

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			c. ID Number	
COMMITTEE TO ELECT CHARLES BLACKWOOD SHERIFF			4-HD-8-27	
b. Mailing Address (include City, State and Zip Code)			d. Date Filed	
PO BOX 1352 CARRBORO, NC 27510			07/10/2014	
			e. Phone Number	
			(919) 260-6680	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name	
2014	04/20/2014	06/30/2014	TERRI BENNETT	
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 <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
		State/County <input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input checked="" type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
7. Type of Fund (if applicable, check one)		10. Special Report Name		
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:				
8. Number of Fundraisers this Report				
1				
3. Account Information		3. Account Information		
a. Financial Institution Full Name		a. Financial Institution Full Name		
BRANCH BANKING AND TRUST				
b. Purpose	c. Account Code	b. Purpose	c. Account Code	
FOR CAMPAIGN CONTRIBUTIONS AND EXPENDITURES	3921			
	d. Period Begin Balance		d. Period Begin Balance	
	\$ 11845.92		\$	
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				
<u>Terri Bennett</u> Printed Name of Signer		<u>[Signature]</u> Signature of Appointed Treasurer		<u>07/10/2014</u> Date
FOR OFFICE USE ONLY				
Date Received:	<u>7-10-14</u>	Employee:	<u>DC</u>	Delivery Method
Date Postmarked:	_____	Employee:	_____	<input type="checkbox"/> Normal Mail
Date Scanned:	<u>7/10/14</u>	Employee:	<u>BA</u>	<input type="checkbox"/> Registered Mail
Date Data Entered:	_____	Employee:	_____	<input checked="" type="checkbox"/> Hand Delivered
				<input type="checkbox"/> Electronically Filed
				<input type="checkbox"/> Signer has not received mandatory training
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.				
You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.				

Detailed Summary

Amendment
 Yes No

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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
COMMITTEE TO ELECT CHARLES BLACKWOOD SHERIFF	2014 Second Quarter	4-HD-8-27	
Start of Election Cycle: January 1, 2013		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 11,845.92	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 1,418.00	\$ 2,373.00
6) Contributions from Individuals (CRO-1210)		\$ 7,650.00	\$ 35,575.00
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00	\$ 0.00
9) Loan Proceeds (CRO-1410)		\$ 0.00	\$ 5,852.33
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00	\$ 0.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00	\$ 0.00
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00	\$ 0.00
11c) Outside Sources of Income (CRO-1250)		\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 9,068.00	\$ 43,800.33
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 14,029.17	\$ 36,788.47
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 199.50	\$ 326.61
15) Loan Repayments (CRO-1420)		\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00	\$ 0.00
17) In-Kind Contributions (CRO-1510)		\$ 600.00	\$ 600.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 14,828.67	\$ 37,715.08
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 6,085.25	\$ 6,085.25
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 5,852.33	
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 0.00	
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0.00	
24) Account Transfers Within the Committee (CRO-1720)		\$ 0.00	
25) Administrative Support (CRO-1710)		\$ 0.00	\$ 0.00
26) Forgiven Loans (CRO-1440)		\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0.00	\$ 0.00
28) Contributions to be Refunded (CRO-1215)		\$ 0.00	\$ 0.00

Aggregated Contributions from Individuals

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 CHARLES BLACKWOOD SHERIFF					4-HD-8-27	
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add	3921	Cash		06/26/2014	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Cash		04/26/2014	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Cash		04/26/2014	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Cash		04/26/2014	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Cash		04/26/2014	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Cash		06/26/2014	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Check		06/26/2014	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Cash		06/26/2014	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Cash		06/26/2014	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Cash		06/26/2014	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Cash		06/26/2014	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Check		06/20/2014	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Cash		06/26/2014	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Cash		06/26/2014	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Cash		06/26/2014	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Check		05/20/2014	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Cash		06/26/2014	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Cash		06/26/2014	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Check		06/01/2014	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Check		05/16/2014	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Cash		06/26/2014	\$ 10.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Cash		06/26/2014	\$ 20.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	3921	Cash		06/26/2014	\$ 20.00	
<input type="checkbox"/> Remove						
4. Total only this Page					\$ 625.00	
5. Total of ALL CRO-1205 Pages					\$ 1,418.00	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

