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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C
b. Mailing Address (include City, State and Zip Code)	**d. Date Filed**
PO BOX 363 NEWTON, NC 28658	04/28/2014
	e. Phone Number
	828-244-1182

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2014	01/01/2014	04/19/2014	FRED W. LAXTON

6. Type of Committee (Check One)

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

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

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

8. Number of Fundraisers this Report

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	
PEOPLES BANK	
b. Purpose	**c. Account Code**
CAMPAIGN FINANCE	THW
	d. Period Begin Balance
	$ 3962.62

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.

FRED W. LAXTON — Printed Name of Signer

Fred W Laxton — Signature of Appointed Treasurer

04/28/2014 — Date

FOR OFFICE USE ONLY

Date Received: _____

Date Postmarked: _____

Date Scanned: _____

Date Data Entered: _____

RECEIVED
APR 28 2014
By

Employee: _____

Employee: _____

Employee: _____

Employee: _____

Delivery Method

- ☐ Normal Mail
- ☐ Registered Mail
- ☐ Hand Delivered
- ☐ Electronically Filed
- ☐ Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

Amendment ☐ Yes ☒ No

Use this form to summarize all disclosure reporting forms and to total monetary information.

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	FIRST QTR PLUS	KDU13C

Start of Election Cycle: January 1, 2011		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 3962.62	$ -0-
RECEIPTS			
5) Aggregated Contributions from Individuals	*(CRO-1205)*	$ 1320.00	$ 1910.00
6) Contributions from Individuals	*(CRO-1210)*	$ 14010.00	$ 21539.40
7) Contributions from Political Party Committees	*(CRO-1220)*	$	$
8) Contributions from Other Political Committees	*(CRO-1230)*	$	$
9) Loan Proceeds	*(CRO-1410)*	$	$
10) Refunds/Reimbursements To the Committee	*(CRO-1240)*	$	$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	*(CRO-1250)*	$	$
11b) Contributions from Not-for-Profit Organizations	*(CRO-1250)*	$	$
11c) Outside Sources of Income	*(CRO-1250)*	$	$
11d) Legal Expense Fund – Other Sources	*(CRO-1270)*	$	$
11 e) Exempt Purchase Price Sales	*(CRO-1265)*	$	$
12) TOTAL RECEIPTS *(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)*		$ 15330.00	$ 23449.40
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	*(CRO-1310)*	$ 14377.16	$ 17875.14
13b) Contributions to Candidates/Political Committees	*(CRO-1310)*	$	$
13c) Coordinated Party Expenditures	*(CRO-1310)*	$	$
14) Aggregated Non-Media Expenditures	*(CRO-1315)*	$	$
15) Loan Repayments	*(CRO-1420)*	$	$
16) Refunds/Reimbursements From the Committee	*(CRO-1320)*	$	$ 329.40
17) In-Kind Contributions	*(CRO-1510)*	$ 1110.00	$ 1439.40
18) TOTAL EXPENDITURES *(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)*		$ 15487.16	$ 19643.94
19) Cash on Hand at End *(Add lines 4 and 12 together, then subtract line 18)*		$ 3805.46	$ 3805.46
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	*(CRO-1330)*	$	
21) Outstanding Loans (incl. ones from other campaigns)	*(CRO-1430)*	$	
22) Debts and Obligations owed By the Committee	*(CRO-1610)*	$	
23) Debts and Obligations owed To the Committee	*(CRO-1620)*	$	
24) Account Transfers Within the Committee	*(CRO-1720)*	$	
25) Administrative Support	*(CRO-1710)*	$	$
26) Forgiven Loans	*(CRO-1440)*	$	$
27) 48-Hour Notice Reports Sum	*(CRO-2200)*	$	$
28) Contributions to be Refunded	*(CRO-1215)*	$	$

Aggregated Contributions from Individuals

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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

