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	c. ID Number
Committee to Elect Kevin Dodson	7GL9FI
b. Mailing Address (include City, State and Zip Code)	**d. Date Filed**
PO Box 1438 Sanford NC 27331	
	e. Phone Number
	919-356-4159

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2014	10/19/2014	12/31/2014	Katina Stroupe

6. Type of Committee (Check One)

- ☒ Candidate Campaign
- ☐ Party
- ☐ PAC
- ☐ Referendum
- ☐ Independent Expenditure
- ☐ Joint Fundraiser
- ☐ Legal Expense Fund

7. Type of Fund *(if applicable, check one)*

- ☐ Booster Fund
- ☐ Building Fund
- ☐ Other:

8. Number of Fundraisers this Report

1-raffle

9. Type of Report *(check only one type of report from one category)*

Municipal	State/County	Referendum
☐ Organizational	☐ Organizational	☐ Organizational
☐ Thirty-five day	Quarterly	☐ Pre-referendum
☐ Pre-primary	☐ First	☐ Final
☐ Pre-election	☐ Second	☐ Supplemental Final
☐ Pre-runoff	☐ Third	☐ Annual
Semi-annual	☒ Fourth	☐ Special
☐ Mid Year	Semi-annual	
☐ Year End	☐ Mid Year	**10. Special Report Name**
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

11. Account Information

a. Financial Institution Full Name	
First Bank	
b. Purpose	**c. Account Code**
Campaign receipts and expenditures	FB9557
	d. Period Begin Balance
	$

11. Account Information

a. Financial Institution Full Name	
b. Purpose	**c. Account Code**
	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.

Katina Stroupe	Katina Stroupe	1/12/15
Printed Name of Signer	Signature of Appointed Treasurer	Date

FOR OFFICE USE ONLY

Date Received:	1-12-15	Employee:	VG	Delivery Method
Date Postmarked:		Employee:		☐ Normal Mail ☐ Registered Mail
Date Scanned:		Employee:		☒ Hand Delivered ☐ Electronically Filed
Date Data Entered:		Employee:		☐ 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.

RECEIVED
JAN 12 2015
LEE COUNTY

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 Kevin Dodson	Qtrly	7GL9FJ

Start of Election Cycle: January 1, 2014		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 343.28	$ 0
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	$ 550-	$ 1795.00
6) Contributions from Individuals	(CRO-1210)	$ 14.23	$ 2004.07
7) Contributions from Political Party Committees	(CRO-1220)	$ 0	$ 0
8) Contributions from Other Political Committees	(CRO-1230)	$ 0	$ 0
9) Loan Proceeds	(CRO-1410)	$ 0	$ 0
10) Refunds/Reimbursements to the Committee	(CRO-1240)	$ 0	$ 0
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	$ 0	$ 0
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	$ 0	$ 0
11c) Outside Sources of Income	(CRO-1250)	$ 0	$ 0
11d) Legal Expense Fund - Other Sources	(CRO-1270)	$ 0	$ 0
11e) Exempt Purchase Price Sales	(CRO-1265)	$ 0	$ 0
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		$ 564.23	$ 3799.07
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	$ 594.00	$ 1796.17
13b) Contributions to Candidates/Political Committees	(CRO-1310)	$ 0	$ 0
13c) Coordinated Party Expenditures	(CRO-1310)	$ 0	$ 0
14) Aggregated Non-Media Expenditures	(CRO-1315)	$ 0	$ 0
15) Loan Repayments	(CRO-1420)	$ 0	$ 0
16) Refunds/Reimbursements from the Committee	(CRO-1320)	$ 288.90	$ 1287.01
17) In-Kind Contributions	(CRO-1510)	$ 14.23	$ 705.11
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 897.13	$ 3788.169
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 10.38	$ 10.38
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	$ 0	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	$ 0	
22) Debts and Obligations owed by the Committee	(CRO-1610)	$ 0	
23) Debts and Obligations owed to the Committee	(CRO-1620)	$ 0	
24) Account Transfers Within the Committee	(CRO-1720)	$ 0	
25) Administrative Support	(CRO-1710)	$ 0	$ 0
26) Forgiven Loans	(CRO-1440)	$ 0	$ 0
27) 48-Hour Notice Reports Sum	(CRO-2220)	$ 0	$ 0
28) Contributions to be Refunded	(CRO-1215)	$ 0	$ 998.11

