#### 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 CABARRUS COUNTY a. Full Name c. ID Number BOARD OF ELECTIONS Committee to Elect Van Shaw b. Mailing Address (include City, State and Zip Code) APR 3 0 2018 d. Date Filed 455 CALDWELL DR SE 04/29/2018 CONCORD, NC 28027 RECEIVED e. Phone Number 2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasurer Full Name BARBARA STRANG 2018 01/01/2018 04/21/2018 9. Type of Report (check only one type of report from one category) 6. Type of Committee (Check One) X Candidate Campaign Municipal State/County Party Referendum Joint Fundraiser ☐ PAC Organizational Organizational Organizational ☐ Referendum Legal Expense Fund Thirty-five day Quarterly Pre-referendum Final (if applicable, check one) 7. Type of Fund Pre-primary First "Booster Fund" Pre-election Second Supplemental Final Annual Building Fund Pre-runoff Third Presidential Election Year Candidates Fund Semi-annual П Fourth ☐ Special NC Public Campaign Financing Fund Mid Year Semi-annual Year End Mid Year 10. Special Report Name Other: Final Year End П 8. Number of Fundraisers this Report П Special Final ☐ Special 3. Account Information 3. Account Information a. Financial Institution Full Name a. Financial Institution Full Name F & M BANK b. Purpose c. Account Code b. Purpose c. Account Code **CAMPAIGN** d. Period Begin Balance 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 04/29/2018 Printed Name of Signer Signature of Appointed Treasurer Date FOR OFFICE USE ONLY Delivery Method Date Received: Employee: Normal Mail Registered Mail Date Postmarked: Employee: ☐ Hand Delivered Electronically Filed Date Scanned: Employee: ☐ Signer has not received Date Data Entered: Employee: 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

Committee Full Name (and Fund if applicable)	2. Type of Re					
Committee to Elect Van Shaw	2018 First Qua					
Start of Election Cycle: January 1,		Total this Reporting Period		Total this Election Cycle		
4) Cash on Hand at Start		\$ 0.0	0 \$	0.00		
RECEIPTS						
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 705.0	0 \$	705.00		
6) Contributions from Individuals	(CRO-1210)	\$ 13,841.0	5 \$	13,841.05		
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.0	0 \$	0.00		
8) Contributions from Other Political Committees	(CRO-1230)	\$ 5,200.0	0 \$	5,200.00		
9) Loan Proceeds	(CRO-1410)	\$ 0.0	0 \$	0.00		
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.0	0 \$	0.00		
11) Other Receipt Sources						
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.0	0 \$	0.00		
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ 0.0	0 \$	0.00		
11c) Outside Sources of Income	(CRO-1250)	\$ 0.0	0 \$	0.00		
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0.0	0 \$	0.00		
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0.0	0 \$	0.00		
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c	,11d and 11e)	\$ 19,746.0	5 \$	19,746.05		
EXPENDITURES						
13) Disbursements						
13a) Operating Expenditures	(CRO-1310)	\$ 16,346.6	5 \$	16,346.65		
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0.0	0 \$	0.00		
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.0	0 5	0.00		
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 50.0	0 \$	50.00		
15) Loan Repayments	(CRO-1420)	\$ 0.0	0 \$	0.00		
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0.0	0 \$	0.00		
17) In-Kind Contributions	(CRO-1510)	\$ 1,141.0	5 \$	1,141.05		
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15	5, 16 and 17)	\$ 17,537.7	0 \$	17,537.70		
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18)	\$ 2,208.3	5 \$	2,208.35		
ADDITIONAL INFORMATION			_			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.0	0			
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0.0	0			
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$ 0.0	0			
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$ 0.0	0			
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0.0	0			
25) Administrative Support	(CRO-1710)	\$ 0.0	0 \$	0.00		
26) Forgiven Loans	(CRO-1440)	\$ 0.0	0 \$	0.00		
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0.0	+-			
28) Contributions to be Refunded  NC State Boar	(CRO-1215)	\$ 0.0	0 \$	0.00 August 2008		

Aggregated Contributions from Individual	Aggregated	Contributions	from	Individual
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Page 1 of 1 Yes

Amendment
Yes No

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

1.	Committe	e Full Name (and l		2. ID N	lumber			
Co	ommittee to	Elect Van Shaw						
		or Information						
а.	Amend Add	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd	уууу)	f. Amount	
	Add Remove	1	Cash		04/09/201	8	\$	50.00
	Add	1	Check		03/01/201	8	\$	50.00
	Remove Add Remove	1	Cash		04/06/201	8	\$	20.00
	Add	1	Cash		02/09/201	8	S	50.00
	Remove Add Remove	1	Cash		02/02/201	8	\$	50.00
	Add	1	Cash		02/08/201	8	\$	50.00
	Add	1	Cash		02/13/201	8	\$	50.00
	Remove Add	1	Cash		02/16/201	 8	\$	50.00
		1	Cash		03/01/201		s	20.00
		1	Cash		02/23/201		s	50.00
	Add	1	Cash		03/30/201	8	\$	50.00
-	Remove Add	1	Cash		04/20/201	 8	\$	50.00
	Add	1	Cash		03/01/201	 8	\$	20.00
		1	Check		03/01/201	<del></del> 8	\$	25.00
		1	Cash		03/17/201	8	\$	50.00
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CRO-1205 NC State Board of Elections April 2007

#### Con

				Amendm	ent		
tributions from Individuals		Pg _	_1 of	15	☐ Yes	X No	
			A	CD C 4222			

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 Van Shaw ☐ Add ☐ Remove 3. Contributor Information a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) LAW ENFORCEMENT WILLIAM ARTHUR c. Employer's Name/Specific Field 3845 BENT CREEK DRIVE CONCORD, NC 28027 **RETIRED** e. Election Sum to Date 100.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check 1 03/27/2018 \$ 100.00 \$ П \$ 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) LAW ENFORCEMENT JAMES BAILEY c. Employer's Name/Specific Field 6000 EMANUEL ROAD ROCKWELL, NC 23138 CABARRUS COUNTY GOVT 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 Check 1 02/07/2018 \$ 100.00 \$ П \$ □ Add □ Remove 3. Contributor Information a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) SELF EMPLOYED KEVIN BARBEE c. Employer's Name/Specific Field 560 HERMITAGE DR SE CONCORD, NC 28025 SELF EMPLOYED 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 Check 1 03/16/2018 100.00 \$ \$ 300.00 4. Total only this Page \$ 5. Total of ALL CRO-1210 Pages S 13,841.05 (This line must be on line 6 of Detailed Summary Page CRO-1100)

