

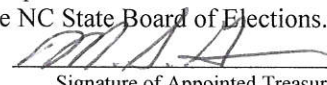

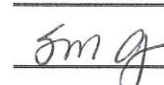
Disclosure Report Cover

Amendment

Yes

No

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

1. Committee Information			
a. Full Name Committee to Elect Dennis McClure Sheriff		c. ID Number pending	
b. Mailing Address (include City, State and Zip Code) PO Box 561 Concord NC 28026		d. Date Filed 01/18/18	
		e. Phone Number 704 431 9338	
2. Report Year 2018	3. Period Start Date (mm/dd/yy) 01/08/2018	4. Period End Date (mm/dd/yy) 01/18/2018	5. Treasurer Full Name Michael S Green
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
7. Type of Fund (if applicable, check one)		State/County	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		<input checked="" type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
8. Number of Fundraisers this Report 0		10. Special Report Name	
11. Account Information		11. Account Information	
a. Financial Institution Full Name Uwharrie Bank		a. Financial Institution Full Name	
b. Purpose Campaign Funds	c. Account Code 1	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 0		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.			
Michael S. Green			01/18/2018
Printed Name of Signer		Signature of Appointed Treasurer	Date
FOR OFFICE USE ONLY			
Date Received:	CABARRUS COUNTY BOARD OF ELECTIONS	Employee:	
Date Postmarked:	JAN 22 2018	Employee:	_____
Date Scanned:	1/23/18	Employee:	
Date Data Entered:	RECEIVED	Employee:	_____
		Delivery Method	
		<input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training	
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.			
You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.			

Detailed Summary

Amendment
 Yes No

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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
Committee to Elect Dennis McClure Sheriff	ORGANIZTIONAL	Pending	
Start of Election Cycle: January 1, 2015		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 0	\$ 0
RECEIPTS			
5) Aggregated Contributions from Individuals <i>(CRO-1205)</i>		\$	\$
6) Contributions from Individuals <i>(CRO-1210)</i>		\$ 102.44	\$ 102.44
7) Contributions from Political Party Committees <i>(CRO-1220)</i>		\$	\$
8) Contributions from Other Political Committees <i>(CRO-1230)</i>		\$	\$
9) Loan Proceeds <i>(CRO-1410)</i>		\$	\$
10) Refunds/Reimbursements To the Committee <i>(CRO-1240)</i>		\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts <i>(CRO-1250)</i>		\$	\$
11b) Contributions from Not-for-Profit Organizations <i>(CRO-1250)</i>		\$	\$
11c) Outside Sources of Income <i>(CRO-1250)</i>		\$	\$
11d) Legal Expense Fund – Other Sources <i>(CRO-1270)</i>		\$	\$
11 e) Exempt Purchase Price Sales <i>(CRO-1265)</i>		\$	\$
12) TOTAL RECEIPTS <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)</i>		\$ 102.44	\$ 102.44
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures <i>(CRO-1310)</i>		\$	\$
13b) Contributions to Candidates/Political Committees <i>(CRO-1310)</i>		\$	\$
13c) Coordinated Party Expenditures <i>(CRO-1310)</i>		\$	\$
14) Aggregated Non-Media Expenditures <i>(CRO-1315)</i>		\$	\$
15) Loan Repayments <i>(CRO-1420)</i>		\$	\$
16) Refunds/Reimbursements From the Committee <i>(CRO-1320)</i>		\$	\$
17) In-Kind Contributions <i>(CRO-1510)</i>		\$ 102.44	\$ 102.44
18) TOTAL EXPENDITURES <i>(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</i>		\$ 102.44	\$ 102.44
19) Cash on Hand at End <i>(Add lines 4 and 12 together, then subtract line 18)</i>		\$ 0	\$ 0
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees <i>(CRO-1330)</i>		\$	
21) Outstanding Loans (incl. ones from other campaigns) <i>(CRO-1430)</i>		\$	
22) Debts and Obligations owed By the Committee <i>(CRO-1610)</i>		\$	
23) Debts and Obligations owed To the Committee <i>(CRO-1620)</i>		\$	
24) Account Transfers Within the Committee <i>(CRO-1720)</i>		\$	
25) Administrative Support <i>(CRO-1710)</i>		\$	\$
26) Forgiven Loans <i>(CRO-1440)</i>		\$	\$
27) 48-Hour Notice Reports Sum <i>(CRO-2220)</i>		\$	\$
28) Contributions to be Refunded <i>(CRO-1215)</i>		\$	\$

Contributions from Individuals

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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	
Committee to Elect Dennis McClure Sheriff					pending	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Dennis McClure 511 Kansas St Kannapolis, NC 28083			b. Job Title/Profession Phar. Distibution c. Employer's Name/Specific Field Cannon Pharm.		d. Comments e. Election Sum to Date \$ 102.44	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Debit Card	Print carts	01/11/2018	\$	53.44
<input type="checkbox"/>	1	Debit card	Postage	01/17/2018	\$	49.00
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
c. Employer's Name/Specific Field			e. Election Sum to Date \$			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
c. Employer's Name/Specific Field			e. Election Sum to Date \$			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$	102.44
5. Total of ALL CRO-1210 Pages					\$	102.44
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

In-Kind Contributions

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
 Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Committee to Elect Dennis McClure Sheriff		pending	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
Dennis McClure 1511 Kansas Kannapolis, NC 28083		<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
			\$ 102.44
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Printer Cart. and Post cards		01/11/2018	\$ 53.44
Postage Stamps		01/17/2018	\$ 49.00
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
			\$
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
			\$
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
4. Total only this Page		\$ 102.44	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 102.44	