	Amen	dment		
Disclosure Report Cover	$\boxtimes$	Yes		
Is a this form for general report and committee information, must be signed and submitted along with a	ther d	etailed fo	rmc	

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 Inform	nation						
a. Full Name					c. ID Number		
Committee to Elect J	John Stiver						
	de City, State and Zip Code)				d. Date Filed		
502 S College Ave Newton, NC 28658					10/24/2019		
ĺ					e. Phone Number		
					828-612-0989		
2. Report Year	3. Period Start Date (mm/c	dd/yy) 4. Period (mm/dd/yy)	End Date	5. Treasurer Full	Name		
2019	1/1/2018	9/2	4/2019	John M Stiver			
6. Type of Committee	e (Check One)	9. Type of Report	(check on	ly one type of report	from one category)		
Candidate Campai		Municipal	State/C	J	Referendum		
PAC	Referendum	Organizationa	1 🔲	Organizational	Organizational		
Independent Expenditure Legal Expense Fur	Joint Fundraiser	Thirty-five day	y	Quarterly	Pre-referendum		
7. Type of Fund	(if applicable, check one)	Pre-primary		First	Final		
"Booster Fund"	н иррисине, спеск опе	1 = '		Second	Supplemental Final		
Building Fund		Pre-election Pre-runoff		Third	Annual		
		Semi-annual		Fourth	Special		
		Mid Year	r   L	Semi-annual	Special		
Other:		Year End		Mid Year	10. Special Report Name		
L. Oundr.		Final		Year End	101,07001111107011111101		
8. Number of Fundr	aisare this Depart	Special		Final			
o, inumper of Fundi	7	Бреста		Special			
11. Account Informa	o		11. Account				
a. Financial Institution Fi				titution Full Name			
People's Bank	un Name		a. A Mancial Miss				
b. Purpose	c. Account Code		b. Purpose		c. Account Code		
Campaign			b. I di pose		V.12000		
Finance	JM	S					
	d. Period Begin Balance	e			d. Period Begin Balance		
	\$ 357.13				\$		
CERTIFICATION							
the NC General Statut		mmingled with proh	ibited or other	non-disclosed funds.	& 22D-22M of Chapter 163 of I further certify that this report		
John M Stive		i dumou by the Ne S	State Board of I		10/24/2019		
Joini W Suve	Printed Name of Signer	S	ignature of Appoin	14 00 0	Date		
FOR OFFICE USE OF							
	,	T1			Delivery Method		
Date Received:	2	Employee:	8	INE DE L	Normal Mail		
Date Postmarked		Employee:	8-		Registered Mail Hand Delivered		
Date Scanned:		Employee:	n	OCT 25 20	Electronically Filed Signer has not received		
Date Data Entere	d:	Employee:		Ву	mandatory training		
Please Note: This		nend committee infor an of books informat			ess, treasurer, assistant treasurer,		

CRO-1000

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

 $N_0$ 

## **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		
Committee to Elect John Stiver	35 Day Report				
Start of Election Cycle: January 1,	2019	Total this Reporting Period	Total this d Election Cycle		
4) Cash on Hand at Start		\$ 357.13	\$ 357.13		
RECEIPTS		وعرازا الأراجة			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$		
6) Contributions from Individuals	(CRO-1210)	\$ 3367.99	\$ 3367.99		
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 Organization	ns <i>(CRO-1250)</i>	\$	\$		
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)	\$ 3367.99	\$ 3367.99		
EXPENDITURES					
13) Disbursements	P. P. M. T. S.				
13a) Operating Expenditures	(CRO-1310)	\$ 1704.46	\$ 1704.46		
13b) Contributions to Candidates/Political Committee	ees (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)	\$ 1547.99	\$ 1547.99		
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,		\$ 3252.45	\$ 3252.45		
19) Cash on Hand at End (Add lines 4 and 12 together, then subtr		\$ 472.67	\$ 472.67		
ADDITIONAL INFORMATION		THE PARTY OF THE P			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	The state of the		
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-1/10)				
	ì í	\$	\$		
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$		
28) Contributions to be Refunded	(CRO-1215)	\$	\$		