Aggregated Contributions from Individuals

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 CHARLES BLACKWOOD SHERIFF				4-HD-8-27	
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Check		04/26/2014	\$ 35.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Check		05/10/2014	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Check		06/26/2014	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Cash		06/26/2014	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Cash		06/26/2014	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Cash		06/26/2014	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Check		06/01/2014	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Check		06/20/2014	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Cash		06/26/2014	\$ 15.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Cash		06/26/2014	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Cash		06/26/2014	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Check		06/26/2014	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Cash		06/26/2014	\$ 8.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Check		06/26/2014	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Check		06/26/2014	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Check		06/26/2014	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Check		05/10/2014	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Check		06/20/2014	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Check		06/01/2014	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Money Order		05/06/2014	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Money Order		05/06/2014	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Check		06/10/2014	\$ 40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Cash		06/26/2014	\$ 20.00
4. Total only this Page				\$	\$793.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>				\$	\$1,418.00

Contributions from Individuals

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 CHARLES BLACKWOOD SHERIFF					4-HD-8-27	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
CHARLES BEST 64 11 QUAIL FARM RD MEBANE, NC 27258			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	3921	Cash		06/26/2014	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
RACHEL BEST 6605 HYLEN TRAIL EFLAND,, NC 27243			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	3921	Check		06/26/2014	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
GEARY BLACKWOOD 120 PINWOOD DR CHAPEL HILL, NC 27517			BUSINESS OWNER			
			c. Employer's Name/Specific Field			
			BLACKWOOD GRADING AND LANDSCAPING			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	3921	Cash		06/26/2014	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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)					\$ 7,650.00	

Contributions from Individuals

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 CHARLES BLACKWOOD SHERIFF						4-HD-8-27	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
WILLIAM BROWN 11744 US HWY 15/501 CHAPEL HILL, NC 27517				BUSINESS OWNER			
				c. Employer's Name/Specific Field			
				BROWN'S AUTOMOTIVE		e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	3921	Cash		06/26/2014		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CLARK CHURCH 1438 OLD LYSTRA RD CHAPEL HILL, NC 27517				BUSINESS OWNER			
				c. Employer's Name/Specific Field			
				RENTAL PROPERTY MANAGEMENT		e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	3921	Check		04/26/2014		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MICHEAL COX 1032 OLD LYSTRA RD CHAPEL HILL, NC 27517				SUPERVISING MANAGER			
				c. Employer's Name/Specific Field			
				AGILENT TECHNOLOGIES		e. Election Sum to Date	
						\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	3921	Check		05/16/2014		\$ 250.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 450.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 7,650.00	

Contributions from Individuals

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 CHARLES BLACKWOOD SHERIFF						4-HD-8-27	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DOUGLAS F DUNNAGAN 4632 G ST GARNER, NC 27529				PART TIME FACULTY INSTRUCTOR BLET			
				c. Employer's Name/Specific Field			
				WAKE TECH& VANCE -GRANVILLE COMMUNITY COLLEGE		e. Election Sum to Date	
						\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	3921	Money Order		06/01/2014		\$ 250.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
J LINDSAY EFLAND PO BOX 296 HALL'S MILL RD EFLAND, NC 27243				BUSINESS OWNER			
				c. Employer's Name/Specific Field			
				EFLAND HOSIERY MILL		e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	3921	Check		06/26/2014		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MARSHA EFLAND PO BOX 98 2021 BROOKHOLLOW RD EFLAND, NC 27243				NA			
				c. Employer's Name/Specific Field			
				STAY AT HOME MOM		e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	3921	Check		06/26/2014		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
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)						\$ 7,650.00	

