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

a. Full Name: Caldwell for Sheriff

b. Mailing Address (include City, State and Zip Code): P.O.B 16505, Chapel Hill, NC 27516

c. ID Number: CHDTNH

d. Date Filed: 7/14/14

e. Phone Number: (919) 967-4442

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2014	4/20/14	6/30/14	David Caldwell Jr.

6. Type of Committee (Check One)

- ☒ Candidate Campaign
- ☐ Party
- ☐ PAC
- ☐ Referendum
- ☐ Independent Expenditure
- ☐ Joint Fundraiser
- ☐ Legal Expense Fund

7. Type of Fund *(if applicable, check one)*

- ☐ Booster Fund
- ☐ Building Fund
- ☐ Other:

8. Number of Fundraisers this Report: 3

9. Type of Report *(check only one type of report from one category)*

Municipal	State/County	Referendum
☐ Organizational	☐ Organizational	☐ Organizational
☐ Thirty-five day	Quarterly	☐ Pre-referendum
☐ Pre-primary	☐ First	☐ Final
☐ Pre-election	☒ Second	☐ Supplemental Final
☐ Pre-runoff	☐ Third	☐ Annual
Semi-annual	☐ Fourth	☐ Special
☐ Mid Year	Semi-annual	
☐ Year End	☐ Mid Year	
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

10. Special Report Name

11. Account Information

a. Financial Institution Full Name: SunTrust

b. Purpose: Campaign

c. Account Code: #237

d. Period Begin Balance: $ 472.81

11. Account Information

a. Financial Institution Full Name:

b. Purpose:

c. Account Code:

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.

Caldwell, David L. — Printed Name of Signer
David L. Caldwell — Signature of Appointed Treasurer
8/5/14 — Date

FOR OFFICE USE ONLY

Date Received:	8/5/14	Employee:	BBJ
Date Postmarked:		Employee:	
Date Scanned:	8/5/14	Employee:	BBJ
Date Data Entered:		Employee:	

Delivery Method
- ☐ Normal Mail
- ☐ Registered Mail
- ☒ Hand Delivered
- ☐ Electronically Filed
- ☐ 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.

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Detailed Summary

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

Amendment ☑ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
Caldwell for Sheriff	Second QTR	CH0TNH

Start of Election Cycle: January 1, _____		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 472.81	$
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	$ 1500.00	$ 1667.99
6) Contributions from Individuals	(CRO-1210)	$ 4570.00	$ 5445.00
7) Contributions from Political Party Committees	(CRO-1220)	$ 212.50	$ 212.50
8) Contributions from Other Political Committees	(CRO-1230)	$	$
9) Loan Proceeds	(CRO-1410)	$	$ 3579.80
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)		$ 6282.50	$ 10,905.29
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	$ 4776.37	$ 8776.35
13b) Contributions to Candidates/Political Committees	(CRO-1310)	$	$ 150.00
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)	$ 600.00	$ 600.00
17) In-Kind Contributions	(CRO-1510)	$ 612.50	$ 612.50
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 5988.87	$ 10,138.85
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 766.44	$ 766.44
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	$ 112.50	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	$ 3,579.80	
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)	$	$

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Aggregated Contributions from Individuals