Amendment Dishursements **⊠** Yes

Disbursem				Pg <u>1</u> of	
			ee for; operating expen	ises, contributions to	candidate/political
	coordinated party ex				
76. 1. 11. 11. 1	ull Name (and Fun	d if applicable)			2. ID Number
Committee to E	lect John Stiver				
3. Type of Disb	ursement (Plea		CRO-1310 forms for ea		nent.)
Operating E	Expenses	Contributions to Ca	ndidates/Political Committee		oordinated Party Expenditures
4. Payee Inform	nation		Add	Remove	1 2 5 5
a. Full Name, Maili	ing Address & Phone		b. Coordinated Commit	tee Name	d. Comments
(include city, state,					
Reunion Parade					_
525 W A Street			c. Level Registered (Spe		_
Newton, NC 28	8658		Federal	County:	
828-466-2695			State	Municipality:	e. Election Sum to Date
					\$ 25.00
4.1	E	h. Purpose Code	: Doto (mm/dd/man)	j. Amount	k. Required Remarks
f. Account Code	g. Form of Payment	n. I ui pose Code	i. Date (mm/dd/yyyy)	j. Amount	Parade Fee
JMS	Check	О	8/18/19	\$25.00	1 made 1 cc
				\$	
4. Payee Inforn	nation		Add	Remove	
	ing Address & Phone		b. Coordinated Commit	tee Name	d. Comments
(include city, state,					
Lowes					
1550 21st Street	: Dr		c. Level Registered (Spe	cify)	
HIckory, NC 2	8602		Federal	County:	
828-3049069			State	Municipality:	e. Election Sum to Date
					\$ 7.34
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy	j. Amount	k. Required Remarks
JMS	Debt	0	8/21/19	\$7.34	USA POinwheels
				\$	
4 Deman Tulano	rátion.	П	Add	Remove	BUILD TO BE SEED OF THE SECOND
4. Payee Inform	ing Address & Phone		b. Coordinated Commit		d. Comments
(include city, state,	-				
Printables Unli					
PO Box 1525	iiiiou		c. Level Registered (Spe	cify)	
445 LIthia Inn	Road		Federal	County:	
Lincolnton, NC			State	Municipality:	e. Election Sum to Date
704-736-1411	200,0 1020				\$ 180.31
					\$ 180.31
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy	j. Amount	k. Required Remarks
JMS	Check	0	8/21/19	\$180.31	Pens to hand ou
				\$	
	A. There		\$ 212.65		
5. Total only th					ψ 212.03
O. 10121 Of ALI	CRO-1310 Pages	nmary Page CRO_11	00 if Operating Expenses)		1501.15
(This line goes in	i une 13a oj Deiuweu Sur 1 lino 13h of Dotoilod Sus	nmary Page CRO-11	00 if Contrib to Candidates/	Political Comm)	\$ 1704.46
(This line goes in	i tine 130 of Detailed Sur I line 13c of Detailed Sur	nmary Page CRO-116	00 if Coordinated Party Exp	enditures)	
	les (List detailed ex				
A Lui pose Cou	D* Drinting			D - To Anot	ther Candidate

A\* - Media F\* - Equipment E - Salaries

G - Political Party

K\* - Office Expenses

H\* - Holding Public Office Expenses Q\* - Donation to Legal Expense Fund

O\* - Other \* Codes require detailed explanation in required remarks field (k)