Contributions from Individuals

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 CHARLES BLACKWOOD SHERIFF						4-HD-8-27	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MALINDA FRALEY 758 LEGEND OAKS DR CHAPEL HILL, NC 27517				MANAGER			
				c. Employer's Name/Specific Field			
				UNC BOOKSTORE		e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	3921	Check		04/30/2014		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
LEN FUQUA PO BOX 1299 HILLSBOROUGH, NC 27278				BUSINESS OWNER			
				c. Employer's Name/Specific Field			
				TIMBER DEVELOPMENT CO LLC		e. Election Sum to Date	
						\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	3921	Check		04/28/2014		\$ 250.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
BRANDON GILLIS 6817 NC 57 ROUGEMONT, NC 27572				CO-OWNER			
				c. Employer's Name/Specific Field			
				GILLIS'S BBQ		e. Election Sum to Date	
						\$ 600.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	3921	In-Kind	BBQ AND SIDES DONATED FOR	06/26/2014		\$ 600.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 950.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 7,650.00	

Contributions from Individuals

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 CHARLES BLACKWOOD SHERIFF					4-HD-8-27	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
S. TONY GORE III 105 BRADFORD PL CHAPEL HILL, NC 27517			BUSINESS OWNER			
			c. Employer's Name/Specific Field			
			SOUTHSTAR CAPITAL LLC		e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	3921	Check		05/01/2014	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
LYNN HOBGOOD PO BOX 26 CEDAR GROVE, NC 27231			SELF EMPLOYED			
			c. Employer's Name/Specific Field			
			CPA		e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	3921	Check		06/30/2014	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
EDWARD HOLMES JR 1156 PINEHURST DR CHAPEL HILL, NC 27517			BUSINESS OWNER			
			c. Employer's Name/Specific Field			
			HOLMES OIL CO		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	
<input type="checkbox"/>	3921	Check		05/05/2014	\$ 300.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 800.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 7,650.00	

Contributions from Individuals

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 CHARLES BLACKWOOD SHERIFF					4-HD-8-27	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
C H HORNE 173 WEAVER DAIRY RD CHAPEL HILL, NC 27511			RETIRED			
			c. Employer's Name/Specific Field			
			POLICE OFFICER			
					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	
<input type="checkbox"/>	3921	Check		06/26/2014	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
GEORGE A HORTON III 504 MEADOWLANDS DR HILLSBOROUGH, NC 27278			PARTNER			
			c. Employer's Name/Specific Field			
			SUMMIT ENGINEERING			
					e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	3921	Check		06/30/2014	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
R W HUTCHINS 2015 STARTERWOOD LN HILLSBOROUGH, NC 27278-6001			ACCOUNTANT			
			c. Employer's Name/Specific Field			
			Professional, Scientific, and Technical Services			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	3921	Check		05/10/2014	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 550.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 7,650.00	

Contributions from Individuals

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 CHARLES BLACKWOOD SHERIFF						4-HD-8-27	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
VERLA INSCOE 610 SURRY RD CHAPEL HILL, NC 27514				STATE LEGISLATOR			
				c. Employer's Name/Specific Field			
				STATE OF NC			
						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	
<input type="checkbox"/>	3921	Check		06/26/2014		\$ 200.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
FRANK MCDADE 901 MCDADE STORE RD HILLSBOROUGH, NC 27278				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	3921	Check		06/26/2014		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DONALD MCLENNAN JR 103 CHESAPEAKE WAY CHAPEL HILL, NC 27516				BUSINESS OWNER			
				c. Employer's Name/Specific Field			
				SHOW PROS			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	3921	Check		05/06/2014		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
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)						\$ 7,650.00	

Contributions from Individuals

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 CHARLES BLACKWOOD SHERIFF					4-HD-8-27	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
RICKY M MERRITT 2019 MANGUM CT CHAPEL HILL, NC 27517			DIRECTOR OF MANUFACTURING			
			c. Employer's Name/Specific Field TRIANGLE BRICK			
					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	
<input type="checkbox"/>	3921	Check		04/22/2014	\$ 300.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
E CLAUDE NEVILLE 1720 NEVILLE RD CHAPEL HILL, NC 27516-5462			RETIRED FIREFIGHTER			
			c. Employer's Name/Specific Field CHAPEL HILL FIRE DEPARTMENT			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	3921	Check		05/16/2014	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
WALT NUTTER 3111 DAIRYLAND RD HILLSBOROUGH, NC 27278			BUSINESS OWNER			
			c. Employer's Name/Specific Field MAPLE VIEW FARMS			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	3921	Cash		06/26/2014	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 500.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 7,650.00	

