

# Disclosure Report Cover

Amendment  
 Yes  No

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

1. Committee Information			
a. Full Name Buddy Parker For Orange County Sheriff	c. ID Number		
b. Mailing Address (include City, State and Zip Code) 836 Oakdale Drive Hillsborough NC 27278	d. Date Filed 04/28/2014		
e. Phone Number 919-886-3872			
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2014	01/01/2014	04/19/2014	CharlesAnna Riley Hamlett William Lane Parker
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<b>Municipal</b>	<b>State/County</b>
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input checked="" type="checkbox"/> First
<b>7. Type of Fund (if applicable, check one)</b>		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth
<input type="checkbox"/> Other:		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End
		<input type="checkbox"/> Special	<input type="checkbox"/> Final
			<input type="checkbox"/> Special
<b>8. Number of Fundraisers this Report</b>		<b>10. Special Report Name</b>	
11. Account Information		11. Account Information	
a. Financial Institution Full Name Community One Bank		a. Financial Institution Full Name	
b. Purpose	c. Account Code 1	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 200.00		d. Period Begin Balance \$
<b>CERTIFICATION</b>			
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.			
<u>William Lane Parker</u> Printed Name of Signer		<u>[Signature]</u> Signature of Appointed Treasurer	<u>4/28/14</u> Date
<b>FOR OFFICE USE ONLY</b>			
Date Received:	<u>4/28/14</u>	Employee:	<u>[Signature]</u>
Date Postmarked:	<u>                    </u>	Employee:	<u>                    </u>
Date Scanned:	<u>4/28/14</u>	Employee:	<u>[Signature]</u>
Date Data Entered:	<u>                    </u>	Employee:	<u>                    </u>
		Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed Signer has not received mandatory training	
			
<b>Please Note:</b> This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.			

# Detailed Summary

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b> Buddy Parker for Orange County Sheriff	<b>2. Type of Report</b> 1 <sup>st</sup> Quarter	<b>3. ID Number</b>
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<b>Start of Election Cycle:</b> January 1, <u>2014</u>	<b>Total this Reporting Period</b>	<b>Total this Election Cycle</b>
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4) Cash on Hand at Start	\$ 200.00	\$
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<b>RECEIPTS</b>		
5) Aggregated Contributions from Individuals (CRO-1205)	\$ <del>2071</del>	\$ <del>2071</del>
6) Contributions from Individuals (CRO-1210)	\$ 2071	\$ 2271
7) Contributions from Political Party Committees (CRO-1220)	\$	\$
8) Contributions from Other Political Committees (CRO-1230)	\$	\$
9) Loan Proceeds (CRO-1410)	\$	\$
10) Refunds/Reimbursements To the Committee (CRO-1240)	\$	\$
11) Other Receipt Sources		
11a) Interest on Bank Accounts (CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Organizations (CRO-1250)	\$	\$
11c) Outside Sources of Income (CRO-1250)	\$	\$
11d) Legal Expense Fund – Other Sources (CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sales (CRO-1265)	\$	\$
<b>12) TOTAL RECEIPTS</b> (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 2071	\$ 2271

<b>EXPENDITURES</b>		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 2271	\$
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)	\$	\$
<b>18) TOTAL EXPENDITURES</b> (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 2271	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 0	\$

<b>ADDITIONAL INFORMATION</b>		
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$	
22) Debts and Obligations owed By the Committee (CRO-1610)	\$	
23) Debts and Obligations owed To the Committee (CRO-1620)	\$	
24) Account Transfers Within the Committee (CRO-1720)	\$	
25) Administrative Support (CRO-1710)	\$	\$
26) Forgiven Loans (CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum (CRO-2200)	\$	\$
28) Contributions to be Refunded (CRO-1215)	\$	\$



# Contributions from Individuals

Pg \_\_\_\_\_ of \_\_\_\_\_

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>	<b>2. ID Number</b>
Buddy Parker For Orange County Sheriff	