J - Penalties

I - Postage

					Amendment	
Disbursements	Pg	2	of	8	Yes	N

	ull Name (and Fun	d if applicable)			2. ID Number				
committee to El					1				
3. Type of Disb			CRO-1310 forms for each t						
Operating E		Contributions to Car	ndidates/Political Committees		ordinated Party Expenditures				
4. Payee Inform			Add	Remove					
No.	ng Address & Phone		b. Coordinated Committee N	ame	d. Comments				
(include city, state,									
The Observer N	ews Enterprise								
PO Box 48			c. Level Registered (Specify)						
Newton, NC 28	3658		Federal	County:					
828-464-0221			State	Municipality:	e. Election Sum to Date				
					\$ 315.00				
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks				
JMS	Check	A	7/22/19	\$315.00	Political Ads				
31410	CHCCK	A	1122119	\$313.00					
				\$					
4. Payee Inform	ation		Add	Remove					
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Na	ame	d. Comments				
(include city, state,	& zip)								
ASR Graphics									
623 B Carolina			c. Level Registered (Specify)						
Maiden, NC 28	650		Federal	County:					
828-428-0029			State 🖂	Municipality:	e. Election Sum to Date				
					\$ 243.96				
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks				
JMS	Debit	A	8/29/19	\$121.98	T Shirts				
JMS	Debit	A	9/12/19	\$121.98	T Shirts				
4. Payee Inform	ation		Add	Remove					
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Na	ime	d. Comments				
(include city, state,	& zip)								
Print Runner									
8000 Haskell Av	ve.		c. Level Registered (Specify)						
Van Nuys, CA 9	1406		Federal	County:					
888-296-5760			State 🖂	Municipality:	e. Election Sum to Date				
					\$ 134.53				
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks				
JMS	Debit	В	9/4/19	\$77.11	Stickers for wa				
JMS	Debit	В	8/21/19	\$57.42	Post Cards				
5. Total only thi	s Page				\$ 693.49				
6. Total of ALL	CRO-1310 Pages								
			) if Operating Expenses)		\$ 1704.46				
			) if Contrib to Candidates/Politic		\$ 1704.40				
			) if Coordinated Party Expenditu	res)					
	s (List detailed exp								
A* - Media E - Salaries	B* - Printing F* - Equipment	C* - Fund			her Candidate				
I - Postage	J - Penalties	G - Politic	ea Party e Expenses		Public Office Expenses n to Legal Expense Fund				
O* - Other	- I viiditios	AL -OHIC	- Apviises	Z - Donation	. to megar maperise Puritu				
* Codes require	* Codes require detailed explanation in required remarks field (k)								

								Amendment	
Disbursements				Pg	3	of	8	⊠ Yes □	No
41 0	 _		_	_	-		_	1	

	ull Name (and Fun	d if applicable)				2.	ID Number	
Committee to E								
3. Type of Disb				0-1310 forms for each t		The state of the s		
Operating E		Contributions to Ca		ates/Political Committees	Co	ordinated Part	y Expenditures	
4. Payee Inform	nation		-	Add	Remove			
	ng Address & Phone		b.	. Coordinated Committee N	ame	d. Comme	nts	
(include city, state,	& zip)		-					
US Post Office						1		
218 S Main Ave			c.	Level Registered (Specify)		-		
Newton, NC 28	8658		ᄩ	Federal	County:			
800-275-8777			L	State 🖂	Municipality:	e. Election	Sum to Date	
						\$ 70.00	)	
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Require	d Remarks	
JMS	Check	I		9/4/19	\$70.00	Stamps		
					\$			
4. Payee Inform	ation		1	dd.' 🗀 🗀 🗀 🖰	Remove:			
a. Full Name, Maili	ng Address & Phone		b.	Coordinated Committee Na	ame	d. Commer	ıts	
(include city, state,	& zip)		4					
Office Depot	v 11		_			-		
1858 Catawba V	•		c.	Level Registered (Specify)		-		
Hickory, NC 28	3602		ŀ	_ Federal	County:			
828-322-4053				State 🔀	Municipality:	e. Election	Sum to Date	
						\$ 60.19		
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required		
JMS	Debit	В		9/17/19	\$60.19	Handouts		
					\$			
	The state of the s			1 18. upo)				
4. Payee Inform			T	dd Coordinated Committee Na	Remove	3.0		
(include city, state,	ng Address & Phone		D.	Coordinated Committee Na	ıme	d. Commen	its	
Unifour Floral V			1					
935 3 <sup>rd</sup> Ave	VIIOICSAIC		6	Level Registered (Specify)				
Suite 104			Г	Federal T	County:			
Hickory, NC 28	8602		ᄩ	State	Municipality:	e Election	Sum to Date	
828-322-0188	7002		-	) Suite [A]	manorpanty.			
						\$ 49.22		
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required		
JMS	Debit	0		9/17/19	\$49.22	Flowers/F	talley	
					\$			
5. Total only thi	s Page	THE SHIP SHIP				\$ 17	79.41	
	CRO-1310 Pages					Ψ 17	7.11	
	line 13a of Detailed Sum	mary Page CRO-110	0 if (	Operating Expenses)			***	
(This line goes in	line 13b of Detailed Sum	mary Page CRO-110	9 if (	Contrib to Candidates/Politic	al Comm)	\$ 17	704.46	
				Coordinated Party Expenditu	res)			
	s (List detailed exp				Karan di Levi i	Y. ДЕДЕ		
A* - Media	B* - Printing	C* - Fund			D - To Anothe		-	
E - Salaries I - Postage	F* - Equipment J - Penalties	G - Politic K* - Office			H* - Holding Q* - Donation			
O* - Other	o - 1 cuatues	K - OIII	.e E	vhenses	A Donarioi	i to Legal E	yhense e quu	
	e detailed explanati	on in required re	ema	rks field (k)				

