

COPY

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 CHECK CHUCK FOR CLEMMONS | c. ID Number 2013 OCT -4 AM 9:37 |
| b. Mailing Address (include City, State and Zip Code) 175 NOTTIDGE COURT CLEMMONS, NC 27012 | d. Date Filed 10/02/2013 |
| | e. Phone Number (336) 766-7178 |

| | | | |
|------------------------|---|---|--|
| 2. Report Year 2013 | 3. Period Start Date (mm/dd/yy) 07/01/2013 | 4. Period End Date (mm/dd/yy) 09/24/2013 | 5. Treasurer Full Name JOHN D CROUCH JR |
|------------------------|---|---|--|

| | | | |
|---|---|--|---|
| 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 |
| <input type="checkbox"/> Joint Fundraiser | <input type="checkbox"/> PAC | <input type="checkbox"/> Organizational | <input type="checkbox"/> Organizational |
| <input type="checkbox"/> Referendum | <input type="checkbox"/> Legal Expense Fund | <input checked="" type="checkbox"/> Thirty-five day | <input type="checkbox"/> Quarterly |
| 7. Type of Fund (if applicable, check one) | | <input type="checkbox"/> Pre-primary | <input type="checkbox"/> First |
| <input type="checkbox"/> "Booster Fund" | | <input type="checkbox"/> Pre-election | <input type="checkbox"/> Second |
| <input type="checkbox"/> Building Fund | | <input type="checkbox"/> Pre-runoff | <input type="checkbox"/> Third |
| <input type="checkbox"/> Presidential Election Year Candidates Fund | | <input type="checkbox"/> Semi-annual | <input type="checkbox"/> Fourth |
| <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 |
| | | <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 | | 10. Special Report Name | |

| | | | |
|--|-------------------------------|--|-------------------------------|
| 3. Account Information | | 3. Account Information | |
| a. Financial Institution Full Name CHECK CHUCK FOR CLEMMONS | | a. Financial Institution Full Name CHECK CHUCK FOR CLEMMONS | |
| b. Purpose SAVINGS TO LIMIT BANK SERVICE CHARGES | c. Account Code JC | b. Purpose CHECKING | c. Account Code JC |
| | d. Period Begin Balance \$ | | d. Period Begin Balance \$ |

CERTIFICATION

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

John D Crouch Jr John D Crouch Jr 10/02/2013
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: 10/4/2013 Employee: Judy Speas Delivery Method

Date Postmarked: 10/2/2013 Employee: Judy Speas Normal Mail

Date Scanned: _____ Employee: _____ Registered Mail

Date Data Entered: _____ Employee: _____ 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 | |
| <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> 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 | |
|--|----------------------|-----------------------------|---------------------------|
| CHECK CHUCK FOR CLEMMONS | 2013 Thirty-five-day | | |
| Start of Election Cycle: January 1, <u>2013</u> | | Total this Reporting Period | Total this Election Cycle |
| 4) Cash on Hand at Start | | \$ 961.77 | \$ 0.00 |
| RECEIPTS | | | |
| 5) Aggregated Contributions from Individuals | (CRO-1205) | \$ 75.00 | \$ 75.00 |
| 6) Contributions from Individuals | (CRO-1210) | \$ 3,530.00 | \$ 4,673.35 |
| 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) | \$ 0.00 | \$ 0.00 |
| 11) Other Receipt Sources | | | |
| 11a) Interest on Bank Accounts | (CRO-1250) | \$ 0.01 | \$ 0.01 |
| 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) | | \$ 3,605.01 | \$ 4,748.36 |
| EXPENDITURES | | | |
| 13) Disbursements | | | |
| 13a) Operating Expenditures | (CRO-1310) | \$ 2,320.38 | \$ 2,358.61 |
| 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) | \$ 12.00 | \$ 12.00 |
| 15) Loan Repayments | (CRO-1420) | \$ 0.00 | \$ 0.00 |
| 16) Refunds/Reimbursements from the Committee | (CRO-1320) | \$ 425.00 | \$ 425.00 |
| 17) In-Kind Contributions | (CRO-1510) | \$ 430.00 | \$ 573.35 |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) | | \$ 3,187.38 | \$ 3,368.96 |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) | | \$ 1,379.40 | \$ 1,379.40 |
| 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 | |
| CHECK CHUCK FOR CLEMMONS | | | | | | | |
| 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 ALEXANDER 240 BULLFINCH RD MOORESVILLE, NC 28117 (336) 403-1025 | | | | ATTORNEY | | | |
| | | | | c. Employer's Name/Specific Field | | e. Election Sum to Date | |
| | | | | Professional, Scientific, and Technical Services | | \$ 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"/> | JC | Check | | 07/09/2013 | \$ 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 | |
| SCOTT BOYLES 230 ASHBOURNE LAKE CT CLEMMONS, NC 27012 (336) 766-9579 | | | | PRESIDENT | | | |
| | | | | c. Employer's Name/Specific Field | | e. Election Sum to Date | |
| | | | | LOGAN HEATING | | \$ 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"/> | JC | Check | | 09/16/2013 | \$ 75.00 | | |
| <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 | |
| ED BREWER 4545 BRIDGEWATER DR CLEMMONS, NC 27012 (336) 766-5753 | | | | ATTORNEY | | | |
| | | | | c. Employer's Name/Specific Field | | e. Election Sum to Date | |
| | | | | DAVIS & BREWER | | \$ 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"/> | JC | Check | | 08/29/2013 | \$ 100.00 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 4. Total only this Page | | | | | | \$ 275.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | \$ 3,530.00 | |

