

Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
Do not use this form to update information

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

| | |
|---|---------------------------------|
| 1. Committee Information | |
| a. Full Name Jason Reid for Sheriff | c. ID Number |
| b. Mailing Address (include City, State and Zip Code) PO Box 1082 Conover, NC 28613 | d. Date Filed 07/14/2017 |
| | e. Phone Number 828-270-7673 |

| | | | |
|-------------------------------|--|--|--|
| 2. Report Year 2017 | 3. Period Start Date (mm/dd/yy) 07/04/2017 | 4. Period End Date (mm/dd/yy) 07/14/2014 | 5. Treasurer Full Name Leisa Herman Towery |
|-------------------------------|--|--|--|

| | | | |
|--|---|---|--|
| 6. Type of Committee (Check One) | | 9. Type of Report <i>(check only one type of report from one category)</i> | |
| <input checked="" type="checkbox"/> Candidate Campaign | <input type="checkbox"/> Party | Municipal | State/County |
| <input type="checkbox"/> PAC | <input type="checkbox"/> Referendum | <input type="checkbox"/> Organizational | <input checked="" type="checkbox"/> Organizational |
| <input type="checkbox"/> Independent | <input type="checkbox"/> Joint Fundraiser | <input type="checkbox"/> Thirty-five day | <input type="checkbox"/> Quarterly |
| <input type="checkbox"/> Expenditure | | <input type="checkbox"/> Pre-primary | <input type="checkbox"/> First |
| <input type="checkbox"/> Legal Expense Fund | | <input type="checkbox"/> Pre-election | <input type="checkbox"/> Second |
| 7. Type of Fund <i>(if applicable, check one)</i> | | <input type="checkbox"/> Pre-runoff | <input type="checkbox"/> Third |
| <input type="checkbox"/> "Booster Fund" | | <input type="checkbox"/> Semi-annual | <input type="checkbox"/> Fourth |
| <input type="checkbox"/> Building Fund | | <input type="checkbox"/> Mid Year | <input type="checkbox"/> Semi-annual |
| <input type="checkbox"/> Other: | | <input type="checkbox"/> Year End | <input type="checkbox"/> Mid Year |
| 8. Number of Fundraisers this Report | | <input type="checkbox"/> Final | <input type="checkbox"/> Year End |
| None | | <input type="checkbox"/> Special | <input type="checkbox"/> Final |
| | | <input type="checkbox"/> Special | <input type="checkbox"/> Special |

| | | | |
|--|------------------------------------|------------------------------------|-------------------------------|
| 11. Account Information | | 11. Account Information | |
| a. Financial Institution Full Name Peoples Bank | | a. Financial Institution Full Name | |
| b. Purpose Campaign Acct | c. Account Code JCR | b. Purpose | c. Account Code |
| | d. Period Begin Balance \$ 0.00 | | 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.

Leisa Herman Towery

Printed Name of Signer

Leisa Herman Towery

Signature of Appointed Treasurer

07/14/2017

Date

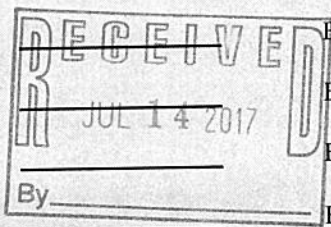
FOR OFFICE USE ONLY

Date Received:

Date Postmarked:

Date Scanned:

Date Data Entered:



