# **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 undate information.

Do not use this is	omito apaat	e information.					Mark Control	
1. Committee Inf	ormation		gallasia.					
a. Full Name								c. ID Number
DIANE HONEY	CUTT FOR	COUNTY CO	MMISS	SIONEAB,	ARRU	S COUNTY	/	
b. Mailing Addres	s (include Ci	ty, State and Zi	p Code)			ELECTION	5	d. Date Filed
2635 DANBUR CONCORD, NO		NW		JUL 7 2018				07/06/2018
concord, ne	20021							e. Phone Number
RECEIVED						IVED		(704) 791-2807
2. Report Year 3	. Period Star	rt Date (mm/dd/	yy)	4. Period	End Da	ite (mm/dd/yy)	5. Treas	urer Full Name
2018 04/22/2018			(	06/30/2	2018	KEN YE	ELTON	
6. Type of Comm	ittee (Check	One)	9. Typ	e of Report	(c.	heck only one	type of re	port from one category)
X Candidate Cam		rty	Munic	ipal	***************************************	State/County		Referendum
☐ Joint Fundraise	r 🔲 PA	AC .		Organizatio	nal	Organizati	onal	Organizational
Referendum	☐ Le	gal Expense Fund	100000000000000000000000000000000000000	Thirty-five	day	Quarterly		☐ Pre-referendum
7. Type of Fund	(if applicab	le, check one)	口	Pre-primary	/	☐ First		☐ Final
Booster Fund"			10	Pre-election		Secon	d	Supplemental Final
Building Fund				Pre-runoff		Third		Annual
Presidential Ele	ection Year Ca	ndidates Fund		Semi-annua	l	Fourtl		Special
NC Public Cam				Mid Ye		Semi-annu		
The Facility Cam	pargir i manom	S - 44	腨	Year E		Mid Y		10. Special Report Name
Other:			H	Final	irci	Year J		10. Special Report Ivallie
		a Doublet	占	Special		Final	Liid	
8. Number of Fu	idraisers un	s Keport	-	эрестат				
	1					☐ Special		
3. Account Inform	mation				3. Acc	ount Informa	tion	
a. Financial Instit		ıme			a. Fina	ncial Institut	on Full Na	ame
UWHARRIE BA	ANK			***************************************	***************************************			
b. Purpose		c. Account Coo	le	marine - Company	b. Pur	pose		c. Account Code
CAMPAIGN RE	ECEIPTS		Λ	***************************************				
AND EXPENCE			A					
	<del>===</del> >	d. Period Begi	n Balan	ce				d. Period Begin Balance
		0		5 000 50				
CEDENEIC VEIO	NT.	\$		5,989.58			sylvensolvekissä kunissisystempissississi	\$
CERTIFICATION  I certify that th		or Fund is in co	mplian	ce with all a	pplica	ble provisions	of Article	e 22A, 22B & 22D-22M of
Chapter 163 of	the NC Gene	ral Statutes and	that no	funds are	commi	ingled with pr	ohibited o	r other non-disclosed
								ined by the NC State Board
. /		1 .	•					
Ken	eth E. >	eltos			wer	AE (N		07/06/2018
Pri	nted Name of	Signer	-	Sign	ature of	Appointed Tre	asurer	Date
FOR OFFICE US	EONLY					7		
		holma					Ι	Delivery Method
Date Receive	d:	11/0018	();	Emplo	yee:	#1947/1/2011 HETTER	- Î	Normal Mail
	/	/					Ī	Registered Mail
Date Postmar	ked:			Emplo	yee:		– ř	Hand Delivered
		10/0				2	r	X Electronically Filed
Date Scanned	d: <u>1</u>	117/18		Emplo	yee:	mg	L	A Electronically Flied
	/	/				0		7 Cianaulas not
Date Data En	tered:			Emplo	yee:		L	☐ Signer has not received
								mandatory training
Please Note	e: This form	cannot be used	to ame	nd committe	ee info	rmation such	as the con	nmittee address, treasurer,
		int treasurer, cu						
Y		nd the Statemen						
	tillel						VVIIIII	

