Disclosure Rep Use this form for gene	ral report and committee in	formation, must be s	igned and submitted along		No
Do not use this form to	AND MANAGEMENT (1997年1月1日 日本日本日本日本日本日本日本日本日本日本日本日本日本日本日本日本日本日本日		ALCOHOL STATE OF THE STATE OF		
1. Committee Inform	ation		校9年20年4年20年4日校6月1日1日	c, ID Number	2200 (15s)
a. Full Name				C, ID I value v	
Jason Reid for Sherif	f				
h Mailing Address (inclus	de City, State and Zip Code)	1946. 在 1861年 - 1945	RECEIPTED TO THE RESERVE OF	d. Date Filed	
PO Box 1082	de City, State and 21p code,	AND DESIGNATION OF THE PARTY OF		07/14/2017	CPASSON NORTH AS
Conover, NC 28613				97 100 C 11 100 C 11 100 C	
,				e. Phone Number	7.25
				828-270-7673	
ven en la une veneral de la constant		4. Period E	nd Date		A SERVICE
2. Report Year	3. Period Start Date (mm/d	d/yy) (mm/dd/yy)	S. Heasu	rer Full Name	
2015	07/04/2017	07/14	4/2014 Leisa Her	man Towery	
2017	07/04/2017			C - Common entancial	
6. Type of Committee		9. Type of Report		Referendum	
Candidate Campai		Municipal	State/County Organizational	Organizational	-
☐ PAC	Referendum	Organizational		Pre-referendum	
Independent Expenditure	Joint Fundraiser	Thirty-five day	Quarterly	Tre-referendum	
Legal Expense Fu			First	Final	
7. Type of Fund	(if applicable, check one)	Pre-primary	Second	Supplemental Final	
Booster Fund"		Pre-election Pre-runoff	Third	Annual	
Building Fund		Semi-annual	Fourth	Special Special	
		Mid Year	Semi-annual		
Other:		Year End	Mid Yea	10. Special Report Nam	1e
		Final	Year En	d	
8. Number of Funda	raisers this Report	Special Special	Final		
	None		Special		ALCO STATE SECTION
11. Account Inform	Property of the Control of the Contr	公司 1000年7月	11. Account Informatio		ESSE
a. Financial Institution I			a. Financial Institution Full N	lame	A MARIA
Peoples Bank		and the second s		c. Account Code	
b. Purpose	c. Account Code		b. Purpose	C. Account Code	0117525-100
Campaign	JO	CR			
Acct	d. Period Begin Balan			d. Period Begin Balance	
		***************************************		s	
	\$ 0.00			3	1 2 April 18
CERTIFICATION					
HTPs to a resident and a resident and a residence of		liance with all applic	able provisions of Article 2	22A, 22B, & 22D-22M of Chapter 1	63 of
d. NIC Compred Stat	utee and that no funds are o	commingled with pro-	Hipited of other non-discio	sed funds. I further certify that this r	ерогі
is complete, true and	d correct and that I have be	en trained by the NC	State Board of Elections		
Leisa Hern	nan Towery		Signature of Appointed Treasurer		
	Printed Name of Signer	CONTRACTOR OF THE PROPERTY OF	Signature of Appointed Treasurer	A CONTRACTOR OF THE STATE OF TH	
FOR OFFICE USE	ONLY	and the second		Delivery Method	
Date Received:	MEREI	TO Employee:		Normal Mail	
		Employee:		Registered Mail Hand Delivered	
Date Postmarko	ea: JUL 14	7017		Electronically Filed	1
Date Scanned:	DU	Employees		Signer has not rece	
Bute Soumou.	By			mandatory training	
Date Data Ente		Employee			201953

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

Amendment \boxtimes Yes No

1. Committee Full Name (and Fund if applicable) 2. Type of Report 3. ID Number						
Jason Reid for Sheriff Or	ganizational			od kolidarova i dine nia		
	2017		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$	0.00	\$	0.00	
RECEIPTS						
5) Aggregated Contributions from Individuals	(CRO-1205)	\$		\$		
6) Contributions from Individuals	(CRO-1210)	\$	3990.00	\$	3990.00	
7) Contributions from Political Party Committees	(CRO-1220)	\$	4000.00	\$	4000.00	
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, 11a	l and 11e)	\$	7990.00	\$	7990.00	
EXPENDITURES						
13) Disbursements						
13a) Operating Expenditures	(CRO-1310)	\$		\$		
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)	\$		\$		
17) In-Kind Contributions	(CRO-1510)	\$	90.00	\$	90.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 a	and 17)	\$	90.00	\$	90.00	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract li	ine 18)	\$	7900.00	\$	7900.00	
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)	\$		330	3.57, 22.36.35	
25) Administrative Support	(CRO-1710)	\$		\$		
26) Forgiven Loans	(CRO-1440)	\$		\$		
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$		\$		
28) Contributions to be Refunded	(CRO-1215)	\$		\$		
CPO 1100	(5.10 1210)	*		Ψ		