Contributions from Individuals

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 CHARLES BLACKWOOD SHERIFF						4-HD-8-27	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JOE PHELPS 1806 PATRICK HENRY LN HILLSBOROUGH, NC 27278				BUSINESS OWNER			
				c. Employer's Name/Specific Field			
				REALESTATE			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	3921	Cash		06/26/2014		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JEFF PHILLIPS 500 MANOR RIDGE DR CARRBORO, NC 27510				PRESIDENT			
				c. Employer's Name/Specific Field			
				FLEET FEET INC			
						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	
<input type="checkbox"/>	3921	Check		05/16/2014		\$ 1,000.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JOEY POINTER 1833 CHEDWORTH CT CHAPEL HILL, NC 27517				CFO			
				c. Employer's Name/Specific Field			
				FLEET FEET SPORTS			
						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	
<input type="checkbox"/>	3921	Money Order		05/20/2014		\$ 200.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 1,300.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 7,650.00	

Contributions from Individuals

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 CHARLES BLACKWOOD SHERIFF						4-HD-8-27	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JOHN PREYER 214 GLENBURNIE ST CHAPEL HILL, NC 27514-3704				CO-FOUNDER/PRESIDENT/COO			
				c. Employer's Name/Specific Field			
				RESTORATION SYSTEMS		e. Election Sum to Date	
						\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	3921	Check		05/14/2014		\$ 500.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JANICE PUTNAM PO BOX 1474 HILLSBOROUGH, NC 27278				NUTRITIONIST			
				c. Employer's Name/Specific Field			
				ALAMANCE COUNTY HEALTH DEPARTMENT		e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	3921	Check		06/26/2014		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
WILLIAM C RAY 5004 NC 86 N HILLSBOROUGH, NC 27278				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED		e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	3921	Check		06/26/2014		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 700.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 7,650.00	

Contributions from Individuals

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 CHARLES BLACKWOOD SHERIFF					4-HD-8-27	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
D GERALD TALBERT 1480 CRAWFORD DAIRY RD CHAPEL HILL, NC 27516			BUSINESS OWNER			
			c. Employer's Name/Specific Field TALBERT'S M MART			
					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	
<input type="checkbox"/>	3921	Check		06/26/2014	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
LARRY TALBERT 1006 PANTHER CT HILLSBOROUGH, NC 27278			RETIRED			
			c. Employer's Name/Specific Field RETIRED			
					e. Election Sum to Date	
					\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	3921	Check		06/01/2014	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
TOMMY WAGNER 1014 FLINT ROCK LN HILLSBOROUGH, NC 27278			BUSINESS OWNER			
			c. Employer's Name/Specific Field WAGNER TIRE			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	3921	Cash		06/26/2014	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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)					\$ 7,650.00	

Contributions from Individuals

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 CHARLES BLACKWOOD SHERIFF						4-HD-8-27	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
BRAD WALKER 1125 WALKER FIELD DR ROUGEMONT, NC 27572				OWNER			
				c. Employer's Name/Specific Field			
				BUILDER			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	3921	Cash		06/26/2014		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
BARRY WILLIAMS 447 COLLINS MTN RD CHAPEL HILL, NC 27516				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						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	
<input type="checkbox"/>	3921	Check		05/20/2014		\$ 200.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CLAUDIE WILLIAMS 1825J OLD GREENSBORO RD CHAPEL HILL, NC 27516-5236				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	3921	Check		05/16/2014		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
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)						\$ 7,650.00	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 CHARLES BLACKWOOD SHERIFF				4-HD-8-27	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
JACK WOOD 1328 BROOKHOLLOW RD EFLAND, NC 27243-9621			RETIRED		
			PROGRESS ENERGY		e. Election Sum to Date \$ 500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	
<input type="checkbox"/>	3921	Check		04/26/2014	\$ 400.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
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)					\$ 7,650.00