CRO-1000 NC State Board of Elections December 2007

Amendment X Yes □ No

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

	2. Type of Rep			D Nu	nber	
DIANE HONEYCUTT FOR COUNTY COMMISSIONER	2018 Second	Quarte	er			
Start of Election Cycle: January 1,2017			Fotal this orting Period	Total this Election Cycle		
4) Cash on Hand at Start		\$	5,989.58	\$	0.00	
RECEIPTS						
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	25.00	\$	1,670.00	
6) Contributions from Individuals	(CRO-1210)	\$	3,304.02	\$	30,329.02	
7) Contributions from Political Party Committees	(CRO-1220)	\$	0.00	\$	0.00	
8) Contributions from Other Political Committees	(CRO-1230)	\$	2,600.00	\$	2,600.00	
9) Loan Proceeds	(CRO-1410)	\$	0.00	\$	2,000.00	
10) Refunds/Reimbursements to the Committee	\$	250.00	\$	250.00		
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)	\$	6,179.02	\$	36,849.02	
EXPENDITURES						
13) Disbursements						
13a) Operating Expenditures	(CRO-1310)	\$	3,134.49	\$	26,931.52	
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	0.00	\$	800.00	
13c) Coordinated Party Expenditures	(CRO-1310)	\$	0.00	\$	0.00	
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	0.00	\$	83.39	
15) Loan Repayments	(CRO-1420)	\$	0.00	\$	0.00	
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	459.02	\$	459.02	
17) In-Kind Contributions	(CRO-1510)	\$	459.02	\$	459.02	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15	5, 16 and 17)	\$	4,052.53	\$	28,732.95	
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18)	\$	8,116.07	\$	8,116.07	
ADDITIONAL INFORMATION						
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00			
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	2,000.00			
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-1215)	\$	0.00	\$	0.00	

Aggrega	ated Contrib	outions from I	ndividuals Page	1_ of	1	Amendme Yes	ent No
Optional fo	rm used to repor	rt NC Contributions	From Individuals of \$	50 or less		3	***************************************
1. Committe	e Full Name (and	Fund if applicable)			2. ID Number		
DIANE HO	NEYCUTT FOR	COUNTY COMMIS	SSIONER				
3. Contribut	tor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/d	d/yyyy)	f. Amoun	t
☐ Add ☐ Remove	A	Check		05/04/20	05/04/2018 \$		
4. Total or	nly this Page				\$		\$25.00
	f ALL CRO-12  nust be on line 5 of L	205 Pages Detailed Summary Page	CRO-1100)		\$		\$25.00
CRO-1205		N	C State Board of Elections				April 200

				Amendment				
Pg	1_	$\mathbf{of}$	6_	X Yes	☐ No			

1. Com	mittee Full Name	(and Fund if applicabl	le)			2. I	D Number	
DIANE	HONEYCUTT	FOR COUNTY COM	1MISSIONER				TOTAL STANCE OF THE STANCE OF	
3. Cont	ributor Informatio	on		Add Re	move			
a. Full N	Name, Mailing Add	dress & Phone		b. Job Title/Pr		d. C	Comments	
(inclu	ide city, state, & zi	ip)		RETIRED	***************************************			
	N COBB				== ***********************************			
	RISH WOODS D				Name/Specific Field			
CONC	ORD, NC 28025	į.		RETIRED		o E	dection Sum	to Date
				1			Techon Sun	1 to Date
						\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	scription	j. Date (mm/dd/yyyy)	16	k. Amount	NAME AND DESIGNATION
	A	Check			05/04/2018		\$	100.00
							\$	
							\$	
	ributor Informatio				move			
	Name, Mailing Add			b. Job Title/Pr	ofession	d. C	Comments	
	ide city, state, & zi	íp)		RETIRED				
HELEN COLLINS				- Employania	N /C : Ct Tt 1.3			
3653 HENSHAW ROAD				THE RESIDENCE OF THE PARTY OF T	Name/Specific Field	-		
CHARI	CHARLOTTE, NC 28209			RETIRED		e. F	dection Sum	to Date
							Techon Bun	
						\$		125.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	scription	j. Date (mm/dd/yyyy)		k. Amount	
	A	Check			05/04/2018		\$	125.00
							\$	
							\$	
	ributor Informatio			Add Re	move			
	Name, Mailing Add			b. Job Title/Pr	ofession	d. C	Comments	
	ide city, state, & zi	ip)		RETIRED				
JOAN I				a Employor's	Name/Specific Field	-		
PO BO	ORD, NC 28026				Name/Specific Field	-		
COINC	JRD, NC 20020	i		RETIRED		e. E	dection Sum	to Date
		•				\$		100.00
f. Prior		h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
	A	Check			05/03/2018		\$	100.00
							\$	
							\$	
4. Tota	al only this Pag	ge				\$		325.00
5. Tota	al of ALL CRO	<b>O-1210 Pages</b>						3 30 4 00
(This l	ine must be on line	6 of Detailed Summary I	Page CRO-1100)			\$		3,304.02