				Amendm	ent
Pg	2	of	15	☐ Yes	X No

1. Comr	nittee Full Name	(and Fund if applicabl	e)			2. I	D Number
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Pg	7	of	15	☐ Yes	X No

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3. Conti	ributor Informatio	on		Add 🔲 Re	emove			
a. Full N	ame, Mailing Add	lress & Phone		b. Job Title/P	rofession	d. (	Comments	
(inclu	de city, state, & zi	ip)		PRESIDENT				
DAVID	GRAHAM							
	YNFORD CT			c. Employer's	Name/Specific Field	1		
	SBURG, NC 2807:	5		USS AGENC	YLLC			
	2007.			COSTIGENC	1 EEC	e. E	lection Sum	to Date
						\$		250.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
		Check						
	1	C.I.C.I.			02/20/2018		\$	250.00
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4. Tota	4. Total only this Page							500.00
	5. Total of ALL CRO-1210 Pages							
	ine must be on line	S		13,841.05				

				Amendm	ent
Pg	8	of	15	☐ Yes	X No

		dividual continudati		omanou	nons un	idei \$50 ii foliii elee i	1200	13 Hot uscu	
1. Com	mittee Full Name	(and Fund if applicab	le)				2.1	D Number	
Commit	ttee to Elect Van Sh	aw							
3. Cont	ributor Informati	on		Add	Re	move			
	Name, Mailing Add			b. Job	Title/Pr	ofession	d. (	Comments	
(inclu	ıde city, state, & z	ip)		INVES	STIGAT	OR			
	AM HALLMAN			-		NT 40' 10' TO 11	-		
	CELYN ROAD					Name/Specific Field			
ASHVI	LLE, NC 28804			NC M	EDICAI	L BOARD	. I	Election Sum	to Date
								rection Jum	
							\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	1	j. Date (mm/dd/yyyy)	)	k. Amount	
	1	Check				04/17/2018		s	100.00
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	ributor Informati			Add	Re	move			
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(inclu	ide city, state, & z	ip)		CONS	TRUCT	ION			
	ER HANNAH			. F	1	N/C: C:- F:-1.1	-		
NC	NC			c. Employer's Name/Specific Field					
				LOMAX TILE & MARBLE			e. I	Election Sum	to Date
							\$		500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	1	j. Date (mm/dd/yyyy)	)	k. Amount	
	1	Check				02/18/2018		S	500.00
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	ributor Informati			Add					
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	ıde city, state, & z	ip)		CONS	TRUCT	ION			
	HARTSELL			o Emp	lover's	Name/Specific Field	1		
	HARTWOOD ST ND, NC 28027				EMPLO				
MIDLA	IND, NC 20027			SELF	EMPLO	TED	e. I	Election Sum	to Date
							\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	eription	1	j. Date (mm/dd/yyyy)	)	k. Amount	
	1	Check				03/28/2018		s	100.00
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				Amendm	ent
Pg	9	of	15	☐ Yes	X No

F. Prior   S. Account Code   h. Form of Payment   i. In-Kind Description   j. Date (mm/dd/yyyy)   k. Amount	•••••	nittee Full Name tee to Elect Van Sh	<b>(and Fund if applicab</b> law	le)				2. I	D Number
A. Full Name, Mailing Address & Phone (include city, state, & zip)   DCD, INC     DCD, INC	3. Conti	ributor Informatio	on		Add	Ren	move		
WILLIAM HARVEY								d. C	Comments
A STANIAN   A ST	(inclu	de city, state, & zi	ip)		IPCD, II	NC			
PRESIDENT					- F1	!- 7	V/C		
Recount Code   Reco			E SE				vame/Specific rieid		
F. Prior   S. Account Code   h. Form of Payment   i. In-Kind Description   j. Date (mm/dd/yyyy)   k. Amount	CONCC	JKD, NC 20023			PRESIL	JEN I		e. E	lection Sum to Date
								s	100.00
	f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription		j. Date (mm/dd/yyyy)		k. Amount
		1	Check				03/01/2018		\$ 100.00
Add Remove  a. Full Name, Mailing Address & Phone (include city, state, & zip)  PAUL HUNT 911 PATRICA AVE HARRISBURG, NC 28075  CABARRUS COUNTY  c. Employer's Name/Specific Field  CABARRUS COUNTY  c. Employer's Name/Specific F									s
A. Full Name, Mailing Address & Phone (include city, state, & zip)   LAW ENFORCEMENT									\$
LAW ENFORCEMENT   PAUL HUNT   911 PATRICA AVE   HARRISBURG, NC 28075   S. Employer's Name/Specific Field   S. 200.00									
PAUL HUNT   911 PATRICA AVE   HARRISBURG, NC 28075								d. C	Comments
S. Employer's Name/Specific Field   CABARRUS COUNTY   E. Election Sum to Date   S. 200.00			(p)		LAW E	NFORC	CEMENT		
CABARRUS COUNTY   E. Election Sum to Date   S   200.00					c. Employer's Name/Specific Field				
\$ 200.00    Prior   S. Account Code   h. Form of Payment   i. In-Kind Description   j. Date (mm/dd/yyyy)   k. Amount					CABAI	RRUS C	COUNTY		
f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount  Check 03/19/2018 \$ 200.00  3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone (include city, state, & zip)  LOY INGOLD 5306 ATWATER DRIVE CONCORD, NC 28025  C. Employer's Name/Specific Field MEDICAL INVESTIGATOR  E. Election Sum to Date \$ 200.00  f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount  Check 02/09/2018 \$ 200.00  \$ 4. Total only this Page							e. E	lection Sum to Date	
□       1       Check       03/19/2018       \$ 200.00         □   </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> <td>200.00</td>								\$	200.00
	f. Prior	g. Account Code		i. In-Kind Des	cription		j. Date (mm/dd/yyyy)		k. Amount
3. Contributor Information  a. Full Name, Mailing Address & Phone (include city, state, & zip)  LOY INGOLD 5306 ATWATER DRIVE CONCORD, NC 28025  6. Employer's Name/Specific Field MEDICAL INVESTIGATOR  e. Election Sum to Date \$ 200.00  f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount  Check  02/09/2018  \$ 200.00  4. Total only this Page  \$ 500.00		1	Check				03/19/2018		\$ 200.00
3. Contributor Information  a. Full Name, Mailing Address & Phone (include city, state, & zip)  LOY INGOLD 5306 ATWATER DRIVE CONCORD, NC 28025  C. Employer's Name/Specific Field MEDICAL INVESTIGATOR  e. Election Sum to Date \$ 200.00  f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy)  Check  02/09/2018  \$ 200.00  4. Total only this Page  \$ 500.00									\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)  LOY INGOLD 5306 ATWATER DRIVE CONCORD, NC 28025  C. Employer's Name/Specific Field MEDICAL INVESTIGATOR  e. Election Sum to Date \$ 200.00  f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount  Check  02/09/2018  \$ 200.00  4. Total only this Page									\$
Cinclude city, state, & zip   RETIRED						_			
LOY INGOLD   5306 ATWATER DRIVE   C. Employer's Name/Specific Field   MEDICAL INVESTIGATOR   e. Election Sum to Date   \$ 200.00		-					ofession	d. C	Comments
Same   Specific Field   MEDICAL INVESTIGATOR	• • • • • • • • • • • • • • • • • • • •		ip)		RETIRE	ED			
MEDICAL INVESTIGATOR   e. Election Sum to Date   s   200.00					c. Empl	oyer's l	Name/Specific Field		
\$ 200.00    F. Prior   g. Account Code   h. Form of Payment   i. In-Kind Description   j. Date (mm/dd/yyyy)   k. Amount					MEDIC	'AL IN'	VESTIGATOR		
F. Prior   g. Account Code   h. Form of Payment   i. In-Kind Description   j. Date (mm/dd/yyyy)   k. Amount								e. E	lection Sum to Date
□       1       Check       02/09/2018       \$ 200.00         □   □   4. Total only this Page								\$	200.00
□	f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription		j. Date (mm/dd/yyyy)		k. Amount
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4. Total only this Page \$ 500.00									\$
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5 Total of ALL CPO 1210 Pages	4. Total only this Page						\$	500.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)		. Total of ALL CRO-1210 Pages						s	13,841.05

