

Disclosure Report Cover

Amendment
 Yes No

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

1. Committee Information	
a. Full Name COMMITTEE TO ELECT KEN REDDIC - ONSLOW CO BOARD OF EDUCATION	c. ID Number 3HCUY3
b. Mailing Address (include City, State and Zip Code) 905 GREENWAY DR JACKSONVILLE, NC 28546	d. Date Filed 04/27/2018
	e. Phone Number 910-330-6873

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2018	01/01/2018	04/21/2018	JOHN F PHELPS

6. Type of Committee (Check One)	9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser	Municipal	State/County	Referendum
	<input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
7. Type of Fund (if applicable, check one)	10. Special Report Name		
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input checked="" type="checkbox"/> Other:			
8. Number of Fundraisers this Report			
0			

11. Account Information		11. Account Information	
a. Financial Institution Full Name FIRST NATIONAL BANK		a. Financial Institution Full Name	
b. Purpose CAMPAIGN ACCOUNT FOR RECEIPTS AND EXPENDITURES	c. Account Code FP	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 73.70		d. Period Begin Balance \$

CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

JOHN F PHELPS _____ Date: 04/27/2018
 Printed Name of Signer Signature of Appointed Treasurer

FOR OFFICE USE ONLY

Date Received: _____

Date Postmarked: _____

Date Scanned: _____

Date Data Entered: _____

Employee: _____

Employee: _____

Employee: _____

Employee: _____

Delivery Method

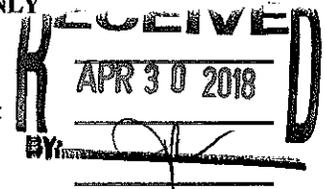
Normal Mail

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 KEN REDDIC - ONSLOW COUNTY BOARD OF EDUCATION		FIRST QUARTER PLUS		3HCUY3	
Start of Election Cycle: January 1, 2018		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 73.70		\$ 0.00	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$	
6) Contributions from Individuals (CRO-1210)		\$ 6387.69		\$ 6512.69	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$		\$	
10) Refunds/Reimbursements To the Committee (CRO-1240)		\$		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$		\$	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$	
11d) Legal Expense Fund – Other Sources (CRO-1270)		\$		\$	
11 e) Exempt Purchase Price Sales (CRO-1265)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 6387.69		\$ 6512.69	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 1501.75		\$ 1501.75	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
13c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$		\$	
15) Loan Repayments (CRO-1420)		\$		\$	
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$ 1255.69		\$ 1255.69	
17) In-Kind Contributions (CRO-1510)		\$ 1255.69		\$ 1306.99	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 4013.13		\$ 4064.43	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 2448.26		\$ 2448.26	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$			
22) Debts and Obligations owed By the Committee (CRO-1610)		\$			
23) Debts and Obligations owed To the Committee (CRO-1620)		\$			
24) Account Transfers Within the Committee (CRO-1720)		\$			
25) Administrative Support (CRO-1710)		\$		\$	
26) Forgiven Loans (CRO-1440)		\$		\$	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$		\$	
28) Contributions to be Refunded (CRO-1215)		\$		\$	

Contributions from Individuals

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 KEN REDDIC - ONSLOW CO. BOARD OF EDUCATION					3HCUY3	
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	
KATHLEEN DILLINGHAM 615 INDEPENDENCE DR JACKSONVILLE, NC 28546			EDUCATOR			
			c. Employer's Name/Specific Field RETIRED			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	FP	CASH		04/12/2018		\$ 50.00
<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	
BO HONEYCUTT 138 WHITE OAK BLUFF RD STELLA, NC 28582			MILITARY			
			c. Employer's Name/Specific Field USMC (RETIRED)			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	FP	CASH		02/24/2018		\$ 50.00
<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	
LIZ HONEYCUTT 138 WHITE OAK BLUFF RD STELLA, NC 28582			GRAPHIC ART DESIGNER			
			c. Employer's Name/Specific Field SELF-EMPLOYED			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	FP	CASH		02/24/2018		\$ 50.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 150.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 6387.69	

