Disclosure	Report	Cover

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Disclosure Report Cover

JAN 102019

Amendment ves 121 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 In	formation										
a. Full Name									c. ID Nu	mber	
FRIENDS OF A	ALAN NORMA	AN								-QBC115	
b. Mailing Addre	ess (include City	y, State and Zip	(Code	'.					d. Date	Filed	
568 OAK GRO LAWNDALE,		HILL CH ROA	AD						•	01/09/2019	
LAWINDALL,	110 20070								e. Phon	e Number	
									(70	04) 472-6480	
2. Report Year	3. Period Start	Date (mm/dd/)	/y)	4. Period l	and Da	te (m	m/dd/yy)	5. Treasur	er Full	Name	
2018		/21/2018		1	2/31/2	2018		KRISTEN	BHAN	IRICK	
6. Type of Com	mittee (Check O	ne)	9. Typ	e of Report	(cl	heck	only one	type of rep	ort from	one category)	
Candidate Car			Munic				e/County		Referen		
☐ Joint Fundrais	er 🔲 PAG	2		Organization	nal		Organizatio	onal	, —	anizational	
Referendum		al Expense Fund		Thirty-five	day	(Quarterly			referendum	
7. Type of Fund		e, check one)		Pre-primary	,		First		Fina		
Booster Fund	di ⁱⁱ			Pre-election	ı		Second	l		plemental Final	
🔲 Building Fund				Pre-runoff			Third		And		
<u> </u>	lection Year Cand		l_	Semi-annual	i		Fourth		☐ Spe	cial	
NC Public Car	mpaign Financing	Fund	<u> </u>	Mid Ye		_ `	Semi-annua NGA V		10 5	LI-L D A N	
				Year Er	nd		Mid Ye Year E		10. Spe	cial Report Name	
Other:			뮤	Fînal Special		片,	Final	iiu	1		
8. Number of F	undraisers this	Report	_	Special						1	
,	0					<u>.</u>	Special			<u></u>	
3. Account Info					Informat		·				
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ВВ&Т										·	
b. Purpose		c. Account Cod	le		b. Pur	pose			c. Acco	unt Code	
CAMPAIGN F	INANCES		01								
		d. Period Begi		1 C e					d. Period Begin Balance		
		\$		36,051.54					\$		
I certify that Chapter 163	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										
1 - j	rinted Name of S	igner		\ Sign	ature of	f App	ointed Tre	asurer		Date	
FOR OFFICE I	USEONLY					0		_			
Date Receiv	ved:	1-10-19		Emplo	yee:	1	dis _		elivery <u>N</u> Norma		
Date Postm	narked:		_	Emplo	yee:			_ 🗆		ered Mail Delivered	
Date Scann	ied:			Emplo	yee:			_	-	nically Filed	
Date Data I			·	Emplo	yee:				-	has not received tory training	
Please No	te: This form o	annot be used	to ame	nd committ	ee info	rmati	ion such	as the com	nittee ad	dress, treasurer,	
	assista	nt treasurer, cu	ıstodia	n of books i	inform	ation,	огассои	nt informat	ion.		

