| 1. Committee Info | rmation | | | | <u> </u> | | W-1 |
|---|---|------------------------|------------------------|--------------------|--------------------|----------------|---|
| a. Full Name | | • | | | ***** | c. ID N | umber |
| Committee to elect | Ronnie Whetstine | | | | | | OCBCV7 |
| b. Mailing Address (inc | lude City, State and Zip Code |) | | | | d. Date | - Filed |
| P.O. Box 968 | | | | | | n:// | 22/02/0 |
| Shelby, NC 28151 | | | | | | 0/10 | 2/2019 |
| | | | IAN | 0.2.2019 | , | e. Phon | e Number |
| | pr. 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - | | | | | | 704 482-7594 |
| 2. Report Year | 3. Period Start Date (m | m/dd/yy) | 4. Period E (mm/dd/yy) | End Date | 5. Treasurer l | | |
| 2018 | 10/21/2018 | | 12/31 | 1/2018 | Thomas Euell | Crawford | |
| 6. Type of Commit | tee (Check One) | 9, Ty | pe of Report | (check on | ly one type of rej | port from one | category) |
| Candidate Camp | | Munic | ipai | State/C | | Referen | |
| PAC | Referendum | | Organizational | | Organizational | | Organizational |
| Independent Expenditure Legal Expense F | Joint Fundraiser | | Thirty-five day | | Quarterly | l l | re-referendum |
| 7. Type of Fund | (if applicable, check one) | \neg | Pre-primary | | First | | inal |
| "Booster Fund" | | $\exists \bar{\Box}$ | Pre-election | | Second | | Supplemental Final |
| Building Fund | | | Pre-runoff | | Third | | \nnual |
| | | | Semi-annual | | Fourth | | special |
| _ | | | Mid Year | | Semi-annual | | |
| Other: | | | Year End | ∫ | Mid Year | 10. Sp | ecial Report Name |
| 0.31 | | | Final | - 1님 . | Year End | | |
| 8. Number of Func | raisers this Report | | Special | | Final Special | | |
| 11. Account Inform | nation | | | 11. Account l | Information | | |
| a. Financial Institution | Full Name | | | a. Financial Inst | itution Full Name | | |
| Home Trust Bank | | | | | | | |
| b. Purpose | c. Account Code | | | b. Purpose | | e. Acc | ount Code |
| Campaige Finance | | IRW | | | | | |
| | d. Period Begin Bala | ince | | | | d. Per | iod Begin Balance |
| | \$ 5090.72 | | | | | s | |
| CERTIFICATION | l . | | | | | | |
| the NC General Stat | mmittee or Fund is in com autes and that no funds are d corre <u>ct</u> and that I have b | comming een trained | led with prohi | bited or other i | non-disclosed fu | nds. 1 further | certify that this report |
| Thomas | s I Crautor | 1 | _ Jh | and Cross | 10 | _0//0 | 2/2011 |
| | Printed Name of Signer | | Sig | gnature of Appoint | ted Treasurer | | Date |
| FOR OFFICE USE | | | | Δ. | | D-0 | Markend |
| Date Received: | 1-2-2019 | | Employee: | 440 | 3 | | ormal Mail |
| Date Postmarke | ed: | _ | Employee: | | | ☐ Ha | gistered Mail and Delivered |
| Date Scanned: | | | Employee: | | | ☐ Si | ectronically Filed gner has not received |
| | | | | | | ma | indatory training |