								Amendment	
Disbursements				Pg	4	of	8	⊠ Yes	No.
					_		_		

	full Name (and Fun	d if applicable)			2. ID Number
	lect John Stiver	y			
3. Type of Disb			CRO-1310 forms for each		
Operating E		Contributions to Ca	ndidates/Political Committees		Coordinated Party Expenditures
4. Payee Inform			Add	Remove	
a. Full Name, Maili	ing Address & Phone		b. Coordinated Committee N	d. Comments	
(include city, state,	& zip)				
Sam's					
2435 Highway			c. Level Registered (Specify)		
HIckory, NC 2	8602		Federal	County:	
828=326-8699			State 🔀	Municipality:	e. Election Sum to Date
					\$ 121.55
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
JMS	Debit		0/10 10	670.10	Funs/CookiesM
TIME	Deoit	0	9/19.19	\$72.12	
JMS	Debit	0	9/3/19	\$49.43	Cookies-Rally
4. Payee Inform	nation		Add' []	Remove	
a. Full Name, Maili	ing Address & Phone		b. Coordinated Committee N		d. Comments
(include city, state,	•				
Mike Sherrill M					
PO Box 492			c. Level Registered (Specify)		
Newton, NC 28	3658		Federal	County:	
828-612-1037			State 🖂	Municipality:	e. Election Sum to Date
					\$ 300.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j, Amount	k. Required Remarks
TMC					Music/Ralley
JMS	Check	G	9/24/19	\$300.00	
•				\$	
4. Payee Inform	ation		Add $\square$	Remove	
	ng Address & Phone		b. Coordinated Committee N	d. Comments	
(include city, state,	0		or coor answer commission 14	pa pa a v	u comments
Peoples Bank	St Zap)				
420 W A Street			c. Level Registered (Specify)		
Newton, NC 28			Federal	County:	_
828-464-5663	1050		State	Municipality:	e. Election Sum to Date
020 404-5005			State	wanicipanty.	e. Election Sum to Date
					\$ 16.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
JMS	Debit	0	8/31/19	\$8.00	Bank Fee
JMS	Debit	0	7/30/19	\$8.00	Bank Fee
5. Total only thi	s Page	IE Q-WASTERS	The state of the s	Seal Vindini	\$ 437.55
	CRO-1310 Pages			The Contract of the	Ψ37.33
		ımary Page CRO-110	0 if Operating Expenses)		
			0 if Contrib to Candidates/Politic	eal Comm)	\$ 1704.46
			0 if Coordinated Party Expenditu		
	es (List detailed exp			I S S AII BU	
A* - Media	B* - Printing	C* - Fund	The second second second	D - To Anot	her Candidate
E - Salaries	F* - Equipment		0	H* - Holdin	g Public Office Expenses
I - Postage	J - Penalties	K* - Offic	ce Expenses	on to Legal Expense Fund	
O* - Other	e detailed explanati	ion in vocalued -	omanica Gald (In)		

