



Amendment
 Yes No

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 Information | |
| a. Full Name COMMITTEE TO ELECT ROYCE BENNETT | c. ID Number RHCY4D |
| b. Mailing Address (include City, State and Zip Code) 2475 NORTHWOODS DRIVE JACKSONVILLE, NC 28540 | d. Date Filed 07/11/2016 |
| | e. Phone Number |

| | | | |
|------------------------|---|---|--|
| 2. Report Year 2016 | 3. Period Start Date (mm/dd/yy) 03/01/2016 | 4. Period End Date (mm/dd/yy) 06/30/2016 | 5. Treasurer Full Name COMMITTEE TO ELECT ROYCE BENNETT |
|------------------------|---|---|--|

| | | | | |
|---|---|--|--|---|
| 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"/> Party | Municipal | State/County | Referendum |
| <input type="checkbox"/> Joint Fundraiser | <input type="checkbox"/> PAC | <input type="checkbox"/> Organizational | <input type="checkbox"/> Organizational | <input type="checkbox"/> Organizational |
| <input type="checkbox"/> Referendum | <input type="checkbox"/> Legal Expense Fund | <input type="checkbox"/> Thirty-five day | <input type="checkbox"/> Quarterly | <input type="checkbox"/> Pre-referendum |
| 7. Type of Fund (if applicable, check one) | | <input type="checkbox"/> Pre-primary | <input type="checkbox"/> First | <input type="checkbox"/> Final |
| <input type="checkbox"/> "Booster Fund" | | <input type="checkbox"/> Pre-election | <input checked="" type="checkbox"/> Second | <input type="checkbox"/> Supplemental Final |
| <input type="checkbox"/> Building Fund | | <input type="checkbox"/> Pre-runoff | <input type="checkbox"/> Third | <input type="checkbox"/> Annual |
| <input type="checkbox"/> Presidential Election Year Candidates Fund | | <input type="checkbox"/> Semi-annual | <input type="checkbox"/> Fourth | <input type="checkbox"/> Special |
| <input type="checkbox"/> NC Public Campaign Financing Fund | | <input type="checkbox"/> Mid Year | <input type="checkbox"/> Semi-annual | |
| <input type="checkbox"/> Other: | | <input type="checkbox"/> Year End | <input type="checkbox"/> Mid Year | 10. Special Report Name |
| | | <input type="checkbox"/> Final | <input type="checkbox"/> Year End | |
| | | <input type="checkbox"/> Special | <input type="checkbox"/> Final | |
| | | | <input type="checkbox"/> Special | |
| 8. Number of Fundraisers this Report 0 | | | | |

| | | | |
|---|---------------------------------------|--|--------------------------------------|
| 3. Account Information | | 3. Account Information | |
| a. Financial Institution Full Name COMMITTEE TO ELECT ROYCE BENNETT | | a. Financial Institution Full Name PAYPAL | |
| b. Purpose ELECTION FINANCES FOR ELECT ROYCE BENNETT FOR COUNTY COMMISSIONER | c. Account Code COM16 | b. Purpose ONLINE CONTRIBUTIONS | c. Account Code PP01 |
| | d. Period Begin Balance \$ 1515.08 | | d. Period Begin Balance \$ 182.68 |
| | 1,332.40 | | |

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

Gary R Peters Printed Name of Signer [Signature] Signature of Appointed Treasurer 07/11/2016 Date

FOR OFFICE USE ONLY

Date Received: 7/11/16 Employee: _____

Date Postmarked: _____ Employee: _____

Date Scanned: _____ Employee: _____

Date Data Entered: _____ Employee: _____

Delivery Method

Normal Mail

Registered Mail

Hand Delivered

Electronically Filed

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 ROYCE BENNETT | | 2016 Second Quarter | | RHCY40 | |
| Start of Election Cycle: January 1, 2016 | | | Total this Reporting Period | | Total this Election Cycle |
| 4) Cash on Hand at Start | | | \$ 1,515.08 | | \$ |
| RECEIPTS | | | | | |
| 5) Aggregated Contributions from Individuals (CRO-1205) | | \$ 0.00 | | \$ 879.10 | |
| 6) Contributions from Individuals (CRO-1210) | | \$ 1,850.00 | | \$ 13757.62 | |
| 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/Reimbursements to the Committee (CRO-1240) | | \$ 216.20 | | \$ 216.93 | |
| 11) Other Receipt Sources | | | | | |
| 11a) Interest on Bank Accounts (CRO-1250) | | \$ 0.00 | | \$ 0.22 | |
| 11b) Contributions from Not-For-Profit Organizations (CRO-1250) | | \$ 0.00 | | \$ 0.00 | |
| 11c) Outside Sources of Income (CRO-1250) | | \$ 100.00 | | \$ 225.00 | |
| 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) | | \$ 2,166.20 | | \$ 15078.87 | |
| EXPENDITURES | | | | | |
| 13) Disbursements | | | | | |
| 13a) Operating Expenditures (CRO-1310) | | \$ 1,493.29 | | \$ 10185.53 | |
| 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) | | \$ 52.19 | | \$ 130.82 | |
| 15) Loan Repayments (CRO-1420) | | \$ 0.00 | | \$ 0.00 | |
| 16) Refunds/Reimbursements from the Committee (CRO-1320) | | \$ 0.00 | | \$ 125.00 | |
| 17) In-Kind Contributions (CRO-1510) | | \$ 0.00 | | \$ 2501.72 | |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) | | \$ 1,545.48 | | \$ 12993.07 | |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) | | \$ 2,135.80 | | \$ 2,135.80 | |
| 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-1215) | | \$ 0.00 | | \$ 0.00 | |