Disbursements

Amendment

Pg 1 of 7

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 CHARLES BLACKWOOD SHERIFF						4-HD-8-27	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
CIRCLE CITY 836 EAST ST PITTSBORO, NC 27312 (919) 542-5512							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 1,318.36	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
3921	Debit Card	B	05/21/2014	\$ 1,318.36	SHIRTS PRINTED		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
EXCHANGE CLUB PO BOX 565 HILLSBOROUGH, NC 27278							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 100.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
3921	Check	O	06/04/2014	\$ 100.00	DONATION TO		
				\$	CHARITABLE FUNCTION		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
GEPHART MARKETING SOLUTIONS,LLC PO BOX 669 HILLSBOROUGH, NC 27278							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 96.21	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
3921	Check	O	04/21/2014	\$ 96.21	STANDS FOR SIGNS		
				\$			
5. Total only this Page						\$ 1,514.57	
6. Total of ALL CRO-1310 Pages						\$ 14,029.17	
<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 (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 7

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 CHARLES BLACKWOOD SHERIFF						4-HD-8-27	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
GEPHART MARKETING SOLUTIONS,LLC PO BOX 669 HILLSBOROUGH, NC 27278				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County:			
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 3,169.10	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
3921	Debit Card	B	05/20/2014	\$ 2,835.85	YARD SIGNS		
3921	Debit Card	B	06/02/2014	\$ 333.25	SIGNS		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
KANGAROO EXPRESS 2229 HWY 54 E CHAPEL HILL, NC 27516				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County:			
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 130.28	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
3921	Debit Card	O	04/20/2014	\$ 59.03	FUEL		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
MINCEYS GRAPHICS 3211 MINCEY RD HILLSBOROUGH, NC 27278 (919) 732-3747				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County:			
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 1,846.88	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
3921	Debit Card	B	04/22/2014	\$ 241.88	BANNER		
				\$			
5. Total only this Page						\$ 3,470.01	
6. Total of ALL CRO-1310 Pages						\$ 14,029.17	
<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 (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

Amendment

Pg 3 of 7 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 CHARLES BLACKWOOD SHERIFF						4-HD-8-27	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
MINCEYS GRAPHICS 3211 MINCEY RD HILLSBOROUGH, NC 27278 (919) 732-3747							
				c. Level Registered (Specify)			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
						\$ 937.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
3921	Debit Card	B	05/20/2014	\$ 537.50	SIGNS AND STICKERS		
3921	Debit Card	B	06/10/2014	\$ 400.00	SIGNS		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ORANGE COUNTY OPTIMIST CLUB PO BOX 9 EFLAND, NC 27243							
				c. Level Registered (Specify)			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
						\$ 250.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
3921	Check	O	06/13/2014	\$ 200.00	SPONSOR FOR HOG DAY		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
PARTY CITY 5402 NEW HOPE COMMONS DR DURHAM, NC 27707							
				c. Level Registered (Specify)			
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
						\$ 227.38	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
3921	Debit Card	C	06/25/2014	\$ 227.38	PAPER PRODUCTS FOR FUNDRAISER		
				\$			
5. Total only this Page						\$ 1,364.88	
6. Total of ALL CRO-1310 Pages						\$ 14,029.17	
<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 (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

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 CHARLES BLACKWOOD SHERIFF						4-HD-8-27	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
THE NEWS OF ORANGE COUNTY 109 E KING ST HILLSBOROUGH, NC 27278							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County:			
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 439.68	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
3921	Debit Card	A	04/21/2014	\$ 439.68	NEWSPAPER AD		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
THE NEWS OF ORANGE COUNTY 109 E KING ST HILLSBOROUGH, NC 27278							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County:			
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 793.80	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
3921	Debit Card	A	05/13/2014	\$ 171.75	CAMPAIGN AD		
3921	Debit Card	A	06/09/2014	\$ 241.44	CAMPAIGN AD		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
THE NEWS OF ORANGE COUNTY 109 E KING ST HILLSBOROUGH, NC 27278							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County:			
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 793.80	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
3921	Debit Card	A	06/16/2014	\$ 197.41	CAMPAIGN AD		
3921	Debit Card	A	06/27/2014	\$ 183.20	CAMPAIGN AD		
5. Total only this Page						\$ 1,233.48	
6. Total of ALL CRO-1310 Pages						\$ 14,029.17	
<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 (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