				Amenument	
Disbursements	Pg	<u>5</u>	of <u>8</u>	⊠ Yes	No No

	ull Name (and run	d ii applicable)				Z. ID Number			
	lect John Stiver								
3. Type of Disb	ursement (Plea	ise use separate C	CRO-1310 forms for	each i					
Operating E	xpenses	Contributions to Ca	ndidates/Political Commi	ttees	Co	pordinated Party Expenditures			
4. Payee Inform	nation		Add		Remove				
a. Full Name, Maili	ing Address & Phone		b. Coordinated Com	nittee N	ame	d. Comments			
(include city, state,	& zip)								
Peoples Bank									
420 W A Street			c. Level Registered (S	pecify)					
Newton, NC 28			Federal	Π	County:				
828-464-5663	7050		State	$\boxtimes$	Municipality:	e. Election Sum to Date			
020 404 5005			State	<u></u>					
						\$ 18.00			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yy	arer k	j. Amount	k. Required Remarks			
1. Account Cour	g. rorm or rayment	M T al post coat	i. Date (minutary)	33)	j. Amount	k. Required Remarks			
					\$				
						Cl. 1			
JMS	Debit	0	8/21/19		\$18.00	Checks			
					<u> </u>				
4. Payee Inform	ation		Add		Remove				
a. Full Name, Maili	ng Address & Phone		b. Coordinated Comr	nittee N	ame	d. Comments			
(include city, state,	& zip)								
Eleen's Dairy Co	enter								
1712 N Main A			c. Level Registered (S	pecify)					
Newton, NC 28	8658		Federal	П	County:				
828-464-8460	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		State	$\boxtimes$	Municipality:	e. Election Sum to Date			
020-404-0400						C. Election Sum to Date			
						\$ 55.36			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yy	yy)	j. Amount	k. Required Remarks			
						Slaw/Ralley			
JMS	Debit	G	9/21/19		\$55.36	Sia			
					\$				
4. Payee Inform	ation		Add		Remove				
	ng Address & Phone		b. Coordinated Comm	nittee N	ame	d. Comments			
(include city, state,	0								
Peoples Bank	ос гар)								
420 W A Street			c. Level Registered (S	necify)		†			
	2650		Federal		County:				
Newton, NC 28	0038			H	*	e. Election Sum to Date			
828-464-5663			State		Municipality:	e. Liection Sum to Date			
						\$ 12.00			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yy	vv)	j. Amount	k. Required Remarks			
I. ACCOUNT COUC	g. roim of Layment		i. Date (min/ud/yy	<i>331</i>	J. ramount	Service Charge			
JMS	Debit	О	1/31/18		\$6.00	Service Charge			
						Service Charge			
JMS	Debit	0	2/28/18		\$6.00	Service Charge			
	- Marie					\$ 85.36			
5. Total only thi				-		\$ 63.30			
- 100, ( ,00	CRO-1310 Pages					1			
	line 13a of Detailed Sun				1.C	\$ 1746.04			
	(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)								
				xpenditi	ures)				
	es (List detailed ex								
A* - Media	B* - Printing	C* - Fund			<b>D</b> - To Anoth				
E - Salaries	F* - Equipment		•			Public Office Expenses			
I - Postage	J - Penalties	K* - Offic	ce Expenses		Q* - Donatio	on to Legal Expense Fund			
O* - Other			- A (- X)						
* Codes require	e detailed explanati	on in required re	emarks field (k)						