				Amendme	ent
Pg	_10	of	15	☐ Yes	X No

	_	dividual contributions		mimbuu	ions un	dei \$50 ii foim CRO I			
1. Comr	nittee Full Name	(and Fund if applicabl	e)				2. ID Number		
Commit	tee to Elect Van Sh	aw							
3. Conti	ributor Informati	o <b>n</b>		Add	Ren	nove			
a. Full N	ame, Mailing Add	lress & Phone		b. Job	Title/Pn	ofession	d. C	Comments	
	de city, state, & z			EDUCA	тор				
				JEDUCE	ATOK				
	ISENHOUR	_		c. Employer's Name/Specific Field					
	SH POTATO ROA	D				vame/Specific Field			
CONCC	RD, NC 28025			RETIR	ED		<u> </u>		_
							e. E	lection Sum to	Date
							\$		500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription		j. Date (mm/dd/yyyy)		k. Amount	
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								s	
								\$	
3. Conti	Contributor Information								
a. Full N	ame, Mailing Add	lress & Phone		b. Job	Title/Pn	ofession	d. C	Comments	
(inclu	(include city, state, & zip)				NEORC	CEMENT			
					INI OICC	CEMIEM			
	JAMES			a Emml	lowowie i	Name/Specific Field	ł		
	9100 FISHER RD								
MT PLE	EASANT, NC 2812	24		CABA	RRUS (	COUNTY	<u> </u>		_
							e. E	lection Sum to	Date
							s		200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription		j. Date (mm/dd/yyyy)		k. Amount	
	1	Check				03/28/2018		s	200.00
								\$	
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	ributor Informati				Ren				
a. Full N	ame, Mailing Add	lress & Phone		b. Job	Title/Pro	ofession	d. C	Comments	
(inclu	de city, state, & z	ip)		DA MC	ORE C	ORP.			
ALLEN	KINLEY			1					
	AMI CHURCH RO	OVD		c. Empl	lover's l	Name/Specific Field	1		
	ORD, NC 28025	JAD			•••••				
CONCC	JKD, NC 28023			SHEET	MEIA	L FABRICATOR	o F	lection Sum to	Data
							e. L	rection Sum to	Date
							\$		600.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription		j. Date (mm/dd/yyyy)		k. Amount	
	1	Check				02/20/2018		s	600.00
								s	
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	d only this De						S		1,300.00
	4. Total only this Page 5. Total of ALL CRO 1210 Pages								.,500.00
	Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)							13	3,841.05
							_		

Amendment Contributions from Individuals Pg \_\_11 of 15 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 Committee to Elect Van Shaw ☐ Add ☐ Remove 3. Contributor Information b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) MANAGER JEROME LITTLE c. Employer's Name/Specific Field 6996 FRISKIE LANE CONCORD, NC 28027 VER-EL EVENTS LLC e. Election Sum to Date 2,000.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check 1 03/26/2018 \$ 2,000.00 \$ П \$ 3. Contributor Information ☐ Add ☐ Remove b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) LAW ENFORCEMENT MARC NESBITT c. Employer's Name/Specific Field 103 SOUTH RIDGE ROAD KANNAPOLIS, NC 28083 CABARRUS COUNTY GOVT e. Election Sum to Date 250.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check 1 02/14/2018 \$ 250.00 \$

		\$		
3. Contributor Information	Add Remove			
a. Full Name, Mailing Address & Phone	b. Job Title/Profession	d. Comments		
(include city, state, & zip)	ude city, state, & zip) LAW ENFORCEMENT			
KEVIN PFISTER				
1530 PORTERS CT	c. Employer's Name/Specific Field			
CONCORD, NC 28025	CABARRUS COUNTY			
		e. Election Sum to Date		
	li Production	\$ 250.00		

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
	1	Check		03/22/2018	\$	250.00
					\$	
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4. Tota	al only this Pa	ge			S	2,500.00

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			Amendm	ent
Pg	12 of	15	Yes	X No