				Amendment				
Pg	2_	$\mathbf{of}$	6_	X Yes	☐ No			

1. Committee Full Name (and Fund if applicable)	2. ID Number			
DIANE HONEYCUTT FOR COUNTY COMMISS	IONER			
3. Contributor Information	☐ Add ☐ Re	emove		
a. Full Name, Mailing Address & Phone	b. Job Title/Pr	rofession	d. Comments	
(include city, state, & zip) GARY EMBLER	SALES MAN	NAGER	***************************************	***************************************
300 MCGILL AVENUE	c. Employer's	Name/Specific Field	1	
CONCORD, NC 28025	NIBLOCK F			
		TOMES	e. Election Sum	to Date
			\$	300.00
	Kind Description	j. Date (mm/dd/yyyy)	k. Amount	interpretation,
A Check		05/04/2018	\$	300.00
			\$	
			\$	
3. Contributor Information		emove		
a. Full Name, Mailing Address & Phone	b. Job Title/Pi	rofession	d. Comments	
(include city, state, & zip)	RETIRED			
FRAN FOLEY	a Employante	N		
265 UNION ST	WHICH SHARE	Name/Specific Field		
CONCORD, NC 28025	CABARRUS SCHOOLS	S COUNTY	e. Election Sum	to Date
	SCHOOLS			
			\$	100.00
	Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
A Check		05/04/2018	\$	100.00
			\$	
			\$	
3. Contributor Information	☐ Add ☐ Re			
a. Full Name, Mailing Address & Phone	b. Job Title/Pr		d. Comments	
(include city, state, & zip) LISA HAMMILL	LEGAL ASS	SISTANT	¥	
112 FRITZRON DR	c. Employer's	Name/Specific Field		
MT PLEASANT, NC 28124	LAW FIRM			
Control Contr			e. Election Sum	to Date
			\$	300.00
	Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
A Check		05/29/2018	\$	300.00
			\$	
			\$	
		The state of the s		
4. Total only this Page			\$	700.00

Pg 3 of 6 M 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 DIANE HONEYCUTT FOR COUNTY COMMISSIONER 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) REALTOR DIANE HONEYCUTT 2635 DANBURY CIRCLE c. Employer's Name/Specific Field CONCORD, NC 28027 ALLEN TATE REALTORS e. Election Sum to Date 0.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount In-Kind A FOOD FOR EVENT 05/10/2018 S 459.02 S \$ 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) **CPA** LADOSKA KEETER c. Employer's Name/Specific Field 1188 FAWN RIDGE ROAD CONCORD, NC 28027 GORDAN AND KEETER CPA 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 A 05/29/2018 S 100.00 S  $\Box$ S 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) **OWNER** TOM D KINCAID 4716 KANNAPOLIS PARKWAY c. Employer's Name/Specific Field KANNAPOLIS, NC 28081 **CRC INC** 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 A 05/04/2018 \$ 100.00 S 4. Total only this Page \$ 659.02 5. Total of ALL CRO-1210 Pages \$ (This line must be on line 6 of Detailed Summary Page CRO-1100) 3,304.02