Amendment

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

CRO-1000 NC State Board of Elections August 2008

No

Detailed SummaryUse 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 Ronnie Whetstine | Year End | (| OCBCV7 |
| Start of Election Cycle: January 1, | 2018 | Total this Reporting Period | Total this Election Cycle |
| 4) Cash on Hand at Start | | S 5090.72 | \$ |
| RECEIPTS | | | |
| 5) Aggregated Contributions from Individuals | (CRO-1205) | S 45.00 | \$ 2609.00 |
| 6) Contributions from Individuals | (CRO-1210) | S | \$ 12705.00 |
| 7) Contributions from Political Party Committees | (CRO-1220) | S | \$ |
| 8) Contributions from Other Political Committees | (CRO-1230) | S 750.00 | \$ 750.00 |
| 9) Loan Proceeds | (CRO-1410) | S | S 1000.00 |
| 10) Refunds/Reimbursements To the Committee | (CRO-1240) | S | S |
| 11) Other Receipt Sources | | | A LONG BUT TO SEE |
| 11a) Interest on Bank Accounts | (CRO-1250) | S | \$ |
| 11b) Contributions from Not-for-Profit Organizati | ions (CRO-1250) | \$ | S |
| 11c) Outside Sources of Income | (CRO-1250) | \$ | S |
| 11d) Legal Expense Fund - Other Sources | (CRO-1270) | S | S |
| 11 e) Exempt Purchase Price Sales | (CRO-1265) | \$ | S |
| 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11 | lc. 11d and 11e) | \$ 795.00 | S 17064.00 |
| EXPENDITURES | | | |
| 13) Disbursements | | | |
| 13a) Operating Expenditures | (CRO-1310) | \$ 438,41 | \$ 11616.69 |
| 13b) Contributions to Candidates/Political Commi | ttees (CRO-1310) | \$ 3800.00 | \$ 3800.00 |
| 13c) Coordinated Party Expenditures | (CRO-1310) | S | S |
| 14) Aggregated Non-Media Expenditures | (CRO-1315) | S | S |
| 15) Loan Repayments | (CRO-1420) | S 1000.00 | \$ 1000.00 |
| 16) Refunds/Reimbursements From the Committee | (CRO-1320) | S | S |
| 17) In-Kind Contributions | (CRO-1510) | S | \$ |
| 18) TOTAL EXPENDITURES (Add Imes 13a, 13b, 13c, 14, 1 | 15. 16 and 17) | S 5238.41 | \$ 16416.69 |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then suit | htract line 18) | \$ 647.31 | \$ 647.31 |
| ADDITIONAL INFORMATION | | | |
| 20) Non-Monetary Gifts Given to Other Committees | (CRO-1330) | S | |
| 21) Outstanding Loans (incl. ones from other campaig | ns) (CRO-1430) | S | |
| 22) Debts and Obligations owed By the Committee | (CRO-1610) | S | |
| 23) Debts and Obligations owed To the Committee | (CRO-1620) | \$ | |
| 24) Account Transfers Within the Committee | (CRO-1720) | S | |
| 25) Administrative Support | (CRO-1710) | S | S |
| 26) Forgiven Loans | (CRO-1440) | S | S |
| 27) 48-Hour Notice Reports Sum | (CRO-2220) | S | S |
| 28) Contributions to be Refunded | (CRO-1215) | S | S |
| 20) Contributions to be Keinnaea | (CRO-1213) | ن | |