Contributions from Individuals

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 ROYCE BENNETT | | | | | | RHC440 |
| 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 | |
| ART FURTNEY 130 TWEED DRIVE JACKSONVILLE, NC 28540 | | | SELF EMPLOYED | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Real Estate | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 600.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | COM16 | Check | | 06/16/2016 | \$ 500.00 | |
| <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 | |
| CALVIN LINDSEY 225 WOODCREST CT JACKSONVILLE, NC 28540 (910) 455-3963 | | | SCHOOL TEACHER | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 500.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | COM16 | Check | | 06/29/2016 | \$ 500.00 | |
| <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 | |
| JOHN PIERCE 405 JOHNSON BLVD JACKSONVILLE, NC 28540 (910) 341-9800 | | | SURVEYOR | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 500.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | COM16 | Check | | 05/03/2016 | \$ 500.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 1,500.00 | |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | \$ 1,850.00 | |

Contributions from Individuals

| | |
|------------------------------|--|
| Amendment | |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> 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 ROYCE BENNETT | | | | | RHCY40 | |
| 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 | |
| WILLIAM R THOMAS 6678 GUM BRANCH RD RICHLANDS, NC 28574 | | | SELF-EMPLOYED | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | | | 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 | |
| <input type="checkbox"/> | COM16 | Check | | 03/01/2016 | \$ 100.00 ✓ | |
| <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 | |
| CHARLES DONALD WILLIAMSON 310 WESTERN BLVD JACKSONVILLE, NC 28546 (910) 455-1414 | | | CAR DEALER | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | | | 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 | |
| <input type="checkbox"/> | COM16 | Check | | 05/31/2016 | \$ 250.00 ✓ | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 350.00 ✓ | |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | \$ 1,850.00 ✓ | |

Refunds/Reimbursements To the Committee

| | |
|------------------------------|--|
| Amendment | |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

Use this form to report refunds received by the committee or reimbursements for a previous expenditure.

| | | | | | |
|--|---------------------------|--|---|--------------------------------|-------------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | 2. ID Number | |
| COMMITTEE TO ELECT ROYCE BENNETT | | | | RHC 440 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | d. Type of Committee | | g. Comments |
| SAMS CLUB WAREHOUSE JACKSONVILLE, NC | | | <input type="checkbox"/> Candidate <input type="checkbox"/> PAC | | Refund for items returned |
| | | | <input type="checkbox"/> Referendum <input type="checkbox"/> Party | | |
| | | | e. Level Registered (Specify) | | |
| | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: | | h. Original Expenditure Date |
| | | | <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | 02/29/2016 |
| | | | | | i. Original Expenditure Amt |
| | | | | | \$ 314.30 |
| b. Job Title/Profession | | c. Employer's Name/Specific Field | | f. Purpose | |
| | | | | RETURNED ITEMS | |
| | | | | j. Election Sum to Date | |
| | | | | \$ 188.34 | |
| k. Account Code | l. Form of Payment | m. In-Kind Description | | n. Date (mm/dd/yyyy) | o. Amount |
| COM16 | Electric Funds Tran | | | 03/01/2016 | \$ 187.46 |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | d. Type of Committee | | g. Comments |
| WALMART NC | | | <input type="checkbox"/> Candidate <input type="checkbox"/> PAC | | Refund for items returned |
| | | | <input type="checkbox"/> Referendum <input type="checkbox"/> Party | | |
| | | | e. Level Registered (Specify) | | |
| | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: | | h. Original Expenditure Date |
| | | | <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | 02/29/2016 |
| | | | | | i. Original Expenditure Amt |
| | | | | | \$ 32.67 |
| b. Job Title/Profession | | c. Employer's Name/Specific Field | | f. Purpose | |
| | | | | RETURNED ITEMS | |
| | | | | j. Election Sum to Date | |
| | | | | \$ 14.93 | |
| k. Account Code | l. Form of Payment | m. In-Kind Description | | n. Date (mm/dd/yyyy) | o. Amount |
| COM16 | Electric Funds Tran | | | 03/04/2016 | \$ 28.74 |
| 4. Total only this Page | | | | | \$ 216.20 |
| 5. Total of ALL CRO-1240 Pages <i>(This line must be on line 10 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 216.20 |