				Amendment			
Pg	4_	$\mathbf{of}$	6	X Yes	☐ No		

	mittee Full Name	2.]	2. ID Number				
DIANE	HONEYCUTT	FOR COUNTY COM	IMISSIONER				
	ributor Informati						
	Name, Mailing Add			b. Job Title/Pr	rofession	d. (	Comments
	HEW D LONG	ip)		VP SALES			
	OHN WHITE RO	)AD		c. Employer's	Name/Specific Field		
	ORD, NC 28025			CHARLOTT			
				SPEEDWAY		e. F	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
	A	Check			06/11/2018		\$ 100.00
							\$
		*					\$
	ributor Informati			CONTRACTOR OF THE PROPERTY OF	emove		
	Name, Mailing Add			b. Job Title/Pi	rofession	d. (	Comments
	ide city, state, & z	ip)		OWNER	Editor and Control of the Control of		
	H MORRISON			c Employer's	Name/Specific Field	1	
	ERMITAGE DR	5		***************************************			
CONCORD, NC 28025				MORRISON COMPANY		e. I	Election Sum to Date
				COMITATI			
		T:	·		-	\$	125.00
ventage		h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount
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Control of the second	ributor Informatio				emove		
	Name, Mailing Add			b. Job Title/Pr		d. C	Comments
	ide city, state, & zi			COMMERC	IAL REAL ESTATE		
	S HUNTER MOR ERMITAGE DRI'			c. Employer's	Name/Specific Field	1	
	ORD, NC 28025				N REAL ESTATE		
	7 Editoria idalianana			Moradoca	( KD/ IL LO I/IIL	e. I	Dection Sum to Date
						\$	125.00
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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				Amendme	ent
Pg	5	$\mathbf{of}$	6_	X Yes	□ No

1. Committee Full Name (and Fund if applicable)							2. ID Number		
		FOR COUNTY COM							
3. Cont	ributor Informati	on		Add 🔲 I	Remove				
a. Full N	Name, Mailing Add	dress & Phone		b. Job Title/		d. C	omments		
	ide city, state, & zi			ATTORNEY				200 a 200 may	
	HOLT MORRIS			- Employer	I Name /C-seifie Field				
	ERMITAGE DRI' ORD, NC 28025			TOTAL CONTRACTOR OF THE PARTY OF	's Name/Specific Field	1			
CONC	JRD, NC 28023	6		MORRISC	ON LAW	e. El	lection Su	m to Date	
						*********			
		T =	T			\$		250.00	
f. Prior		h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy	) 1	k. Amoun	t	
	A	Check			05/04/2018		\$	250.00	
							\$		
							\$		
	ributor Informati			THE RESERVE OF THE PARTY OF THE	Remove				
	Name, Mailing Add			b. Job Title/		d. C	omments	We for the	
(include city, state, & zip)				7	CIAL PAINT				
	AMSEUR			CONTRAC	CTOR 's Name/Specific Field				
133 HILLCREST AVE CONCORD, NC 28025				RETIRED					
001,0	JID, 110 20020			KETIKED		e. E	lection Su	m to Date	
						\$			
c Drion	- A securit Code	I. E af Daymont	I. r. Wind Dee		1			100.00	
	***************************************	h. Form of Payment Check	i. In-Kind Des	cription	j. Date (mm/dd/yyyy	)	k. Amoun	t	
	A	Clicck			05/04/2018		\$	100.00	
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	ributor Informatio				Remove				
	Name, Mailing Add			b. Job Title/	Profession	d. C	omments		
	ide city, state, & zi	(p)		RETIRED					
	AM RINKER WNING CR.			c. Employer	's Name/Specific Field	ai .			
AND AND THE COURT	ORD, NC 28025	í			CIAL REAL	-			
001.1	5100,110 20022	B		ESTATE	CIAL KEAL	e. E	lection Su	m to Date	
						\$		100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy	) ]	k. Amoun	t de la	
	A	Check			05/29/2018		\$	100.00	
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							\$		
4. Tota	al only this Pa	ge				\$		450.00	
5. Tota	al of ALL CRO	O-1210 Pages							
PARTY SEASON STREET		6 of Detailed Summary I	Page CRO-1100)			\$		3,304.02	