Contributions from Individuals

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 KEN REDDIC - ONSLOW CO. BOARD OF EDUCATJION					3HCUY3	
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	
LINDY COCKMAN 700 CROSWELL CT WHISETT, NC 27377			COMMERCIAL BANKER			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
				\$ 50.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CASH		02/24/2018	\$ 50.00	
<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	
CLAUDIA COCKMAN 700 CROSWELL CT WHISETT, NC 27377			EDUCATOR			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
				\$ 50.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CASH		02/24/2018	\$ 50.00	
<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	
PAM TAYLOR 200 CREEDMOOR RD JACKSONVILLE, NC 28546			EDUCATOR			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
				\$ 50.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CHECK		02/27/2018	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 150.00	
5. Total of ALL CRO-1210 Pages					\$ 6387.69	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

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 KEN REDDIC - ONSLOW CO. BOARD OF EDUCATION					3HCUY3	
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	
EARL TAYLOR 200 CREEDMOOR RD JACKSONVILLE, NC 28546			EDUCATOR			
			c. Employer's Name/Specific Field			
			RETIRED			
			e. Election Sum to Date		\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CHECK		02/27/2018	\$ 50.00	
<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	
CRAIG CHAMBERLIN 105 BELVEDERE CT JACKSONVILLE, NC 28546			CREDIT UNION CEO			
			c. Employer's Name/Specific Field			
			RETIRED			
			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"/>	FP	CHECK		03/01/2018	\$ 250.00	
<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 F PHELPS 2106 COLONY PLZ JACKSONVILLE, NC 28546			MILITARY			
			c. Employer's Name/Specific Field			
			RETIRED			
			e. Election Sum to Date		\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CHECK		03/02/2018	\$ 300.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 600.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 6387.69	

Contributions from Individuals

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 KEN REDDIC - ONSLOW CO, BOARD OF EDUCATION					3HCUY3	
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	
JULIE E ROSE 114 JOHN L HURST DR SWANSBORO, NC 28584			RETAIL FURNITURE SPECIALIST			
			c. Employer's Name/Specific Field ROSE BROTHERS FURNITURE			
					e. Election Sum to Date	
					\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CHECK		03/05/2018	\$ 150.00	
<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	
PAMELA S BREWER 2716 NORTHWOODS DR JACKSONVILLE, NC 28540			EDUCATION ADMIN			
			c. Employer's Name/Specific Field ONSLow CO SCHOOLS			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CHECK		03/03/2018	\$ 50.00	
<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	
BELINDA L KOPEC 1638 KELLUM LOOP RD JACKSONVILLE, NC 28546			EDUCATOR			
			c. Employer's Name/Specific Field ONSLow CO SCHOOLS			
					e. Election Sum to Date	
					\$ 40.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CHECK		03/05/2018	\$ 40.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 240.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 6387.69	

Contributions from Individuals

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 KEN REDDIC - ONSLOW CO BOARD OF EDUCATION					3HCUY3	
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	
LENA LEE DESELMS 1000 SUMMERBROOK PLACE JACKSONVILLE, NC 28540			BANKING LOAN OFFICER			
			c. Employer's Name/Specific Field COASTAL BANK & TRUST			
					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"/>	FP	CHECK		03/02/2018		\$ 250.00
<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	
MARY L BUSFIELD 898 PINE VALLEY RD JACKSONVILLE, NC 28546			EDUCATOR			
			c. Employer's Name/Specific Field RETIRED			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	FP	CHECK		03/03/2018		\$ 50.00
<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	
MARY E EDWARDS 503 SCOTSDALE CT JACKSONVILLE, NC 28546			EDUCATOR			
			c. Employer's Name/Specific Field 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
<input type="checkbox"/>	FP	CHECK		03/03/2018		\$ 100.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 6387.69	