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Buddy Parker 836 Oakdale Drive Hillsborough NC 27278		Police Officer			
		<b>c. Employer's Name/Specific Field</b>			
		Hillsborough Police Department			
				<b>e. Election Sum to Date</b>	
				\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>		Check			\$ 120.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Buddy Parker 836 Oakdale Drive Hillsborough NC 27278		Police Officer			
		<b>c. Employer's Name/Specific Field</b>			
		Hillsborough Police Department			
				<b>e. Election Sum to Date</b>	
				\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>		check			\$ 528.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
David Strum 4413 Cornett Dr Iron Station, NC 28080 704-374-0705		Credit Manager			
		<b>c. Employer's Name/Specific Field</b>			
		D&L Parts Company, Inc			
				<b>e. Election Sum to Date</b>	
				\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>		check		02/12/2014	\$ 135.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	783.00
<b>5. Total of ALL CRO-1210 Pages</b>	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	



# Contributions from Individuals

Pg \_\_\_\_\_ of \_\_\_\_\_

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>	<b>2. ID Number</b>
Buddy Parker for Orange County Sheriff	

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Buddy Parker 836 Oakdale Dr Hillsborough, NC 27278 919-296-9026 919-886-3872		Police Officer			
		<b>c. Employer's Name/Specific Field</b>			
		Hillsborough Police Department Law Enforcement			
				<b>e. Election Sum to Date</b>	
				\$ 741.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>		Check		3/25/2014	\$ 710.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b>			
				<b>e. Election Sum to Date</b>	
				\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b>			
				<b>e. Election Sum to Date</b>	
				\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 710.00
<b>5. Total of ALL CRO-1210 Pages</b>	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	



# Contributions from Individuals

Pg \_\_\_\_\_ of \_\_\_\_\_

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>	<b>2. ID Number</b>
Buddy Parker For Orange County Sheriff	

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Adam Hamlett 232 Collins Avenue Hillsborough Nc 27278		Roofer			
		<b>c. Employer's Name/Specific Field</b>			
		Self Employed		<b>e. Election Sum to Date</b>	
				\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>		cash		02/21/2014	\$ 30.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Adam Hamlett 232 Collins Avenue Hillsborough NC 27278		Roofer			
		<b>c. Employer's Name/Specific Field</b>			
		Self Employed		<b>e. Election Sum to Date</b>	
				\$ 30.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>		cash		02/23/2014	\$ 30.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Carole McCullough 1989 Wheelers Church Road Hurdle Mills NC 27541		Retired			
		<b>c. Employer's Name/Specific Field</b>			
				<b>e. Election Sum to Date</b>	
				\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>		check		02/24/2014	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	160.00
<b>5. Total of ALL CRO-1210 Pages</b>	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	



# Contributions from Individuals

Pg \_\_\_\_\_ of \_\_\_\_\_

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>	<b>2. ID Number</b>
Buddy Parker For Orange County Sheriff	

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Amy Edmondson 5122 Brevard Lane Graham NC 27253 336-266-7561		Human Resource			
		<b>c. Employer's Name/Specific Field</b> PHE Inc			
<b>e. Election Sum to Date</b>				\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>		check		02/18/2014	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Linda Galloway 2015 Cross Rd Church Cemetary Rd Hillsborough NC 27278 919-636-1076		retired			
		<b>c. Employer's Name/Specific Field</b>			
<b>e. Election Sum to Date</b>				\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>		cash		03/14/2014	\$ 45.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Linda Galloway 2015 Cross Rd Church Cemetary Rd Hillsborough NC 27278 919-636-1076		retired			
		<b>c. Employer's Name/Specific Field</b>			
<b>e. Election Sum to Date</b>				\$ 45.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>		cash		03/21/2014	\$ 45.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 190.00
<b>5. Total of ALL CRO-1210 Pages</b>	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	



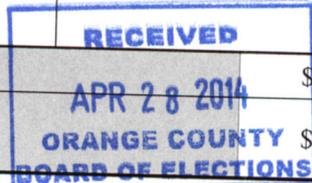
# Contributions from Individuals

Pg \_\_\_\_\_ of \_\_\_\_\_

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
Buddy Parker For Orange County Sheriff							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Thomas Watson 4519 Orange Grove Road Hillsborough NC 27278 919-451-1844				retired			
				<b>c. Employer's Name/Specific Field</b>			
				<b>e. Election Sum to Date</b>		\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>		check		03/29/2014		\$ 50.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Alvin Freeman 424 Hwy 70A East Hillsborough NC 27278				retired			
				<b>c. Employer's Name/Specific Field</b>			
				<b>e. Election Sum to Date</b>		\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>		check		03/22/2014		\$ 100.00	
<input type="checkbox"/>		cash		03/22/2014		\$ 7.00	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Patty Overman 913 NC 86 N Hillsborough NC 27278				retired			
				<b>c. Employer's Name/Specific Field</b>			
				<b>e. Election Sum to Date</b>		\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>		cash		03/22/2014		\$ 7.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$	
<b>5. Total of ALL CRO-1210 Pages</b>						\$ 164.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							



