Amendment

Disclosure Report Cover

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

1. Committee Inform	nation							
a. Full Name							m /	c. ID Number
ADAM PECK FOR	SHERIFF	7		CAB	ARRU D OF	ELECTION	NS	
b. Mailing Address (include Cit	y, State and Zip	Code)	DUAL				d. Date Filed
602 SUMMERLAN CONCORD, NC 2					JUL :	1 7 2018		07/13/2018
CONCORD, NC 2	.0023					ETVED		e. Phone Number
					REC	EIVED		
2. Report Year 3. P	eriod Star	t Date (mm/dd/y	(y)	4. Period	End Dat	e (mm/dd/yy	5. Treasur	er Full Name
2018	04	1/22/2018		(06/30/2	018	ADAM PI	ECK
6. Type of Committe			9. Typ	e of Report	(ch	eck only on	e type of rep	ort from one category)
X Candidate Campaig	gn 🔲 Par	ty	Munic			State/Count		Referendum
☐ Joint Fundraiser	☐ PA	C		Organizatio	nal	Organizat	ional	☐ Organizational
Referendum		gal Expense Fund		Thirty-five	day	Quarterly		Pre-referendum
	(if applicabl	le, check one)		Pre-primary		First		☐ Final
Booster Fund"				Pre-election	L	Secon	ıd	Supplemental Final
☐ Building Fund				Pre-runoff		Third	L	☐ Annual
Presidential Election				Semi-annual		☐ Fourt	h	☐ Special
NC Public Campai	gn Financing	Fund		Mid Ye	ar	Semi-ann		
				Year Er	nd	Mid Y		10. Special Report Name
Other:				Final		Year Year	End	
8. Number of Fundr	aisers this	Report		Special	- 1	Final		
	0					☐ Special		
3. Account Informa					3. Acce	ount Informa	tion	
a. Financial Instituti	on Full Na	me			a. Fina	ncial Institut	ion Full Nan	10
UWHARRIE BAN	K			3 4400 - 1400 - 11 440 - 11 11 11 11 11 11 11 11 11 11 11 11 1				
b. Purpose		c. Account Cod	e		b. Purp	ose		c. Account Code
CAMPAIGN ACC	OUNT	7	812					
		d. Period Begir	Balan	ce				d. Period Begin Balance
		\$						s
CERTIFICATION								
I certify that the C	Committee o	or Fund is in co	mplian	ce with all a	pplicab	le provision	s of Article 2	22A, 22B & 22D-22M of
Chapter 163 of the	e NC Gener	al Statutes and	that no	funds are	commir	ngled with pr	ohibited or o	other non-disclosed
funds. I further c	ertify that t	his report is co	mplete,	true and c	orrect a	nd that I hay	been train	ed by the NC State Board
Λ				/	1/	10		
Adam Pe	d Name of S			_//	- 5 -	100		07/13/2018
Printe	d Name of S	igner		Sign	ature of	Appointed Tr	easurer	Date
FOR OFFICE USE	ONLY							
Date Received:	7	17/18	_	Emplo	yee:	8mg		livery Method Normal Mail
Date Postmarke	i: 7	14/18		Emplo	yee:	smg_	_	Registered Mail Hand Delivered
Date Scanned:	7/	117/18		Emplo	yee: _	5mg		Electronically Filed
Date Data Enter	ed: _	•	_	Emplo	yee: _			Signer has not received mandatory training
Plance Notes	Thin frame			. 1				
riease Note:		annot be used to t treasurer, cus						nittee address, treasurer, on.
37		1.1 0.			~~ ~ ~ .			