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	THW	CASH		01/09/2014	$ 50.00
☒ Add ☐ Remove	THW	CHECK		01/28/2014	$ 50.00
☒ Add ☐ Remove	THW	CASH		02/12/2014	$ 50.00
☒ Add ☐ Remove	THW	CASH		02/12/2014	$ 50.00
☒ Add ☐ Remove	THW	CASH		02/14/2014	$ 20.00
☒ Add ☐ Remove	THW	CHECK		02/16/2014	$ 50.00
☒ Add ☐ Remove	THW	CHECK		02/16/2014	$ 50.00
☒ Add ☐ Remove	THW	CHECK		02/18/2014	$ 25.00
☒ Add ☐ Remove	THW	CASH		02/20/2014	$ 50.00
☒ Add ☐ Remove	THW	CASH		02/20/2014	$ 50.00
☒ Add ☐ Remove	THW	CHECK		02/24/2014	$ 50.00
☒ Add ☐ Remove	THW	CHECK		02/24/2014	$ 35.00
☒ Add ☐ Remove	THW	CHECK		03/04/2014	$ 50.00
☒ Add ☐ Remove	THW	CASH		03/10/2014	$ 40.00
☒ Add ☐ Remove	THW	CASH		03/10/2014	$ 50.00
☒ Add ☐ Remove	THW	CASH		03/10/2014	$ 50.00
☒ Add ☐ Remove	THW	CASH		03/10/2014	$ 50.00
☒ Add ☐ Remove	THW	CASH		03/17/2014	$ 50.00
☒ Add ☐ Remove	THW	CHECK		04/02/2014	$ 50.00
☒ Add ☐ Remove	THW	CASH		04/07/2014	$ 50.00
☒ Add ☐ Remove	THW	CASH		04/07/2014	$ 50.00
☒ Add ☐ Remove	THW	CASH		04/07/2014	$ 50.00

4. Total only this Page	$ 1020.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 1320.00

Aggregated Contributions from Individuals

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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

3. Contributor Information

a. Amend		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☒	Add	THW	CASH		04/07/2014	$ 50.00
☐	Remove					
☒	Add	THW	CASH		04/07/2014	$ 50.00
☐	Remove					
☒	Add	THW	CASH		04/07/2014	$ 50.00
☐	Remove					
☒	Add	THW	CHECK		04/08/2014	$ 50.00
☐	Remove					
☒	Add	THW	CHECK		04/17/2014	$ 50.00
☐	Remove					
☒	Add	THW	CHECK		04/17/2014	$ 50.00
☐	Remove					
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4. Total only this Page	$ 300.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 1320.00

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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

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
TIM HINNANT 320 EAST HAYWOOD ST WENDELL, NC 27591	ADMINISTRATOR GCC	STATE OF NC		$ 150.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CASH		01/09/2014	$ 50.00
☐	THW	CHECK		04/01/2014	$ 100.00
☐					$

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
L. DAVID HUFFMAN 1112 SPRUCEWOOD LANE NEWTON, NC 28658	EXECUTIVE DIRECTOR GCC	STATE OF NC		$ 1500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		03/11/2014	$ 500.00
☐	THW	CHECK		04/07/2014	$ 500.00
☐					$

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
CHESTER SUTTON 1747 FAIRWAY DRIVE NEWTON, NC 28658	RETIRED	LAW ENFORCEMENT		$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		01/21/2014	$ 250.00
☐					$
☐					$

4. Total only this Page	$ 1400.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 14010.00

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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

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
CAROLYN HUFFMAN 3614 HERMAN SIPE RD CONOVER, NC 28613	RETIRED	BEST ATTEMPT		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		01/21/2014	$ 100.00
☐					$
☐					$

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
JAMIE PARSONS 202 RIVERSIDE DRIVE MORGANTON, NC 28655	CONSULTANT	PARSONS & ASSOCIATES		$ 400.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		01/28/2014	$ 200.00
☐					$
☐					$

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
CUYLAR DUNBAR 609 2ND AVE NW CONOVER, NC 28613	RETIRED	CATAWBA VALLEY COMMUNITY COLLEGE		$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		01/28/2014	$ 200.00
☐	THW	CASH		04/17/2014	$ 50.00
☐					$