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 | |
| CHECK CHUCK FOR CLEMMONS | | | | | | | |
| 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 | |
| TEDDY CARNEY 171 BOXWOOD CIRCLE BERMUDA RUN, NC 27006 (336) 940-2288 | | | | HOMEMAKER | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | NONE | | | |
| | | | | | | 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"/> | JC | Check | | 09/05/2013 | \$ 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 | |
| ANDREW FELTS 3817 NOYES AVE CHARLESTON, WV 25301 (336) 971-5964 | | | | ATTORNEY | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | Professional, Scientific, and Technical Services | | | |
| | | | | | | 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"/> | JC | Check | | 07/09/2013 | \$ 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 | |
| MARK FULK 395 COVENTRY PARK LANE WINSTON SALEM, NC 27104 (336) 768-2047 | | | | REALTOR | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | MERIDIAN REALTY GROUP | | | |
| | | | | | | 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"/> | JC | Check | | 08/09/2013 | \$ 100.00 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 4. Total only this Page | | | | | | \$ 450.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | \$ 3,530.00 | |

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 | |
| CHECK CHUCK FOR CLEMMONS | | | | | | | |
| 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 | |
| LEE HALFORD 9623 VIEWSIDE DALLAS, TX 75231 (214) 348-0470 | | | | REAL ESTATE | | | |
| | | | | c. Employer's Name/Specific Field Real Estate | | | |
| | | | | 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"/> | JC | Check | | 08/29/2013 | \$ 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 | |
| ROB HATCHER 641 LICHFIELD RD WINSTON SALEM, NC 27104 (336) 774-7968 | | | | COMMERCIAL REAL ESTATE | | | |
| | | | | c. Employer's Name/Specific Field MILLER HATCHER | | | |
| | | | | 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"/> | JC | Check | | 09/16/2013 | \$ 75.00 | | |
| <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 | |
| EARL CHARLES HOUSKA 175 NOTTIDGE CT CLEMMONS, NC 27012 (336) 766-7178 | | | | REAL ESTATE MANAGEMENT | | | |
| | | | | c. Employer's Name/Specific Field Real Estate | | | |
| | | | | e. Election Sum to Date | | \$ 112.99 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | | In-Kind | PAID FILING FEES | 07/09/2013 | \$ 5.00 | | |
| <input type="checkbox"/> | | In-Kind | CAMPAIGN STICKERS | 08/06/2013 | \$ 425.00 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 4. Total only this Page | | | | | | \$ 1,005.00 | |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | | \$ 3,530.00 | |