1. Comi	nittee Full Name	(and Fund if applicabl	.e)			2. I	D Number
Commit	tee to Elect Van Sh	aw					
3. Conti	ributor Informati	on		Add 🔲 Ren	move		
	Vame, Mailing Add			b. Job Title/Pr	ofession	d. C	Comments
(inclu	ide city, state, & zi	ip)		LAW ENFORC	CEMENT		
SARA F				- Frankanaria	Name/Specific Field	ŀ	
	TREWALT RD	1					
KANNA	APOLIS, NC 28081	I		CABARRUS	JOUNTY	e. E	lection Sum to Date
						\$	100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount
	1	Check			03/23/2018		\$ 100.00
							S
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3. Contr	ributor Informatio	on		Add 🗖 Res	move		
	Vame, Mailing Add			b. Job Title/Pr	ofession	d. C	Comments
(inclu	ide city, state, & z	ip)		OWNER - CCI	M		
	ID PROPST			F 1 1	N (C' (C' T' 1.1		
	NDSOR PLACE				Name/Specific Field		
CONCC	ORD, NC 28025			DAVID PROP	'ST REALTY	o F	lection Sum to Date
						S	200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount
	1	Check			04/06/2018		\$ 200.00
							S
							s
3. Contr	ributor Informatio	on		Add 🗖 Res	move		
	Vame, Mailing Add			b. Job Title/Pr	ofession	d. C	Comments
	ide city, state, & zi	ip)		RETIRED - LA			
	ROBERTS			ENFORCEME			
	AL BOST ROAD				Name/Specific Field		
MIDLA	ND, NC 28107			RETIRED		e. E	lection Sum to Date
						\$	300.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount
	1	Check			03/17/2018		\$ 300.00
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4. Tota	al only this Pa	ge				s	600.00
5. Tota	al of ALL CRO	O-1210 Pages	CRO IIIAN			s	13,841.05
(I his i	ine must be on line	6 of Detailed Summary I	'age CKO-1100)				

5. Total of ALL CRO-1210 Pages

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

					Amendme	ent
Individuals	Pg	13	of	15	☐ Yes	X No

Contributions from 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 Van Shaw ☐ Add ☐ Remove 3. Contributor Information b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) DENMAR PUBLIC WAREHOUSES, INC. LAWSON ROGERS c. Employer's Name/Specific Field 755 WINGARD ROAD CONCORD, NC 28025 **PRESIDENT** e. Election Sum to Date 1,200.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check 1 03/08/2018 \$ 1,200.00 \$ П \$ 3. Contributor Information ☐ Add ☐ Remove b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) REALTOR WENDELL RUMMAGE c. Employer's Name/Specific Field 3101 FAIRMEAD DRIVE CONCORD, NC 28025 ALLEN TATE REALTY e. Election Sum to Date 100.00 i. In-Kind Description f. Prior g. Account Code h. Form of Payment j. Date (mm/dd/yyyy) k. Amount Check 1 03/15/2018 \$ 100.00 \$ П \$ ☐ Add ☐ Remove 3. Contributor Information a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) LAW ENFORCEMENT STEVE SANDER c. Employer's Name/Specific Field 339 HOUSTON ST NE CONCORS, NC 28027 CABARRUS COUNTY e. Election Sum to Date 200.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check 1 03/01/2018 200.00 \$ \$ 1,500.00 4. Total only this Page \$

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					Amendme	ent
S	Pg _	14	of	15	☐ Yes	X No

1. Comr	nittee Full Name	(and Fund if applicabl	e)			2. I	D Number
Commit	tee to Elect Van Sh	aw					
3. Conti	ributor Informati	on		Add 🔲 Rer	move		
	lame, Mailing Add			b. Job Title/Pro	ofession	d. C	Comments
	de city, state, & z	ip)					
VAN SH				c. Employer's	Name/Specific Field		
	LDWELL DR SE ORD, NC 28025			C. Employer s.	чаше/эреспистием		
CONCO	AD, IVC 20023					e. E	Election Sum to Date
						\$	1,141.05
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount
	1	In-Kind	CANDIDATE F	ILING FEE	02/12/2018		\$ 1,141.05
							s
							S
	ributor Informati						
	ame, Mailing Add			b. Job Title/Pr		d. C	Comments
	ide city, state, & zi	ip)		LT DEPUTY S	HERIFF		
VAN W	SHAW LDWELL DR SE			c. Employer's l	Name/Specific Field		
	ORD, NC 28025			CABARRUS (			
001,00	MD, 110 20025			SHERIFF'S DI		e. E	Election Sum to Date
						s	100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)	_	k. Amount
	1	Cash			01/18/2018		\$ 100.00
							s
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3. Contr	ributor Informati	on		Add 🔲 Res			
	ame, Mailing Add			b. Job Title/Pro	ofession	d. C	Comments
•••••	de city, state, & zi	ip)		LAW ENFORC	CEMENT		
	THOMAS			c. Employer's	Name/Specific Field		
	COCK STREET ORD, NC 28025				COUNTY GOVT		
	712,110 20023			C/IB/IRROS	3001111 0011	e. E	Election Sum to Date
						\$	100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount
	1	Check			02/16/2018		\$ 100.00
							S
							\$
4. Tota	al only this Pa	ge				\$	1,341.05
	al of ALL CRO	O-1210 Pages 6 of Detailed Summary F	Page CRO-1100)			s	13,841.05

				Amendm	ent
Pg	_ 15	of	15	Yes	X No

		dividual continuation		, iiiiii di	ions un	der \$50 ir rollin erco 1	203	is not used
		(and Fund if applicabl	le)				2. I	D Number
Commit	tee to Elect Van Sh	aw						
3. Conti	ributor Informati	on		Add	☐ Ren	nove		
	ame, Mailing Add					ofession	d. C	Comments
	de city, state, & z			OWEN	ER			
MIKE T	ORRENCE							
807 RO	THMOOR DR NE			c. Emp	loyer's l	Name/Specific Field		
CONCC	ORD, NC 28025			FOIL'S	S INC.		L	
							e. E	lection Sum to Date
							\$	500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	1	j. Date (mm/dd/yyyy)		k. Amount
	1	Check				03/20/2018		\$ 500.00
								s
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3. Conti	ributor Informati	on		Add	Ren	nove		
a. Full N	ame, Mailing Add	lress & Phone		b. Job	Title/Pr	ofession	d. C	Comments
(inclu	de city, state, & z	ip)		VEHIC	LE SAI	ÆS		
TIMOT	HY VAUGHN							
1229 PE	NDLETON DRIV	Е		c. Emp	loyer's l	Name/Specific Field		
KANNA	APOLIS, NC 2808	1		HILBI	SH FOR	D.	_	
							e. L	lection Sum to Date
							\$	100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	ı	j. Date (mm/dd/yyyy)		k. Amount
	1	Check				03/30/2018		\$ 100.00
								s
								s
3. Conti	ributor Informati	on		Add	Ren	nove		
a. Full N	ame, Mailing Add	lress & Phone		b. Job	Title/Pr	ofession	d. C	Comments
(inclu	de city, state, & z	ip)		LAW E	NFORO	CEMENT		
STEPHI	EN WAGONER							
	MER ROAD			c. Emp	loyer's l	Name/Specific Field		
CONCC	ORD, NC 28025			CABA	RRUS (	COUNTY	. T	Election Sum to Date
							e. L	lection Sum to Date
							\$	100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	ı	j. Date (mm/dd/yyyy)		k. Amount
	1	Check				04/03/2018		\$ 100.00
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4. Tota	al only this Pa	ge					\$	700.00
5. Tota	al of ALL CR	O-1210 Pages	D CDO 1100				s	13,841.05
(I his l	ine must be on line	6 of Detailed Summary 1	age CRO-1100)					