Amendment

Yes X No

Use this form to summarize all disclosure reporting forms and to total monetary information 1. Committee Full Name (and Fund if applicable) 3. ID Number 2. Type of Report FRIENDS OF ALAN NORMAN 2018 Fourth Quarter -OBC|115--Total this Total this 2015 Start of Election Cycle: January 1, Reporting Period Election Cycle 41,046,35 4) Cash on Hand at Start 36.051.54 RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) 230.00 565.00 (CRO-1210) \$ 30,825.90 6) Contributions from Individuals \$ 7,324.90 (CRO-1220) 0.00 \$ 0.007) Contributions from Political Party Committees \$ \$ 1,000.00 (CRO-1230) S 1.000.00 8) Contributions from Other Political Committees (CRO-1410) \$ 0.00\$ 0.00 9) Loan Proceeds (CRO-1240) \$ 00.0\$ 0.00 0) Refunds/Reimbursements to the Committee 1) Other Receipt Sources (CRO-1250) 00.0\$ 0.00 11a) Interest on Bank Accounts \$ 11b) Contributions from Not-For-Profit Organizations (CRO-1250) \$ 00.00.00(CRO-1250) \$ 0.00 0.0011c) Outside Sources of Income \$ (CRO-1270) \$ 0.00 0.00 11d) Legal Expense Fund - Other Sources \$ (CRO-1265) \$ 0.00 0.00 11e) Exempt Purchase Price Sales 2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e) 8,554.90 \$ 32,390.90 \$ EXPENDITURES 3) Disbursements (CRO-1310) 12,761.89 \$ 37,550.00 13a) Operating Expenditures \$ (CRO-1310) \$ 13b) Contributions to Candidates/Political Committees 0.00 0.00 (CRO-1310) \$ \$ 13c) Coordinated Party Expenditures 0.00 0.00 \$ 4) Aggregated Non-Media Expenditures (CRO-1315) \$ 0.00 42.70 \$ \$ (CRO-1420) (5) Loan Repayments 00.04,000.00 \$ (CRO-1320) \$ (6) Refunds/Reimbursements from the Committee 0.00 0.00 (CRO-1510) \$ 2,324.90 \$ 2,324.90 7) In-Kind Contributions 8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) \$ \$ 43,917.60 15,086,79 9) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) \$ \$ 29,519.65 29,519.65 ADDITIONAL INFORMATION (CRO-1330) \$ 0.0020) Non-Monetary Gifts Given to Other Committees (CRO-1430) \$ 0.00 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1610) 0.00\$ 22) Debts and Obligations owed by the Committee (CRO-1620) 0.00 \$ 23) Debts and Obligations owed to the Committee 0.00 24) Account Transfers Within the Committee (CRO-1720) 0.00 (CRO-1710) 0.00 \$ \$ 25) Administrative Support (CRO-1440) 0.00 \$ 0.00 26) Forgiven Loans (CRO-2220) 0.00 0.00 \$ 27) 48-Hour Notice Reports Sum (CRO-1215) S 28) Contributions to be Refunded 00.0\$ 0.00 Optional form used to report NC Contributions From Individuals of \$50 or less 1. Committee Full Name (and Fund if applicable) 2. ID Number -QBC115--FRIENDS OF ALAN NORMAN 3. Contributor Information c. Date (mm/dd/yyyy) f. Amount b. Account Code c. Form of Payment d. In-Kind Description a. Amend Add 01 Cash 10/21/2018 \$ 50.00 Remove Add 01 Check 10/25/2018 \$ 50.00 Remove Add 01 Cash 10/21/2018 \$ 50.00 ☐ Remove Add Cash 01 10/30/2018 \$ 50.00 Remove Add 01 Check 10/21/2018 \$ 30.00 Remove \$230.00 \$ 4. Total only this Page 5. Total of ALL CRO-1205 Pages \$ \$230.00 (This line must be on line 5 of Detailed Summary Page CRO-1100)

CRO-1205

NC State Board of Elections

April 2007

Amendment **Contributions from Individuals** ☐ Yes X 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 FRIENDS OF ALAN NORMAN -QBC115--3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) OWNER DENNIS BEAM 1404 STONE GATE DR c. Employer's Name/Specific Field SHELBY, NC 28150 SAFETY TEST e. Dection 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 Check 01 10/22/2018 \$ 1,000.00 П \$ \$ 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) OWNER DREW BEAM PO BOX 1514 c. Employer's Name/Specific Field SHELBY, NC 28151 SAFETY TEST e. Dection Sum to Date \$ 1,000.00 f. Prior g. Account Code | b. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 01 Check 10/22/2018 \$ 1,000.00 \$ \$ 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) PROGRAMMER CHRIS COOK c. Employer's Name/Specific Field **PO BOX 438** 212 W MAIN ST **UPM** LATTIMORE, NC 28089 e. Dection 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 In-Kind 01 WEBSITE BUILDING AND 11/01/2018 600.00 MANAGING FOR 2 1/2

4. Total only this Page

5. Total of ALL CRO-1210 Pages

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

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Contributions from Individuals

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se this form to report individual contributions over \$50 or contri	ributions under \$50 if form CR	Ω 1205 is n	ot used	

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CHARLES DEDMON		_			b. Job Title/	Profession	đ, C	Com	ments
Campleyer's Name/Specific Field A V DEDMON TRUCKING Cample			ip)	·	OWNER	1			
AV DEDMON TRUCKING No. Date Decision Sum to Date Decision Decision Sum to Date			n		c Employer's Name/Specific Field				
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S 100.00	SILLEL	71, NC 20150			I	ION TRUCKING	e. I	Dect	ion Sum to Date
							\$		100.00
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3. Contributor Information								\$	
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Check 10/30/2018 \$ 100.00	f. Prior	g. Account Code		i. In-Kind Des	cription	j. Date (mm/dd/yyyy)	k. A	mount
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(This line must be on line 6 of Detailed Summary Page CRO-1100)	5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$		7,324.90

**Contributions from Individuals** 

	_	

Amendment

No No

Contributions from Individuals

Pg 3 of 4 Pyes

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

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(inclu	de city, state, & zi	p)		OWNER				
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				SERVICES,INC			1000	ion Sum to Date
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1202 TOWNSEND TER			c. Employer's Name/Specific Field					
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	al only this Pa		,			\$		1,924.90
	5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$		7,324.90
				and of Elections		_		A ==1 2007

JAN 7 0 2019

No.