				Amendme	ent
Pg	6_	$\mathbf{of}$	6_	X Yes	□ No

	~~~~~	(and Fund if applicab				2.1	ID Number
DIANE	HONEYCUTT	FOR COUNTY COM	1MISSIONER		AMARIA MINISTRALIA DE LA CALLA		
3.000	tributor Informati			Add 🔲 F	Remove		
SUSSESSED FOR THE PARTY OF THE	Name, Mailing Add			b. Job Title/		d. (	Comments
	ude city, state, & z	ip)		RETIRED			
	P SMALL			a Employer	's Name/Specific Field	=	
	OGER COURT CORD, NC 28025	5		RETIRED		4	
COLIC	OKD, INC 20022			KETIKED		e. I	Election Sum to Date
						\$	70.00
f Drior	To Assount Code	h. Form of Payment	I: In Wind De	i-tion	I. D. 4- (mm/Ad/yyyy)		·
	A Account Code	Check	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)	July 1	k. Amount
	A	Check			05/04/2018		\$ 70.00
							\$
							\$
THE RESERVE OF THE PROPERTY OF	tributor Informati			Add 🔲 F	Remove		
	Name, Mailing Add			b. Job Title/		d. (	Comments
	ude city, state, & z	ip)		TEACHER			
	IY TAYLOR	500000000000000000000000000000000000000		Thenlover	· Y /C Co Fold	_	
	ROOK AVENUE			****************	's Name/Specific Field	4	
CONC	ORD, NC 28025	J		RETIRED		e. J	Election Sum to Date
						\$	-
		h. Form of Payment Check	i. In-Kind Des	scription	j. Date (mm/dd/yyyy)	,	k. Amount
	A	Check			05/04/2018		\$ 100.00
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March 7 College Street	ributor Informati			Add 🔲 F	Remove		
	Name, Mailing Add			b. Job Title/		d. (	Comments
	ude city, state, & zi			OWNER			
	IA F WALLACE			2 Employer	's Name/Specific Field	4	
The second resource of the second	HERBERTT FLOV LOTTE, NC 282			RL WALL		-	
Clirac	LUTTE, INC 202	121		CONSTRU		e. J	Election Sum to Date
				COLIDIA	CHON	\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)	)	k. Amount
	A	Check			05/04/2018		\$ 650.00
							\$
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	al only this Pa	σρ				\$	
	al of ALL CR						
		6 of Detailed Summary I	Page CRO-1100)			\$	3,304.02

### Contributions from Other Political Committees Pg 1 of 1 X Yes ☐ No Use this form to report contributions from other candidate, referendum or PAC committees 1. Committee Full Name (and Fund if applicable) 2. ID Number DIANE HONEYCUTT FOR COUNTY COMMISSIONER 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Type of Committee d. Comments (include city, state, & zip) Candidate X PAC Referendum NC HOME BUILDERS ASSOCIATION c. Level Registered (Specify) PO BOX 99090 ☐ Federal X County: RALEIGH, NC 27624 ☐ State ☐ Municipality: e. Election Sum to Date Wake 1,000.00 f. Account Code g. Form of Payment h. In-Kind Description i. Date (mm/dd/yyyy) j. Amount A Check 05/04/2018 \$ 1,000.00 \$ \$ 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Type of Committee d. Comments (include city, state, & zip) Candidate X PAC Referendum NC REALTORS PAC c. Level Registered (Specify) 4511 WEYBRIDGE LANE Federal GREENTBORO, NC 27407 X County: ☐ State ☐ Municipality: e. Election Sum to Date Guilford \$ 1,000.00 f. Account Code g. Form of Payment h. In-Kind Description i. Date (mm/dd/yyyy) j. Amount A Check 06/28/2018 \$ 1,000.00 \$ \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Type of Committee d. Comments (include city, state, & zip) Candidate X PAC Referendum **VULCAN MATERIALS COMPANY PAC** c. Level Registered (Specify) 7680 POPLAR TENT ROAD Federal CONCORD, NC 28027 X County: ☐ State ☐ Municipality: e. Election Sum to Date Cabarrus 600.00 f. Account Code g. Form of Payment h. In-Kind Description i. Date (mm/dd/yyyy) j. Amount A Check 05/29/2018 \$ 600.00 \$ \$ 4. Total only this Page \$ \$2,600.00 5. Total of ALL CRO-1230 Pages \$ \$2,600.00 (This line must be on line 8 of Detailed Summary Page CRO-1100)

Amendment