Page 1 of 2

Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable): Caldwell for Sheriff

2. ID Number: CHDTNH

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	237	CHECK		4/21/14	$ 25.00
☐ Add ☐ Remove	237	CHECK		4/26/14	$ 25.00
☐ Add ☐ Remove	237	CHECK		4/24/14	$ 50.00
☐ Add ☐ Remove	237	CHECK		4/29/14	$ 40.00
☐ Add ☐ Remove	237	CHECK		5/2/14	$ 30.00
☐ Add ☐ Remove	237	CHECK		5/12/14	$ 10.00
☐ Add ☐ Remove	237	CASH		5/17/14	$ 50.00
☐ Add ☐ Remove	237	CHECK		5/17/14	$ 25.00
☐ Add ☐ Remove	237	PAY PAL		6/3/14	$ 3.00
☐ Add ☐ Remove	237	CHECK		6/3/14	$ 50.00
☐ Add ☐ Remove	237	CHECK		6/6/14	$ 20.00
☐ Add ☐ Remove	237	CHECK		6/21/14	$ 50.00
☐ Add ☐ Remove	237	CHECK		6/21/14	$ 10.00
☐ Add ☐ Remove	237	CHECK		6/21/14	$ 50.00
☐ Add ☐ Remove	237	CHECK		6/21/14	$ 20.00
☐ Add ☐ Remove	237	CHECK		6/21/14	$ 10.00
☐ Add ☐ Remove	237	PAY PAL		6/21/14	$ 30.00
☐ Add ☐ Remove	237	PAY PAL		6/23/14	$ 50.00
☐ Add ☐ Remove	237	PAY PAL		6/24/14	$ 50.00
☐ Add ☐ Remove	237	PAY PAL		6/24/14	$ 50.00
☐ Add ☐ Remove	237	PAY PAL		6/26/14	$ 25.00
☐ Add ☐ Remove	237	CHECK		6/25/14	$ 25.00
☐ Add ☐ Remove	237	CHECK		6/26/14	$ 25.00

4. Total only this Page $ 723.00

5. Total of ALL CRO-1205 Pages $ 1500.00

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

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Aggregated Contributions from Individuals

Page 2 of 2

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
CALDWELL FOR SHERIFF	CHDTNH

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	237	CHECK		6/26/14	$ 50.00
☐ Add ☐ Remove	237	CHECK		6/26/14	$ 50.00
☐ Add ☐ Remove	237	CHECK		6/26/14	$ 25.00
☐ Add ☐ Remove	237	CHECK		6/26/14	$ 50.00
☐ Add ☐ Remove	237	CHECK		6/27/14	$ 25.00
☐ Add ☐ Remove	237	CHECK		6/28/14	$ 32.00
☐ Add ☐ Remove	237	CASH		5/17/14	$ 50.00
☐ Add ☐ Remove	237	CASH		5/17/14	$ 40.00
☐ Add ☐ Remove	237	CHECK		6/26/14	$ 25.00
☐ Add ☐ Remove	237	CHECK		6/26/14	$ 25.00
☐ Add ☐ Remove	237	CHECK		6/27/14	$ 35.00
☐ Add ☐ Remove	237	CHECK		6/26/14	$ 40.00
☐ Add ☐ Remove	237	CHECK		6/26/14	$ 25.00
☐ Add ☐ Remove	237	CHECK		6/26/14	$ 15.00
☐ Add ☐ Remove	237	CHECK		6/26/14	$ 15.00
☐ Add ☐ Remove	237	CHECK		6/26/14	$ 25.00
☐ Add ☐ Remove	237	CHECK		6/26/14	$ 25.00
☐ Add ☐ Remove	237	CHECK		6/26/14	$ 25.00
☐ Add ☐ Remove	237	CHECK		6/25/14	$ 25.00
☐ Add ☐ Remove	237	CHECK		6/26/14	$ 50.00
☐ Add ☐ Remove	237	CHECK		6/26/14	$ 50.00
☐ Add ☐ Remove	237	PAY PAL		6/28/14	$ 50.00
☐ Add ☐ Remove	237	PAY PAL		6/29/14	$ 25.00

4. Total only this Page	$ 777.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 1500.00

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Orange County Bd. of Elections

Contributions from Individuals

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

Amendment ☒ Yes ☐ No

1. Committee Full Name (and Fund if applicable): Caldwell for Sheriff

2. ID Number: CHDTNH

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Molly DeMarco, 120 Justice St., Chapel Hill, NC 27516

b. Job Title/Profession: Professor

c. Employer's Name/Specific Field: UNC

d. Comments:

e. Election Sum to Date: $ 350.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	Check		4/18/14	$ 100.00
☐	237	PayPal		6/9/14	$ 250.00
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Sterlin Holt Jr., 102 Holt St, Mebane, NC

b. Job Title/Profession: Retired

c. Employer's Name/Specific Field: None

d. Comments:

