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
The Committee to Elect Sheriff John W. Ingram	Cau-000000-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Lee Thompson 102 E. Moore St. Southport NC 28461 910-457-5299	owner	Cape Fear Jewelers	Flounder Tourn door prize In-Kind	$ 350.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	O	In-Kind	necklace	8.22.15	$350.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Merrell Thigpen 6707 Netherlands Dr. Wilmington NC 28405 910-350-2667	Sales	Atlantic Shores Distributors	Flounder Tourn drinks	$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	O	In-Kind	drinks	8.22.15	$250.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Michelle Dietz 324 Village Rd NE # F Leland NC 28451 910-371-3371	owner	The Logo Shoppe	Flounder Tourn door prize In kind	$ 30.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	O	In-Kind	Canvas Tote bag	8-22-15	$ 30.00
☐					$
☐					$

4. Total only this Page	$ 630.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 29,102.00

Contributions from Individuals

Pg 63 of 67 | 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
The Committee to Elect Sheriff John W. Ingram V	C0U-000000C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Brian Callahan 5042 market St Wilmington NC 28412 910-792-1300	owner	Batteries & Bulbs	Flounder Tourn door prize In Kind	$ 30.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	O	In Kind	Flashlight	8.22.15	$ 30.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Deanna Peloza 4590 Long Beach Rd Southport NC 28461 910-363-4520	owner	East Coast Sun	Flounder Tourn door prize In Kind	$ 50.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	O	In Kind	Tanny Gift Cert.	8.22.15	$ 50.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Brant McMullen 65 Causeway Dr Ocean Isle Beach NC 28469 910-575-3474	owner	Ocean Isle Fishing Center	Flounder Tourn Raffle In Kind	$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	O	In-Kind	Yeti Cooler	8.22.15	$250.00
☐					$
☐					$

4. Total only this Page	$ 330.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$29,102.00

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
The Committee to Elect Sheriff John W. Ingram V	Cou-000000-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Doug Turner 4700 main St Shallotte NC 28470 910-755-5546	owner	Douglas Diamonds	Golf Tourn Raffle	$ 575.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	O	In-Kind	diamond necklace	9-15-15	$ 575.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Bill McAlliste 1032 old ocean Hwy E Bolivia NC 28422	owner	whitley Paver equipment	Golf Tourn Raffle In Kind	$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	O	In Kind	Rambler Yeti Cooler	9-16-15	$250.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Lorraine Cooper 1802 Beech Rd Southport NC 28464 910-880-9954	owner	The Memory Cottage	Flounder Tourn Raffle	$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	O	In Kind	Life Guard Chair	8-22-15	$250.00
☐					$
☐					$

4. Total only this Page	$ 1075.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 29,102.00

Contributions from Individuals

Pg 65 of 67 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
The Committee to Elect Sheriff John W. Ingram	Cau-000000-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Dean Spatholt 1045 River Rd Calabash NC 28467 910-579-8888	owner	Boundry House Rest	Flounder Tourn door prize In Kind	$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	O	Inkind	Gift Cert's	8.22.15	$250.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Alice Raynor 489 Maplewood Dr NW Calabash, NC 28467 910-579-9577	owner	It's all about Embroidery	Flounder Tourn	$250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	O	In-Kind	Hats	8.22.15	$250.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Nesbitt Nobles 600 W. Brunswick St Southport NC 28461 866. 395-3474	owner	The Tackle Box	Flounder Tourn door prize In-Kind	$ 350.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	O	In Kind	Fishing Rods; Reels	8.22.15	$350.00
☐					$
☐					$

4. Total only this Page	$ 850.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 29,102.00

Contributions from Individuals

Pg 64 of 67 | 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
The Committee to Elect Sheriff John W. Ingram	Cau-000000-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Bart Long PO Box 355 Bolivia NC 28422 910-253-2777	Deputy	BCSO	Flounder Tourn door prize In-kind	$ 280.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	O	In kind	Cooler	8.22.15	$ 280.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Kevin Williams 6332 Oleander Dr Wilmington NC 28403 910-392-3500	owner	Intercoastal Tackle	Flounder Tourn door prize	$ 20.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	O	In kind	Fishing Supplies	8.22.15	$ 20.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
George Murray 1144 E. Cutlar Crossing Ste 102 Leland NC 28451	owner	murray art Gallery	golf tourn Raffle In kind	$ 125.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	O	In kind	Framed Print	9.16.15	$
☐					$
☐					$