Aggregated Contributions from Individuals JAN 022019

Amendment 1

Yes 🔀 of <u>I</u>

No

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

| Comm | omittee Full N | ame (and Fun | d if applicable) | | | 2. ID N | umber |
|---|-----------------------|--------------------|-----------------------------|---------------------------------------|------------------------|-------------------|---------------|
| | · | Ronnie Whetstii | ne | | | • | OCBCV7 |
| 3. Con | tributor Infor | | | | | | |
| a. Amen | | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy |) | f. Amount |
| | Add Remove | JRW | Cash | | 10/24/20 | | \$ 25.00 |
| | Add | | | | | | |
| | Remove | JRW | Cash | | 10/29/20 | 18 | \$ 20.00 |
| | Add | | | | | | |
| <u> </u> | Remove | | | | | | \$ |
| <u> </u> | Add | | | | | | \$ |
| <u> </u> | Remove | | | | | | J |
| | Add | 4 | | | ! | | \$ |
| | Remove Add | | | | <u> </u> | | Ψ |
| <u> </u> | Remove | _ | | | | | \$ |
| | Add | | | | | | <u> </u> |
| | Remove | | | | | | \$ |
| | Add | <u></u> | | | | | |
| H | Remove | | | | | | \$ |
| 亓 | Add | - | | | - | | |
| Ħ | Remove | | | | | - | \$ |
| | Add | | | · · · · · · · · · · · · · · · · · · · | | | |
| | Remove | | | | | | \$ |
| | Add | | | | | | |
| | Remove | <u></u> | | | | | \$ |
| | Add | | | | | | |
| <u> </u> | Remove | | | | | | \$ |
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| <u> </u> | Remove | | | | | | \$ |
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| <u> </u> | Remove | | | | | | D |
| | Add | _ | | | | 1 | \$ |
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| <u> </u> | Remove | - | | | | | \$ |
| <u> </u> | Add | <u></u> | | ····· | - | | · |
| | Remove | 1 | | | | 1 | \$ |
| | Add | | | | | | |
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| H | Add | | | | | | |
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| | Remove | | | | | | <u> </u> |
| ┽ ┈┤ | Add | | | | | | |
| <u> </u> | Remove only this I | Раде | <u> </u> | <u> </u> | | | |
| | | | | | - | S 45 | 5.00 |
| | | RO-1205 Pa | iges mary Page CRO-1100) | | ! | S 45 | i. 0 0 |
| | | - of Deminer Off | many ruge Cho-1100) | | i | | |

Contributions from Other Political Committees JAN UZ 2019

| Amend | me |
|-------|----|
| | |

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

| 1. Committee Full | Name (and Fund if applicable) | | | | | | | 2, ID I | Number |
|-------------------------|---------------------------------------|------------|---------------|---------------------------------------|---------|-------------|---|-----------|-----------------|
| | t Ronnie Whetstine | | | | | | | | OCBCV7 |
| 3. Contributor Int | ormation | | Add | | Rem | ove | | | |
| a. Full Name, Mailing | Address & Phone | | b. Type of | Committee | | | | d. Com | ments |
| (include city, state, & | & zip) | | □ | Candidate | | \boxtimes | PAC | | |
| NC Realator PAC | | | L. | Referendun | | | | | |
| 4511 Weybridge L | | | e. Level R | egistered (Sp | ecity) | <u></u> | | | |
| Greensboro, NC 2 | 7407 | | | Federal | | 片 | County: | a Flast | ion Sum to Date |
| | | | | State | | <u>u</u> | Municipality: | e, r.iect | ion sum to Date |
| | | - | | | | | | \$ | 750.00 |
| f. Account Code | g. Form of Payment | h. In-Kind | Description | <u> </u> | | i. Dat | e (mm/dd/yyyy) |) | j. Amount |
| JRW | Check | | | | | | 10/29/2018 | | \$ 750.00 |
| | | | | | | | | | S |
| | | | | | _ | | | | s |
| 3. Contributor In | formation | | Add | | Rem | ove | | | |
| a. Full Name, Mailing | Address & Phone | | b. Type of | Committee | | | | d. Com | ments |
| (include city, state. | & zip) | | | Candidate | | | PAC | | |
| | | | | Referendun | | | | | |
| | | | c. Level R | egistered (Sp | occify) | | | | |
| | | | | Federal | | | County: | | * S D4- |
| | | | | State | | <u></u> | Municipality: | e. Elect | ion Sum to Date |
| | | | | | | | . , | \$ | |
| f. Account Code | g. Form of Payment | h, In-Kind | l Description | 11 | | i. Dat | e (mm/dd/yyyy) |) | j. Amount |
| | | | | | | | | | S |
| | | | | | | | | | S |
| | | | | | | | | | s |
| 3. Contributor In | formation | | Add | | Rem | ove | | | |
| a. Full Name, Mailing | Address & Phone | | b. Type of | f Committee | | | | d. Com | ments |
| (include city, state, | & zip) | | | Candidate | | | PAC | | |
| | | | | Referendun | | | | | |
| | | | c. Level R | egistered (Sp | necify) | | 0 . | | |
| | | | | Federal State | | | County: Municipality: | a Flact | ion Sum to Date |
| | | | | State | | <u> </u> | wanesparky. | \$ | ion dam to Date |
| f. Account Code | g. Form of Payment | h. In-Kinc | l Descriptio | <u></u> | 1 | i. Dat | e (mm/dd/yyyy) |) | j. Amount |
| | 0 | | 1 | | | | | | S |
| <u> </u> | | | | | | | · · · · - · · · · · · · · · · · · · · · | - | |
| | | | | · · · · · · · · · · · · · · · · · · · | | | | | \$ |
| ····· | | | | | | | | ı | S |
| 4. Total only this | Page | | | | | | | \$ | 750.00 |
| 5. Total of ALL C | RO-1230 Pages | | | | | | | \$ | 750.00 |
| (This line must be or | n line 8 of Detailed Summary Page CRO | -1100) | | | | | | _ | |