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
☐	237	Check		5/2/14	$ 150.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Hilliard G. Caldwell, 15176 Russell Ln., Glynn, LA 70736

b. Job Title/Profession: Retired

c. Employer's Name/Specific Field: None

d. Comments:

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
☐	237	Check		5/3/14	$ 100.00
☐					$
☐					$

4. Total only this Page $ 600.00

5. Total of ALL CRO-1210 Pages $ 4570.00

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

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Contributions from Individuals

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

Amendment ☒ Yes ☐ No

1. Committee Full Name (and Fund if applicable): Caldwell For Sheriff

2. ID Number: CHDTNH

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Mark Dorosin, 113 Creekview Cir., Carrboro, NC 27510

b. Job Title/Profession: Lawyer

c. Employer's Name/Specific Field: UNC

d. Comments:

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
☐	237	Check		6/17/14	$ 150.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Danise Webb, 1715 Rusch Rd., Chapel Hill, NC 27516

b. Job Title/Profession: Day Care

c. Employer's Name/Specific Field: One Two Buckle My Shoe

d. Comments:

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
☐	237	Cash		5/17/14	$ 50.00
☐	237	Cash		5/18/14	$ 50.00
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): William H. Burnette Jr., 3402 Buckhorn Rd., Efland, NC 27243

b. Job Title/Profession: Retired

c. Employer's Name/Specific Field: None

d. Comments:

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
☐	237	Check		5/14/14	$ 100.00
☐					$
☐					$

4. Total only this Page $ 350.00

5. Total of ALL CRO-1210 Pages $ 4570.00

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

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Contributions from Individuals

Pg 3 of 10

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
Caldwell for Sheriff	CHDTNH

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
AJ Howard Clement III 5201 Brookstone Dr. Durham, NC 27713	Retired	None		$ 150.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	Check		5/17/14	$ 150.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Arthrell A. Sanders 9419 Theresa Lane Rougemont, NC 27572	Retired	None		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	Check		5/17/14	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Daryl Caldwell 608 Orchard Place Hillsborough, NC 27278	Retired	None		$ 300.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	Check		5/12/14	$ 300.00
☐					$
☐					$

4. Total only this Page	$ 550.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 4570.00

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Contributions from Individuals

Pg 4 of 10

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
Caldwell for Sheriff	CHOTNH

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Pamela S. Hemminger 407 Sharon Rd. Chapel Hill, NC 27517	Board member	Habitat		$100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	Check		5/15/14	$100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Nathaniel Davis, Sr. 104 James St. Carrboro, NC 27510	Supervisor	Recreation Chapel Hill		$100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	Check		5/24/14	$100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
William Elliott Warnock 51 Davie Circle Chapel Hill, NC 27514	Reporter	News Observer		$100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	Check		6/6/14	$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)*	$ 4570.00

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Contributions from Individuals

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

Amendment ☒ Yes ☐ No

1. Committee Full Name (and Fund if applicable): Caldwell for Sheriff

2. ID Number: CHDTNH

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Judith M. Panitch, 123 Ivy Brook Lane, Chapel Hill, NC 27516

b. Job Title/Profession: Director Communication

c. Employer's Name/Specific Field: UNC

d. Comments:

e. Election Sum to Date: $60.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	Check			$60.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): John M. Gallagher, 400 Ford Rd., Chapel Hill, NC 27516

b. Job Title/Profession: Writer

c. Employer's Name/Specific Field: Self Employed

d. Comments:

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
☐	237	Check		6/19/14	$100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Larry Talbert, 1006 Panther Ct, Hillsborough, NC 27278

b. Job Title/Profession: Retired

c. Employer's Name/Specific Field: None

d. Comments:

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
☐	237	Check		6/12/14	$100.00
☐					$
☐					$

4. Total only this Page $260.00

5. Total of ALL CRO-1210 Pages $4570.00

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

RECEIVED AUG 05 2014 Orange County Bd. of Elections

Contributions from Individuals

Pg 6 of 10

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
Caldwell for Sheriff	CHOTNH