4. Total only this Page	$ 550.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 14010.00

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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

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
IRA CLINE 4444 LEE CLINE RD CONOVER, NC 28613	FARMER	IRA CLINE FARMS		$ 600.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		01/28/2014	$ 100.00
☐	THW	CHECK		03/04/2014	$ 200.00
☐	THW	CHECK		04/01/2014	$ 200.00

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
SYBIL STEWART 8018 VISTA VIEW DRIVE SHERRILLS FORD, NC 28673	RETIRED	BEST ATTEMPT		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		01/28/2014	$ 100.00
☐					$
☐					$

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
NED JARRETT 3182 NINTH TEE DRIVE NEWTON, NC 28658	RETIRED	NASCAR		$ 150.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		01/31/2014	$ 50.00
☐					$
☐					$

4. Total only this Page	$ 650.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 14010.00

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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

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
JEROME BOLICK PO BOX 307 CONOVER, NC 28613	EXECUTIVE	SOUTHERN FURNITURE		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		01/31/2014	$ 200.00
☐					$
☐					$

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
DONALD BUMGARNER 200 THORNBURG DRIVE CONOVER, NC 28613	REAL ESTATE	SELF-EMPLOYED		$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		02/03/2014	$ 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
RICHARD HOWARD 5982 HWY 150 EAST DENVER, NC 28037	RETIRED	BEST ATTEMPT		$ 300.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW			02/03/2014	$ 300.00
☐					$
☐					$

4. Total only this Page	$ 750.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 14010.00

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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

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
LYNN BAKER 1114 MAPLE DRIVE NEWTON, NC 28658	RETIRED	CATAWBA SHERIFFS DEPARTMENT		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		02/03/2014	$ 100.00
☐					$
☐					$

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
ROBBIE BENNETT 3796 COOL BRANCH DRIVE MAIDEN, NC 28650	FUNERAL DIRECTOR	SELF-EMPLOYED		$ 550.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		02/03/2014	$ 550.00
☐					$
☐					$

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
TONY WOLFE 1072 CATAWBA GREENS DRIVE NEWTON, NC 28658	RETIRED	PEOPLES BANK		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		02/12/2014	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 750.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 14010.00

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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

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
JOHN TEETER 6762 BIG SKY LANE HICKORY, NC 28601	EXECUTIVE	PEPSI-COLA BOTTLING COMPANY		$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		02/16/2014	$ 100.00
☐					$
☐					$

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
JEAN PITTS 5596 HUFFMAN FARM RD HICKORY, NC 28602	RECEPTIONIST	CATAWBA COUNTY CHAMBER OF COMMERCE		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		02/20/2014	$ 100.00
☐					$
☐					$

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
TOM ALEXANDER 1070 26TH AVE NE HICKORY, NC 28601	RETIRED	FIRE CHIEF		$ 950.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		02/21/2014	$ 500.00
☐	THW	CHECK		04/08/2014	$ 250.00
☐					$

4. Total only this Page	$ 950.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 14010.00

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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

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
STEVE TAYLOR 3988 ENGLEWOOD STREET CLAREMONT, NC 28610	RETIRED	FURNITURE		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		02/21/2014	$ 100.00
☐					$
☐					$

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
BRITT GRIFFITH PO BOX 3424 HICKORY, NC 28603	PRIVATE INVESTIGATOR	GRIFFITH SECURITY		$ 1000.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		03/05/2014	$ 1000.00
☐					$
☐					$

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
RICK FOSTER PO BOX 57 HICKORY, NC 28603	OWNER	CENTURY HEATING & AIR		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		03/10/2014	$ 200.00
☐					$
☐					$

4. Total only this Page	$ 1300.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 14010.00

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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

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
DAVID HOOD, JR 1109 MAPLE DRIVE NEWTON, NC 28658	OWNER	COTWALD BARBER SHOP		$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		03/10/2014	$ 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
DORIS FISH 1004 EAST 23RD ST NEWTON, NC 28658	RETIRED	BEST ATTEMPT		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		03/10/2014	$ 100.00
☐					$
☐					$