Aggregated Contributions from Individuals

Page 1 of 3

Amendment ☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of $50 or less

1. Committee Full Name (and Fund if applicable)	2. ID Number
Committee to Elect Kevin Dodson	7GL9FI

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☑ Add ☐ Remove	FB9557	cash		10/20/2014	$ 10-
☑ Add ☐ Remove	FB9557	cash		10/20/2014	$ 10-
☑ Add ☐ Remove	FB9557	cash		10/20/2014	$ 10-
☑ Add ☐ Remove	FB9557	cash		10/20/2014	$ 30-
☑ Add ☐ Remove	FB9557	cash		10/20/2014	$ 10-
☑ Add ☐ Remove	FB9557	cash		10/20/2014	$ 10-
☑ Add ☐ Remove	FB9557	cash		10/20/2014	$ 10-
☑ Add ☐ Remove	FB9557	cash		10/20/2014	$ 10-
☑ Add ☐ Remove	FB9557	cash		10/23/2014	$ 10-
☑ Add ☐ Remove	FB9557	cash		10/23/2014	$ 10-
☑ Add ☐ Remove	FB9557	cash		10/24/2014	$ 10-
☑ Add ☐ Remove	FB9557	cash		10/24/2014	$ 10-
☑ Add ☐ Remove	FB9557	cash		10/24/2014	$ 10-
☑ Add ☐ Remove	FB9557	cash		10/24/2014	$ 10-
☑ Add ☐ Remove	FB9557	cash		10/27/2014	$ 10-
☑ Add ☐ Remove	FB9557	cash		10/27/2014	$ 10-
☑ Add ☐ Remove	FB9557	cash		10/27/2014	$ 10-
☑ Add ☐ Remove	FB9557	cash		10/27/2014	$ 10-
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 40-
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10-
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 20-
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 20-
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 20-

4. Total only this Page	$ 310.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 550.00

Aggregated Contributions from Individuals

Page 2 of 3

Amendment ☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of $50 or less

1. Committee Full Name (and Fund if applicable)	2. ID Number
Committee to Elect Kevin Dodson	7GL9FI

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
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☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
☑ Add ☐ Remove	FB9557	cash		10/29/2014	$ 10 -
4. Total only this Page					$ 230 -
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*					$ 550 00

Aggregated Contributions from Individuals

Page 3 of 3

Amendment ☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of $50 or less

1. Committee Full Name (and Fund if applicable)	2. ID Number
Committee to Elect Kevin Dodson	7GL9F-I

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☒ Add ☐ Remove	FB91557	Cash		10/29/2014	$ 10-
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
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☐ Add ☐ Remove					$
☐ Add ☐ Remove					$

4. Total only this Page	$ 10-
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 550.00

Contributions from Individuals

Pg 1 of 1

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 Kevin Dodson	7GL9FI

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Kevin Dodson 919-356-4159 520 Valley Rd Sanford NC 27330	candidate	mileage
	c. Employer's Name/Specific Field	e. Election Sum to Date
	candidate	$ 682.66

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☑	—	—	mileage	12/31/14	$ 9.86
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Kathria Stroupe 919-770-6888 301 Steel Bridge Rd Sanford NC 27330	treasurer	mileage
	c. Employer's Name/Specific Field	e. Election Sum to Date
	treasurer	$ 22.85

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☑	—	—	mileage	12/31/14	$ 4.37
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
	c. Employer's Name/Specific Field	e. Election Sum to Date
		$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐					$
☐					$
☐					$

4. Total only this Page	$ 14.23
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 14.23

Contributions to be Reimbursed

Pg 1 of 1

Amendment ☐ Yes ☒ No

Use this form to report Contributions of $1,000 or less to be reimbursed within 7 days.
Reimbursements must be disclosed on the Refunds/Reimbursements Form (CRO-1320).

1. Committee Full Name	2. ID Number
Committee to Elect Kevin Dodson	7GL9FI

3. Contributor Information ☐ Add ☐ Remove

Full Name & Mailing Address of the Payee (the original vendor)	Full Name & Mailing Address of the Reimbursee (the person to whom the campaign check is written)

a. Contribution Description	b. Date (mm/dd/yyyy)	c. Credit Card Y/N	d. Amount
			$

3. Contributor Information ☐ Add ☐ Remove

Full Name & Mailing Address of the Payee (the original vendor)	Full Name & Mailing Address of the Reimbursee (the person to whom the campaign check is written)

a. Contribution Description	b. Date (mm/dd/yyyy)	c. Credit Card Y/N	d. Amount
			$

3. Contributor Information ☐ Add ☐ Remove

Full Name & Mailing Address of the Payee (the original vendor)	Full Name & Mailing Address of the Reimbursee (the person to whom the campaign check is written)

a. Contribution Description	b. Date (mm/dd/yyyy)	c. Credit Card Y/N	d. Amount
			$

3. Contributor Information Add Remove

Full Name & Mailing Address of the Payee (the original vendor)	Full Name & Mailing Address of the Reimbursee (the person to whom the campaign check is written)

a. Contribution Description	b. Date (mm/dd/yyyy)	c. Credit Card Y/N	d. Amount
			$