4. Total only this Page	$ 425.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 29102.00

Contributions from Individuals

Pg 67 of 67 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
The Committee to Elect Sheriff John W. Ingram V	C0U-000000-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Tom Miller 8951 Ocean Hwy E Leland NC 28451	owner	Willoughby's	golf tourn Raffle In kind	$ 181.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	O	In kind	coll. edition Jack Daniels	9-16-15	$ 181.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Nick Hoff 150 Holden Beach Rd Shallotte NC 28470	owner	Vapa Boss	golf tourn door prize In-kind	$ 40.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	O	In kind	Gift Cert	9-16-15	$ 40.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	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	$ 321.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 29102.00

Disbursements

Pg 1 of 12 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
The Committee to Elect Sheriff John W. Ingram V	C[illegible]

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
The Main Attraxxion 525 Wesley Trail Supply NC 28462 910-515-5847		☐ Federal ☒ County: ☐ State ☐ Municipality:	Flounder Tourn. Shirts	$ 4433.98

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1346	C	7-1-15	$ 4433.98	Tee Shirt Printing
				$	

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
US Postal Service S. Brunswick office 1587 Seaside Rd SW Ocean Isle Beach NC 28469		☐ Federal ☒ County: ☐ State ☐ Municipality:	PO Box 1yr Rental	$ 56.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1347	K	7-7-15	$ 56.00	PO Box Rent.
				$	

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
Patti Howell Holden Beach Rd Shallotte NC 28470 910-880-4935		☐ Federal ☒ County: ☐ State ☐ Municipality:	gas	$ 91.25

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1348	C	7-7-15	$ 91.25	gas - Flounder Tourn
				$	

5. Total only this Page	$ 4581.23
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)*	$ 19,645.58

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)**

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

Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)
Committee to Elect Sheriff John W Ingram V

2. ID Number
Rev-000000-C-001

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
Pythagoras Masonic Lodge PO Box 10027 #249 Southport NC 28461 910-457-0323		☐ Federal ☒ County: ☐ State ☐ Municipality:	Golf Tourn.	$ 100.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1349	H	7-15-15	$100.00	Hole Sponsor
				$	

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
Michelle Ingram 6815 Myrtlehead Rd Ash NC 28420		☐ Federal ☒ County: ☐ State ☐ Municipality:	Rotary Dues	$ 225.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1350	H	7-17-15	$225.00	Rotary Dues
				$	

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
Brunswick Co Parks & Rec 69 Stamp Act Dr #M Bolivia NC 28422 910-253-2670		☐ Federal ☒ County: ☐ State ☐ Municipality:	Softball Team	$ 500.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1351	H	7-17-15	$500.00	softball team
				$	

5. Total only this Page $ 825.00

6. Total of ALL CRO-1310 Pages $ 19645.58
(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)

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)

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

Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)
Committee to Elect Sheriff John W Ingram V

2. ID Number
Brn-000000-C-001

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
Brunswick Co GOP PO Box 8199 Ocean Isle Beach NC 28469 910-754-4011		☐ Federal ☑ County: ☐ State ☐ Municipality:	Lincoln Dinner	$ 1000.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1352	H	8-2-15	$ 1000.00	Dinner/Table
				$	

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
West Brunswick Athletic Booster 550 Whiteville Rd Shallotte NC 28470		☐ Federal ☒ County: ☐ State ☐ Municipality:	Sign	$ 400.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK # 1354	H	8.3.15	$ 400.00	Sign
				$	

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
Nation Wide Ins Doyle Dennis Agency 701 N. Howe St Ste 6 Southport NC 28461 910-457-6788		☐ Federal ☐ County: ☐ State ☐ Municipality:	Ins policy Flander Town	$ 365.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1353	C	8.3.15	$ 365.00	Flander Town
				$	