Contributi	ons from Other	r Political C	ommittees	n- 1 -e	1	Amendment  Yes No
	report contributions fr				_	Li fes Li No
	ıll Name (and Fund if a				2. II	) Number
Committee to Ele						
2 C-+-1	S		A 11 🗖	D		
3. Contributor I				Remove	1.0	,
_	iling Address & Phone		b. Type of Com	······	a. C	omments
(include city, s			·-	■ PAC		
	Y - COMMITTEE TO RE	E-ELECT		1 (C1C-)	1	
7491 EDGEFIEL			c. Level Registe		-	
CONCORD, NC	28025			- County	T-1	
			☐ State	■ Municipality:	e. Li	ection Sum to Date
					\$	5,200.00
f. Account Code	g. Form of Payment	h. In-Kind Descri	ption	i. Date (mm/dd/y	ууу)	j. Amount
1	Check			02/19/2018		\$ 5,200.00
						\$
						\$
4. Total only this	s Page				\$	\$5,200.00
	CRO-1230 Pages be on line 8 of Detailed St	ımmary Page CRO-1	100)		s	\$5,200.00

					Amendm	ent
Disbursements	Pg	1	of	7	☐ Yes	X No

1. Committee Fu	ıll Name (a	ınd Fund i	if applicable)							2. ID Nu	mber	
Committee to Ele	ect Van Sha	W										
3. Type of Disbu	ırsement	(Please	use separate CRO	0-1310	forms	for eacl	ı type	of Disbu	rseme	<u>nt.)</u>		
X Operating Exp		Cont	ributions to Candidat	es/Polit	ical Cor	nmittees		☐ Coc	ordinat	ed Party E	xpenditu	res
4. Payee Inform	ation				Add		Remo	ve				
a. Full Name, Ma		ess & Ph	one		b. Coo	rdinate	d Com	mittee N	ame	d. Comm	ents	
(include city, sta	te, & zip)											
A PIECE OF WO	PRK .											
NC							tered (	Specify)				
						deral	⊢	County			61	
					St	ate	L	Municip	ality:	e. Electio	n Sum t	o Date
										S		335.00
f. Account Code	g. Form of	Payment	h. Purpose Code	i. Date	(mm/d	ld/yyyy)	j. Am	ount	k. Re	quired Re	marks	
1	Cho		В	<b>†</b>	4/06/20	•••••	\$	335.00	HAT	S		
							s					
4. Payee Inform	ation				Add		Remo	***				
a. Full Name, Ma		one & Die				_		ve mittee Na		d. Comm	onto	
(include city, sta	_	ess & rn	one		b. C00	rumate	и Сош	mittee IV	аше	u. Comm	ents	
CABARRUS MA					1							
NC	KKEIING	•			c. Leve	el Regis	tered (	Specify)		1		
INC.					☐ Fe			County				
					☐ Sta	ate		Municip	ality:	e. Electio	n Sum t	o Date
										s		150.00
6 A (C-1-	- F	D	h Dumasa Cada	. D-4-	· / /3	11/	: A	4	L D.	quired Re	manka	
	<b>T</b>		h. Purpose Code	<b>†</b>	•••••	•••••	<b>†</b>		†·····			
1	Debit	Card	О	0	3/14/20	018	\$	150.00	EVE.	NT SPACI		
							\$					
4. Payee Inform					Add		Remo	ve				
a. Full Name, Ma	ailing Addı	ess & Ph	one		b. Coo	rdinate	d Com	mittee N	ame	d. Comm	ents	
(include city, sta	te, & zip)											
HENDRICK MO	TOR SPOR	TS.			-							
NC					c. Leve	<del></del>	tered (	Specify) County				
					☐ Sta		-			e. Electio	. S	n Data
					51.	ale	<b>.</b>	Ivitaticii	anty.		пэиш	o Date
										S		150.00
f. Account Code	g. Form of	Payment	h. Purpose Code	i. Date	(mm/d	d/yyyy)	j. Amo	ount	k. Re	quired Re	marks	
1	Che	eck	О	0	3/16/20	18	\$	150.00	EVE	NT SPACI	Ξ	
							s					
5. Total only thi	a Dago						-			•		(25,00
		) D								\$		635.00
6. Total of ALL		_	n cno	*****								
			Summary Page CRO					0-1:1.0	٠١	S		16,346.65
			Summary Page CRO Summary Page CRO						ommi			
	_		expenditure code				,··					
A* - Media		- Printin	•	- ' '	undrai			D - To	Anoti	her Candi	date	
E - Salaries		- Equipm	_		litical I	_				Public C		cpenses
I - Postage		- Penaltie				xpense	s			n to Lega		_
O* Other												
* Codes requir	e detailed e	explanatio	n in required ren	ıarks f	ield (k	)						