Amendment Yes

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

| | all Name (and Func | | | | | | _ | 2. ID Number |
|--|------------------------------|---------------------------|-------|------------------------|---------------|-----------------|----------|--|
| Committee to elect Ronnie Whetstine OCBCV7 | | | | | | | | |
| 3. Type of Disbu | irsement <i>(Plea</i> | se use separate C | RO- | 1310 forms for e | ach ty | pe of Disbursem | ent.) | |
| Operating Ex | | | ndida | tes/Political Committe | ees | Coc | ordinate | d Party Expenditures |
| 4. Payee Inform | | | A | id | | Remove | | |
| a. Fuli Name, Mailin | ng Address & Phone | | b. | Coordinated Commi | ttee Na | me | d. Co | mments |
| (include city, state, o | - | | | | | | | |
| WOHS 1390 AN | | | | | | <u>.</u> | | |
| KTC Broadcasti | | | c. | Level Registered (Spe | ecify) | | | |
| P.O. Box 415 | | | | Pederal | | County: | | |
| Cherryville, NC | 28201 | | | State | | Municipality: | e. Ele | ection Sum to Date |
| 704 482-1310 | | | | . | | • | s : | 75.00 |
| C. A C. d. | - Francis Domest | h. Purpose Code | 1 | i. Date (nim/dd/yyyy | A | j. Amount | l: Re | quired Remarks |
| f. Account Code | g. Form of Payment | n. i ai pose code | | 1. Date (unit/du/yyy) | '' | \$75.00 | | io Ad |
| JRW | Check | A | | 11/12/2018 | | \$75.00 | Radi | io Au |
| | | | | | | \$ | | |
| 4. Payee Inform | eation | | A | dd | | Remove | <u> </u> | |
| | ng Address & Phone | | | Coordinated Commi | ttee Na | | d. Co | omments |
| | ** | | | | | : | 1 | |
| (include city, state, or What's Up Shop | | | 1 | | | | | |
| P.O. Box 415 | per, me. | | | Level Registered (Sp | ecify) | | 1 | |
| | 28201 | | | Federal | | County: | 1 | |
| Cherryville NC | 202U I | | - | State | | Municipality: | p 171. | ection Sum to Date |
| 704 435-2846 | | | - | 1 state | <u> </u> | with the party. | E. E.R | KING DUM W PAIK |
| | | | | | | | S | 150.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | | i. Date (nim/dd/yyyy | r) | j. Amount | k. Re | quired Remarks |
| JRW | Check | Α | | 11/12/2018 | | \$150.00 | Į. | nt' Up |
| | | | | | | | Sho | pper Ad |
| | | | | | | \$ | | |
| 4. Payee Inform | ation | | A | dd | | Remove | | |
| a. Full Name, Maili | ng Address & Phone | | b. | Coordinated Commi | ttee Na | me | d. Co | กเกเยมts |
| (include city, state, | - | | П | | | | | |
| Ken & Marys R | | | | | | | | |
| 1628 S DeKalb | | | c. | Level Registered (Sp | ecify) | | | |
| Shelby, NC 281 | | | | | \boxtimes | County: | 1 | |
| 704 487-1777 | | | | State | | Municipality: | e, Eh | ection Sum to Date |
| | | | | | - | | S | 28,41 |
| | | h Dung 0-2 | Т, | | , | 7 4 | ↓ | <u> </u> |
| f. Account Code | g. Form of Payment | h. Purpose Code | _ | i. Date (mm/dd/yyyy | y) | j. Amount | | equired Remarks |
| JRW | Debit Card | 0 | | 10/27/2018 | | \$28.41 | | ch for paign worker |
| | | | | | | \$ | | |
| | | | | | | , w | <u></u> | |
| 5. Total only th | | | | | | | S | 253.41 |
| | CRO-1310 Pages | | | | | | : | |
| | line 13a of Detailed Sun | | | | | | S | 438.41 |
| | line 13b of Detailed Sun | | | | | | ! * | |
| | line 13c of Detailed Sun | ***** | | | penditui | res) | : | |
| | es (List detailed ex | | | | | | | P. 7 . |
| A* - Media | B* - Printing | C* - Fund | | _ | | D - To Anoth | | |
| E - Salaries 1 - Postage | F* - Equipment J - Penalties | G - Politic K* - Offic | | | | | | e Office Expenses egal Expense Fund |
| O* - Other | g - renames | K" - OIII | ec E | лренаев | | ✓ - Dollatto | " IO L | egar Expense rund |
| | e detailed explanati | ion in required r | ema | rks field (k) | | | | |