5. Total only this Page $ 1765.00

6. Total of ALL CRO-1310 Pages $ 19 645.58
(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)

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)

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

Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)
Committee to Elect Sheriff John W Ingram V

2. ID Number
Non-000000-C001

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
Paws-Ability PO Box 6174 Ocean Isle Beach NC 28469 910-579-4707		☐ Federal ☒ County: ☐ State ☐ Municipality:	Bike Run Fundraiser	$ 500.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1356	H	8-12-15	$500.00	Bike Run
				$	

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
North Brunswick Republican Club PO Box 281 Leland NC 28451		☐ Federal ☒ County: ☐ State ☐ Municipality:	dues	$ 250.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK B57	H	9-21-15	$250.00	dues
				$	

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
Jamie Bruner 5468 R.L. Lewis Ln Bolivia NC 28422 910-712-4582		☐ Federal ☒ County: ☐ State ☐ Municipality:	1st place Flander Tourn.	$ 1800.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1358	C	8-22-15	$1400.00	Flander Tourn
O	CK B63	C	9-22-15	$400.00	Calabria Flander Tourn

5. Total only this Page $ 2550.00

6. Total of ALL CRO-1310 Pages $ 19645.58
(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)

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)

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

Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)
Committee to Elect Sheriff John W Ingram V

2. ID Number
Com-000000-C-001

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
Jamie Bruner 5468 R.L. Lewis Lane Bolivia NC 28422 910-712-4582		☐ Federal ☒ County: ☐ State ☐ Municipality:	Flander Tourn	$ 2500.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1365	C	8.22.15	$ 700.00	High Roller Flander Tourn.
				$	

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
John Theodoratis 129 McQuillan Dr Wilmington NC 28412 910-233-1471		☐ Federal ☒ County: ☐ State ☐ Municipality:	Flander Tourn	$ 1100.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1359	C	8.22.15	$ 900.00	Flander Tourn
O	CK 1364	C	8.22.15	$ 200.00	2nd Calcutta Flander Tourn

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
Anthony Bridgeman 4701 Southgate Blvd Southport NC 28461 910-279-6081		☐ Federal ☒ County: ☐ State ☐ Municipality:	Flounder Tourn	$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1360	C	8.22.15	$ 700.00	Flander Tourn
				$	

5. Total only this Page $ 2500.00

6. Total of ALL CRO-1310 Pages $ 19645.58
(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)

7. Purpose Codes (List detailed expenditure code in (h.) above)

A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund
O* - Other			

* Codes require detailed explanation in required remarks field (k)

Disbursements

Pg 6 of 12 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
The Committee to Elect Sheriff John W Ingram V	Cal-000000-C-001

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
Charlie Mills 1004 Fairley St SE Southport NC 28461 910-880-4901		☐ Federal ☒ County: ☐ State ☐ Municipality:	Flounder Town	$ 500.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1361	C	7.22.15	$ 500.00	Flounder Town
				$	

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
Fred Davis 221 Normandy Dr Wilmington NC 28412 910-233-8374		☐ Federal ☒ County: ☐ State ☐ Municipality:	Flounder Town	$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1362	C	7.22.15	$ 300.00	Flounder Town
O	CK 1369	C	7.22.15	$ 50.00	service Flounder Town

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
John Theodorakis 129 McQuillan Dr Wilmington NC 28412 910-233-1471		☐ Federal ☒ County: ☐ State ☐ Municipality:	Flounder Town	$ 1500.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1366	C	7.22.15	$ 400.00	Flounder Town
				$	

5. Total only this Page $ 1250.00

6. Total of ALL CRO-1310 Pages $ 19645.58

(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)

7. Purpose Codes (List detailed expenditure code in (h.) above)

A* - Media	**B* - Printing**	**C* - Fundraising**	D - To Another Candidate
E - Salaries	**F* - Equipment**	G - Political Party	**H* - Holding Public Office Expenses**
I - Postage	J - Penalties	**K* - Office Expenses**	**Q* - Donation to Legal Expense Fund**
O* Other			