Contributions from Individuals

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 ELCET KEN REDDIC - ONSLOW CO BOARD OF EDUCATION					3HCUY3	
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	
PAUL L WIGGINS 139 BOSCO DR JACKSONVILLE, NC 28540			EDUCATOR			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	FP	CHECK		03/05/2018		\$ 50.00
<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	
JO ANN MINTON 2230 WARRENTON WAY JACKSONVILLE, NC 28546			HOUSEWIFE			
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	FP	CHECK		03/03/2018		\$ 50.00
<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	
THOMAS J MAHLUM 626 INDEPENDENCE DR JACKSONVILLE, NC 28546			REAL ESTATE BROKER			
			c. Employer's Name/Specific Field			
			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
<input type="checkbox"/>	FP	CHECK		03/01/2018		\$ 100.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 200.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 6387.69	

Contributions from Individuals

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 KEN REDDIC - ONSLOW CO BOARD OF EDUCATION					3HCUY3	
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 E GLOVER 1206 DECATUR RD JACKSONVILLE, NC 28540			CEO/ MILITARY CONTRACTING			
			c. Employer's Name/Specific Field COASTAL ENTERPRISE			
					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"/>	FP	CHECK		03/05/2018	\$ 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	
MICHAEL ELDER 702 KATHERYN AVE JACKSONVILLE, NC 28540			EDUCATOR			
			c. Employer's Name/Specific Field ONSLow CO SCHOOLS			
					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"/>	FP	CHECK		03/06/2018	\$ 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	
ANNE M YANNESSA 113 SPENCER CT JACKSONVILLE, NC 28546			FBI INVESTIGATOR			
			c. Employer's Name/Specific Field FBI			
					e. Election Sum to Date	
					\$ 40.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CHECK		03/05/2018	\$ 40.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 640.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 6387.69	

Contributions from Individuals

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 KEN REDDIC - ONSLOW CO BOARD OF EDUCATION					3HCUY3	
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	
SHARON B CONE PO BOX 12245 JACKSONVILLE, NC 28546-2245			HOUSEWIFE			
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	FP	CHECK		03/07/2018		\$ 50.00
<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	
JUDITH C COPELAND 104 WEBB CT JACKSONVILLE, NC 28546			EDUCATOR			
			c. Employer's Name/Specific Field			
			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
<input type="checkbox"/>	FP	CHECK		03/03/2018		\$ 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	
BARBARA BRANCHE 101 SHOREHAM DR JACKSONVILLE, NC 28546			DENTAL HYGENIST INSTRUCTOR			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election Sum to Date	
					\$ 30.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	FP	CHECK		03/07/2018		\$ 30.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 180.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 6387.69	

Contributions from Individuals

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 KEN REDDIC - ONSLOW CO BOARD OF EDUCATION					3HCUY3	
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	
PAMELA E THOMAS 2015 COLONY PLZ JACKSONVILLE, NC 28546			EDUCATOR			
			c. Employer's Name/Specific Field			
			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	
<input type="checkbox"/>	FP	CHECK		03/04/2018	\$ 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	
WILLIAM C DARNER 207 CONVERSE DR JACKSONVILLE, NC 28546			MILITARY			
			c. Employer's Name/Specific Field			
			USMC (RETIRED)		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	
<input type="checkbox"/>	FP	CHECK		03/06/2018	\$ 200.00	
<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	
FRANCES A HARRIS 134 WHITE OAK BLUFF RD STELLA, NC 28582			EDUCATOR			
			c. Employer's Name/Specific Field			
			ONSLow CO SCHOOLS		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CHECK		03/07/2018	\$ 50.00	
<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)					\$ 6387.69	