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
PETER WEST 1115 MAPLE DRIVE NEWTON, NC 28658	SUPERVISOR	DEPARTMENT OF SOCIAL SERVICES		$ 150.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		03/10/2014	$ 50.00
☐					$
☐					$

4. Total only this Page	$ 400.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 14010.00

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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

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
RON SMITH 3518 34TH AVE CT NE HICKORY, NC 28601	WIRE TECHNICIAN	AT&T		$ 150.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		03/10/2014	$ 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
DIANE HUFFMAN 1112 SPRUCEWOOD LANE NEWTON, NC 28658	DESIGNER	UNIFOUR DRAPERY & DESIGN		$ 4200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		03/10/2014	$ 1000.00
☐	THW	CHECK		04/17/2014	$ 3000.00
☐					$

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
STEVE WOODSWORTH PO BOX 1218 ROCKY MOUNT, NC 27802	PRESIDENT	CPFRM		$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		03/17/2014	$ 500.00
☐					$
☐					$

4. Total only this Page	$ 4550.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 14010.00

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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

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
CARMEN ISENHOWER 1537 LITTLE HILL RD NEWTON, NC 28658	PHARMACIST	WALKER PHARMACY		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		03/20/2014	$ 200.00
☐					$
☐					$

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
DAWN TUTTEROW 110 MOCKINGBIRD LANE LINCOLNTON, NC 28092	ASSISTANT DA	STATE OF NC		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		03/20/2014	$ 100.00
☐					$
☐					$

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
BRUCE MEISNER 3021 8TH ST CT NE HICKORY, NC 28601	APPRAISER	REAL ESTATE ADVISORY SERVICES		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		03/20/2014	$ 200.00
☐					$
☐					$

4. Total only this Page	$ 500.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 14010.00

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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

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
CHARLES PRESTON PO BOX 367 CONOVER, NC 28613	REAL ESTATE	SELF-EMPLOYED		$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		03/28/2014	$ 200.00
☐					$
☐					$

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
RAY VON BEATTY 3738 PLEASANT LANE SHERRILLS FORD, NC 28673	RETIRED	LENOIR-RHYNE UNIVERSITY		$ 320.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		IN-KIND	FOOD/BEVERAGES	03/30/2014	$ 220.00
☐	THW	CHECK		04/01/2014	$ 100.00
☐					$

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
SUSAN WEST 326 SOUTH MAIN AVE NEWTON, NC 28658	RETIRED	INSURANCE		$ 150.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		04/01/2014	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 620.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 14010.00

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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

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
KAY SCHMUCKER 2075 2ND ST DR NW HICKORY, NC 28601	REAL ESTATE AGENT	PRUDENTIAL REAL ESTATE		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		04/02/2014	$ 100.00
☐					$
☐					$

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
TOM KEEGAN 4099 KISER COVE LANE TERRELL, NC 28682	RETIRED	BEST ATTEMPT		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		04/02/2014	$ 100.00
☐					$
☐					$

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
LEE HART 135 20TH AVE NW HICKORY, NC 28601	RETIRED	SHERIFFS DEPARTMENT		$ 800.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		IN-KIND	FOOD/BEVERAGES	04/05/2014	$ 800.00
☐					$
☐					$

4. Total only this Page	$ 1000.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 14010.00

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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

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
CORDELL HARRIS 4836 GLENN HOLLOW LANE HICKORY, NC 28601	INSURANCE	CORDELL HARRIS INSURANCE AGENCY		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		04/07/2014	$ 100.00
☐					$
☐					$

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
JOE McCLASIN 1661 QUAIL RUN NEWTON, NC 28658	EXECUTIVE	SHURTAPE TECHNOLOGY		$ 90.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		IN-KIND	FOOD/BEVERAGES	04/09/2014	$ 90.00
☐					$
☐					$