Kerunas/Re	eimbu	irsements	To the Comm	mttee P	g <u>l</u> of	1	X Yes	□ No	
Use this form to re	eport re	funds received	l by the committee or	r reimbursements	for a previous ex	pendit	ure.		
1. Committee Ful	l Name	(and Fund if a	pplicable)			2. ID	Number		
DIANE HONEY	CUTT	FOR COUNT	Y COMMISSIONER	3				,	
3. Contributor In	formati	on		Add R	emove				
a. Full Name, Mail (include city, sta				d. Type of Comm	nittee PAC	g. Comments			
LAURAL PARK	PROPI	ERTY OWNE	RS ASSOC	Referendum	☐ Party				
PO BOX 41357 CONCORD, NC 28027				e. Level Registe	red (Specify)	h. Original Expenditure Date			
				Federal State	03/20/20			)/2018	
						i. Ori	ginal Expe	enditure Amt	
						\$		250.00	
b. Job Title/Profess	sion	c. Employer's	Name/Specific Field	f. Purpose j. Election Sum to Da			to Date		
				RETURN OF SE DEPOSIT CHEC	ECURITY CK AND CREDIT	\$	STORY	0.00	
k. Account Code	l. Form	of Payment	m. In-Kind Descrip	tion	n. Date (mm/dd/	уууу)	o. Amoun	t a marada naga	
A		Check			06/28/2018	3	\$	250.00	
4. Total only the	his Pa	ge				\$		250.00	
5. Total of AL  (This line must be			es ummary Page CRO-110	00)		\$		250.00	
CRO-1240			NC State Bos	ard of Elections			The state of the s	December 2007	

Amendment

D.	1		4
DIS	Durs	sem	ents

				Amendme	ent	
Pg	1_	of	2_	X Yes	□ No	

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

1. Committee Fu	Il Name (and Fun	d if applicable)						2. ID N	umber
DIANE HONE	YCUTT FOR CO	UNTY COMM	ISSIONER						
3. Type of Disbu		e use separate							
Operating Exp		ntributions to Car	ndidates/Polit		S	Coc	ordinate	ed Party	Expenditures
4. Payee Informa				Market Control of the	Rem				
	iling Address & I	Phone		b. Coordinate	ed Con	imittee Na	ame	d. Com	nents
(include city, sta				-					
73 & MAIN RE				c. Level Regi	stored	(Specify)	karasar i		
1467 N. MAIN MT. PLEASAN				Federal	rereu	County:			
MI. FLEASAN	1, NC 20174			State	Ď	Municip		e. Electi	on Sum to Date
								\$	114.49
f. Account Code	g. Form of Paymer	nt h. Purpose C	ode i. Date	(mm/dd/yyyy	j. Am	ount	k. Re	quired F	lemarks
A	Check	С	0	5/07/2018	\$	114.49	·		GREET
					\$		EVE		
4 D T 6									
4. Payee Informa		<b>.</b>		Add	Remo				
	iling Address & I	hone		b. Coordinate	ed Con	imittee Na	ame	d. Com	nents
(include city, star	te, & zip)								
JAN BOYD	EDAD CT			c. Level Regis	stered	(Specify)	n Live and the		
11390 OLDE CEDAR CT DAVIDSON, NC 28036				Federal		County:			
211,125011,11	C 20030			☐ State	Ī	Municip		e. Electi	on Sum to Date
				200 000 000 000 000 000 000 000 000 000				\$	00.00
		T: = ====							90.00
***************************************	g. Form of Paymer			(mm/dd/yyyy)		ount			Remarks .
A	Check	EO	0.	5/07/2018	\$	90.00	HOU	RLY W	AGES
					\$				
4. Payee Informa	ation			Add 🗖	Remo	ove			
a. Full Name, Ma	iling Address & I	Phone		b. Coordinate	d Con	mittee Na	ame	d. Com	nents
(include city, stat	te, & zip)			***************************************	************	*************	********	SESSONBESIDES	***************************************
JILL BOYD									
11390 OLDE CI				c. Level Regis	THE RESERVE AND PARTY AND PARTY AND PARTY.				
DAVIDSON, N	C 28063			☐ Federal ☐ County: ☐ State ☐ Municipality:				o Flooti	on Court to Date
				State		Withhelp	anty:	e. Hecti	on Sum to Date
								\$	70.00
f. Account Code	g. Form of Paymer	t h. Purpose C	ode i. Date	(mm/dd/yyyy)	j. Am	ount	k. Re	quired R	temarks