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Andy Cagle 3420 Mount Willings Rd. Efland, NC 27243	Self Employed	Andy Cagle Construction		$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	Check		6/26/14	$ 500.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Gene R. Nichol 104 Pine Ln. Chapel Hill NC 27514	Lawyer	UNC/Civil Rights		$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	Check		6/26/14	$ 500.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Lynn K. Knauff 205 Deepwood Rd. Chapel Hill, NC 27514	Retired	UNC School of Public Health		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	Check		6/26/14	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 1100.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 4570.00

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AUG 05 2014
Orange County Bd. of Elections

Contributions from Individuals

Pg 7 of 10

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
Caldwell for Sheriff	CH0TNH

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MARK MARCOPOLIS 7207 SOUTHERN TRL. CHAPEL HILL NC 27516	OWNER	MARCOPOLIS Construction		$60.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	CHECK		6/26/14	$60.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Vicki Boyer P.O.B. 302 Carrboro, NC 27510	Retired	None		$100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	CHECK		6/26/14	$100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Todd Shapley-Quinn 130 Justice Street Chapel Hill, NC 27516	Instructor	UNC Family Medicine		$100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	CHECK		6/26/14	$100.00
☐					$
☐					$

4. Total only this Page	$260.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$4570.00

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AUG 05 2014
Orange County Bd. of Elections

Contributions from Individuals

Pg 8 of 10

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
Caldwell for Sheriff	CHDTNH

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
John Hammond 114 Essex Dr. Chapel Hill, NC 27514	Retired	None		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	PayPal		6/25/14	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Jennifer E. Weaver 223 W Queen Hillsborough, NC 27278		Hillsborough Town Board of Elections		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	PayPal		6/12/14	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Damon Seils 601 Jones Ferry Rd. Apt B-13 Carrboro, NC 27510	Carrboro Alderman	Town of Carrboro		$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	PayPal		6/10/14	$ 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)*	$ 4570.00

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Contributions from Individuals

Pg 9 of 10

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
Caldwell for Sheriff	CH0TNH

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Michelle Johnson 109 Center St. Carrboro, NC 27510	Carrboro Alderman	Town of Carrboro, NC		$250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	PayPal		6/11/14	$250.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Malcolm Hunter 817 Old Mill Rd Carrboro, NC 27514	Professor	UNC Chapel Hill School of Law		$250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	PayPal		6/16/14	$250.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Allison DeMarco 120 Justice Street Chapel Hill, NC 27516	Social Worker	Frank Porter Graham, Chapel Hill		$100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	PayPal		6/10/14	$100.00
☐					$
☐					$

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)*	$ 4570.00

RECEIVED AUG 05 2014 Orange County Bd. of Elections

Contributions from Individuals

Pg 10 of 10

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
Caldwell for Sheriff	CH0TNH

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
James Barnett 100 Morgan Bluff Ln. Chapel Hill, NC 27517	School Board Official	Chapel Hill, Carrboro School Board		$100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	237	PayPal		6/11/14	$100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	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
☐					$
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	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
☐					$
☐					$
☐					$

4. Total only this Page	$ 100.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 4570.00

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Contributions from Other Political Committees

Pg 1 of 2

Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable): Caldwell for Sheriff

2. ID Number: CHDTNH

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Mark Chilton, 203 Ashe St, Carrboro, NC 27510

b. Type of Committee: ☒ Candidate ☐ PAC ☐ Referendum

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☒ Municipality:

d. Comments: Mailing of Postcards

e. Election Sum to Date: $37.50

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
237	" "	Mailing Postcards	4/25/14	$37.50
				$
				$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Barry Jacobs, 2105 Moorefield Rd, Hillsborough, NC 27278

b. Type of Committee: ☒ Candidate ☐ PAC ☐ Referendum

c. Level Registered (Specify): ☐ Federal ☒ County: ☐ State ☐ Municipality:

d. Comments: Mailing of Postcards

e. Election Sum to Date: $37.50

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
237	" "	Mailing Postcards	4/25/14	$37.50
				$
				$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Bethany Chaney, 217 Hillsborough Rd., Carrboro, NC 27510

b. Type of Committee: ☒ Candidate ☐ PAC ☐ Referendum

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments: Mailing of Postcards

e. Election Sum to Date: $37.50

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
237	" "	Mailing Postcards	4/25/14	$37.50
				$
				$

