00				
			\$				
			\$				
3. Contributor Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) DEAN SCOTT 21343 CARRIKER RD A/GERMANE, NC 28001		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">b. Type of Contributor ☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source</td> <td style="width:40%;">c. Comments</td> </tr> <tr> <td colspan="2">d. Election Sum to Date \$ 300.00</td> </tr> </table>		b. Type of Contributor ☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	c. Comments	d. Election Sum to Date \$ 300.00	
b. Type of Contributor ☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	c. Comments						
d. Election Sum to Date \$ 300.00							
e. Description DJ SERVICE FOR FUND RAISER		f. Date (mm/dd/yyyy) 04/02/2018	g. Fair Market Amount \$ 300.00				
			\$				
			\$				
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) NANCY SASSER 29013 JORDAN POND RD A/GERMANE NC 28001		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">b. Type of Contributor ☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source</td> <td style="width:40%;">c. Comments</td> </tr> <tr> <td colspan="2">d. Election Sum to Date \$ 545.67</td> </tr> </table>		b. Type of Contributor ☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	c. Comments	d. Election Sum to Date \$ 545.67	
b. Type of Contributor ☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	c. Comments						
d. Election Sum to Date \$ 545.67							
e. Description Table Decorations, Badges, etc FOR FUND RAISER		f. Date (mm/dd/yyyy) 07/26/2018	g. Fair Market Amount \$ 280.73				
			\$				
			\$				
4. Total only this Page		\$ 792.73					
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$					

In-Kind Contributions

Amendment
Pg 3 of ☐ 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 Wayne Sassen House seat 67		82-2481911	
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small> Wayne Sassen 29013 Jordan Pond Rd Albemarle, NC 28001		b. Type of Contributor ☒ Individual ☒ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
c. Comments List of Pharmacists for Fund raising		d. Election Sum to Date \$	
e. Description Paid for a List of N.C. Pharmacists		f. Date (mm/dd/yyyy) 03/09/2018	
g. Fair Market Amount \$ 300.03		\$	
\$		\$	
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>		b. Type of Contributor ☐ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
c. Comments		d. Election Sum to Date \$	
e. Description		f. Date (mm/dd/yyyy)	
g. Fair Market Amount \$		\$	
\$		\$	
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>		b. Type of Contributor ☐ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
c. Comments		d. Election Sum to Date \$	
e. Description		f. Date (mm/dd/yyyy)	
g. Fair Market Amount \$		\$	
\$		\$	
4. Total only this Page			
\$			
5. Total of ALL CRO-1510 Pages			
\$			
<small>(This line must be on line 17 of Detailed Summary Page CRO-1100)</small>			

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD ENVELOPE TO
CERTIFIED MAIL



7027 0660 0000 5574 9922



1000



27611

U.S. POSTAGE
PAID
OAKBORO, NC
26129
APR 27, 18
AMOUNT
\$9.30
R2305K139089-04