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 is form to Pool 1005.

		individual contribution	us over \$50 of co	ontributions	under \$50 if form CRO	1205	is r	not used
1. Con	muttee Full Nam	e (and Fund if applicat	ble)		<u> </u>			umber
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(This line must be on line 6 of Detailed Summary Page CRO-1100)						\$		7,324.90
CRO-12	10		NC State Boa	rd of Elections				April 2007

April 2007

Amendment Contributions from Other Political Committees Pg _____ or ______ X No ☐ Yes Use this form to report contributions from other candidate, referendum or PAC committees 1. Committee Full Name (and Fund if applicable) 2. ID Number FRIENDS OF ALAN NORMAN -QBC115--□ Add □ 3. Contributor Information Remove b. Type of Committee d. Comments a. Full Name, Mailing Address & Phone Candidate X PAC (include city, state, & zip) Referendum SOUTHERN STATES PBA c. Level Registered (Specify) 2155 HIGHWAY 42 SOUTH Y Federal County: MCDONOUGH, GA 30252 ☐ State Municipality: e. Election Sum to Date (770) 389-5391 1,000.00 i. Date (mm/dd/yyyy) j. Amount f. Account Code | g. Form of Payment h. In-Kind Description 10/22/2018 01 Check \$ 1,000.00 \$ \$ \$1,000.00 \$ 4. Total only this Page 5. Total of ALL CRO-1230 Pages \$ \$1,000.00 (This line must be on line 8 of Detailed Summary Page CRO-1100)

NC State Board of Elections

CRO-1230

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DE	SDU	rse	me	nes.

Amendment

Pg <u>1</u> of <u>3</u> Ves **X** 

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

1. Committee Fu	ull Name (and Fund i	f applicable)						2. ID Num	
FRIENDS OF A	ALAN NORMAN							-QBCT	15
3. Type of Disbu	rsement (Please)	use separate CRO	)-13IO	forms for each	h typ	e of Disbu	rseme	ent.)	<u> </u>
Operating Exp	penses Contr	ributions to Candidat				<u>-</u>		ed Party Exp	enditures
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	ailing Address & Pho	one		b. Coordinated			me	d. Comme	n ts
(include city, sta	_	<i>/</i> 110	I			**********			
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SHELBY, NC	28151		ı	☐ Federal		County:		1	
(704) 484-1711	20101		1	☐ State		Municip	ality:	e. Dection	Sum to Date
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								\$	13,150.54
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j, A	mount	k. Re	quired Rem	arks
01	Check	AB			\$	3,736.73		LOUTS	
01	Check	AB	10	0/24/2018	\$	3,736.73	MAI	L OUTS	
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(include city, sta	-	,ne	!					<del></del>	
COMMUNTIY				1					
503 N LAFAYE			!	c. Level Regist	tered	(Specify)			
SHELBY, NC			İ	Federal		County:		ĺ	!
(704) 484-1067			!	☐ State		Municip	ality:	e. Bection	Sum to Date
(/04) 464 105/					•			\$	2,122.00
f Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	li. A	mount	k. Re	quired Rem	arks
01	Check	A		1/20/2018	\$	459.00		VSPAPER	
	CHECK	<del>                                     </del>		1/20/2016	ļ	405.00	1417.	VOI MI EK	ADS
		<u> </u>			\$				
4. Payee Inform	ation			Add 🔲	Ren	nove			
	ailing Address & Pho	one		b. Coordinated	d Co	mmittee Na	m e	d. Commer	ots
(include city, sta	_								
KRISTEN HAM				<u> </u>				]	
249 BENTON F			1	c. Level Regist				]	
KINGS MOUN	TAIN, NC 28086		+	Federal		County:			
			1	☐ State		<b>Ш</b> Милисира	ality:	e. Dection	Sum to Date
			١					\$	500.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(m m/dd/yyyy)	j. A	mount	k. Re	quired Ren	arks
01	Check	EO	1	1/27/2018	\$	400.00	BOO	KKEEPEI	R
·					\$				
5. Total only thi	s Page				<u> </u>			\$	8,332.46
6. Total of ALL	CRO-1310 Pages								
(This line goes i	in line 13a of Detailed S	Summary Page CRO	-1100 if	Operating Expen	nses)			\$	12,761.89
(This line goes t	in line 13b of Detailed S	lummary Page CRO	-1100 if	Contrib to Cand	lidate	s/Political Co	omm)	. <b>.</b>	12,701102
(This line goes l	in line 13c of Detailed S	ummary Page CRO-	1100 if	Coordinated Par	rty Ex	cpenditures)			<u> </u>
7. Purpose Co	odes (List detailed	expenditure code	in (h.)	above)					
A* - Media	B* - Printin			undraising		D - To	Anot	her Candida	ate
E - Salaries	F* - Equipme	~		litical Party					fice Expenses
I - Postage	J - Penalties			Office Expenses	5		-		Expense Fund
O* Other				-		_		_	_