*** Codes require detailed explanation in required remarks field (k)**

Disbursements

Pg 7 of 12 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
The Committee to Elect Sheriff John W. Ingram ✓	C[illegible]-C001

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
[illegible] Tammy Burris 417 Sherraw River Rd Shallotte NC 28450 910-253-2777		☐ Federal ☑ County: ☐ State ☐ Municipality:	Flander Town	$ 600.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1367	C	8.22.15	$ 600.00	1st Dum. Flander Town
				$	

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
Jeff Shaver 40379 Tower Rd Atlantic Beach NC 28512 704-791-3882		☐ Federal ☑ County: ☐ State ☐ Municipality:	Flander Town	$ 300.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1368	C	8.22.15	$ 300.00	2nd Dum
				$	

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
Roman Hewett 1281 Seashare Hills Rd Supply NC 28462		☐ Federal ☑ County: ☐ State ☐ Municipality:	Flander Town	$ 50.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1371	C	8.22.15	$ 50.00	Jr. Flander
				$	

5. Total only this Page $ 950.00

6. Total of ALL CRO-1310 Pages $ 19 645.58

(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)

7. Purpose Codes (List detailed expenditure code in (h.) above)

A* - Media	**B* - Printing**	**C* - Fundraising**	D - To Another Candidate
E - Salaries	**F* - Equipment**	G - Political Party	**H* - Holding Public Office Expenses**
I - Postage	J - Penalties	**K* - Office Expenses**	**Q* - Donation to Legal Expense Fund**
O* Other			

*** Codes require detailed explanation in required remarks field (k)**

Disbursements

Pg 8 of 12 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
The Committee to Elect Sheriff John W. Ingram	C01-000000-C001

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
Kayla Bruner 5468 R.L. Lewis Ln Bolivia NC 28422 910-520-8356		☐ Federal ☒ County: ☐ State ☐ Municipality:	Flounder Tourn	$ 50.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1370	C	8-22-15	$ 50.00	Lady Angler
				$	

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
4 Season Trophy Shop 221 S. Kerr Ave Wilmington NC 28403 910-799-8840		☐ Federal ☒ County: ☐ State ☐ Municipality:	Golf Tourn	$ 421.41

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1372	C	9-1-15	$421.41	Trophies Golf
				$	

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
Smithfield Bar-B-Q 4670 East Coast Lane Shallotte NC 28470 910-754-5522		☐ Federal ☒ County: ☐ State ☐ Municipality:	Luncheon	$ 199.67

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1373	H	9-1-15	$ 199.67	Luncheon
				$	

5. Total only this Page $ 671.08

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)

$19645.58

7. Purpose Codes (List detailed expenditure code in (h.) above)

A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund
O* Other			

* Codes require detailed explanation in required remarks field (k)

Disbursements

Pg 9 of 12 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
The Committee to Elect Sheriff John W Ingram	C04-000000-C-001

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
NAACP Brunswick County PO BOX 364 Supply NC 28461 910-253-0923		☐ Federal ☒ County: ☐ State ☐ Municipality:	Freedom Fund ~~[illegible]~~ ad	$ 200.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1374	H	9-9-15	$ 200.00	Banquet ad
				$	

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
Meadow lands Golf Club 1000 Meadow lands Trail Calabash NC 28467 910-287-7529		☐ Federal ☒ County: ☐ State ☐ Municipality:	Golf Tourn.	$ 2926.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	debit Card	C	9-19-15	$ 638.00	Food
O	debit Card	C	9-19-15	$ 2288.00	88 Golfers

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
MC Donalds 7105 Ocean Hwy SW Sunset Beach NC 28468 910-575-2818		☐ Federal ☒ County: ☐ State ☐ Municipality:	Golf Tourn.	$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	debit Card	C	9-19-15	$ 160.13	Food (Breakfast)
				$	

5. Total only this Page $ 3286.13

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)