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

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

| | | | | | |
|--|--|------------------------------------|--|----------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | 2. Type of Report | | 3. ID Number | |
| Jason Reid for Sheriff | | Organizational | | | |
| Start of Election Cycle: | | January 1, | | 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 | | <i>(CRO-1205)</i> | | \$ | |
| 6) Contributions from Individuals | | <i>(CRO-1210)</i> | | \$ 3990.00 | |
| 7) Contributions from Political Party Committees | | <i>(CRO-1220)</i> | | \$ 4000.00 | |
| 8) Contributions from Other Political Committees | | <i>(CRO-1230)</i> | | \$ | |
| 9) Loan Proceeds | | <i>(CRO-1410)</i> | | \$ | |
| 10) Refunds/Reimbursements To the Committee | | <i>(CRO-1240)</i> | | \$ | |
| 11) Other Receipt Sources | | | | | |
| 11a) Interest on Bank Accounts | | <i>(CRO-1250)</i> | | \$ | |
| 11b) Contributions from Not-for-Profit Organizations | | <i>(CRO-1250)</i> | | \$ | |
| 11c) Outside Sources of Income | | <i>(CRO-1250)</i> | | \$ | |
| 11d) Legal Expense Fund – Other Sources | | <i>(CRO-1270)</i> | | \$ | |
| 11 e) Exempt Purchase Price Sales | | <i>(CRO-1265)</i> | | \$ | |
| 12) TOTAL RECEIPTS <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)</i> | | | | \$ 7990.00 | |
| EXPENDITURES | | | | | |
| 13) Disbursements | | | | | |
| 13a) Operating Expenditures | | <i>(CRO-1310)</i> | | \$ | |
| 13b) Contributions to Candidates/Political Committees | | <i>(CRO-1310)</i> | | \$ | |
| 13c) Coordinated Party Expenditures | | <i>(CRO-1310)</i> | | \$ | |
| 14) Aggregated Non-Media Expenditures | | <i>(CRO-1315)</i> | | \$ | |
| 15) Loan Repayments | | <i>(CRO-1420)</i> | | \$ | |
| 16) Refunds/Reimbursements From the Committee | | <i>(CRO-1320)</i> | | \$ | |
| 17) In-Kind Contributions | | <i>(CRO-1510)</i> | | \$ 90.00 | |
| 18) TOTAL EXPENDITURES <i>(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</i> | | | | \$ 90.00 | |
| 19) Cash on Hand at End <i>(Add lines 4 and 12 together, then subtract line 18)</i> | | | | \$ 7900.00 | |
| ADDITIONAL INFORMATION | | | | | |
| 20) Non-Monetary Gifts Given to Other Committees | | <i>(CRO-1330)</i> | | \$ | |
| 21) Outstanding Loans (incl. ones from other campaigns) | | <i>(CRO-1430)</i> | | \$ | |
| 22) Debts and Obligations owed By the Committee | | <i>(CRO-1610)</i> | | \$ | |
| 23) Debts and Obligations owed To the Committee | | <i>(CRO-1620)</i> | | \$ | |
| 24) Account Transfers Within the Committee | | <i>(CRO-1720)</i> | | \$ | |
| 25) Administrative Support | | <i>(CRO-1710)</i> | | \$ | |
| 26) Forgiven Loans | | <i>(CRO-1440)</i> | | \$ | |
| 27) 48-Hour Notice Reports Sum | | <i>(CRO-2220)</i> | | \$ | |
| 28) Contributions to be Refunded | | <i>(CRO-1215)</i> | | \$ | |

Contributions from Individuals

Pg 1 of 2

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 | |
|---|-----------------|--------------------|-----------------------------------|----------------------|-------------------------|--|
| Jason Reid for Sheriff | | | | | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Lisa A. Dubs 31 2 nd St NW Hickory, NC 28601 828-323-1926 | | | Self Employed | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Attorney | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 200.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | JCR | Check | | 07/04/2017 | \$ 200.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Steven A. Ehlers PO Box 1845 Hickory, NC 28603 828-324-2922 | | | Self Employed | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | 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. Amount | |
| <input type="checkbox"/> | JCR | Check | | 07/04/2017 | \$ 200.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Walter S. Meyer 2199 Old Beatty Ford Rd Catawba, NC 28609 704-488-2531 | | | Deputy | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Catawba County Sheriff's 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/yyyy) | k. Amount | |
| <input type="checkbox"/> | JCR | Check | | 07/06/2017 | \$ 1000.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 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) | | | | | \$ 3990.00 | |