n	ie	bu	re.	Δ	m	Δ	n	te
v	15	Du	11.2	c	Ш	c	П	เร

Amendment

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

1. Committee Fu	II Name (and Fund i	f applicable)				]	2. ID Nun	
FRIENDS OF ALAN NORMAN							-QBC1	15
3. Type of Disbu	rsement <i>(Please u</i>	se separate CRO	-1310	forms for each	type of Disbui	seme	nt. <u>)</u>	
X Operating Exp		ibutions to Candidat	es/Polit	ical Committees	□ Coo	rdinate	d Party Ex	penditures
4. Payee Inform				Add 🔲	Remove			
	iling Address & Pho	b. Coordinated Committee Name   d. Comments						
(include city, sta	-				i i			
LEGRAND CE							:	
MARION STRE				c. Level Regist	ered (Specify)			
SHELBY, NC				Federal County:				
SHEED I, NO	27150	☐ State	☐ Municip	ality:	e. Dection	Sum to Date		
						1	\$	2,679.43
							į	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Re	quired Ret	narks
01	Check	O	10	1/27/2018	\$ 2,679.43	BUII	DING F	OR DINNER
	·	· · · • · · · · · · · · · · · · · · · ·			\$			
<u> </u>		·						
4. Payee Inform					Remove			
a. Full Name, Ma	illing Address & Pho	one		b. Coordinated	l Committee Na	me	d. Comme	nts
(include city, sta	te, & zip)							
OOAK COTTO	N CANDY/WENDY	Y COBB			1.0 .5			
SHELBY, NC	28150			c. Level Regist				
(704) 300-9896				Federal Federal	County:	1		S
				State	☐ Municip	ality;	e. Dection	Sum to Date
				]			\$	785.00
f. Account Code	g. Form of Payment	h. Purpose Codc	i. Date	(mm/dd/yyyy)	j. Amount	k, Re	quired Re	narks
01	Check	AB	11	0/22/2018	\$ 500.00	HAN	DOUTS	
		<u></u>			\$			
					<b>.</b>			
4. Payee Inform	ation			Add 🔲	Remove			
a. Full Name, Ma	ailing Address & Pho	one		b. Coordinate	Committee Na	me	d. Comm	nts
(include city, sta	te, & zip)			]				
THE SHELBY	STAR						!	
315 E GRAHAI					tered (Specify)		,	
SHELBY, NC 28150				Federa!	County:			
, , , , , , , , , , , , , , , , , , , ,				☐ State ☐ Municipality:			e. Hection	Sum to Date
							\$	1,474.00
		[	l. p	(4.36	l: 4 0 4	l Da	quired Re	marks
f. Account Code	B	<del></del>	_	(mm/dd/yyyy)	j. Amount	-		
01	Check	AB	1	0/23/2018	\$ 850.00	NEV	VSPAPER	AD
					\$			
5. Total only thi	s Page			<u></u>	· · · · · · · · · · · · · · · · · · ·		\$	4,029.43
6. Total of ALL	CRO-1310 Pages							
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)						<b>s</b>	12,761.89	
(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 S	Summary Page CRO	-1100 ij	Coordinated Pa	rty Expenditures)			
7. Purpose C	odes (List detailed	expenditure code	in (h.)	above)				
A* - Media	B* - Printin			Fundraising	D - To	Anot	her Candi	late
				olitical Party				ffice Expenses
I - Postage	J - Penaltie	Office Expense	s Q* - D	onatio	on to Lega	l Expense Fund		
O* Other				-				
							1	