4. Total only this Page	$ Ø
5. Total of ALL CRO-1215 Pages *(This line goes in line 28 of Detailed Summary Page CRO-1100)*	$ Ø

Other Receipt Sources

Pg 1 of ____ Amendment ☐ Yes ☒ 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 Kevin Dodson	7GL9FI

3. Type of Receipt Source *(Please use separate CRO-1250 forms for each type of Receipt Source.)*

☐ Interest ☐ Contributions from Not-for-Profit Organizations ☐ Outside Sources of Income

4. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Not-for-Profit Federal ID #	c. Outside Source Explanation	d. Comments	e. Election Sum to Date
				$

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
				$
				$

4. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Not-for-Profit Federal ID #	c. Outside Source Explanation	d. Comments	e. Election Sum to Date
				$

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
				$
				$

4. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Not-for-Profit Federal ID #	c. Outside Source Explanation	d. Comments	e. Election Sum to Date
				$

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
				$
				$

5. Total only this Page	$ ∅
6. Total of ALL CRO-1250 Pages *(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)* *(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)* *(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)*	$ ∅

Disbursements

Pg 1 of 1 | Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Committee to Elect Kevin Dodson	7GL9FI

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
First Bank 866-792-4357 PO Box 866 Troy NC 27371		☐ Federal ☒ County: ☐ State ☐ Municipality:	Account Service Charge	$ 102.24

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
FB9557	draft	K	10/21/14	$ 8.00	monthly charge
FB9557	draft	K	11/28/14	$ 8.00	monthly charge

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
First Bank 866-792-4357 PO Box 866 Troy NC 27371		☐ Federal ☒ County: ☐ State ☐ Municipality:	Account Service charge	$ 102.24

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
FB9557	draft	K	12/31/14	$ 8.00	monthly charge
				$	

4. Payee Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
WFJA 919-775-3525 PO Box 3457 Sanford NC 27331		☐ Federal ☒ County: ☐ State ☐ Municipality:	radio ads	$ 570.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
FB9557	check	A	10/29/14	$ 570.00	radio ads
				$	

5. Total only this Page	$ 594.00
6. Total of ALL CRO-1310 Pages *(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)* *(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 594.00

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

Page 1 of 1

Amendment ☐ Yes ☒ 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 Kevin Dodson	7GL9FE

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
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
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☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	

4. Total only this Page	$ Ø
5. Total of ALL CRO-1315 Pages *(This line must be on line 14 of Detailed Summary Page CRO-1100)*	$ Ø

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)**

Refunds/Reimbursements From the Committee

Pg 1 of 1

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 Kevin Dodson	7GL9FI

3. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Type of Committee	h. Original Receipt Date
Kevin Dodson 919-356-4159 520 Valley Rd. Sanford NC 27330	☒ Candidate ☐ PAC ☐ Referendum ☐ Party	10/3/14
	e. Level Registered: ☐ Federal ☒ County: ☐ State ☐ Municipality:	i. Original Receipt Amount: $ 288.90
	f. Purpose Code	j. Election Sum to Date: $ 1287.01

b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments	k. Account Code
Candidate	Candidate	P	FB9557

l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount
check			$ 288.90

3. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Type of Committee	h. Original Receipt Date
	☐ Candidate ☐ PAC ☐ Referendum ☐ Party	
	e. Level Registered: ☐ Federal ☐ County: ☐ State ☐ Municipality:	i. Original Receipt Amount: $
	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
			$

3. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Type of Committee	h. Original Receipt Date
	☐ Candidate ☐ PAC ☐ Referendum ☐ Party	
	e. Level Registered: ☐ Federal ☐ County: ☐ State ☐ Municipality:	i. Original Receipt Amount: $
	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	$ 288.90
5. Total of ALL CRO-1320 Pages *(This line must be on line 16 of Detailed Summary Page CRO-1100)*	$ 288.90

6. Purpose Codes (List detailed disbursement code in (f) above)

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

Pg 1 of ____ | Amendment ☐ Yes ☒ 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
Committee to Elect Kevin Dodson	7GL9FI

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Kevin Dodson 919-356-4159 520 Valley Rd Sanford NC 27330	☐ Individual ☒ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	mileag **d. Election Sum to Date** $ 682.66

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
mileag	12/31/14	$ 9.86
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Katina Strupe 919-770-6881 361 Steel Bridge Rd Sanford NC 27330	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	mileag **d. Election Sum to Date** $ 22.85

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
mileage	12/31/14	$ 4.37
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
	☐ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	 **d. Election Sum to Date** $

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		$
		$
		$

4. Total only this Page	$ 14.23
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 14.23