

Disclosure Report Cover

Amendment
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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 Committee to Re-Elect Al Jean Bogle Clerk of Superior Court	c. ID Number SDU3D5
b. Mailing Address (include City, State and Zip Code) 554 1st Street, NW Hickory, NC 28601	d. Date Filed 7/13/10
	e. Phone Number 828.324.7010

2. Report Year 2010	3. Period Start Date (mm/dd/yy) 1/1/2010	4. Period End Date (mm/dd/yy) 4/17/2010	5. Treasurer Full Name Frances Lee Bogle
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6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
<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 type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	Quarterly
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input checked="" type="checkbox"/> First
		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second
		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third
		Semi-annual	<input type="checkbox"/> Fourth
		<input type="checkbox"/> Mid Year	Semi-annual
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End
		<input type="checkbox"/> Special	<input type="checkbox"/> Final
			<input type="checkbox"/> Special
7. Type of Fund (if applicable, check one)		10. Special Report Name	
<input type="checkbox"/> Booster Fund			
<input type="checkbox"/> Building Fund			
<input type="checkbox"/> Other:			
8. Number of Fundraisers this Report			
0			

10. Account Information		11. Account Information	
a. Financial Institution Full Name Bank of Granite	a. Financial Institution Full Name	b. Purpose Campaign	c. Account Code CSC117
b. Purpose	c. Account Code	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.

Frances Lee Bogle **Frances Lee Bogle** **7/13/10**
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: _____	Employee: _____	Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training
Date Postmarked: _____	Employee: _____	
Date Scanned: _____	Employee: _____	
Date Data Entered: _____	Employee: _____	

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 checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
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Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable)		2. Type of Report	3. ID Number
Committee to Re-Elect ^{Al Jean Bogie} Clerk of Court		1 st Quarter	SDU3D5
Start of Election Cycle: January 1, <u>2010</u>		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)		\$ 90	\$ 90
6) Contributions from Individuals (CRO-1210)		\$ 4525	\$ 4525
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00	\$ 0.00
9) Loan Proceeds (CRO-1410)		\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00	\$ 0.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00	\$ 0.00
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00	\$ 0.00
11c) Outside Sources of Income (CRO-1250)		\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 4615	\$ 4615
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 1061.00	\$ 1061.00
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 0.00	\$ 0.00
15) Loan Repayments (CRO-1420)		\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00	\$ 0.00
17) In-Kind Contributions (CRO-1510)		\$ 1025.00	\$ 1025.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 2086.00	\$ 2086.00
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 2529.00	\$ 2529.00
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0	
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 0	
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0	
24) Account Transfers Within the Committee (CRO-1720)		\$ 0	
25) Administrative Support (CRO-1710)		\$ 0	\$ 0
26) Forgiven Loans (CRO-1440)		\$ 0	\$ 0
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0	\$ 0
28) Contributions to be Refunded (CRO-1215)		\$ 0	\$ 0

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

Committee to Re-Elect Al Jean Bogle Clerk of Superior Court	SDU3D5
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a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
John Merhar 931 25 th Avenue Drive, NW Hickory, NC 286	Retired	
	c. Employer's Name/Specific Field	
		e. Election Sum to Date
		\$ 100

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	CSC117	Check		2/17/2010	\$ 100
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Blake Trimble 4235 3 rd Street, NW Hickory, NC 28601	General Counsel	
	c. Employer's Name/Specific Field	
	Hickory Springs	
		e. Election Sum to Date
		\$ 200

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	CSC117	Check		2/23/2010	\$ 200
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
Pam Holt 556 10 th Street Drive, NW, Hickory, NC 28601	Assistant	
	c. Employer's Name/Specific Field	
	Clerk of Superior Court	
		e. Election Sum to Date
		\$ 50

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	CSC117	Check		2/26/2010	\$ 50
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

\$ 350.00
 \$ 4525

Contributions from Individuals

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

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Committee to Re-Elect Al Jean Bogle Clerk of Superior Court	SDU3D5
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a. Full Name, Mailing Address & Phone (include city, state, & zip) Patti Thompson 4685 Riverview Street Claremont, NC 28610	b. Job Title/Profession Assistant	d. Comments e. Election Sum to Date \$ 100
	c. Employer's Name/Specific Field Clerk of Superior Court	

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	CSC117	Check		3/1/2010	\$ 100
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

a. Full Name, Mailing Address & Phone (include city, state, & zip) Dean Proctor 605 2 nd Avenue, NW Hickory, NC 28601	b. Job Title/Profession Owner	d. Comments e. Election Sum to Date \$ 500
	c. Employer's Name/Specific Field Proctor Wholesale	