<b>T</b>		rsem	4
	ahıı	THE CARRY	AMTO

Pg <u>6</u>

of 8

Amendment Yes

No

1. Committee Full Name (and Fund if applicable)  2. ID Number							
Committee to El							
3. Type of Disbu		se use senarate C	RO-1310 forms for each ty	pe of Disbursem	ent.)		
Operating Ex			ndidates/Political Committees	Coc	ordinated Party Expenditures		
4. Payee Inform			Add	Remove			
			b. Coordinated Committee Na		d. Comments		
	ng Address & Phone						
(include city, state, a	x zip)						
Peoples Bank			c. Level Registered (Specify)				
420 W A Street	(50		Federal	County:			
Newton, NC 28	800		State	Municipality:	e. Election Sum to Date		
828-464-5663			☐ State ☐	within cipality.	c. Execution Sum to Date		
					\$ 12.00		
	- P 6B	h. Purpose Code	i Data (mm/dd/sunsa)	j. Amount	k. Required Remarks		
f. Account Code	g. Form of Payment	n. 1 ui pose Coue	i. Date (mm/dd/yyyy)	J. Amount	Service Charge		
JMS	Debit	O	3/30/18	\$6.00	Service Charge		
					Service Charge		
JMS	Debit	0	4/30/18	\$6.00	Get vice Cliarge		
			A.1.1	Pamara			
4. Payee Inform			Add	Remove	d. Comments		
	ng Address & Phone		b. Coordinated Committee Na	ше	u. Comments		
(include city, state,	& zip)						
Peoples Bank							
420 W A St			c. Level Registered (Specify)				
Newton, NC 28	658		Federal	County:	71 11 2 7		
828-464-5663			State 🖂	Municipality:	e. Election Sum to Date		
					\$ 12.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
AV I ROUGHINI COME					Service Charge		
JMS	Debit	О	5/31/18	\$6.00			
				0.000	Service Charge		
JMS	DEbit	О	6/29/18	\$6.00			
4. Payee Inform	ation		Add	Remove			
		استا	b. Coordinated Committee Na		d. Comments		
· ·	ng Address & Phone						
(include city, state,	ox Zip)						
Peoples Bank			c. Level Registered (Specify)				
420 W A St			Federal Federal	County:			
Newton, NC 28658			State	Municipality:	e. Election Sum to Date		
828-464-5663			LI State 🔼	manoipanty.			
					\$ 12.00		
£ Agggrupt C-3-	g Form of Daymant	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
f. Account Code	g. Form of Payment	III I II POST COME	is nace (minimal)jjj)		Service Charge		
JMS	Debit	0	7/31/18	\$6.00	21,144 2		
					Service Charge		
JMS	Debit	o	8/31/18	\$6.00	Service Charge		
0 2000							
5. Fotal only this lage							
6. Total of ALL CRO-1310 Pages  (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)  \$\frac{1704.46}{3}\$							
(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)  \$ 1704.46							
(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* - Fundr E - Salaries F* - Equipment G - Politica					Public Office Expenses		
I - Postage	J - Penalties				n to Legal Expense Fund		
O* - Other							
* Codes require detailed explanation in required remarks field (k)							

				Amen	dment	
Disbursements	Pg	<u>7</u>	of <u>8</u>		Yes	No

	uli Name (and Fun	d if applicable)				2. ID Number		
Committee to Elect John Stiver								
3. Type of Disb	3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
Operating E	xpenses	Contributions to Car	ndid	lates/Political Committees	L Co	pordinated Party Expenditures		
4. Payee Information				∡dd □	Remove			
a. Full Name, Maili	ng Address & Phone		b.	. Coordinated Committee N	lame	d. Comments		
(include city, state,	•							
Peoples Bank	cc zip)		1					
420 W A St				Level Registered (Specify)				
	V. 50		С.		Country			
Newton, NC 28	8608		Federal County:			71 1 2 1 7		
828-464-5663			State Municipality:			e. Election Sum to Date		
						\$ 12.00		
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JMS	Debit	О		9/28/18	\$6.00	Service Charge		
JMS	Debit	О		10/31/18	\$6.00	Service Charge		
4. Payce Inform	ation		A	dd 🔲	Remove			
		اسا	-	. Coordinated Committee N		d. Comments		
	ng Address & Phone		D.	. Con amateu Committee N				
(include city, state,	& Zip)		-					
Peoples Bank			-					
420 W A St			c.	Level Registered (Specify)				
Newton, NC 28	3658		L	Federal	County:			
828-464-5663				State 🖂	Municipality:	e. Election Sum to Date		
						\$ 12.00		
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
TMC	Dobit	0		11/30/18	\$6.00	Service Charge		
JMS	Debit	U		11/30/16	\$0.00			
JMS	Debit	0		12/31/18	\$6.00	Service Charge		
4. Payee Inform	otion		Α	dd 🗍	Remove			
7,311.11.11.11.11.11.11.11.11.11.11.11.11.			b. Coordinated Committee Name			d. Comments		
l '	ng Address & Phone		b. Cool dinated Committee Name			u. Comments		
(include city, state,	& zip)							
Peoples Bank								
420 W A St			c. Level Registered (Specify)					
Newton, NC 28	658		Federal County:					
828-464-5663			State Municipality:			e. Election Sum to Date		
020 101 3003						\$ 12.00		
f. Account Code	g. Form of Payment	h. Purpose Code	_	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JMS	Debit	0		1/31/19	\$6.00	Service Charge		
						Service Charge		
JMS	DEbit	0		2/28/19	\$6.00			
5. Total only thi						\$ 36.00		
6. Total of ALL CRO-1310 Pages								
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$\\$1704.46\$								
(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* - Fund				ner Candidate		
E - Salaries F* - Equipment G - Politic						g Public Office Expenses		
1 .						on to Legal Expense Fund		
O* - Other				•				
*Codes require	e detailed explanati	ion in required re	ema	arks field (k)				