$ 19645.58

7. Purpose Codes (List detailed expenditure code in (h.) above)

A* - Media	**B* - Printing**	**C* - Fundraising**	D - To Another Candidate
E - Salaries	**F* - Equipment**	G - Political Party	**H* - Holding Public Office Expenses**
I - Postage	J - Penalties	**K* - Office Expenses**	**Q* - Donation to Legal Expense Fund**
O* Other			

*** Codes require detailed explanation in required remarks field (k)**

Disbursements

Pg 10 of 12 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
The Committee to Elect Sheriff John W Ingram	C04-000000e-001

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
Walmart 550 Hwy 17 N. N. Myrtle Beach SC 29582 843-281-8352		☐ Federal ☒ County: ☐ State ☐ Municipality:	Golf Tourn	$ 196.86

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	debit Card	C	9-18-19	$ 196.86	water & Soda
				$	

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
My Heart Sings 4436 Main St. Shallotte NC 28470 910-755-PIAN		☐ Federal ☐ County: ☐ State ☐ Municipality:	Alzheimer Fundraiser	$ 100.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	debit Card	H	9-26-15	$ 100.00	our heart sings donation
				$	

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
Communities in Schools Po Box 10087 Southport NC 28461 910-457-3494		☐ Federal ☒ County: ☐ State ☐ Municipality:	Gala	$ 300.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK	H	10-28-15	$ 300.00	Gala Tickets
				$	

5. Total only this Page $ 596.86

6. Total of ALL CRO-1310 Pages $ 19645.58

(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)

7. Purpose Codes (List detailed expenditure code in (h.) above)

A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund
O* Other			

* Codes require detailed explanation in required remarks field (k)

Disbursements

Pg 11 of 12 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
The Committee to Elect Sheriff John W. Ingram V	C01-00000C-001

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
Brunswick County Republican Women 971 Old Ocean Hwy Bolivia NC 28422 910-754-4011		☐ Federal ☒ County: ☐ State ☐ Municipality:	Christmas gala	$ 500.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1376	H	11-25-15	$ 500.00	Table - gala
				$	

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
Wells Park Products 750 Croomsbridge Rd Burgow NC 28425 1-800-821-5121		☐ Federal ☒ County: ☐ State ☐ Municipality:	Luncheon	$ 75.50

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1377	H	12-16-15	$ 75.50	BBQ lunch
				$	

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
Pay Pal 2211 N. 1st St San Jose California 95131		☐ Federal ☒ County: ☐ State ☐ Municipality:	account Fees	$ 84.98

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	debit	O	8-22-15	$ 84.98	service charge charge Acct
				$	

5. Total only this Page $ 660.48

6. Total of ALL CRO-1310 Pages $ 19645.58

(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)

7. Purpose Codes (List detailed expenditure code in (h.) above)

A* - Media	**B* - Printing**	**C* - Fundraising**	D - To Another Candidate
E - Salaries	**F* - Equipment**	G - Political Party	**H* - Holding Public Office Expenses**
I - Postage	J - Penalties	**K* - Office Expenses**	**Q* - Donation to Legal Expense Fund**
O* Other			

*** Codes require detailed explanation in required remarks field (k)**

Disbursements

Pg 12 of 12 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
The Committee to Elect Sheriff John W Ingram V	C01-00000-C-001

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
US Post office 1587 Seaside Rd SW Ocean Isle Beach NC 910-579-3480		☐ Federal ☒ County: ☐ State ☐ Municipality:	Stamps	$ 9.80

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
O	CK 1355	I	8.4-15	$ 9.80	Stamps
				$	

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
		☐ Federal ☐ County: ☐ State ☐ Municipality:		$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				$	
				$	

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
		☐ Federal ☐ County: ☐ State ☐ 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 $ 9.80

6. Total of ALL CRO-1310 Pages $ 19645.58

(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)

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
The Committee to Elect Sheriff John W Ingram V	Gau-000000-C-001