Contributions from Individuals

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 KEN REDDIC - ONSLOW CO BOARD OF EDUCATION					3HCUY3	
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	
ALTON R HARRIS 134 WHITE OAK BLUFF RD STELLA, NC 28582			STATE AGRICULTURE EXT AGENT			
			c. Employer's Name/Specific Field NC STATE			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CHECK		03/07/2018	\$ 50.00	
<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	
TIMOTHY F EDWARDS 2206 WARRENTON WAY JACKSONVILLE, NC 28546			MEDICAL DOCTOR PA			
			c. Employer's Name/Specific Field WOMENS GYNECOLOGY ASSOCIATES			
					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"/>	FP	CHECK		03/14/2018	\$ 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	
REBECCA H BARTLEY 212 E SEAGULL WAY HUBERT, NC 28539			HOUSEWIFE			
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CHECK		03/13/2018	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 200.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 6387.69	

Contributions from Individuals

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 KEN REDDIC - ONSLOW CO BOARD OF EDUCATION					3HCUY3	
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	
MARTHA L BONEY 1033 BEECH TREE RD JACKSONVILLE, NC 28546			HOUSEWIFE			
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	FP	CHECK		03/14/2018		\$ 50.00
<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 J CHESTER 125 RAINTREE CIRCLE JACKSONVILLE, NC 28546			EDUCATOR			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	FP	CHECK		03/17/2018		\$ 50.00
<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	
MAT C RAYMOND JR 206 E SEAGULL LANE HUBERT, NC 28539			AUTO DEALER			
			c. Employer's Name/Specific Field			
			RETIRED SANDERS FORD		e. Election Sum to Date	
					\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	FP	CHECK		03/19/2018		\$ 300.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 6387.69	

Contributions from Individuals

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 KEN REDDIC - ONSLOW CO BOARD OF EDUCATION					3HCUY3	
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	
MAT C RAYMOND III 100 WINESTONE PL JACKSONVILLE, NC 28546			AUTO DEALER OWNER			
			c. Employer's Name/Specific Field			
			SANDERS FORD		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	
<input type="checkbox"/>	FP	CHECK		03/19/2018	\$ 200.00	
<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	
ANN H RIDGE 502 HUFFMANTON RD RICHLANDS, NC 28547			EDUCATOR			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CHECK		03/10/2018	\$ 50.00	
<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	
NACE B RIDGE PO BOX 113 RICHLANDS, NC 28547-0113						
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CHECK		03/10/2018	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 300.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 6387.69	

Contributions from Individuals

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 KEN REDDIC - ONSLOW CO BOARD OF EDUCATION					3HCUY3	
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	
JEFFREY HOLLAMON 4316 SCOTLAND LANE WILMINGTON, NC 28409			CFO			
			c. Employer's Name/Specific Field			
			ONSLow CO SCHOOLS			
			e. Election Sum to Date		\$ 49.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CASH		03/14/2018	\$ 49.00	
<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	
ANNE S KUNKEL 120 BROOKVIEW DR JACKSONVILLE, NC 28540			HOUSEWIFE			
			c. Employer's Name/Specific Field			
			e. Election Sum to Date		\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CHECK		03/21/2018	\$ 50.00	
<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	
CLARENCE M COLLINS III 296 CREEDMOOR RD JACKSONVILLE, NC 28546			MILITARY			
			c. Employer's Name/Specific Field			
			USMC RETIRED			
			e. Election Sum to Date		\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CHECK		03/17/2018	\$ 300.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 399.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 6387.69	

Contributions from Individuals

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 KEN REDDIC - ONSLOW CO BOARD OF EDUCATION					3HCUY3	
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	
B ELAINE BIXIONES 211 CREEDMOOR RD JACKSONVILLE, NC 28546			EDUCATOR			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election Sum to Date	
					\$ 49.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	FP	CHECK		03/21/2018		\$ 49.00
<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	
CATHY JO KORENEK 138 TILLET LANE SNEADS FERRY, NC 28460			HR			
			c. Employer's Name/Specific Field			
			ONSLOW CO SCHOOLS			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	FP	CHECK		03/23/2018		\$ 50.00
<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	
KATHY P SPENCER 106 E BAY DRIVE SNEADS FERRY, NC 28460			EDUCATOR			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	FP	CHECK		03/25/2018		\$ 50.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 149.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 6387.69	