_				
D	ish	mrs	en	ients

				Amendment				
Pg	2	of	7	☐ Yes	X No			

1. Committee Fu	ull Name (and Fu	ıd if applicable)						2. ID Nun	ıber
Committee to Ele									
3. Type of Disbu	ırsement <u>(Plea</u>	se use separate CR(	0-1310	fonns for eacl	ı type	of Disbu	rseme	<u>nt.)</u>	
X Operating Exp	penses 🔲 C	ontributions to Candida	tes/Polit	ical Committees		☐ Coc	rdinat	ed Party Ex	penditures
4. Payee Inform	ation			Add 🗆	Remo	ove			
a. Full Name, Ma	ailing Address &	Phone		b. Coordinate	d Com	mittee Na	ıme	d. Comme	ents
(include city, sta	te, & zip)								
KUESTER MAN	AGEMENT GROU	JP.							
NC				c. Level Regis					
				Federal	Ļ	County:			
				State	L	Municip	ality:	e. Election	Sum to Date
								\$	250.00
f. Account Code	g. Form of Payme	nt h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Am	ount	k. Re	quired Rei	narks
1	Check	О	0	2/22/2018	\$	250.00	CLU.	BHOUSE F	RENTAL -
					s		MEE	T & GREE	Т
4 D T 4					-				
4. Payee Inform		Di		Add 🗆	Remo			1.0	,
	ailing Address &	Phone		b. Coordinate	d Com	imittee Na	ıme	d. Comme	ents
(include city, sta				-					
MU CAMPAIGN				c. Level Regis	tered (	(Specify)			
304 WHITTINGT LOUISVILLE, K				☐ Federal		County:			
LOUIS VILLE, K	.1 40222			State		-		e. Election	Sum to Date
							<del>.</del>		
								S	1,518.92
f. Account Code	g. Form of Payme	nt h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Am	ount	k. Re	quired Rei	marks
1	Check	В	0	3/28/2018	\$	1,518.92	CAM	PAIGN SI	GNS
					\$				
4. Payee Inform	ation			Add	Remo	ove			
	ailing Address &	Phone		b. Coordinate			ıme	d. Comme	ents
(include city, sta	_						•••••		
MY CAMPAIGN				1					
304 Whittington I	Pkwy			c. Level Regis	tered (	(Specify)			
LOUISVILLE, K				☐ Federal		County:			
				☐ State		Municip	ality:	e. Election	Sum to Date
								\$	1,518.92
f. Account Code	g. Form of Payme	nt h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Am	ount	k. Re	quired Rei	marks
1	Check	В		4/09/2018	S	1,518.92		PAIGN SIG	
-	Check		+		_	1,510.72	C7 1111	THON DI	G145
					\$				
5. Total only thi	s Page							\$	3,287.84
6. Total of ALL	CRO-1310 Page	3							
(This line goes i	n line 13a of Detail	d Summary Page CRO	)-1100 ij	Operating Expe	nses)			S	16,346.65
		d Summary Page CRO					omm)	•	10,540.05
(This line goes i	(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* - Prir	ting	C* - F	undraising		D - To	Anot	her Candid	late
E - Salaries	F* - Equi	pment	G - Po	litical Party		H* - H	olding	Public O	ffice Expenses
I - Postage	J - Pena	ties	K* - C	Office Expense:	s	Q* - D	onatio	n to Legal	l Expense Fund
O* Other			_						
* Codes requir	e detailed explana	tion in required rer	narks f	ield (k)					

Disbursements		

				Amendment					
Pg	3	of	7	☐ Ye	s X No				

1. Committee Fu	ıll Name (a	and Fund i	if applicable)						2. ID Numb	er
Committee to Ele	ect Van Sha	W								
3. Type of Disbu	rsement	(Please	use separate CRO	)-1310	forms for eacl	ı typ	e of Disbu	rseme	<u>nt.)</u>	
X Operating Exp	enses	· · · · · <u>· · · · · · · · · · · · · · </u>	ributions to Candidat						ed Party Expe	nditures
4. Payee Inform	ation				Add 🔲	Rem	nove			
a. Full Name, Ma	ailing Add	ress & Ph	one		b. Coordinate	d Co	mmittee Na	ıme	d. Commen	ts
(include city, sta	te, & zip)									
MY CAMPAIGN	STORE .									
304 WHITTING	TON PKWY	7 #201			c. Level Regis	tered	(Specify)			
LOUISVILLE, K	Y 40222				■ Federal		County:			
					State		Municip	ality:	e. Election S	um to Date
									\$	1,544.56
f. Account Code	g. Form of	Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Aı	mount	k. Re	quired Rema	ırks
1	Ch	eck	В	0	3/01/2018	\$	1,544.56	CAM	PAIGN SIG	NS
						\$				
4. Payee Inform	ation				Add $\square$	Rem	nove			
a. Full Name, Ma	ailing Add	ress & Ph	one		b. Coordinate	d Co	mmittee Na	ıme	d. Commen	ts
(include city, sta	te, & zip)									
MY CAMPAIGN	STORE .									
304 WHITTING	TON PKWY	<i>?</i>			c. Level Regis					
LOIUSEVILLE,	KY 40222				☐ Federal		County:			
					☐ State		Municip	ality:	e. Election S	Sum to Date
									S	2,251.90
f. Account Code	g. Form of	Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Aı	mount	k. Re	quired Rema	rks
1		eck	В	<b>†</b>	3/15/2018	S	2,251.90	CAM	PAIGN SIGN	NS
					0,10,2010	s				
4. Payee Inform	ation				Add $\square$	Rem	nove			
a. Full Name, Ma		ress & Ph	one		b. Coordinate			ıme	d. Commen	ts
(include city, sta	_					•••••		•••••		
MY CAMPAIGN		•••••		•••••	1					
304 WHITTING		7			c. Level Regis	tered	(Specify)			
LOUISVILLE, K					Federal Federal		County:			
					State		■ Municip	ality:	e. Election S	Sum to Date
									\$	719.26
f. Account Code	g. Form of	Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Aı	mount	k. Re	quired Rema	ırks
1	Ch	eck	В	0	3/21/2018	\$	719.26	BUM	PER STICKI	ERS,
						\$		BUT	TONS & PEN	NS
5. Total only thi	s Page								S	4,515.72
6. Total of ALL	CRO-1310	Pages								·
		_	Summary Page CRO	1100 4	Onevering France					
_			Summary Page CRO Summary Page CRO				e/Political C	annu)	S	16,346.65
			Summary Page CRO Summary Page CRO					ominij		
7. Purpose Co	odes (Lis	t detailed	expenditure code	in (h.)	above)					
A* - Media		- Printin	•	- ' '	undraising		D - To	Anoti	her Candidat	te
E - Salaries		- Equipm	_		litical Party		H* - H	olding	Public Offi	ce Expenses
I - Postage		- Penaltie			Office Expenses	S				xpense Fund
O* Other										
* Codes require	e detailed o	explanatio	n in required ren	ıarks f	ield (k)					