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	0	deb.t	0	7-21-15	$ 4.00	Bank Service Charge
☐ Add ☐ Remove	0	deb.t	0	8-21-15	$ 4.00	Bank Service Charge
☐ Add ☐ Remove	0	deb.t	0	9-21-15	$ 4.00	Bank Service Charge
☐ Add ☐ Remove	0	deb.t	0	10-21-15	$ 4.00	Bank Service Charge
☐ Add ☐ Remove	0	deb.t	0	11-21-15	$ 4.00	Bank Service Charge
☐ Add ☐ Remove	0	deb.t	0	12-21-15	$ 4.00	Bank Service Charge
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
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☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	
☐ Add ☐ Remove					$	

4. Total only this Page	$ 36.00
5. Total of ALL CRO-1315 Pages *(This line must be on line 14 of Detailed Summary Page CRO-1100)*	$ 36.00

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)**

In-Kind Contributions

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
The Committee to Elect Sheriff John W. Ingram	C0U-000000[illegible]

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Heather Hardwick 1225 Blakeway St #304 Daniels Island SC 29492 919-623-3915	☑ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Flounder Tourn d. Election Sum to Date: $ 150.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Door Prizes Flounder Tourn. (4) Gift Cards	8-17-15	$ 150.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Clark Callahan 1045 River Rd Calabash, NC 28467 910-579-8888	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	golf tournament door prize d. Election Sum to Date: $ 500.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
4 Gift Card. Boundry House Rest.	8-27-15	$ 100.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Forrest King 9962 Beach Dr Calabash, NC 28467 910-579-2093	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	golf tourn. door prize d. Election Sum to Date: $ 50.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
2 Shark Cell phone Pals & Coffee Cups	9-9-15	$ 50.00
		$
		$

4. Total only this Page	$ 300.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 5566.00

In-Kind Contributions

Pg 2 of 14 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
The Committee to Elect Sheriff John W Ingram V	Can-000000-C001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Clark Callahan 720 Hwy 17 Little River, SC 29566 843-399-8888	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	golf Tourn.
		d. Election Sum to Date: $ 600.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
4 Gift Cert. Clarks Seafood & Chop House	9-2-15	$ 100.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Henry Bennett 6205 Old Shallotte Rd Ocean Isle Beach NC 28469 910-287-3081	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	golf Tourn
		d. Election Sum to Date: $ 150.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
4 Rounds of golf @ Crow Creek	9-7-15	$ 150.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
C.W. Hamilton III 497 Lockwood Folly Rd SW Bolivia, NC 28422 910-842-1773	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	golf Tourn
		d. Election Sum to Date: $ 100.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Gift Cert. Anglers Marine	9-10-15	$ 100.00
		$
		$

4. Total only this Page	$ 350.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 5566.00

In-Kind Contributions

Pg 3 of 14 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
The Committee to Elect Sheriff John W Ingram ✓	C04-00000-C001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Tim Madison 4924 Main St Shallotte, NC 28470 910-754-7229	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	golf Tourn door prize d. Election Sum to Date: $ 100.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
4 gift Cert. & 4 tee shirts, Duffers	9-3-15	$ 100.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Kevin Richards 2120 Sea Mt. Hwy N. Myrtle Beach, SC 29582 843-280-5200	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Door Prize golf Tourn d. Election Sum to Date: $ 50.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Gift Cert @ Fillings Rest.	9-15-15	$ 50.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Bobby Harrelson 1800 Linkwood Dr. Leland NC 28451 910-383-0999	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Door Prize golf Tourn d. Election Sum to Date: $ 100.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
2 round golf Magnolia Greens	9-8-15	$ 100.00
		$
		$

4. Total only this Page	$ 250.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 5566.00

In-Kind Contributions

Pg 4 of 14 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
The Committee to Elect Sheriff John W Ingram V	C04-000000-C001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
Brian Cheers 45 Nabe Dr Shallotte NC 28470 910-754-2811	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Door Prize golf Tourn	$ 50.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
4 oil Changes Nabe Dodge	9-9-15	$ 50.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
Del Williamson 1300 Pearl Blvd Calabash NC 28467 910-579-8132	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Door Prize golf Tourn	$ 150.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
4 rounds golf @ The Pearl	9-4-15	$ 150.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
Jamie Milliken 1455 Phelps St SW Shallotte NC 28470 910-253-5901	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Door Prize golf Tourn	$ 50.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Gift Cert. @ Shallotte Electric	9-5-15	$ 50.00
		$
		$