| Disbursements | Dis | bи | rsem | en | ts |
|---------------|-----|----|------|----|----|
|---------------|-----|----|------|----|----|

Amendment Yes

No

Disbursements $\frac{140022019}{Pg} = \frac{Amendme}{2}$ Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

| | ull Name (and Fun | | <u> </u> | | 2. ID Number | | | |
|---|---------------------------------|----------------------|-------------------------------|--|---|--|--|--|
| Committee to elect Ronnie Whetstine | | | | | | | | |
| 3. Type of Disb | ursement <i>(Plea</i> | se use separate C | RO-1310 forms for each i | type of Disburse | ment.) | | | |
| Operating E | xpenses | Contributions to Car | ndidates/Political Committees | | Coordinated Party Expenditures | | | |
| 4. Payec Inform | nation | | Add | Remove | 110111111111111111111111111111111111111 | | | |
| a. Full Name, Maili | ng Address & Phone | | b. Coordinated Committee N | ame | d. Comments | | | |
| (include city, state, | & zip) | | | | ~ · · · · · · · · · · · · · · · · · · · | | | |
| Cleveland Coun | ity | | L | | | | | |
| Boys and Girls | Club | | c. Level Registered (Specify) | | | | | |
| 412 W Sumter S | ST. | | Federal | County: | _ | | | |
| Shelby, NC 281 | 50 | | State | Municipality: | e. Election Sum to Date | | | |
| • | | | | | 0 160 00 | | | |
| | | | | | S 160.00 | | | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | | |
| (1535) | Ob a de | | | A110.00 | Event Sponsor | | | |
| JRW | Check | 0 | 11/12/2018 | \$110.00 | · | | | |
| | | | | | | | | |
| | | | | \$ | | | | |
| 4. Payee Inform | ation | | Add | Remove | | | | |
| a. Full Name, Maili | ng Address & Phone | | b. Coordinated Committee N | ame | d. Comments | | | |
| (include city, state, | •• | | | | | | | |
| WOHS 1390 At | | | | | | | | |
| KTC Broadcast | | | c. Level Registered (Specify) | | | | | |
| Cherryville, NC | _ | | Federal 🖂 | County: | | | | |
| 704 482-1310 | 2020. | | State | Municipality: | e. Election Sum to Date | | | |
| 704 402-1510 | | | | with the same of t | | | | |
| | | | | | \$ 150.00 | | | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | | |
| IDW/ | Chaole | | | \$75.00 | Radio Ad | | | |
| JRW | Check | Α | 12/14/2018 | \$75.00 | | | | |
| | | | | \$ | | | | |
| | | | | | | | | |
| 4. Payee Inform | | | Add 🗍 | Remove | | | | |
| a. Full Name, Maili | ng Address & Phone | | b. Coordinated Committee N | ame | d. Comments | | | |
| (include city, state, | & zip) | | | | | | | |
| | | | | | | | | |
| | | | c. Level Registered (Specify) | | | | | |
| | | | Federal | County: | | | | |
| | | | State | Municipality: | e. Election Sum to Date | | | |
| | | | | | S | | | |
| | | | | | 3 | | | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | | |
| | | | | \$ | | | | |
| | | | | Ψ | | | | |
| | | | | \$ | | | | |
| | , | i | | | | | | |
| 5. Total only thi | | | | | \$ 185.00 | | | |
| | CRO-1310 Pages | | | | | | | |
| _ | line 13a of Detailed Sun | | | | S 438.41 | | | |
| (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) | | | | | | | | |
| | | | | ires) | | | | |
| 7. Purpose Codes (List detailed expenditure code in (h.) above) | | | | | | | | |
| | | | 1 | | | | | |
| A* - Media | B* - Printing | C* - Func | | | her Candidate | | | |
| E - Salaries | B* - Printing F* - Equipment | G - Politic | al Party | H* - Holdin | g Public Office Expenses | | | |
| | B* - Printing | G - Politic | | H* - Holdin | | | | |