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 CHARLES BLACKWOOD SHERIFF						4-HD-8-27
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
US POSTAL SERVICE 1500 W MAIN ST CARRBORO, NC 27510						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 147.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
3921	Debit Card	I	06/18/2014	\$ 147.00		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
VIP PRINTING 99 SOUTH ELLIOTT RD CHAPEL HILL, NC 27516						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 3,837.63
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
3921	Debit Card	I	04/24/2014	\$ 189.08		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
VIP PRINTING 99 SOUTH ELLIOTT RD CHAPEL HILL, NC 27516						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 358.58
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
3921	Debit Card	B	06/04/2014	\$ 358.58	BROCHURES	
				\$		
5. Total only this Page						\$ 694.66
6. Total of ALL CRO-1310 Pages						\$ 14,029.17
<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 (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

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 CHARLES BLACKWOOD SHERIFF						4-HD-8-27	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
VISTAPRINT 95 HAYDEN AVE LEXINGTON, MA 02421				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 11,469.16	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
3921	Debit Card	B	04/21/2014	\$ 5,273.63	DIRECT MAILERS		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
WALMART 12500 US 15-501 CHAPEL HILL, NC 27516				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 122.21	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
3921	Debit Card	K	05/05/2014	\$ 104.05	MATERIALS AND SUPPLIES TO ASSEMBLE		
				\$			
5. Total only this Page						\$ 5,377.68	
6. Total of ALL CRO-1310 Pages						\$ 14,029.17	
<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 (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)							

Aggregated Non-Media Expenditures

Optional form used to report NC Non-Media Expenditures of \$50 or less.

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO ELECT CHARLES BLACKWOOD SHERIFF					4-HD-8-27	
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Debit Card	K	04/20/2014	\$ 43.23	COMMITTEE MEETING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Debit Card	O	05/20/2014	\$ 44.16	SUPPLY FOR PUTTING SIGNS UP
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Debit Card	O	06/09/2014	\$ 15.30	MATERIAL FOR SIGNS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Check	O	06/04/2014	\$ 50.00	CAMPAIGN BOOTH FEE AT HOG DAY
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3921	Debit Card	O	06/03/2014	\$ 46.81	MATERIALS TO PUT TOGETHER SIGNS
4. Total only this Page					\$ 199.50	
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$ 199.50	
6. Purpose Codes (List detailed expenditure code in (d) above)						
	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* - Donations to Legal Expense Fund			
O* - Other						
* Codes require detailed explanation in required remarks field (g)						

In-Kind Contributions

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 CHARLES BLACKWOOD SHERIFF		4-HD-8-27	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
BRANDON GILLIS 6817 NC 57 ROUGEMONT, NC 27572		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 600.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
BBQ AND SIDES DONATED FOR FUNDRAISER EVENT.		06/26/2014	\$ 600.00
			\$
			\$
4. Total only this Page		\$ 600.00	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 600.00	

Outstanding Loans

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
COMMITTEE TO ELECT CHARLES BLACKWOOD SHERIFF		4-HD-8-27	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
CHARLES S BLACKWOOD 100 PINWOOD DR CHAPEL HILL, NC 27517-8018		RETIRED DEPUTY SHERIFF	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		ORANGE COUNTY SHERIFF'S OFFICE	11/01/2013
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 136.49	\$ 136.49
k. Full Name of Lending Institution			l. Loan Number
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
CHARLES S BLACKWOOD 100 PINWOOD DR CHAPEL HILL, NC 27517-8018		RETIRED DEPUTY SHERIFF	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		ORANGE COUNTY SHERIFF'S OFFICE	03/26/2014
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 5,318.00	\$ 5,318.00
k. Full Name of Lending Institution			l. Loan Number
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
CHARLES S BLACKWOOD 100 PINWOOD DR CHAPEL HILL, NC 27517		RETIRED	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		ORANGE COUNTY SHERIFFS DEPARTMENT	09/11/2013
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 397.84	\$ 397.84
k. Full Name of Lending Institution			l. Loan Number
4. Total only this Page			\$ 5,852.33
5. Total of ALL CRO-1430 Pages (This line must be on line 21 of Detailed Summary Page CRO-1100)			\$ 5,852.33