Disbursements	P <sub>P</sub> 4	of

				Amendment				
Pg	4	of	7	Yes	X No			

1. Committee Fu	ıll Name (a	ınd Fund i	if applicable)						2. ID Nur	nber
Committee to Ele										
3. Type of Disbu	rsement	(Please	use separate CRO	)-1310	fonns for eacl	ı typ	e of Disbu	rseme	<u>nt.)</u>	
X Operating Exp	enses	Contr	ributions to Candidat	es/Polit	ical Committees		☐ Coc	ordinat	ed Party Ex	penditures
4. Payee Inform	ation				Add 🔲	Rem	nove			
a. Full Name, Ma	ailing Addı	ress & Ph	one		b. Coordinate	d Co	mmittee Na	ıme	d. Comme	ents
(include city, sta	te, & zip)									
MY CAMPAIGN	STORE.									
304 Whittington I	Pkwy				c. Level Regis	tered				
LOUISVILLE, K	Y 40222				Federal		County:			
					State		Municip	ality:	e. Election	n Sum to Date
									\$	1,024.52
f. Account Code	g. Form of	Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Aı	mount	k. Re	quired Re	marks
1	Cho	eck	В	0	4/03/2018	\$	1,024.52	CAM	IPAIGN SI	GNS &
						s		BAN	NER	
4. Payee Inform					Add 🗆		nove			
a. Full Name, Ma		0. Dia			b. Coordinate				d. Comme	
-	_	ess & rn	one		b. Coordinate	a Co	mmittee N	ıme	a. Comme	ents
(include city, sta MY CAMPAIGN					1					
					c. Level Regis	tered	(Specify)			
304 Whittington I LOUISVILLE, K	-				☐ Federal		County:			
LOUIS VILLE, K	1 40222				State				e. Election	n Sum to Date
									s	920.00
									•	829.90
f. Account Code	g. Form of	Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	†······	mount	k. Re	quired Re	marks
1	Debit	Card	В	0	2/09/2018	\$	829.90	BUT'	TONS, BU	MPER
						s		STIC	KERS, ET	C.
4. Payee Inform	ation				Add $\square$	Parr	nove			
a. Full Name, Ma		race & Phy	one		b. Coordinate			ıme	d. Comme	ante
(include city, sta	_		0110							
MY CAMPIAGN					1					
304 Whittington I					c. Level Regis	tered	(Specify)			
LOUISVILLE. K					☐ Federal		County:			
,					State		☐ Municip	ality:	e. Election	n Sum to Date
									s	1,590.93
			I							·
f. Account Code	g. Form of	Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Aı	mount	k. Re	quired Re	marks
1	Debit	Card	В	0	2/08/2018	\$	1,590.93	CAM	IPAIGN SI	GNS
						\$				
5. Total only thi	s Page								\$	3,445.35
6. Total of ALL	CRO-1310	) Pages								
		_	Summary Page CRO	-1100 if	Operating Expe	nses)			_	1.5045.55
_							s/Political C	omm)	\$	16,346.65
	(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		- Equipm	_		litical Party					ffice Expenses
I - Postage		- Penaltie			Office Expense:	S				l Expense Fund
O* Other					•					
* Codes require	e detailed e	explanatio	n in required ren	ıarks f	ield (k)					

					Amendme	ent
Disbursements	Pg	5	of	7	☐ Yes	Σ

X No

1. Committee Fu	ull Name (and Fund : ect Van Shaw	if applicable)						2. ID Nur	nber
<ol> <li>Type of Disbut</li> <li>Operating Exp</li> </ol>		use separate CRC ributions to Candidat			ı type			<u>nt.)</u> ed Party Ex	penditures
4. Payee Inform	ation			Add 🗆	Rem	ove			
_	ailing Address & Ph	one		b. Coordinate	d Cor	nmittee Na	ıme	d. Comm	ents
(include city, sta	te, & zip)								
QUICK PRINT C	F CONCORD .								
21 PALISADE D				c. Level Regis					
CONCORD, NC	28025			Federal		County:		T1 41	n Sum to Date
				State		Municip	anty:	e. Liection	a Sum to Date
								S	1,243.34
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Ar	nount	k. Re	quired Re	marks
1	Debit Card	В	0	3/19/2018	S	1,243.34	CAM	PAIGN C	ARDS
					s	<u> </u>			
4 D T 6					_				
4. Payee Inform				Add	Rem			1 C	4-
	ailing Address & Ph	one		b. Coordinate	a Coi	nmittee Na	ıme	d. Comm	ents
(include city, sta OUICK PRINT C				1					
12 PALASIDE D				c. Level Regis	tered	(Specify)			
CONCORD, NC				☐ Federal		County:			
,				☐ State		Municip	ality:	e. Election	n Sum to Date
								S	256.80
6.4 (6.1	E CD /	h Duman Cala		( /11/ )			1. D.	quired Re	
I. Account Code	g. Form of Payment	h. Purpose Code	<b>†</b>		†····	•••••	·····		•••••
1	Debit Card	В	0	4/12/2018	\$	256.80	COL	OR FLYE	<u> </u>
					\$				
4. Payee Inform	ation			Add 🗆	Rem	ove			
a. Full Name, Ma	ailing Address & Ph	one		b. Coordinate	d Cor	nmittee Na	ıme	d. Comm	ents
(include city, sta	te, & zip)								
QUICK PRINTO				T 1D		/C''C \			
12 PALISIDE DE				c. Level Regis Federal	tered	County:			
CONCORD, NC	28025			State	i	☐ Municip		e. Election	n Sum to Date
								S	440.84
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Ar	nount	k. Re	quired Re	marks
1	Debit Card	В	0	2/20/2018	\$	440.84	CAM	PAIGN C	ARDS
					S				
5. Total only thi	с Раде							\$	1,940.98
								3	1,940.98
	CRO-1310 Pages	n cno	*****						
	n line 13a of Detailed !					./D-1551 C		S	16,346.65
	(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)								
	odes (List detailed				Ĺ				
A* - Media	B* - Printir			undraising		D - To	Anoti	ner Candio	fate
E - Salaries	F* - Equipm	_		litical Party					ffice Expenses
I - Postage	J - Penaltie			Office Expense:	s				l Expense Fund
O* Other				•					
* Codes require	e detailed explanatio	n in required ren	ıarks f	ield (k)					