Amendment Yes

 \boxtimes 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 B. 1997)

| 1. Committee F | ull Name (and Fun | d if applicable) | | | | | | 2. 1D Number | |
|-----------------------|--------------------------|----------------------|-------------------------------|--------------------------|-------------|---------------|---------------------------------------|----------------------|---|
| ··· | | | | | | | | | |
| 3. Type of Disb | | | _ | <u>-1310 forms for e</u> | _ | | · · · · · · · · · · · · · · · · · · · | | |
| Operating E | - | Contributions to Car | - | ates/Political Committe | ces | Co | ordinate | d Party Expenditures | |
| 4. Payee Inform | | | _ | .dd | _[_] | Remove | | | |
| | ng Address & Phone | | b, | Coordinated Commi | ittee Na | ıme | d. Co | omments | |
| (include city, state, | & zip) | | _ | | | | | | |
| NC GOP | | | L | | | | | | |
| 1506Hillsborou | _ | | c. | Level Registered (Sp | | | | | |
| Raleigh, NC 27 | 605 | | <u>L</u> | Federal | \boxtimes | County: | | | |
| 919 828-6423 | | | L | State | <u> </u> | Municipality: | e. Ele | ection Sum to Date | |
| | | | | | | | S 3 | 3800.00 | |
| | , | | <u></u> | | | | ٠, د | 7000.00 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | | i. Date (mm/dd/yyyy | y) | j. Amount | k. Re | quired Remarks | |
| JRW | Check | G | | 10/24 /2018 | | \$3300.00 | Dona | ation | |
| 31(1) | CHOCK | 0 | | 10/24/2010 | | \$5500.00 | | | |
| | | | | | | \$ | | | |
| | | | | | | <u> </u> | | | |
| 4. Payee Inform | ation | | _ | dd | | Remove | | | |
| a. Full Name, Maili | ng Address & Phone | | b. | Coordinated Commi | ttee Na | ime | d, Co | mnients | |
| (include city, state, | | | | | | | | | |
| Cleveland Coun | ty GOP | | | | | | | | |
| P.O. Box 1236 | | | c. Level Registered (Specify) | | |] | | | |
| Shelby, NC 281 | 51 | | | Federal | \boxtimes | County: | | | |
| | | | | State | | Municipality: | e. Ele | ection Sum to Date | |
| | | | | | | | | -00.00 | |
| | | | | | | | S 5 | 500.00 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | | i. Date (mm/dd/yyyy | () | j. Amount | k. Re | quired Remarks | |
| JRW | Check | G | | 10/12/2018 | | \$500.00 | | | |
| | | | \dashv | · · · · | | | <u> </u> | | |
| | | | | | | \$ | | | |
| 4. Payce Inform | ation | | A | | <u></u> | Damana | | | |
| | | <u>.</u> <u>L.</u> | _ | Coordinated Commit | too No | Remove | 1 0 | mments | |
| | ng Address & Phone | | 0. | Coordinated Collins | nee na | ilite¢ | u. Co | inments | |
| (include city, state, | & zip) | | 1 | | | | İ | | |
| | | į | a Laval Panistanad (Spenify) | | | ļ | | | |
| | | | c. Level Registered (Specify) | | | 1 | | | |
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| | | | <u> </u> | State | <u> </u> | Municipality: | e. Elec | ction Sum to Date | |
| | | | | | | | S | | |
| f. Account Code | g. Form of Payment | h. Purpose Code | | i. Date (mm/dd/yyyy | Δ | j. Amount | l Da | quired Remarks | |
| THE COURT COURT | g. I want of a dyment | | \dashv | n Date (min da) 3333 | | J. Amount | ж. ше | tunea remarks | |
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| 5. Total only thi | s Page | | | | | | S | 3800.00 | |
| | CRO-1310 Pages | | | | | | | | |
| (This line goes in . | line 13a of Detailed Sum | mary Page CRO-1100 | 0 if C | Operating Expenses) | | | c | 2000.00 | |
| | line 13b of Detailed Sum | | | | | | \$ | 3800.00 | |
| (This line goes in | line 13c of Detailed Sum | mary Page CRO-1100 |) if C | Coordinated Party Exp | enditur | res) | | | |
| | s (List detailed exp | | | | | | | | - |
| A* - Media | B* - Printing | C* - Fund | | | | D - To Anothe | | | |
| E - Salaries | F* - Equipment | G - Politica | | • | | | | Office Expenses | |
| 1 - Postage | J - Penalties | K* - Offic | e Ex | xpenses | | Q* - Donation | ı to Leş | gal Expense Fund | |
| O* - Other | detailed explanati | on in paguinad | | eko fiold (IA | | | | | |
| Codes require | uetaneu expianati | on in requirea re | ına | eks hela (K) | | | | | i |