A	Check	ЕО		5/07/2018	\$	70.00	HOU	RLY W	AGES
					\$				
5. Total only this	Раде				Ψ			¢	274.40
	CRO-1310 Pages							\$	274.49
(This line goes in (This line goes in	ı line 13a of Detailed ı line 13b of Detailed	d Summary Page	CRO-1100 if	Contrib to Can	didates		omm)	\$	3,134.49
	line 13c of Detailed				ırty Exp	enditures)			
	des (List detaile								
A* - Media	B* - Print	PARKET PRODUCES AND A CONTRACT OF THE PARKET		undraising				er Cano	
E - Salaries I - Postage O* Other	<b>F* - Equip</b> <b>J</b> - Penal			litical Party <b>Office Expense</b>	es				Office Expenses gal Expense Fund
* Codes require	detailed explanat	ion in required	l remarks f	ield(k)					

Dic	burseme	nte
$\mathbf{D}^{12}$	Durseme	11115

				Amendm	ent
Pg	2_	of	2_	X Yes	☐ No

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

1. Committee Fu	ll Name (and Fun	d if applicable)						2. ID Nu	mber
DIANE HONE	YCUTT FOR CO	JNTY COMMIS	SIONEI	2	<del></del>		ALS PRINCES OF SOME SOME		
3. Type of Disbut	rsement (Pleas	e use separate CK	20-1310	forms for eac	h typ	e of Disbu	rseme	nt.)	
X Operating Exp	enses	ntributions to Candid	lates/Poli	tical Committees	3				xpenditures
4. Payee Informa	ntion			Add $\square$	Rei	nove			
a. Full Name, Ma	iling Address & P	hone		b. Coordinate	d Co	mmittee Na	ame	d. Comm	ents
(include city, stat	te, & zip)								
KRISTIN MOR	RISON								
112 NAVIGATI				c. Level Regis	stere		1000		
MOORESVILLI	E, NC 28117			☐ Federal ☐ State		County:			
				State		Municip	anty:	e. Hectio	n Sum to Date
	500							\$	2,382.83
f. Account Code	g. Form of Paymen	t h. Purpose Code	e i. Dat	e (mm/dd/yyyy)	j. A	mount	k. Re	quired Re	marks
A	Check	Е		04/30/2018	\$	210.00			
					\$				
4. Payee Informa	otion			Add 🔲		nove			
	iling Address & P	hone	ALEST COMPANY	b. Coordinate			am o	d. Comm	onto
(include city, stat		none		b. Coordinate	u co	THIRITIECE IV	anre	u. Comm	ents
PERRY PRODU				1					
41 EDGEWOOI				c. Level Regis	tere	d (Specify)	(Sept		
	CONCORD, NC 28025					X County:			
				☐ State		☐ Municip	ality:	e. Electio	n Sum to Date
				Cabarrus				\$	1,450.00
f. Account Code	g. Form of Paymen	t h. Purpose Code	e i Dat	e (mm/dd/yyyy)	i A	mount	k Re	quired Re	
A	Check	A		05/10/2018	\$	1,450.00		IAL ME	
	Chock		-	3/10/2018	+	1,430.00		KETING	
					\$		1717 11	CCC III	J
4. Payee Informa				Add 🗖	Rer	nove			
a. Full Name, Ma	iling Address & P	hone		b. Coordinate	d Co	mmittee Na	ıme	d. Comm	ents
(include city, stat									
WALKER MAR					Technology (				
	REET NW SUIT	E 101		c. Level Regis	tere	County:			
CONCORD, NC	28027			State		Municip		a Flactic	n Sum to Date
				<u> </u>		Wullerp	anty.	e. Decilo	n Sum to Date
								\$	1,200.00
f. Account Code g	g. Form of Paymen	t h. Purpose Code	i. Date	e (mm/dd/yyyy)	j. A	mount	k. Re	quired Re	marks
A	Check	0	0	6/08/2018	\$	1,200.00	CAN	1PAIGN	MATERIAL
			1		\$				VELOPMENT
5. Total only this	Dogo				Ψ			Φ.	
								\$	2,860.00
6. Total of ALL C									
	line 13a of Detailed							\$	3,134.49
(This line goes in	line 13b of Detailed line 13c of Detailed	Summary Page CRO	0-1100 i 0-1100 i	f Contrib to Cand f Coordinated Pa	lidate rtv E:	s/Political Co cnenditures)	omm)		*
	des (List detaile	Accessed to the second of the	THE PERSON NAMED IN						
A* - Media	B* - Printi			undraising		<b>D</b> - To	Anoth	ner Candi	date
E - Salaries	F* - Equip	NEW PROPERTY AND ADDRESS OF THE PARTY OF THE PARTY.		olitical Party					Office Expenses
I - Postage	J - Penalt			Office Expense	S				d Expense Fund