4. Total only this Page	$ 250.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 5566.00

In-Kind Contributions

 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
The Committee to Elect Sheriff John W Ingram	C0y-000000-C001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date	e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Buster Dawless 599 Seaside Rd SW Ocean Isle Beach, NC 28469 910-595-5463	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Door prize gaf Town	$ 100.00	Pest Control @ Strand Pest	8-31-15	$ 100.00
						$
						$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date	e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Pat Cullifer 3117 Thistlewood Dr Leland, NC 28451 910-465-1293	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	door prize gaf town	$ 150.00	Framed Print ECU Football	9-8-15	$ 150.00
						$
						$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date	e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
John Barrett 445 Holden Beach Rd Shallotte NC 28470 910-754-8207	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Door prize gaf Town	$ 25.00	1 0:1 Charge @ Barretts Serv.	9-8-15	$ 25.00
						$
						$

4. Total only this Page	$ 275.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 5566.00

In-Kind Contributions

Pg 6 of 14 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
The Committee to Elect Sheriff John W Ingram	C04-00000-C001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
Gregg Nicks 1407 13th Ave N Myrtle Beach SC 29582 843-249-0900	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Door Prize gaf Town	$ 100.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
2 gift Cert. @ Boardwalk Billy's	8.27.15	$ 100.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
Dennis Walsh 117 Village Rd Leland NC 28451 910-399-7924	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Door prize gaf Town	$ 25.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Gift Cert @ Charlie MacGroders	9-7-15	$ 25.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
Jennifer Inman 4729 main St Shallotte, NC 28470 910-754-6200	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	door prize gaf Town	$ 35.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Bird House	9.2.15	$ 35.00
		$
		$

4. Total only this Page	$ 160.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 5566.00

In-Kind Contributions

Pg 7 of 14 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
The Committee to Elect Sheriff John W Ingram	Cay-000000-C001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Cedric Heweatt 4733 Main St Shallotte NC 28470 910-448-0396	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	door prize golf tourn d. Election Sum to Date $ 20.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Car Wash @ Dynamic Dynamite Detail	9.3.15	$ 20.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Ray Zeno 4734 main St Shallotte NC 28470 910-754-5280	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	door prize golf tourn d. Election Sum to Date $ 50.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
2 lunch Buffets @ Zeno's Garden	9-8-15	$ 50.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Kyle Bias 2650 Ocean Hwy W Shallotte, NC 28470 910-377-1359	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	door prize golf tourn d. Election Sum to Date $ 100.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
20:1 Charges & tire rot. @ Blacks Tire	9-2-15	$ 100.00
		$
		$

4. Total only this Page	$ 170.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 5566.00

In-Kind Contributions

Pg 9 of 14 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
The Committee to Elect Sheriff John W Ingram V	C04-000000-C001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Cindy Roach 3434 Holden Beach Rd SW Holden Beach NC 28462 910-619-9618	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Flounder Tourn d. Election Sum to Date $ 80.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Bracelet & Tervis Cup door prize	8.22.15	$ 80.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Melody Bellamy 125 Village Rd SW Shallotte NC 28470	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Flounder Tourn d. Election Sum to Date $ 100.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Koozies	8.22.15	$ 100.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Patrick Jones 121 E Moore St Southport NC 28464 910-457-0433	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Flounder Tourn d. Election Sum to Date $ 100.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Gift Certificate	8.22.15	$ 100.00
		$
		$

4. Total only this Page	$ 280.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 5566.00

In-Kind Contributions

Pg 9 of 14 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
The Committee to Elect Sheriff John W Ingram	C04-000000-C001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
Lee Thompson 102 E. Moore St Southport NC 28461 910-457-5299	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Flounder Tourn	$ 350.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
14 kt Flounder Charm & necklace	8-22-15	$ 350.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
Merrell Thigpen 6707 Netherlands Dr Wilmington NC 28405 910-350-2667	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Flounder Tourn	$ 250.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
drinks & glasses	8-22-15	$ 250.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
Michelle Dietz 324 Village Rd NE #F Leland NC 28451 910-371-3371	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Flounder Tourn	$ 30.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Canvas Tote (Door Prize)	8.22.15	$ 30.00
		$
		$