Contributions from Individuals

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 KEN REDDIC - ONSLOW CO BOARD OF EDUCATION					3HCUY3	
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	
TIMOTHY SPENCER 106 E BAY DRIVE SNEADS FERRY, NC 28460			EDUCATOR			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	FP	CASH		03/25/2018		\$ 50.00
<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 W BAILE 809 DECATUR RD JACKSONVILLE, NC 28540			EDUCATOR			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	FP	CHECK		03/24/2018		\$ 50.00
<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	
J PETER ANDREWS 1004 CLIFTON RD JACKSONVILLE, NC 28540			EDUCATOR			
			c. Employer's Name/Specific Field			
			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
<input type="checkbox"/>	FP	CHECK		03/27/2018		\$ 100.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 200.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 6387.69	

Contributions from Individuals

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 KEN REDDIC - ONSLOW CO BOARD OF EDUCATION					3HCUY3	
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	
RUTH B ROBERTS 310 COMFORT HWY RICHLANDS, NC 28574			EDUCATOR			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CHECK		03/28/2018	\$ 50.00	
<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	
BARRY D COLLINS 133 BATCHELOR TRL JACKSONVILLE, NC 28546			HR, ASST SUP			
			c. Employer's Name/Specific Field			
			ONSLOW CO SCHOOLS			
					e. Election Sum to Date	
					\$ 49.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CHECK		03/31/2018	\$ 49.00	
<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	
CONNIE V TALLMAN 1305 DECATUR RD JACKSONVILLE, NC 28540			HOUSEWIFE			
			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"/>	FP	CHECK		04/02/2018	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 199.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 6387.69	

Contributions from Individuals

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 KEN REDDIC - ONSLOW CO BOARD OF EDUCATION					3HCUY3	
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	
NEIL H THOMPSON 107 DRAYTON HALL JACKSONVILLE, NC 28540			CPA			
			c. Employer's Name/Specific Field			
			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	
<input type="checkbox"/>	FP	CHECK		04/08/2018	\$ 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	
PAMELA M BELL 109 BROOKVIEW DR JACKSONVILLE, NC 28540			EDUCATOR			
			c. Employer's Name/Specific Field			
			ONSLow CO SCHOOLS		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CHECK		04/16/2018	\$ 50.00	
<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	
THERESE E LEE 120 VALENCIA DR JACKSONVILLE, NC 28546			ADMIN ASSISTANT			
			c. Employer's Name/Specific Field			
			ONSLow CO SCHOOLS		e. Election Sum to Date	
					\$ 75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CHECK		04/02/2018	\$ 75.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 225.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 6387.69	

Contributions from Individuals

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 KEN REDDIC - ONSLOW CO BOARD OF EDUCATION					3HCUY3	
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	
MARY B MORGAN 122 DRAYTON HALL JACKSONVILLE, NC 28540			HOUSEWIFE			
			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"/>	FP	CHECK		04/10/2018	\$ 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	
DAVID DILLINGHAM 615 INDEPENDENCE DR JACKSONVILLE, NC 28546			OWNER, PEST CONTROL CO			
			c. Employer's Name/Specific Field			
			RETIRED			
				\$ 50.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FP	CASH		04/12/2018	\$ 50.00	
<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	
KEN REDDIC 905 GREENWAY DR JACKSONVILLE, NC 28546 910-539-4281					CANDIDATE	
			c. Employer's Name/Specific Field			
			e. Election Sum to Date			
				\$ 1255.69		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>			STAMPS	03/12/2018	\$ 96.92	
<input type="checkbox"/>			YARD SIGNS	02/20/2018	\$ 858.14	
<input type="checkbox"/>			THANK YOU CARDS	02/23/2018	\$ 300.63	
4. Total only this Page					\$ 1405.69	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 6387.69	