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

Amendment

Yes No

	2. Type of Re		3.1	D Nu	mber	
ADAM PECK FOR SHERIFF	2018 Second	Quarter				
Start of Election Cycle: January 1, 2015		Total this Reporting Period		Total this Election Cycle		
4) Cash on Hand at Start		\$	1,275.44	\$	0.00	
RECEIPTS						
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	0.00	\$	900.00	
6) Contributions from Individuals	(CRO-1210)	\$	0.00	\$	12,819.47	
7) Contributions from Political Party Committees	(CRO-1220)	\$	0.00	\$	0.00	
8) Contributions from Other Political Committees	(CRO-1230)	\$	0.00	\$	0.00	
9) Loan Proceeds	(CRO-1410)	\$	0.00	\$	0.00	
10) Refunds/Reimburs ements to the Committee	(CRO-1240)	\$	0.00	\$	0.00	
11) Other Receipt Sources						
11a) Interest on Bank Accounts	(CRO-1250)	\$	0.00	\$	0.00	
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	0.00	\$	0.00	
11c) Outside Sources of Income	(CRO-1250)	\$	0.00	\$	0.00	
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	0.00	\$	0.00	
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	0.00	\$	0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c.	,11d and 11e)	\$	0.00	\$	13,719.47	
EXPENDITURES						
13) Disbursements	Commission of the International States of the Commission of the Co					
13a) Operating Expenditures	(CRO-1310)	\$	3,699.87	\$	13,238.31	
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	0.00	\$	0.00	
13c) Coordinated Party Expenditures	(CRO-1310)	\$	0.00	\$	0.00	
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	0.00	\$	50.00	
15) Loan Repayments	(CRO-1420)	\$	0.00	\$	0.00	
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	0.00	\$	0.00	
17) In-Kind Contributions	(CRO-1510)	\$	0.00	\$	2,855.59	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15	5, 16 and 17)	\$	3,699.87	\$	16,143.90	
19) Cash on Hand at End (Add lines 4 and 12 together, then sul	otract line 18)	\$	(2,424.43)	\$	(2,424.43)	
ADDITIONAL INFORMATION						
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00			
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	0.00			
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$	0.00			
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$	0.00			
24) Account Transfers Within the Committee	(CRO-1720)	\$	0.00			
25) Administrative Support	(CRO-1710)	\$	0.00	\$	0.00	
26) Forgiven Loans	(CRO-1440)	\$	0.00	\$	0.00	
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	0.00	\$	0.00	
28) Contributions to be Refunded CRO-1100 NC State Boar	(CRO-1215)	\$	0.00	\$	0.00	

Disbursem	ients				Pg	l of	1	Amendm	
committees and	o report expenditures l coordinated party ex	xpenditures	e for o	perating exper	nses.	contributio	ons to	candidate/p	olitical
1. Committee Fu ADAM PECK FO	ull Name (and Fund i OR SHERIFF	f applicable)						2. ID Numbe	r
3. Type of Disbu Operating Exp	arsement (<u>Please</u>)	use separate CRO)-1310	forms for eac	lı typ				
4. Payee Inform	The second secon	ibutions to Candidat		Add	Rem		ordinat	ed Party Exper	ıditures
	ailing Address & Pho	one	Ц	b. Coordinate			ome	d. Comments	-
(include city, sta		J110		or coordinate	u 00.	Himitice	line	d. Comment	5
CASCO SIGNS									
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				☐ State		☐ Municip	ality:	e. Election S	um to Date
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f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Ar	nount	k. Re	quired Rema	rks
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					S				
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(include city, sta						***************************************		••••••	
BETHANY PECH				7 177 1					
602 SUMMERLA				c. Level Regis Federal		(Specify) County:	***************************************		
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100000000000000000000000000000000000000	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. An	nount	k. Re	quired Rema	rks
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					S		BILB	BOARD, MED	ĪΑ
4. Payee Inform				Add \square	Rem	iove			
a. Full Name, Ma	ailing Address & Pho	one		b. Coordinate	d Cor	mmittee Na	ame	d. Comment	8
(include city, sta	ite, & zip)								
SYSCO			,						

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(include city, sta	ite, & zip)						••••••		
BETHANY PEC									
602 SUMMERLA			c. Level Kegi:	tered (Specif					
CONCORD, NC	28025		State	□ Совя □ Мяза		1:	- F141-	n Sum to Date	
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(include city, sta		one	o. Coordinate	ed Committee	i Na	me	d. Comm	ents	
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