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	CSC117	Check		3/3/2010	\$ 500
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

a. Full Name, Mailing Address & Phone (include city, state, & zip) Ronald Bogle 154 Lake Ellen Drive Chapel Hill, NC 27514	b. Job Title/Profession Retired	d. Comments e. Election Sum to Date \$ 250
	c. Employer's Name/Specific Field	

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	CSC117	Check		3/7/2010	\$ 250
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

					\$ 850.00
					\$ 4525

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

Committee to Re-Elect Al Jean Bogle Clerk of Superior Court	SDU3D5
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a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small> Ray Corne P.O. Box 166 Newton, NC 28658	b. Job Title/Profession Lawyer	d. Comments
c. Employer's Name/Specific Field Corne & Cilley, PLLC		e. Election Sum to Date \$ 100

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	CSC117	Check		3/10/2010	\$ 100
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small> Charles Dixon 855 20 th Avenue Drive, NW Hickory, NC 28601	b. Job Title/Profession Lawyer	d. Comments
c. Employer's Name/Specific Field Dixon Law Firm		e. Election Sum to Date \$ 100

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	CSC 117	Check		3/10/2010	\$ 100
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small> Judy White P.O. Box 2053 Hickory, NC 28603	b. Job Title/Profession Homemaker	d. Comments
c. Employer's Name/Specific Field 		e. Election Sum to Date \$ 100

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	CSC117	Check		3/15/2010	\$ \$100
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

\$ 300.00

\$4525

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

Committee to Re-Elect Al Jean Bogle Clerk of Superior Court SDU3D5

a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>	b. Job Title/Profession	d. Comments
Judy Bach 4330 4 th Street Cr, NW Hickory, NC 28601	Homemaker	
	c. Employer's Name/Specific Field	
		e. Election Sum to Date
		\$ 100

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	CSC 117	Check		3/15/2010	\$ 100
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>	b. Job Title/Profession	d. Comments
Michael Barnett 1194 Ione Baker Road Hickory, NC 28602	Lawyer	
	c. Employer's Name/Specific Field	
	Patrick Harper Dixon	
		e. Election Sum to Date
		\$ 100

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	CSC 117	Check		3/15/2010	\$ 100
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>	b. Job Title/Profession	d. Comments
Linda Whitener 5423 Old Shelby Road Hickory, NC 28602	Homemaker	
	c. Employer's Name/Specific Field	
		e. Election Sum to Date
		\$ 50

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	CSC 117	Check		3/15/2010	\$ 50
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

\$ 250.00
\$ 4525

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

Committee to Re-Elect Al Jean Bogle Clerk of Superior Court					SDU3D5
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Jeff Mackie 220 35 th Avenue, NW Hickory, NC 28601		Lawyer			
		c. Employer's Name/Specific Field			
		Mackey, Hutten, Hanvey & Ferrell			
				e. Election Sum to Date	
				\$ 50	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	CSC 117	Check		3/18/2010	\$ 50
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
AJ Coutu 1451 Duckworth Street Morganton, NC 28655		Family Court Administrator			
		c. Employer's Name/Specific Field			
		Catawba County			
				e. Election Sum to Date	
				\$ 50	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	CSC 117	Check		3/18/2010	\$ 50
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Dwight Hastings 300 29 th Avenue, NE Hickory, NC 28601		Dentist			
		c. Employer's Name/Specific Field			
		Self Employed			
				e. Election Sum to Date	
				\$ 100	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	CSC 117	Check		3/15/2010	\$ 100
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
					\$ 200.00
					\$ 4525
					\$500.00

Contributions from Individuals

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

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Committee to Re-Elect Al Jean Bogle Clerk of Superior Court					SDU3D5	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Brenda Cline 870 18 th Avenue Court, NW Hickory, NC 28601			Homemaker			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
					\$ 100	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	CSC 117	Check		3/18/2010	\$ 100	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Robert Mullinax 804 Woodson Drive Newton, NC 28658			Judge			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			NC		\$ 500	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	CSC 117	Check		3/18/2010	\$ 500	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Jerry Phillips 1327 10 th Street Drive, NW Hickory, NC 28601			Retired			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
					\$ 100	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	CSC 117	Check		3/21/2010	\$ 100	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
					\$ 700.00	
					\$ 4525	

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Committee to Re-Elect Al Jean Bogle Clerk of Superior Court					SDU3D5	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Lauch Faircloth 803 Beaman Street Clinton, NC 28329			Retired			
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 100	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	CSC 117	Check		3/25/2010	\$ 100	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Lynn Walker 840 32 nd Avenue, NW Hickory, NC 28601			Homemaker			
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 100	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	CSC 117	Check		3/29/2010	\$ 100	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Carolyn Bradford 3650 9 th Street Drive, NE Hickory, NC 28601			Homemaker			
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 50	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	CSC 117	Check		4/10/2010	\$ 50	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
					\$ 250.00	
					\$ 4525	