4. Total only this Page $112.50

5. Total of ALL CRO-1230 Pages $212.50

(This line must be on line 8 of Detailed Summary Page CRO-1100)

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Contributions from Other Political Committees

Pg 2 of 2

Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable): Caldwell for Sheriff

2. ID Number: CHDTNH

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Elect Mark Dorosin, 113 Creekview Cir., Carrboro, NC 27510

b. Type of Committee: ☐ Candidate ☐ PAC ☐ Referendum

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 100.00

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
237	Check		6/14/14	$ 100.00
				$
				$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip):

b. Type of Committee: ☐ Candidate ☐ PAC ☐ Referendum

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
				$
				$
				$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip):

b. Type of Committee: ☐ Candidate ☐ PAC ☐ Referendum

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
				$
				$
				$

4. Total only this Page $ 100.00

5. Total of ALL CRO-1230 Pages *(This line must be on line 8 of Detailed Summary Page CRO-1100)* $ 212.50

RECEIVED AUG 05 2014 Orange County Bd. of Elections

Disbursements

Pg 1 of 5

Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable): Caldwell for Sheriff

2. ID Number: CHDTNH

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): Chapel Hill NAACP Banquet
NAACP Branch 6589
P.O.B 1236
Carrboro, NC

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $150.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
237	Check	A	4/22/14	$150.00	Tickets + Advertisement
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Walmart
5450 New Hope Commons Dr.
Durham, NC 27707

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $16.09

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
237	Credit Card	K	4/23/14	$16.09	Office Supplies
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Fedex Office
114 W. Franklin St.
Chapel Hill, NC 27516

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $481.23

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
237	Credit Card	B	6/22/14	$481.23	Flyers
				$	

5. Total only this Page $647.32

6. Total of ALL CRO-1310 Pages $ 477637

(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)**

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Disbursements

Pg 2 of 5

Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable): Caldwell for Sheriff

2. ID Number: CHDTNH

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): Chilton for Register of Deeds, 203 Ashe st., Carrboro, NC 27510

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments: Mailing of Post cards

e. Election Sum to Date: $150.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
237	Check	I	5/1/14	$150.00	
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Gephart Marketing Solutions, P.O. B 669, Hillsborough, NC 27278

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $1742.78

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
237	Check	B	5/28/14	$1742.78	Campaign signs Printing
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Coca-Cola Bottling Company, 3214 Hillsborough Rd., Durham, NC 27705

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $158.83

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
237	Check	C	5/16/14	$158.83	Campaign Fundraising
				$	

5. Total only this Page $ 205.61

6. Total of ALL CRO-1310 Pages $ 4276.37

(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)**

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Disbursements

Pg 3 of 5

Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable): Caldwell for Sheriff

2. ID Number: CHDTNH

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): Signs Now, 1322 Fordham Blvd #5, Chapel Hill, NC 27514

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $48.38

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
237	Credit Card	B	6/2/14	$48.38	Campaign cards
				$	

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:

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				$	
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): AA Services, 313 Sylvan Way, Chapel Hill, NC 27516

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $100.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
237	Check	A	6/9/14	$100.00	Website
				$	

5. Total only this Page $ 148.38

6. Total of ALL CRO-1310 Pages $ 7776.37

(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)**

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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

1. Committee Full Name (and Fund if applicable): Caldwell for Sheriff

2. ID Number: CH0TN41

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): A BetterImage Printing, 1709 Legion Rd. Ste 100, Chapel Hill, NC 27517

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $811.96

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
237	Check	B	6/26/14	$811.96	Mailers
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Mediterranean Deli, 410 W. Franklin St., Chapel Hill, NC 27516

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $268.75

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
237	Check	C	6/30/14	$268.75	Fund Raising Event
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): US Postal Service, Estes Drive, Chapel Hill, NC 27516