Disbursements
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JAN 10 2019

Pg 3 of 3 Pes No

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

	coordinated party exp							
1. Committee van Name (and vane in approved)						<b>2. ID Num</b> l -QBCL	ber	
FRIENDS OF ALAN NORMAN							-QBCI	
3. Type of Disbu		se separate CRO			type of Disbur	semei	<u>(f.)</u>	
X Operating Exp	enses 🔲 Contri	butions to Candidate				ramate	d Party Exp	enditures
. Payee Informa	ıtion				Remove			
a. Full Name, Ma	iling Address & Pho	ne		b. Coordinated	Committee Na	me j	d. Commet	i ts
include city, stat	te, & zip)							
USPS				T 1 D - 1-4	1 (5 no alfu)			
405 DEKALB S	Τ			c. Level Registe	County:	{		1
SHELBY, NC 2	28150		,	State		ality:	e. Election	Sum to Date
				<u> </u>			-	
							\$	805.75
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amount	k. Rec	juired Rem	arks
01	Check	i .			\$ 100.00			
					\$			
		<u></u>		Add 🔲	Remove			
4. Payee Inform		ne -			Committee Na	me	d. Comme	n ts
	ailing Address & Pho	one.						
(include city, sta		STING INC						
	M KTC BROADCA	STING INC		c. Level Regist	tered (Specify)			
PO BOX 415				☐ Federal	County:			
CHERRYVILLE, NC 28021 (704) 482-1390				State Municipality:			e. Election	Sum to Date
(704) <del>102</del> -1320 I				}			\$	300.00
	· · · · · · · · · · · · · · · · · · ·	h Burrasa Coda	l: Date	(mm/dd/www)	i Amount	k. Re	quired Ren	narks
	g. Form of Payment				\$ 300.00	<del></del>	OIO AD	
01	Check	AO	1	2/07/2018		10712	10 110	
					\$		<del> </del>	
5. Total only thi	is Page						\$	400.00
	CRO-1310 Pages			· · · · · · · · · · · · · · · · · · ·			 	•
(This line on as	in time 13a of Detailed :	Summary Page CRO	-1100 (	f Operating Expe	nses)		: \$	12,761.89
(77) 1- 12- 1 - 1 - 1	In line 12h of Detailed	Summary Page CRO	)-1100 i	f Contrib to Cana	lidales/Poulical C	Comm)		
(This line goes	in line 13c of Detailed !	Summary Page CRO	-1100 i	f Coordinated Pa	erty Expenditures)	) 		
	odes (List detailed							<u></u>
A* - Media	B* - Printii		C* -	Fundraising	<b>D</b> - To	Anot	her Candio	late
F Salaries F* - Equipment G - Political Party H* - Holding						g Public U	ffice Expenses	
I - Postage	J - Penaltic		K* -	Office Expense	es Q* - I	<b>Jonati</b>	on to Lega	l Expense Fund
O* Other				6-14-04				
	re detailed explanati	on in required re	marks	field (K) pard of Elections				December 2009
CRO-1310		NC	State B	Date of Elections				

**In-Kind Contributions** 

.,		Amendme	n t		
Pg	 of		Yes	X	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.

Use CRO-1215 if in-Kind Contributions were of will be t	CIUI	IOCO WILITIN	ruays.				
1. Committee Full Name (and Fund if applicable)	2. ID Number						
FRIENDS OF ALAN NORMAN		-QBC					
3. Contributor Information	Ad	d 🔲 Rer	nove				
a. Full Name, Mailing Address & Phone	tributor	c. Com	ments				
(include city, state, & zip)		Individual					
CHRIS COOK	_	Candidate					
DO BOY 438			Party				
212 W MAIN ST	V MAIN ST			d. Election Sum to		o Date	
LATTIMORE, NC 28089	1—	Other Recei				<u> </u>	
			·	\$		600.00	
e. Description			f. Date (mm/dd	/уууу)	g. Fair M	rket Amount	
WEBSITE BUILDING AND MANAGING FOR 2 1/2 MONTHS		11/01/20			600.00		
	_				\$		
		<u></u>			\$		
5. Colle touter miss traction			move	т с			
a. Full Name, Mailing Address & Phone		Type of Con	tributor	c. Con	ments	<u> </u>	
(include city, state, & zip)	_	Individual Candidate					
OLIVER EMMERT	1—	Party					
PO BOX 231	_	PAC				I	
SHELBY, NC 28151	Į	Referendum	ı	d. Election Sum		to Date	
	Other Rece		ipt Source \$		,,. · · ·	1,724.90	
e. Description	f. Date (mm/do	l/yyyy)	g. Fair M	arket Amount			
PAID FOR HANDOUT FROM ALPHA MAILING SERVICE,INC			10/31/20	018 \$		1,724.90	
					\$	<del></del>	
					\$		
4. Total only this Page			·	\$		2,324.90	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CR	0-1	100)		\$		2,324.90	
		of Elections		•		December 2007	