				Amendment	
Disbursements	Pg	<u>8</u>	of <u>8</u>	⊠ Yes	No

	ull Name (and Fun	d if applicable)			2. ID Number			
Committee to Elect John Stiver								
3. Type of Disbu	rsement (Plea	se use separate C	RO-1310 forms for each t	vpe of Disburseme	ent.)			
Operating E			ndidates/Political Committees		ordinated Party Expenditures			
4. Payee Inform			Add	Remove	A STATE OF THE PARTY OF THE PAR			
			b. Coordinated Committee Na		d. Comments			
	ng Address & Phone		b. Cool dinated Committee 14	ame	d. Comments			
(include city, state,	& zip)		-					
Peoples Bank								
420 W A St			c. Level Registered (Specify)					
Newton, NC 28	658		Federal	County:				
			State 🖂	Municipality:	e. Election Sum to Date			
					\$ 12.00			
		h Down Code		T	1 D 1 1D 1			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
JMS	Debit	О	3/29/19	\$6.00	Service Charge			
JIVIS	Deon	O	3/29/19	\$0.00				
_				0.00	Service Charge			
JMS	Debit	0	4/30/19	\$6.00	J			
4 Decree Income	.41		Add	Remove				
4. Payee Inform		<b>L</b>			3.6			
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Na	ame	d. Comments			
(include city, state,	& zip)							
Peoples Bank								
420 W A St			c. Level Registered (Specify)					
Newto, NC 286	58		Federal	County:				
110Wt0, 11C 200	50		State	Municipality:	e, Election Sum to Date			
			State	withincipanty.	e, Election Sum to Date			
					\$ 12.00			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
Milosouni Couc	Br I drill of I dy money	-		•	Service Charge			
JMS	Debit	0	5/31/19	\$6.00	Service Charge			
					0.1.01			
JMS	Debit	0	6/28/19	\$6.00	Service Charge			
JIVIO	Deoit	0	0/20/19	\$0.00				
4. Payee Inform	ation		Add	Remove				
	ng Address & Phone		b. Coordinated Committee Na	ame	d. Comments			
(include city, state,	& Zip)		-					
			c. Level Registered (Specify)					
			Federal	County:				
			State	Municipality:	e. Election Sum to Date			
					\$			
f. Account Code	g. Form of Payment	h. Purpose Code	i, Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
	D							
				\$				
				\$				
	70				\$ 24.00			
5. Total only thi	A Character C	φ ∠4.00						
6. Total of ALL CRO-1310 Pages								
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)  \$ 1704.46								
(This line goes in	line 13b of Detailed Sun	ımary Page CRO-110	0 if Contrib to Candidates/Politic	cal 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* - Fun		D - To Anothe	r Candidate			
E - Salaries	F* - Equipment	G - Politic			Public Office Expenses			
I - Postage	J - Penalties		ce Expenses		to Legal Expense Fund			
O* - Other	g 1 challes	IZ - OIII	Tubenses	*				
* Codes require detailed explanation in required remarks field (k)								