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
ALFRED COOKE 1328 10TH ST DR NE HICKORY, NC 28601	RETIRED	REALTOR		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		04/14/2014	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 290.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 14010.00

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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

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
GREG BURGESS 131 WHY 70 SE HICKORY, NC 28602	OWNER	UDDERLY DELICIOUS ICE CREAM		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	CHECK		04/16/2014	$ 200.00
☐					$
☐					$

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
JERRY PHILLIPS 1327 10TH ST DR NW HICKORY, NC 28601	RETIRED	BEST ATTEMPT		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	THW	ELECTRONIC		04/18/2014	$ 100.00
☐					$
☐					$

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
☐	THW				$
☐					$
☐					$

4. Total only this Page	$ 300.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 14010.00

Disbursements

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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

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
CAPITOL PROMOTIONS PO BOX 231 GLENSIDE, PA 19038		☐ Federal ☒ County: ☐ State ☐ Municipality:		$ 4099.67

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
THW	DEBIT CARD	B	01/07/2014	$2060.00	SIGNS/BUMPER STICKERS
THW	DEBIT CARD	B	02/20/20104	$595.00	BILLBOARDS

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
CAPITOL PROMOTIONS PO BOX 231 GLENSIDE, PA 19038		☐ Federal ☒ County: ☐ State ☐ Municipality:		$ 6222.17

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
THW	DEBIT CARD	B	03/11/2014	$1858.50	BILLBOARD/ YARD SIGNS
THW	DEBIT CARD	B	03/14/2014	$264.00	DOOR HANGERS

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		☐ Federal ☒ County: ☐ State ☐ Municipality:		$ 308.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
THW	CHECK	O	01/09/2014	$124.00	PO BOX RENTAL FEE
TWH	DEBIT CARD	I	01/21/2014	$92.00	POSTAGE

5. Total only this Page	$ 4993.50
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)*	$ 14377.16

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

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

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

Disbursements

Amendment ☐ 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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

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
LOWES HARDWARE 1450 2ND ST NE HICKORY, NC 28601		☐ Federal ☒ County: ☐ State ☐ Municipality:		$ 109.24

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
THW	DEBIT CARD	O	01/17/2014	$8.10	YARD STAKES
THW	DEBIT CARD	O	02/01/2014	$81.34	YARD STAKES

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
LOWES HARDWARE 1450 2ND ST NE HICKORY, NC 28601		☐ Federal ☒ County: ☐ State ☐ Municipality:		$ 306.78

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
THW	DEBIT CARD	O	03/12/2014	$81.34	YARD STAKES
THW	DEBIT CARD	O	03/22/2014	$116.20	YARD STAKES

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
LOWES HARDWARE 1450 2ND ST NE HICKORY, NC 28601		☐ Federal ☒ County: ☐ State ☐ Municipality:		$ 697.55

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
THW	DEBIT CARD	O	04/04/2014	$146.75	YARD STAKES
THW	DEBIT CARD	O	02/20/2014	$244.02	YARD STAKES

5. Total only this Page	$ 677.75
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)*	$ 14377.16

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

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

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

Disbursements

 Amendment ☐ 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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

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	d. Comments
FRIENDS OF SHERRILLS FORD LIBRARY PO BOX 404 SHERRILLS FORD, NC 2673	c. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 125.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
THW	CHECK	O	01/18/2014	$125.00	SPRING GALA FUNDRAISER
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
WAL-MART 2525 US HWY 70 SE HICKORY, NC 28602	c. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 151.98

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
THW	DEBIT CARD	K	01/18/2014	$52.82	INK/LABELS
THW	DEBIT CARD	O	04/02/2014	$19.00	DOOR HANGERS

4. Payee Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
CUBBARD EXPRESS 5340 SOUTH NC 127 HICKORY, NC 28602	c. Level Registered (Specify) ☐ Federal ☒ County: ☐ State ☐ Municipality:	e. Election Sum to Date $ 80.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
THW	DEBIT CARD	O	02/01/2014	$50.00	GAS USED TO DELIVER SIGNS
THW	DEBIT CARD	O	03/12/2014	$30.00	GAS USED TO DELIVER SIGNS