Contributions from Individuals

Amendment	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
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Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Committee to Re-Elect Al Jean Bogle Clerk of Superior Court						SDU3D5
a. Full Name, Mailing Address & Phone (include city, state, & zip) Mark Hilton 1351 Northern Drive Conover, NC 28613			b. Job Title/Profession State Rep.		d. Comments	
			c. Employer's Name/Specific Field NC		e. Election Sum to Date \$ 250	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	CSC 117	Check		4/5/2010	\$	250
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Shirley Anthony P.O. Box 175 Hickory, NC 28603			b. Job Title/Profession Lawyer		d. Comments	
			c. Employer's Name/Specific Field Anthony & Tate		e. Election Sum to Date \$ 250	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	CSC 117	Check		4/8/2010	\$	250
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Stine Isenhower P.O. Box 425 Conover, NC 28613			b. Job Title/Profession Retired		d. Comments	
			c. Employer's Name/Specific Field		e. Election Sum to Date \$ 100	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	CSC 117	Check		4/1/2010	\$	100
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
					\$	600.00
					\$	4525

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			
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		
Al Jean Bogle 1777 12 th St, NE Hickory, NC 28601		Clerk of Court			
		c. Employer's Name/Specific Field			
		Catawba County State of NC	e. Election Sum to Date		
			\$ 1025		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	CSC117	Check	Filing Fee	2/8/10	\$ 1025
<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		
		c. Employer's Name/Specific Field			
			e. Election Sum to Date		
			\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>					\$
<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		
		c. Employer's Name/Specific Field			
			e. Election Sum to Date		
			\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 1025
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 4525

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.

Committee to Re-Elect Al Jean Bogle Clerk of Court					SDU3D5
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
f. Full Name, Mailing Address & Phone (include city, state, & zip) U.S. Post Office Hickory, NC		g. Coord. (to) Committee Name _____		d. Comments _____	
e. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				e. Election Sum to Date \$ 44.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
CSC 117	check	I	2/1/2010	\$44.00	postage for campaign mailer
				\$	
f. Full Name, Mailing Address & Phone (include city, state, & zip) Vick's Custom Screen Printing 307 Dusty Road Taylorsville, NC 28681		g. Coord. (to) Committee Name _____		d. Comments _____	
e. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				e. Election Sum to Date \$ 486.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
CSC 117	check	B+	3/1/2010	\$486.00	campaign signs
				\$	
f. Full Name, Mailing Address & Phone (include city, state, & zip) Vick's Custom Screen Printing 307 Dusty Road Taylorsville, NC 28681		g. Coord. (to) Committee Name _____		d. Comments _____	
e. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				e. Election Sum to Date \$ 972.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
CSC 117	check	B+	4/1/2010	\$486.00	
				\$	
					\$ 1016.00
(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)					\$ 1061.00

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

Disbursements

Amendment	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
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Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

Committee to Re-Elect Al Jean Bogle Clerk of Court	SDU3D5
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<input checked="" type="checkbox"/> Operating Expenses	<input type="checkbox"/> Contributions to Candidates/Political Committees	<input type="checkbox"/> Coordinated Party Expenditures
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a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Comments
Catawba County GOP Newton, NC		
c. Level Registered (Specify)		e. Election Sum to Date
<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 35.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
CSC 117	check	O+	4/10/2010	\$35.00	tickets to GOP Picnic
				\$	

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Comments
Catawba County GOP Newton, NC		
c. Level Registered (Specify)		e. Election Sum to Date
<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 45.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
CSC 117	check	O+	4/10/2010	\$10.00	fee to display material at GOP picnic
				\$	

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Comments
c. Level Registered (Specify)		e. Election Sum to Date
<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$

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

	\$ 45.00
(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)	\$ 1061.00

B* - Printing	D - To Another Candidate
E - Salaries	H - Holding Public Office Expenses
J - Penalties	Q* - Donation to Legal Expense Fund

In-Kind Contributions

Pg 1 of 1

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

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
 Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number
Committee to Re-Elect A1 Jean Bogle Clerk of Court		SDU3D5
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
A1 Jean Bogle 1777 12th Street Hickory, NC 28601	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date
		\$
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
filing fee	2/8/10	\$ \$1025
		\$
		\$
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 <input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date
		\$
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 <input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date
		\$
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		\$
		\$
		\$
4. Total only this Page		\$ \$1025
5. Total of ALL CRO-1510 Pages <small>(This line must be on line 17 of Detailed Summary Page CRO-1100)</small>		\$ 1025