	NAME OF THE PROPERTY OF THE PR	m Individuals	P over \$50 or contributions un		of <u>2</u>	Amendme Yo		
POSTORNA (OPRODOMINA COMPRENDA DE	NAME AND ADDRESS OF THE OWNER, WHEN PARTY AND AD	(and Fund if applica			2. ID Nu			
Jason Re	eid for Sheriff							
3. Contr	ibutor Informati	ion	☐ Add ☐ R	emove	1 120 x 30 y 5			
	me, Mailing Address	& Phone		b. Job Title/Profession				
(include city, state, & zip) Lisa A. Dubs		Self Employed						
31 2 nd St			c. Employer's Name/	c. Employer's Name/Specific Field Attorney				
	NC 28601		Attorney					
828-323-	-1926				e. Election	Sum to Date		
	and the same of th							
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd	/уууу)	k. Amoun	t see an all	
	JCR	Check		07/04	/2017	\$	200.00	
			37			\$		
						\$		
a. Full Nai (include	ibutor Informati me, Mailing Address city, state, & zip)	STATE OF THE PROPERTY OF THE P	Add Rob. Job Title/Profession Self Employed	emove n	d. Comme	nts		
Steven A. Ehlers PO Box 1845			c. Employer's Name/Specific Field					
Hickory, 828-324-	NC 28603 -2922		Private Investigat	Private Investigator		e. Election Sum to Date		
						\$ 200.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/	/yyyy)	k. Amoun	AND LINES	
	JCR	Check		07/04	/2017	\$	200.00	
						\$		
						\$		
3. Contr	ibutor Informati	on	Add Re	emove				
a. Full Name, Mailing Address & Phone			b. Job Title/Profession		nts			
Walter S.	city, state, & zip) . Mever	(2) 10 10 10 10 10 10 10 10 10 10 10 10 10	Deputy					
2199 Old	Beatty Ford Rd		c. Employer's Name/S	Specific Field				
and the second second second	, NC 28609			Catawba County Sheriff's				
704-488-2531		Office	Office		e. Election Sum to Date \$ 1000.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/		k. Amount		
	JCR	Check	•	07/06		\$	1000.00	

4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

\$

\$

1400.00

3990.00

\$

\$

		m Individuals		Pg <u>2</u> 0	f <u>2</u>	Amendm		
1. Com	mittee Full Name	(and Fund if applica	over \$50 or contributions u	inder \$50 if form Cl	2. ID Nur			
Jason Ro	eid for Sheriff							
3. Conti	ributor Informati	on	☐ Add ☐ I	Remove			Water Com	
a. Full Name, Mailing Address & Phone (include city, state, & zip) William Denton Lindsay, Jr. 4448 Cat Square Rd Vale, NC 28168		A SECTION AND PROPERTY OF THE	b. Job Title/Profession Deputy c. Employer's Name/Specific Field Catawba County Sheriff's		d. Comments			
		Catawba County						
828-228	-4966		Office	Office		s 1250.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/y	ууу)	k. Amoun	t	
	JCR	Check		07/05/2	2017	\$	1250.00	
						\$		
						\$		
3. Conti	ributor Informati	on	Add I	Remove	100			
a. Full Na	me, Mailing Address	& Phone		b. Job Title/Profession				
	e city, state, & zip)		Self Employed					
Scott Re	150							
11 East A St Newton, NC 28658			c. Employer's Name/Specific Field					
			Attorney	Attorney		e. Election Sum to Date		
828-466-3858					THE MANUFACTOR VALUE SCHOOLS			
f. Prior	g. Account Code	h. Form of Payment	i In Vind Description	: D-4 (/34/-	\$	250.00		
	JCR	Check	i. In-Kind Description	j. Date (mm/dd/y 07/05/2		k. Amoun	Annex Description	
	JCK	CHECK		07/03/2	2017		250.00	
						\$		
						\$		
NAME AND ADDRESS OF THE OWNER, WHEN	ibutor Informatio			Remove		经济的	2	
	me, Mailing Address	& Phone				s		
Jason Re	e city, state, & zip)		Captain					
PO Box 1082 Conover, NC 28613		c. Employer's Name	c. Employer's Name/Specific Field Catawba County Sheriff					
				e. Election S	um to Date			
					\$	1090.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	State of the	
	JCR	Check		07/05/2	2017	\$	1000.00	
		In-Kind	PO Box	07/14/	2017	\$	90.00	
						\$		