5. Total only this Page	$ 276.82
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)*	$ 14377.16

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

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

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

Disbursements

 Amendment ☐ 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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

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
BOARD OF ELECTIONS PO BOX 132 NEWTON, NC 28658		☐ Federal ☒ County: ☐ State ☐ Municipality:		$ 1037.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
THW	CHECK	O	02/10/2014	$1037.00	CLERK OF COURT FILING FEE
				$	

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
WNNC PO BOX 430 NEWTON, NC 28658		☐ Federal ☒ County: ☐ State ☐ Municipality:		$ 1077.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
THW	CHECK	A	02/20/2014	$450.00	RADIO ADS
THW	CHECK	A	04/02/2014	$377.00	RADIO ADS

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
ACE HARDWARE 3347 S HWY 127 HICKORY, NC 28602		☐ Federal ☒ County: ☐ State ☐ Municipality:		$ 6.41

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
THW	DEBIT CARD	O	04/18/2014	$6.41	TAPE FOR SIGNS
				$	

5. Total only this Page	$ 1870.41
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)*	$ 14377.16

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

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

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

Disbursements

Amendment ☐ 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): CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT

2. ID Number: KDU13C

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
WILCO HESS SOUTHWEST BLVD NEWTON, NC 28658		☐ Federal ☒ County: ☐ State ☐ Municipality:		$ 43.01

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
THW	DEBIT CARD	O	02/20/2014	$43.01	DELIVERING SIGNS
				$	

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
CATAWBA COUNTY GOP PO BOX 3175 HICKORY, NC 28603		☐ Federal ☒ County: ☐ State ☐ Municipality:		$ 110.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
THW	CHECK	O	03/18/2014	$15.00	BOOTH RENTAL
				$	

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
WHKY 526 MAIN AVE SE HICKORY, NC 28601		☐ Federal ☒ County: ☐ State ☐ Municipality:		$ 3000.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
THW	CHECK	A	03/31/2014	$3000.00	RADIO ADS
				$	

5. Total only this Page $ 3058.01

6. Total of ALL CRO-1310 Pages $ 14377.16

(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

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): CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT

2. ID Number: KDU13C

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
CATAWBA DIRECT MARKETING SOLUTIONS PO BOX 9001 HICKORY, NC 28603		☐ Federal ☒ County: ☐ State ☐ Municipality:		$ 3467.17

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
THW	CHECK	O	04/09/2014	$2345.50	POSTAGE FOR DIRECT MAILER
THW	CHECK	O	04/09/2014	$1121.67	DIRECT MAILER

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
HICKORY DAILY RECORD 1100 11TH AVE BLVD SE HICKORY, NC 28602		☐ Federal ☒ County: ☐ State ☐ Municipality:		$ 33.50

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
THW	CHECK	A	04/09/2014	$33.50	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
		☐ 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: $ 3500.67

6. Total of ALL CRO-1310 Pages: $ 14377.16

(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)

In-Kind Contributions

Pg 1 of 1 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
CITIZENS FOR TAMMY HUFFMAN WEST CLERK OF COURT	KDU13C

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
RAY VON BEATTY 3738 PLEASANT LANE SHERRILLS FORD, NC 28673	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date: $ 220.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
SUPPLIED FOOD AND BEVERAGES FOR A MEET AND GREET	03/30/2014	$ 220.00
		$
		$

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
LEE HART 135 20TH AVE NW HICKORY, NC 28601	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date: $ 800.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
SUPPLIED FOOD AND BEVERAGES FOR A MEET AND GREET	04/05/2014	$ 800.00
		$
		$

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
JOE McCASLIN 1661 QUAIL RUN NEWTON, NC 28658	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date: $

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
SUPPLIED TAPE FOR YARD SIGNS/BILLBOARDS	04/09/2014	$ 90.00
		$
		$

4. Total only this Page	$ 1110.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 1110.00