Other Receipt Sources

| | |
|------------------------------|--|
| Amendment | |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

| | | | | |
|--|---------------------------|--|--------------------------------|------------------|
| 1. Committee Full Name (and Fund if applicable) | | | 2. ID Number | |
| COMMITTEE TO ELECT ROYCE BENNETT | | | RHC440 | |
| 3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i> | | | | |
| <input type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input checked="" type="checkbox"/> Outside Sources of Income | | | | |
| 4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Not-for-Profit Federal ID # | d. Comments | |
| QUALITY CONTRACTING SERVICES 575 WALKENS LANE CT JACKSONVILLE, NC 28546 (910) 545-7596 | | | | |
| | | c. Outside Source Explanation | | |
| | | Business donation Received in error - to be refunded | | |
| | | | e. Election Sum to Date | |
| | | | \$ 100.00 | |
| f. Account Code | g. Form of Payment | h. In-Kind Description | i. Date (mm/dd/yyyy) | j. Amount |
| COM16 | Electric Funds Tran | | 06/16/2016 | \$ 100.00 |
| | | | | \$ |
| 5. Total only this Page | | | | \$ 100.00 |
| 6. Total of ALL CRO-1250 Pages | | | | \$ 100.00 |
| <i>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</i> | | | | |
| <i>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</i> | | | | |
| <i>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</i> | | | | |

Disbursements

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

| | | | | | | | |
|---|---------------------------|------------------------|-----------------------------|--|----------------------------|-------------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | | | 2. ID Number | |
| COMMITTEE TO ELECT ROYCE BENNETT | | | | | | RHCY40 | |
| 3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) | | | | | | | |
| <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures | | | | | | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Coordinated Committee Name | | d. Comments | |
| FACEBOOK NC | | | | | | | |
| | | | | c. Level Registered (Specify) | | | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | e. Election Sum to Date | |
| | | | | | | \$ 29.19 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| COM16 | Debit Card | A | 03/01/2016 | \$ 24.19 | ADVERTISING | | |
| | | | | \$ | | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Coordinated Committee Name | | d. Comments | |
| GO DADDY NC | | | | | | | |
| | | | | c. Level Registered (Specify) | | | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | e. Election Sum to Date | |
| | | | | | | \$ 99.90 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| COM16 | Debit Card | A | 04/14/2016 | \$ 99.90 | WEB SITE | | |
| | | | | \$ | | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Coordinated Committee Name | | d. Comments | |
| JACKSONVILLE DAILY NEWS NC | | | | | | | |
| | | | | c. Level Registered (Specify) | | | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | e. Election Sum to Date | |
| | | | | | | \$ 510.00 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| COM16 | Check | A | 03/28/2016 | \$ 306.00 | ADVERTISING | | |
| | | | | \$ | | | |
| 5. Total only this Page | | | | | | \$ 430.09 | |
| 6. Total of ALL CRO-1310 Pages | | | | | | \$ 1,493.29 | |
| <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> | | | | | | | |
| 7. Purpose Codes (List detailed expenditure code in (h.) above) | | | | | | | |
| A* - Media | | B* - Printing | | C* - Fundraising | | D - To Another Candidate | |
| E - Salaries | | F* - Equipment | | G - Political Party | | H* - Holding Public Office Expenses | |
| I - Postage | | J - Penalties | | K* - Office Expenses | | Q* - Donation to Legal Expense Fund | |
| O* Other | | | | | | | |
| * Codes require detailed explanation in required remarks field (k) | | | | | | | |