O* Other		COMMENSATION FOR STREET						3	•
* Codes require	detailed explanati	on in required re	marks t	field (k)					

Refunds/Re	eimbu	rsements	From the Co	mmittee n	1 0	1	Amendm	-
Use this form to r	eport re	funds/reimburs	sements, including co	ontributions retu	g of	huto	X Yes	□ No
1. Committee Ful	l Name	(and Fund if a	oplicable)		aned to the contin	and the same of	D Numbe	•
			Y COMMISSIONER	3			2 I vallie	
3. Payee Informa	tion			Add □ Re	emove			
a. Full Name, Mai		lress & Phone		d. Type of Com	attour COntract Congress of Artist Conference	0. (	Comments	
(include city, st	ate, & zi	<b>p</b> )		Candidate	☐ PAC	5.	- Interes	
DIANE HONEY	CUTT			Referendum	Party	1		
2635 DANBURY	Y CIRC	LE		e. Level Registe	ered (Specify)	h. (	riginal R	eceipt Date
CONCORD, NC 28027			Federal State	☐ County: ☐ Municipality:		05/10/2018		
						i. 0	riginal Re	eceipt Amount
						\$		459.02
b. Job Title/Profes	sion ————	c. Employer's	Name/Specific Field	f. Purpose Code	2	j. Election Sum to Date		
REALTOR		ALLEN TA	ATE REALTORS	P		\$		0.00
k. Account Code	1. Form	of Payment	m. Required Remai	·ks	n. Date (mm/dd/y	yyy)	o. Amour	ıt
A	Check		FOOD FOR EVENT		05/10/2018		\$	459.02
4. Total only this	0					\$	-	459.02
5. Total of ALL C (This line must be	RO-132	20 Pages 15 of Detailed Su	mmary Page CRO-110	0)		\$		459.02
		the second secon	rsement code in (f) al			Sept.		
L - Returned to <b>P* - Reimburs</b>	Contrib ement of	utor M -	Overpayment for Se Other in required remarks	rvice	N - Exceed	led C	Contibutio	n Limit
CRO-1320	cacant	и слуганации		rd of Elections				July 2007

<b>In-Kind Contributions</b>	Da	1	a C	_1_	Amenda X Yes			
Use this form to report non-monetary contributions, donati	rg one goods or ser	wices n	= <sup>01</sup>					
Use CRO-1215 if In-Kind Contributions were or will be	refunded withi	n 7 das	re vided	to the cor	illimitee of	lund.		
1. Committee Full Name (and Fund if applicable)	returned with	i / da		2. ID	Number			
DIANE HONEYCUTT FOR COUNTY COMMISSION	ONER							
3. Contributor Information	Add 🔲 Re	move						
a. Full Name, Mailing Address & Phone	b. Type of Con	tribut	or	c. Con	nments			
(include city, state, & zip)	X Individual							
DIANE HONEYCUTT	☐ Candidate							
2635 DANBURY CIRCLE	Party							
CONCORD, NC 28027	☐ PAC☐ Referendum							
				d. Election Sum to Date				
	Other Rece	eipt Source \$		0.00				
e. Description		f. Dat	e (mm/c	ld/yyyy)	g. Fair I	Market Amount		
FOOD FOR EVENT		(	)5/10/2	018	\$	459.02		
					\$			
					\$			
4. Total only this Page				\$		459.02		
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CR	RO-1100)			\$		459.02		

NC State Board of Elections

CRO-1510

December 2007

Outstanding	Loans
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				Amendm	ent	
Pg	1	of	1_	X Yes	□ No	

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)				2. ID Number		
DIANE HONEYCUTT FOR COUNTY COMMISSIONER						
3. Lender	Information	☐ Ad	ld Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
		REALTOR			*****************	
	HONEYCUTT					
2635 DANBURY CIRCLE CONCORD, NC 28025				e. Start Date (mm/dd/yyyy)		
		c. Employer's Name/Specific Field		06/28/2017  f. End Date (mm/dd/yyyy)		
		ALLEN TATE REALTORS				
						g. Rate
%		\$	2,000.00	\$	2,000.00	
k. Full Name of Lending Institution				1. Loan Number		
4. Total only this Page				\$	2,000.00	
5. Total of ALL CRO-1430 Pages (This line must be on line 21 of Detailed Summary Page CRO-1100)						

CRO-1430

NC State Board of Elections

December 2007