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 |
| CHECK CHUCK FOR CLEMMONS | | | | | | |
| 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 | |
| NOAH KIM 3474 LOCKWOOD DR NORCROSS, GA 30092 (678) 770-2602 | | | SELF EMPLOYED | | | |
| | | | c. Employer's Name/Specific Field | | e. Election Sum to Date | |
| | | | Professional, Scientific, and Technical Services | | \$ 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"/> | JC | Check | | 09/05/2013 | \$ 300.00 | |
| <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 | |
| TELFORD KURT 7961 ABELIA WAY CLEMMONS, NC 27012 (336) 712-8059 | | | EDUCATOR | | | |
| | | | c. Employer's Name/Specific Field | | e. Election Sum to Date | |
| | | | OUR LADY OF GRACE | | \$ 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"/> | JC | Check | | 09/16/2013 | \$ 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 | |
| DANA MARSKE 1718 VALLEY BROOK RD CLEMMONS, NC 27012 (336) 692-1593 | | | RETIRED | | | |
| | | | c. Employer's Name/Specific Field | | e. Election Sum to Date | |
| | | | YMCA | | \$ 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"/> | JC | Check | | 08/29/2013 | \$ 150.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 550.00 | |
| 5. Total of ALL CRO 1210 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 3,530.00 | |

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 |
| CHECK CHUCK FOR CLEMMONS | | | | | | |
| 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 MILLER 430 SHERWOOD FOREST RD WINSTON SALEM, NC 27104 (336) 761-1130 | | | REAL ESTATE | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | MILLER HATCHER | | 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"/> | JC | Check | | 09/16/2013 | \$ 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 | |
| CARLOS PEREIRA P O BOX 931 CLEMMONS, NC 27012 (336) 345-6633 | | | BUSINESSMAN | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | EMPLOYMENT AGENCY | | 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"/> | JC | Check | | 08/29/2013 | \$ 150.00 | |
| <input type="checkbox"/> | JC | Check | | 09/16/2013 | \$ 100.00 | |
| <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 RUFFIN 4115 SHATTALON WINSTON SALEM, NC 27106 (336) 924-9257 | | | REALTOR | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Real Estate | | 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"/> | JC | Check | | 07/26/2013 | \$ 200.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 550.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 3,530.00 | |

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 | |
| CHECK CHUCK FOR CLEMMONS | | | | | | | |
| 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 | |
| STEVE SESSIONS 5090 STYERS FERRY ROAD LEWISVILLE, NC 27023 (336) 403-8808 | | | | BUSINESSMAN | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | SESSIONS SPECIALTY | | 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"/> | JC | Check | | 08/26/2013 | \$ 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 | |
| JANET STEPPARD 5489 HERITAGE OAKS LANE WINSTON SALEM, NC 27106 (336) 924-4662 | | | | CFO | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | Construction of Buildings | | 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"/> | JC | Check | | 09/05/2013 | \$ 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 | |
| RICK SYLVESTER 1013 GREENHURST RD WINSTON SALEM, NC 27104 (336) 655-3860 | | | | MECHANICAL ENGINEER | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | SYLVESTER & COCKRUM 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 | | |
| <input type="checkbox"/> | JC | Check | | 08/26/2013 | \$ 100.00 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 4. Total only this Page | | | | | | \$ 450.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | \$ 3,530.00 | |

Contributions from Individuals

| | |
|---|-----------------------------|
| Amendment | |
| <input checked="" type="checkbox"/> Yes | <input 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 | |
| CHECK CHUCK FOR CLEMMONS | | | | | | |
| 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 | |
| RONNIE WILLARD 910 SALEM GLEN CT CLEMMONS, NC 27012 (336) 766-5494 | | | RETIREED | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | RJ REYNOLDS | | 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"/> | JC | Check | | 07/26/2013 | \$ 250.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 250.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 3,530.00 | |

In-Kind Contributions

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

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

| | | | |
|--|--|--|------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | 2. ID Number | |
| CHECK CHUCK FOR CLEMMONS | | | |
| 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 | |
| EARL CHARLES HOUSKA 175 NOTTIDGE CT CLEMMONS, NC 27012 (336) 766-7178 | | <input checked="" type="checkbox"/> Individual | |
| | | <input 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 | |
| | | \$ 112.99 | |
| e. Description | | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| PAID FILING FEES | | 07/09/2013 | \$ 5.00 |
| CAMPAIGN STICKERS | | 08/06/2013 | \$ 425.00 |
| | | | \$ |
| 4. Total only this Page | | | \$ 430.00 |
| 5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i> | | | \$ 430.00 |