Disbursements	
Dispuiscinches	

				Amendment				
Pg	6	of	7	☐ Yes	X No			

1. Committee Fu	ıll Name (a	ınd Fund i	f applicable)						2. ID Nun	nber	
Committee to Ele											
3. Type of Disbu	rsement	(Please	use separate CRO	0-1310	fonns for eacl	ı type	e of Disbu	rseme	<u>nt.)</u>		
X Operating Exp		· · · · <u>· · · · · · · · · · · · · · · </u>	ributions to Candidat				<del></del>		ed Party Ex	penditures	
4. Payee Informa	ation				Add 🗆	Rem	ove				
a. Full Name, Ma		ress & Pho	one		b. Coordinate	d Cor	nmittee Na	ıme	d. Comme	ents	
(include city, sta	_							•••••			
SIGNS NOW .					1						
456 CHURCH ST	,				c. Level Regis	tered	(Specify)		1		
CONCORD, NC					Federal		County:				
, , ,					State		Municip	ality:	e. Election	n Sum to Date	
									s	588.5	51
f. Account Code	g. Form of	Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. An	nount	k. Re	quired Re	marks	
1	Debit	Card	В	0	3/02/2018	S	588.51	VINY	YL SIGNS		
						S					_
						-					_
4. Payee Informa					Add	Rem					
a. Full Name, Ma	_	ress & Ph	one		b. Coordinate	d Cor	nmittee Na	ıme	d. Comme	ents	
(include city, sta	te, & zip)										
WHIRLWIND CI	REATIVE .						(6) 10.3				
PO BOX 485					c. Level Regis						
HARRISBURG, 1	NC 28075				Federal		County:		T1 .1	S . D .	
					State	!	Municip	ality:	e. Election	n Sum to Date	
									\$	800.0	00
f. Account Code	g. Form of	Payment	h. Purpose Code	i. Date	(mm/dd/vvvv)	i. Ar	nount	k. Re	quired Re	marks	
1	Che		A	<b>†</b>	3/26/2018	\$	800.00	†·····		& UPDATES	
-				-	3/20/2010	-		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	DESIGN		_
				<u> </u>		\$					_
4. Payee Informa					Add 🔲	Rem	ove				
a. Full Name, Ma	_	ress & Ph	one		b. Coordinate	d Cor	nmittee Na	ıme	d. Comme	ents	
(include city, sta	te, & zip)										
TOTTALY PROM	MOTIONAI	L.COM									
450 S 2ND ST					c. Level Regis	tered					
COLDWATER, O	OH 45828				☐ Federal		County:				_
					L State	l	Municip	ality:	e. Election	1 Sum to Date	
									s	263.2	25
6 A (C-1-	- F	D	h. Purpose Code	. D-4-	(/11/	: A.		L D.	quired Re	n, anka	
f. Account Code	<del></del>			†·····	(mm/dd/yyyy)	1	nount	†·····			
1	Debit	Card	В	0	2/08/2018	\$	263.25	CAM	IPAIGN GI	VE AWAYS	
						\$					
5. Total only this	s Page								S	1,651.7	76
6. Total of ALL	CRO-1310	) Pages									
		_	Summary Page CRO	_1100 if	Onavatina Fyna	nese)					
-	-						/Political C		\$	16,346.6	65
(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)											
			expenditure code								
A* - Media		- Printin			undraising		D - To	Anoti	her Candio	fate	
E - Salaries		- Equipm	_		litical Party					ffice Expenses	9
I - Postage		- Equipin - Penaltie			Office Expense:	9				l Expense Fun	
O* Other	9	Lonaide	-	11 - 0	The Lapense		Ψ - D	omatic	n to nega	. Zapense i un	
	e detailed e	explanatio	n in required ren	ıarks f	ield (k)						

Disbursements	

				Amendment				
Pg	7	of	7	☐ Yes	X No			

committees and coordinated party expe						
1. Committee Full Name (and Fund if a	applicable)				2. ID Numbe	r
Committee to Elect Van Shaw						
3. Type of Disbursement (Please use	e separate CRO-131	10 forms for each	type of Disbu	rseme	nt.)	
	utions to Candidates/Po				ed Party Expen	ditures
4. Payee Information		□ Add □	Remove			
a. Full Name, Mailing Address & Phon	ne	b. Coordinated	Committee N	ame	d. Comments	1
(include city, state, & zip)						
FAIRWAY OUTDOOR ADVERTISING						
105 - A East JJ Drive		c. Level Regist	ered (Specify)			
GREENSBORO, NC 27406			County			
		☐ State	☐ Municip	oality:	e. Election St	ım to Date
					\$	870.00
f. Account Code g. Form of Payment h.	. Purpose Code i. D:	ate (mm/dd/yyyy)	j. Amount	k. Re	quired Remai	ks
1 Check A	A	04/01/2018	\$ 870.00	BILL	BOARD	
			\$			
5. Total only this Page					S	870.00
6. Total of ALL CRO-1310 Pages						
(This line goes in line 13a of Detailed Sun	mmary Page CRO-1100	0 if Operating Expen	ises)			1624665
(This line goes in line 13b of Detailed Sun			-	omm)	\$	16,346.65
(This line goes in line 13c of Detailed Sun	mmary Page CRO-1100	0 if Coordinated Par	ty Expenditures)			
7. Purpose Codes (List detailed ex	penditure code in (h	n.) above)				
A* - Media B* - Printing	C*	- Fundraising	<b>D</b> - To	Anoth	her Candidate	;
				olding	Public Offic	e Expenses
I - Postage J - Penalties K* - Office Expenses Q* - Donation					n to Legal Ex	pense Fund
O* Other						
* Codes require detailed explanation i	in required remark	s field (k)				

CRO-1310 NC State Board of Elections December 2009

Aggregated	Non-Media	<b>Expenditures</b>
	TIOM TIME COM	- Apendida co

				Am	Amendment			
Page _	1	of_	1		Yes	$\overline{\mathbf{X}}$	No	

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

•		-				
1. Committee Full Nan	2. ID Number					
Committee to Elect Van						
3. Payee Information						
a. Amend b. Account	Code c. Form of Paymen	t d. Purpose Code	e. Date (mm/dd/y)	yyy) f	Amount	g. Required Remarks
☐ Add 1 ☐ Remove	Check	О	04/17/2018		\$ 50.00	EVENT BOOTH
4. Total only this Page \$ 50.00						
5. Total of ALL CRO-1315 Pages (This line must be on line 14 of Detailed Summary Page CRO-1100)						50.00
6. Purpose Codes	(List detailed expendit	ure code in (d) a	ibove)			
	B* - Printing	C* - Fundr	aising	D - To	Another Car	ndidate
E - Salaries	F* - Equipment	G - Political	Party	H* - I	Holding Publ	ic Office Expenses
I - Postage	J - Penalties	K* - Office	Expenses	Q* - I	Donations to	Legal Expense Fund
O* - Other						
* Codes require	detailed explanation	in required ren	narks field (g)			

CRO-1315 NC State Board of Elections December 2009

	c	
In Kind	Contributions	

				Amendment				
$P_g$	_1_	of	_1_	☐ 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.

1. Committee Full Name (and Fund if applicable)			2. ID N	Number
Committee to Elect Van Shaw				
3. Contributor Information	☐ Add ☐ Re	move		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Cor X Individual	itributor	c. Com	ments
VAN SHAW 455 CALDWELL DR SE CONCORD, NC 28025	Candidate Party PAC Referendun	1	d. Elec	tion Sum to Date
	Other Rece	-	s	1,141.05
e. Description		f. Date (mm/dd	/уууу)	g. Fair Market Amount
CANDIDATE FILING FEE		02/12/201	8	\$ 1,141.05
				s
				s
4. Total only this Page			S	1,141.05
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page	CRO-1100)		s	1,141.05