Contributions from Individuals

Pg 2 of 2

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 | |
| Jason Reid for Sheriff | | | | | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| William Denton Lindsay, Jr. 4448 Cat Square Rd Vale, NC 28168 828-228-4966 | | | Deputy | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Catawba County Sheriff's Office | | e. Election Sum to Date | |
| | | | | \$ 1250.00 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | JCR | Check | | 07/05/2017 | \$ 1250.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Scott Reilly 11 East A St Newton, NC 28658 828-466-3858 | | | Self Employed | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Attorney | | e. Election Sum to Date | |
| | | | | \$ 250.00 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | JCR | Check | | 07/05/2017 | \$ 250.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Jason Reid PO Box 1082 Conover, NC 28613 | | | Captain | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Catawba County Sheriff | | e. Election Sum to Date | |
| | | | | \$ 1090.00 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | JCR | Check | | 07/05/2017 | \$ 1000.00 | |
| <input type="checkbox"/> | | In-Kind | PO Box | 07/14/2017 | \$ 90.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 2590.00 | |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | \$ 3990.00 | |

Contributions from Political Party Committees

Pg 1 of 1

Amendment
☐ Yes ☒ No

Use this form to report contributions from a political party

| | | | | | |
|--|---------------------------|-------------------------------|--------------------------------|--------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | 2. ID Number | |
| Jason Reid for Sheriff | | | | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Comments | |
| Coy Reid for Sheriff PO Box 1212 Newton, NC 28658 | | | | | |
| | | | | c. Election Sum to Date | |
| | | | | \$ 4000.00 | |
| d. Account Code | e. Form of Payment | f. In-Kind Description | g. Date (mm/dd/yyyy) | h. Amount | |
| JCR | Check | | 07/12/2017 | \$ 4000.00 | |
| | | | | \$ | |
| | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Comments | |
| | | | | | |
| | | | | c. Election Sum to Date | |
| | | | | \$ | |
| d. Account Code | e. Form of Payment | f. In-Kind Description | g. Date (mm/dd/yyyy) | h. Amount | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Comments | |
| | | | | | |
| | | | | c. Election Sum to Date | |
| | | | | \$ | |
| d. Account Code | e. Form of Payment | f. In-Kind Description | g. Date (mm/dd/yyyy) | h. Amount | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| 4. Total only this Page | | | | \$ 4000.00 | |
| 5. Total of ALL CRO-1220 Pages (This line must be on line 7 of Detailed Summary Page CRO-1100) | | | | \$ 4000.00 | |

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 | |
| Jason Reid For Sheriff | | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Type of Contributor | c. Comments |
| Jason Reid PO Box 1082 Conover, NC 28613 | | <input type="checkbox"/> Individual | |
| | | <input checked="" type="checkbox"/> Candidate | |
| | | <input type="checkbox"/> Party | |
| | | <input type="checkbox"/> PAC | |
| | | <input type="checkbox"/> Referendum | d. Election Sum to Date |
| | | <input type="checkbox"/> Other Receipt Source | \$ 1090.00 |
| e. Description | | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| PO Box | | 07/14/2017 | \$ 90.00 |
| | | | \$ |
| | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Type of Contributor | c. Comments |
| | | <input type="checkbox"/> Individual | |
| | | <input type="checkbox"/> Candidate | |
| | | <input type="checkbox"/> Party | |
| | | <input type="checkbox"/> PAC | |
| | | <input type="checkbox"/> Referendum | d. Election Sum to Date |
| | | <input type="checkbox"/> Other Receipt Source | \$ |
| e. Description | | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Type of Contributor | c. Comments |
| | | <input type="checkbox"/> Individual | |
| | | <input type="checkbox"/> Candidate | |
| | | <input type="checkbox"/> Party | |
| | | <input type="checkbox"/> PAC | |
| | | <input type="checkbox"/> Referendum | d. Election Sum to Date |
| | | <input type="checkbox"/> Other Receipt Source | \$ |
| e. Description | | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| 4. Total only this Page | | \$ 90.00 | |
| 5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100) | | \$ 90.00 | |