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 KEN REDDIC - ONSLOW BD OF EDU					3HCUY3
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 <i>(include city, state, & zip)</i>		b. Coordinated Committee Name		d. Comments	
VITAL SIGNS 425 MARINE BLVD JACKSONVILLE, NC 28540 910-938-6969					
		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:		\$ 858.14	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
FP	CHECK	F	03/08/2018	\$858.14	YARD SIGNS
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>		b. Coordinated Committee Name		d. Comments	
VITAL SIGNS 425 MARINE BLVD JACKSONVILLE, NC 28540 910-938-6969					
		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:		\$ 1501.75	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
FP	CHECK	F	03/26/2018	\$643.61	YARD SIGNS
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>		b. Coordinated Committee Name		d. Comments	
		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:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
5. Total only this Page					\$ 1501.75
6. Total of ALL CRO-1310 Pages <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>					\$ 1501.75
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
O* - Other				D - To Another Candidate	
				H* - Holding Public Office Expenses	
				Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k)					

Refunds/Reimbursements From the Committee

Pg ___ of ___

Amendment
 Yes No

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

1. Committee Full Name (and Fund if applicable)			2. ID Number	
COMMITTEE TO ELECT KEN REDDIC - ONSLOW CO BOARD OF EDUCATION			3HCUY3	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
KEN REDDIC 905 GREENWAY DR JACKSONVILLE, NC 28546 910-539-4281		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		03/12/2018
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered (Specify)		i. Original Receipt Amount
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 955.06
f. Purpose Code		j. Election Sum to Date		
P		\$ 955.06		
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
		CANDIDATE		FP
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount	
CHECK	YARD SIGNS STAMPS/SUPPLIES	03/12/2018	\$ 955.06	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
KEN REDDIC 905 GREENWAY DR JACKSONVILLE, NC 28546 910-539-4281		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		03/28/2018
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered (Specify)		i. Original Receipt Amount
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 03/28/2018
f. Purpose Code		j. Election Sum to Date		
P		\$ 1255.69		
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
		CANDIDATE		FP
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount	
CHECK	THANK YOU CARDS	03/28/2018	\$ 300.63	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered (Specify)		i. Original Receipt Amount
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$
f. Purpose Code		j. Election Sum to Date		
		\$		
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount	
			\$	
4. Total only this Page				\$ 1255.69
5. Total of ALL CRO-1320 Pages (This line must be on line 16 of Detailed Summary Page CRO-1100)				\$ 1255.69
L - Returned to Contributor		M - Overpayment for Service		N - Exceeded Contribution Limit
P* - Reimbursement of In-Kind		O* Other		
* Codes require detailed explanation in required remarks field (m)				

In-Kind Contributions

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

1. Committee Full Name (and Fund if applicable)		2. ID Number	
COMMITTEE TO ELECT KEN REDDIC - ONSLOW BD OF EDU		3HCUY3	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
KEN REDDIC 905 GREENWAY DR JACKSONVILLE, NC 28546 910-539-4281		<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
			\$ 96.92
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
OFFICE SUPPLIES AND STAMPS		03/12/2018	\$ 96.92
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
KEN REDDIC 905 GREENWAY DR JACKSONVILLE, NC 28546 910-539-4281		<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
			\$ 955.06
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
YARD SIGNS		02/20/2018	\$ 858.14
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
KEN REDDIC 905 GREENWAY DR JACKSONVILLE, NC 28546 910-539-4281		<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
			\$ 1255.69
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
THANK YOU CARDS		02/23/2018	\$ 300.63
			\$
			\$
4. Total only this Page			\$ 1255.69
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$ 1255.69