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments: Postage for Mailers

e. Election Sum to Date: $773.35

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
237	Check	I	6/24/14	$773.35	
				$	

5. Total only this Page $1854.06

6. Total of ALL CRO-1310 Pages $ 4776.37

(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)**

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Disbursements

Pg 5 of 5

Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable): Caldwell for Sheriff

2. ID Number: CHDTNH

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): Mt. Olive Lodge, 102 Rosemary st., Carrboro, NC

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $75.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
237	Check	C	6/9/14	$75.00	Building Rental
				$	

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: $

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	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: $

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				$	
				$	

5. Total only this Page $75.00

6. Total of ALL CRO-1310 Pages $ 4776.37

(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)**

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Refunds/Reimbursements From the Committee

Pg ____ of ____

Amendment ☐ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number

3. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Type of Committee	h. Original Receipt Date
Danny Caldwell 1715 Rusch Rd. Chapel Hill, NC 27516	☐ Candidate ☐ PAC ☐ Referendum ☐ Party	6/21/14
	e. Level Registered: ☐ Federal ☐ County: ☐ State ☐ Municipality:	i. Original Receipt Amount: $ 600.00
	f. Purpose Code	j. Election Sum to Date: $ 600.00
b. Job Title/Profession: Retired	c. Employer's Name/Specific Field: None	g. Comments
		k. Account Code: 237

l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount
Check	Food & Accessories for Fund Raiser	6/22/14	$ 600.00

3. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Type of Committee	h. Original Receipt Date
	☐ Candidate ☐ PAC ☐ Referendum ☐ Party	
	e. Level Registered: ☐ Federal ☐ County: ☐ State ☐ Municipality:	i. Original Receipt Amount: $
	f. Purpose Code	j. Election Sum to Date: $
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments
		k. Account Code

l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount
			$

3. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Type of Committee	h. Original Receipt Date
	☐ Candidate ☐ PAC ☐ Referendum ☐ Party	
	e. Level Registered: ☐ Federal ☐ County: ☐ State ☐ Municipality:	i. Original Receipt Amount: $
	f. Purpose Code	j. Election Sum to Date: $
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments
		k. Account Code

l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount
			$

4. Total only this Page	$ 600.00
5. Total of ALL CRO-1320 Pages *(This line must be on line 16 of Detailed Summary Page CRO-1100)*	$ 600.00

6. Purpose Codes (List detailed disbursement code in (f) above)

L - Returned to Contributor M - Overpayment for Service N - Exceeded Contribution Limit

P* - Reimbursement of In-Kind O* Other

*** Codes require detailed explanation in required remarks field (m)**

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In-Kind Contributions

Pg 1 of 2

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): Caldwell For Sheriff

2. ID Number: CHDTNH

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
Mark Chilton 203 Ashe St. Carrboro, NC 27510	☐ Individual ☒ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Indy Mailing	$ 37.50

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Postage for Mailing of Postcards	4/25/14	$ 37.50
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
Barry Jacobs 2105 Moorefield Rd. Hillsborough, NC 27278	☐ Individual ☒ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Indy Mailing	$ 37.50

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Postage for Mailing of Postcards	4/25/14	$ 37.50
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
Bethany Chaney 217 Hillsborough Rd. Carrboro, NC 27510	☐ Individual ☒ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Indy Mailing	$ 37.50

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Postage for Mailing of Postcards	4/25/14	$ 37.50
		$
		$

4. Total only this Page $ 112.50

5. Total of ALL CRO-1510 Pages $ 612.50
(This line must be on line 17 of Detailed Summary Page CRO-1100)

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In-Kind Contributions

Pg 2 of 2

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)	2. ID Number
Caldwell for Sheriff	CHDTNH

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Roger Snipes Snipes Farm Retreat 2339 Jomac Rd Chapel Hill, NC 27516	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date: $ 500.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Rental of Building		$ 500.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
	☐ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	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 (include city, state, & zip)	b. Type of Contributor	c. Comments
	☐ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date: $

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		$
		$
		$

4. Total only this Page	$ 500.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 612.50

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Non-Monetary Gifts Given to Other Committees

Pg ___ of ___

Amendment ☐ Yes ☒ No

Use this form to report any in-kind, non-monetary gift, service or items given to another committee.