# Contributions from Individuals

Pg \_\_\_\_\_ of \_\_\_\_\_

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
Buddy Parker For Orange County Sheriff							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Shane Hamlett 504 Eno Mountain Road Hillsborough NC 27278 919-357-1229				roofer			
				c. Employer's Name/Specific Field			
				self employed			
						e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>		cash			03/22/2014		\$ 21.00
<input type="checkbox"/>							\$
<input type="checkbox"/>							\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Tracey Boley P O Box 54 Efland NC 27243				Travel Agent			
				c. Employer's Name/Specific Field			
				AAA			
						e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>		cash			03/22/2014		\$ 15.00
<input type="checkbox"/>							\$
<input type="checkbox"/>							\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Heidi Carter P.O. Box 1315 Hillsborough, NC 27278 919-576-6000				Insurance Agent			
				c. Employer's Name/Specific Field			
				Nationwide Insurance Hwy 55 Durham, NC			
						e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>		cash			3/22/2014		\$ 7.00
<input type="checkbox"/>							\$
<input type="checkbox"/>							\$
<b>4. Total only this Page</b>						\$ 43.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						\$	



# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b>	<b>2. ID Number</b>
Buddy Parker For Orange County Sheriff	

**3. Contributor Information**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Job Title/Profession</b>	<b>d. Comments</b>
Bunny Maples 1714 Riverside Drive Hillsborough NC 27278 919-357-7600	customer service rep	
	<b>c. Employer's Name/Specific Field</b>	
	Duke	<b>e. Election Sum to Date</b>
		\$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		cash		03/22/2014	\$ 7.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

**3. Contributor Information**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Job Title/Profession</b>	<b>d. Comments</b>
Russell Riley P O Box 27 Efland NC 27243	retired	
	<b>c. Employer's Name/Specific Field</b>	
		<b>e. Election Sum to Date</b>
		\$ 100.00

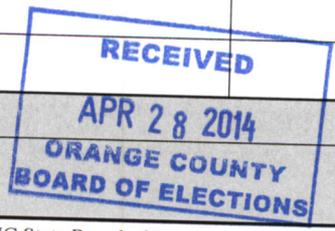
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		cash		03/22/2014	\$ 7.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

**3. Contributor Information**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Job Title/Profession</b>	<b>d. Comments</b>
Wanda Rudd 218 Mt Willing Rd Efland NC 27243	Retail	
	<b>c. Employer's Name/Specific Field</b>	
	Bed Bath & Beyond	<b>e. Election Sum to Date</b>
		\$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		cash		03/22/2014	\$ 7.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 21.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$



# Disbursements

Amendment  Yes  No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

<b>1. Committee Full Name (and Fund if applicable)</b> Buddy Parker for Orange County Sheriff	<b>2. ID Number</b>
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**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

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) A.G.E. Graphics, LLC 52231 St Rt 248 Long Bottom, Ohio 45743 877-973-3225	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
	<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
		<b>e. Election Sum to Date</b> \$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check Card	A	02/28/2014	\$305.00	
				\$	

**4. Payee Information**     Add     Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) A.G.E. Graphics, LLC 52231 St Rt 248 Long Bottom, Ohio 45743 877-973-3225	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
	<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
		<b>e. Election Sum to Date</b> \$ 305.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check Card	A	03/26/2014	\$1140.00	
				\$	

**4. Payee Information**     Add     Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Orange Cnty Board of Elections S. Cameron St. Hillsborough, NC 27278	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
	<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
		<b>e. Election Sum to Date</b> \$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	O	2/17/2014	\$826.00	
				\$	

**5. Total only this Page**    \$ 2270.00

**6. Total of ALL CRO-1310 Pages**    \$ 2270.00

*(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)