4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

3990.00

2590.00

\$

\$

Contributions from Political Party Committees

Use this form to report contributions from a political party

1. Committee Full Name (and Fund if applicable) Jason Reid for Sheriff					2. ID Number		
Jason Reid for 5	neriii						
3. Contributor I	2014年7月1日 1月1日 1月1日 1月1日 1月1日 1月1日 1日 1	Add	Remove	24			
(include city, state				b. Cor	mments		
Coy Reid for Sh PO Box 1212	eriff			1			
Newton, NC 28	658			c. Ele	ection Sum to Date		
] 	\$	4000.00		
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy	/y)	h. Amount		
JCR	Check		07/12/20		\$ 4000.00		
					\$		
					\$		
3. Contributor I	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	Add	Remove				
a. Full Name, Mailin (include city, state				b. Cor	mments		
(Include city)	, & ZIP)	LESSERIES STATES SERVERE SERVE					
			,	c. Election Sum to Date			
				\$			
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy	(y)	h. Amount		
					\$		
					\$		
					\$		
3. Contributor In	THE RESIDENCE OF THE PARTY OF T	Add	Remove		经验证证据的		
a. Full Name, Mailin (include city, state				b. Con	mments		
	And the second s						
				c. Elec	ction Sum to Date		
				\$			
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy	у)	h. Amount		
					\$		
					\$		
					\$		
4. Total only t	PERSONAL PROPERTY AND ADMINISTRATION OF THE PROPERTY AND ADMINISTRATION OF THE PERSONAL PROPERTY AND ADMINISTR			\$	4000.00		
	LL CRO-1220 Page on line 7 of Detailed Summa	的是是在10万分,这个大型的10万分,可以10万分分别,10万万分的一种10万分的,10万分的10万分的10万分的10万分的10万分的10万分的10万分的10万分		\$	4000.00		

Use this form to report non-monetary contributions, donation Use CRO-1215 if In-Kind Contributions were or will be refu	ns, goods or so	rvi	rg 1 of ces provided to t	he com	mittee or fund.	No	
1. Committee Full Name (and Fund if applicable) Jason Reid For Sheriff	nded within 7	uay		2. II) Number		
3. Contributor Information Add Add Add	Remove	of C	ontributor	o Co	mments		
(include city, state, & zip) Jason Reid PO Box 1082 Conover, NC 28613		b. Type of Contributor Individual Candidate Party PAC Referendum Other Receipt Source			ection Sum to Date		
e. Description		188	f. Date (mm/dd/yy	/yy)	g. Fair Market Amount		
PO Box			07/14/201	7	\$ 90.00		
					\$		
					\$		
3. Contributor Information Add	Remove		不然你的会 不是			100 Kg	
a. Full Name, Mailing Address & Phone	902.00.(0)		ontributor	c. Con	nments	History	
(include city, state, & zip)		Cand Party PAC Refer	idual idate rendum r Receipt Source	d. Elec	ction Sum to Date	1	
e. Description	C 5055 3 272 5 974	5 D-4-((1))					
- Securpion	(h) (a.) (4/2 / 1/2 (4/2))	3075	f. Date (mm/dd/yy	уу)	g. Fair Market Amount \$		
					\$		
					\$		
3. Contributor Information Add	Remove			SCHOOL STATE		TALLES	
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor Individual Candidate Party PAC Referendum Other Receipt Source		idual idate endum		nments		
e. Description			f. Date (mm/dd/yy)				
		805	Date (mm/du/yy)	73)	g. Fair Market Amount \$		
					\$		
				7	\$		
4. Total only this Page 5. Total of ALL CRO-1510 Pages				\$	90.00		
or Total of AEE CRO-1310 Pages				\$	90.00		

Pg

In-Kind Contributions

Amendment

 \boxtimes

No