1. Committee Full Name (and Fund if applicable): Caldwell for Sheriff

2. ID Number: CH0TNH

3. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip):
Mark Chilton
203 Ashe St.
Carrboro, NC 27510

b. Type of Committee: ☒ Candidate ☐ PAC ☐ Referendum ☐ Party

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☒ Municipality:

d. Comments: Indy Mailing

e. Type of Gift: ☐ Coordinated Party Expenditure ☐ Contribution to Candidate/Political Committee

f. Description: Postage for Mailing of Postcard

g. Date (mm/dd/yyyy): 4/25/14

h. Fair Market Amount: $ 37.50

3. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip):
Barry Jacobs
2105 Moore Field Rd
Hillsborough, NC 27278

b. Type of Committee: ☒ Candidate ☐ PAC ☐ Referendum ☐ Party

c. Level Registered (Specify): ☐ Federal ☒ County: ☐ State ☐ Municipality:

d. Comments: Indy Mailing

e. Type of Gift: ☐ Coordinated Party Expenditure ☐ Contribution to Candidate/Political Committee

f. Description: Postage of Mailing of Postcard

g. Date (mm/dd/yyyy):

h. Fair Market Amount: $37.50

3. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip):
Bethany Chaney
217 Hillsborough Rd.
Carrboro, NC 27510

b. Type of Committee: ☒ Candidate ☐ PAC ☐ Referendum ☐ Party

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☒ Municipality:

d. Comments: Indy Mailing

e. Type of Gift: ☐ Coordinated Party Expenditure ☐ Contribution to Candidate/Political Committee

f. Description: Postage for Mailing of Postcards

g. Date (mm/dd/yyyy): 4/25/14

h. Fair Market Amount: $ 37.50

4. Total only this Page $ 112.50

5. Total of ALL CRO-1330 Pages $ 112.50

(This line must be on line 20 of Detailed Summary Page CRO-1100)

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Outstanding Loans

Pg ____ of ____

Amendment ☒ Yes ☐ No

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): Caldwell for Sheriff

2. ID Number: CHDTNH

3. Lender Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Danny Caldwell, 1715 Rusch Rd, Chapel Hill, NC 27516

b. Job Title/Profession: Retired

c. Employer's Name/Specific Field: None

d. Comments: Brother

e. Start Date (mm/dd/yyyy): 3/24/14

f. End Date (mm/dd/yyyy):

g. Rate: %

h. Security Pledged:

i. Original Loan Amount: $ 500.00

j. Remaining Loan Balance: $ 500.00

k. Full Name of Lending Institution: Danny Caldwell

l. Loan Number:

3. Lender Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Rosie Phillips, 8108 Rogers Rd., Chapel Hill NC 27516

b. Job Title/Profession: Retired

c. Employer's Name/Specific Field: None

d. Comments: Spouse

e. Start Date (mm/dd/yyyy): 3/24/14

f. End Date (mm/dd/yyyy):

g. Rate: %

h. Security Pledged:

i. Original Loan Amount: $ 2079.80

j. Remaining Loan Balance: $ 2079.80

k. Full Name of Lending Institution: Rosie Phillips

l. Loan Number:

3. Lender Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): David Caldwell, 8108 Rogers Rd, Chapel Hill, NC 27516

b. Job Title/Profession: Retired

c. Employer's Name/Specific Field: None

d. Comments: Self

e. Start Date (mm/dd/yyyy): 1/28/14

f. End Date (mm/dd/yyyy):

g. Rate: %

h. Security Pledged:

i. Original Loan Amount: $

j. Remaining Loan Balance: $ 1,000.00

k. Full Name of Lending Institution: Self

l. Loan Number:

4. Total only this Page $ 3579.80

5. Total of ALL CRO-1430 Pages $ 3579.80

(This line must be on line 21 of Detailed Summary Page CRO-1100)

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