Loan Repayments

JAN 02 2019

Amendment

| Loan Kepayments | | | Pg 1 | of 1 Yes No | | |
|------------------------------------|---------------------------------------|--------------------|----------------------|-------------------------|--|--|
| Use this form to report pays | ments on an existing loan | | * fr = 4 | 01 1 1 2 2 2 2 | | |
| 1. Committee Full Name (| (and Fund if applicable) | | | 2. ID Number | | |
| Committee to elect Ronnie | Whetstine | | | OCBCV7 | | |
| 3. Lender Information | | Add | Remove | | | |
| a. Full Name, Mailing Address & | & Phone | <u> </u> | | b. Comments | | |
| (include city, state, & zip) | | | _ | D) Comments | | |
| James Ronald Whetstine | | | | | | |
| P.O. Box 968 | | | | c. Original Loan Date | | |
| Shelby, NC 28151 | | | | 11/29/2017 | | |
| | | | | d. Original Loan Amount | | |
| | 1 | | | \$ 1000 | | |
| c. Remaining Loan Balance | f. Account Code | g. Form of Payment | h. Date (mm/dd/yyyy) | i. Repayment Amount | | |
| \$ 1000 | JRW | Check | 10/26/2018 | \$ 1000 | | |
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| 3. Lender Information | l. | Add | Remove | | | |
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| | | | | d. Original Loan Amount | | |
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| 3. Lender Information | | Add | Remove | | | |
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| 4. Total only this Page | · · · · · · · · · · · · · · · · · · · | | | \$ 1000 00 | | |
| 5. Total of ALL CRO- | 1420 Pages | | | \$1000 ²² | | |
| (This line must be on line 15 of I | Detailed Summary Page CRO- | ·1100) | | 3 7 0 0 0 | | |