Disbursements

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

| | | | | | | |
|--|---------------------------|------------------------|-------------------------------------|---|----------------------------|--------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | | 2. ID Number |
| COMMITTEE TO ELECT ROYCE BENNETT | | | | | | R4440 |
| 3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) | | | | | | |
| <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures | | | | | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Coordinated Committee Name | | d. Comments |
| DENNIS JARMAN 257 COSTON ROAD JACKSONVILLE, NC 28574 | | | | | | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | |
| | | | | | | \$ 400.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | |
| COM16 | Check | A | 04/11/2016 | \$ 300.00 | ADVERTISING | |
| | | | | \$ | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Coordinated Committee Name | | d. Comments |
| NEWTON SIGN COMPANY, INC 2494 ONLSOW DRIVE JACKSONVILLE, NC 28540 | | | | | | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | |
| | | | | | | \$ 968.06 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | |
| COM16 | Debit Card | A | 05/27/2016 | \$ 64.20 | MAGNETIC SIGNS | |
| | | | | \$ | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Coordinated Committee Name | | d. Comments |
| ONLSOW COUNTY REPUBLICAN PARTY PO BOX 716 JACKSONVILLE, NC 28541 (858) 859-1467 | | | | | | |
| | | | | c. Level Registered (Specify) | | e. Election Sum to Date |
| | | | | <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | |
| | | | | Onslow | | \$ 400.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | |
| COM16 | Check | A | 03/14/2016 | \$ 400.00 | ADVERTISING | |
| | | | | \$ | | |
| 5. Total only this Page | | | | | | \$ 764.20 |
| 6. Total of ALL CRO-1310 Pages | | | | | | \$ 1,493.29 |
| <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> | | | | | | |
| <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> | | | | | | |
| <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> | | | | | | |
| 7. Purpose Codes (List detailed expenditure code in (h.) above) | | | | | | |
| A* - Media | B* - Printing | C* - Fundraising | D - To Another Candidate | | | |
| E - Salaries | F* - Equipment | G - Political Party | H* - Holding Public Office Expenses | | | |
| I - Postage | J - Penalties | K* - Office Expenses | Q* - Donation to Legal Expense Fund | | | |
| O* Other | | | | | | |
| * Codes require detailed explanation in required remarks field (k) | | | | | | |

Disbursements

| | |
|------------------------------|--|
| Amendment | |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

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

| | | | | | | | |
|---|---------------------------|------------------------|-----------------------------|--|----------------------------|-------------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | | | 2. ID Number | |
| COMMITTEE TO ELECT ROYCE BENNETT | | | | | | RHC440 | |
| 3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> | | | | | | | |
| <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures | | | | | | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Coordinated Committee Name | | d. Comments | |
| WJNC/WTKF RADIO NC | | | | | | | |
| | | | | c. Level Registered (Specify) | | | |
| | | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | | |
| | | | | | | e. Election Sum to Date | |
| | | | | | | \$ 299.00 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks | | |
| COM16 | Debit Card | A | 03/01/2016 | \$ 299.00 | ADVERTISING | | |
| | | | | \$ | | | |
| 5. Total only this Page | | | | | | \$ 299.00 | |
| 6. Total of ALL CRO-1310 Pages | | | | | | \$ 1,493.29 | |
| <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> | | | | | | | |
| 7. Purpose Codes (List detailed expenditure code in (h.) above) | | | | | | | |
| A* - Media | | B* - Printing | | C* - Fundraising | | D - To Another Candidate | |
| E - Salaries | | F* - Equipment | | G - Political Party | | H* - Holding Public Office Expenses | |
| I - Postage | | J - Penalties | | K* - Office Expenses | | Q* - Donation to Legal Expense Fund | |
| O* Other | | | | | | | |
| * Codes require detailed explanation in required remarks field (k) | | | | | | | |

Aggregated Non-Media Expenditures

| | |
|------------------------------|--|
| Amendment | |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

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

| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
|--|-----------------------|-----------------------------|---|----------------------|---------------------|---------------------|
| COMMITTEE TO ELECT ROYCE BENNETT | | | | | RHCY4D | |
| 3. Payee Information | | | | | | |
| a. Amend | b. Account Code | c. Form of Payment | d. Purpose Code | e. Date (mm/dd/yyyy) | f. Amount | g. Required Remarks |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | COM16 | Electric Funds Tran | K | 03/29/2016 | \$ 16.99 | CHECKS |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | COM16 | Electric Funds Tran | K | 03/31/2016 | \$ 8.00 | BANK FEE |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | COM16 | Electric Funds Tran | K | 04/29/2016 | \$ 8.00 | BANK FEE |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | COM16 | Electric Funds Tran | K | 05/31/2016 | \$ 8.00 | BANK FEE |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | COM16 | Electric Funds Tran | K | 06/30/2016 | \$ 8.00 | BANK FEE |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | PP01 | Electric Funds Tran | K | 06/16/2016 | \$ 3.20 | TRANSACTION FEE |
| 4. Total only this Page | | | | | \$ | 52.19 |
| 5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i> | | | | | \$ | 52.19 |
| 6. Purpose Codes (List detailed expenditure code in (d) above) | | | | | | |
| | B* - Printing | C* - Fundraising | D - To Another Candidate | | | |
| E - Salaries | F* - Equipment | G - Political Party | H* - Holding Public Office Expenses | | | |
| I - Postage | J - Penalties | K* - Office Expenses | Q* - Donations to Legal Expense Fund | | | |
| O* - Other | | | | | | |
| * Codes require detailed explanation in required remarks field (g) | | | | | | |