4. Total only this Page	$ 630.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 5566.00

In-Kind Contributions

Pg 10 of 14 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
The Committee to Elect Sheriff John W Ingram V	C04-000000-C001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Brian Callahan 5042 Market St Wilmington NC 28412 910-792-1300	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Flounder Tourn d. Election Sum to Date $ 30.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Flashlight (Door Prize)	8.22.15	$ 30.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Deanna Peloza 4590 Long Beach Rd Southport NC 28461 910-363-4520	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Flounder Tourn d. Election Sum to Date $ 50.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Tanning Gift Cert (Door Prize)	8.22.15	$ 50.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Brant McMullen 65 Causeway Dr. Ocean Isle Beach NC 28469 910-575-3474	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Flounder Tourn d. Election Sum to Date $ 250.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Raffle Yeti Cooler	8.22.15	$250.00
		$
		$

4. Total only this Page	$ 330.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 5566.00

In-Kind Contributions

 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
The Committee to Elect Sheriff John W Ingram	Cay-000000-C001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Doug Turner 4700 Main St Shallotte NC 28470 910-755-5546	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Raffle prize golf Tourn d. Election Sum to Date: $ 575.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
diamond necklace	9-15-15	$ 575.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Bill McAllister 1032 old ocean Hwy E. Bolivia NC 28422	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Raffle prize golf Tourn d. Election Sum to Date: $

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Rambler Yeti Cooler	9-16-15	$ 250.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Lorraine Cooper 1802 Beach Rd Southport NC 28464 910-880-9954	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Founder Tourn d. Election Sum to Date: $ 250.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Chair / Raffle door prize	8-22-15	$ 250.00
		$
		$

4. Total only this Page	$ 1075.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 5566.00

In-Kind Contributions

Pg 12 of 14 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
The Committee to Elect Sheriff John W Ingram	C04-000000-C001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
Dean Spatholt 1045 River Rd Calabash NC 28467 910-579-8888	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Flounder Tourn	$ 250.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Gift Cert's (Door Prize)	8.22.15	$ 250.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
Alice Rayner 489 Maplewood Dr NW Calabash NC 28467 910-579-9577	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Flounder Tourn	$ 250.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Hats	8.22.15	$ 250.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
Nesbitt Nobles 600 W Brunswick St. Southport NC 28461 866-395-3474	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Flounder Tourn	$ 350.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Fishing Rods & Reels Door Prize	8.22.15	$ 350.00
		$
		$

4. Total only this Page	$ 850.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 5566.00

In-Kind Contributions

 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
The Committee to Elect Sheriff John W Ingram ✓	Coy-00000-C-001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Bart Long PO Box 355 Bolivia NC 28422 910-253-2777	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Flounder Tourn d. Election Sum to Date $280.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Cooler (Door Prize)	8.22.15	$280.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Kevin Williams 6332 Olander Dr Wilmington NC 28403 910-392-3500	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Flounder Tourn d. Election Sum to Date $ 20.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Fishing Bucket/Stickers door prize	8.22.15	$20.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
George Murray 1144 E. Cutlar Crossing Rd Leland NC 28451	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Framed Print golf tourn d. Election Sum to Date $ 125.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Framed print : 3 sketches	9-16-15	$ 125.00
		$
		$

4. Total only this Page	$ 425.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 5566.00

In-Kind Contributions

 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
The Committee to Elect Sheriff John W Ingram	C4y-000000-C001

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Tom Miller 8951 Ocean Hwy E. Leland NC 28451	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	Raffle golf tourn d. Election Sum to Date $ 181.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Collectors Edition Jack Daniels	9.16.15	$ 181.00
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
Nick Hoff 150 Holden Beach Rd Shallotte NC 28470	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	golf tourn door prize d. Election Sum to Date $ 40.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
gift certificate vape Boss	9.16.15	$ 40.00
		$
		$

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	$ 221.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 5566.00