

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 BJ Barnes for Sheriff | c. ID Number |
| b. Mailing Address (include City, State and Zip Code) P.O. Box 19707 Greensboro, NC 27419 | d. Date Filed 7-27-2007 |
| | e. Phone Number |

| | | | |
|------------------------|---|---|-------------------------------------|
| 2. Report Year 2007 | 3. Period Start Date (mm/dd/yy) 01-01-2007 | 4. Period End Date (mm/dd/yy) 06-30-2007 | 5. Treasurer Full Name BJ Barnes |
|------------------------|---|---|-------------------------------------|

| | | | | |
|--|--|---|--|---|
| 6. Type of Committee (Check One) <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum | | 9. Type of Report (check only one type of report from one category) | | |
| 7. Type of Fund (if applicable, check one) <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> NC Political Party Financing Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other: | | Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special | State/County <input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First Plus <input type="checkbox"/> Second <input type="checkbox"/> Third Plus <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input checked="" type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special | Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special |
| 8. Number of Fundraisers this Report | | 10. Special Report Name | | |

| | | | |
|--|---|--|---------------------------------|
| 11. Account Information | | 11. Account Information | |
| a. Financial Institution Full Name Branch Banking + Trust | | a. Financial Institution Full Name Branch Banking + Trust | |
| b. Purpose Campaign expenses | c. Account Code a | b. Purpose Campaign CD | c. Account Code b |
| | d. Period Begin Balance \$26,201 ⁸⁷ | | d. Period Begin Balance \$ 0 |

CERTIFICATION

I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct and that I have been trained by the NC State Board of Elections according to Article 163.278.9(k).

BJ Barnes _____ 7-27-07
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: **RECEIVED** Employee: _____
 Date Postmarked: **JUL 27 2007** Employee: _____
 Date Scanned: **GUILFORD COUNTY** Employee: _____
 Date Data Entered: **BOARD of ELECTIONS** 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 | 2. ID Number | |
|---|-----------------------------|-----------------------------|---------------------------|
| BJ Barnes for Sheriff | MidYear 2007 Semi Annual | | |
| Start of Election Cycle: January 1, <u>2007</u> | | Total this Reporting Period | Total this Election Cycle |
| 4) Cash on Hand at Start | | \$ 26,201 ⁸⁷ | \$ 26,201 ⁸⁷ |
| 5) Aggregated Contributions from Individuals | (CRO-1205) | \$ 0 | \$ 0 |
| 6) Contributions from Individuals | (CRO-1210) | \$ 93 ³⁶ | \$ 93 ³⁶ |
| 7) Contributions from Political Party Committees | (CRO-1220) | \$ 0 | \$ 0 |
| 8) Contributions from Other Political Committees | (CRO-1230) | \$ 1,861 ⁰⁰ | \$ 1,861 ⁰⁰ |
| 9) Loan Proceeds | (CRO-1410) | \$ 0 | \$ 0 |
| 10) Refunds/Reimbursements To the Committee | (CRO-1240) | \$ 425 | \$ 425 |
| 11) Other Receipt Sources | | | |
| 11a) Interest on Bank Accounts | (CRO-1250) | \$ 0 | \$ 0 |
| 11b) Contributions from Not-for-Profit Organizations | (CRO-1250) | \$ 0 | \$ 0 |
| 11c) Outside Sources of Income | (CRO-1250) | \$ 0 | \$ 0 |
| 12) TOTAL RECEIPTS | | \$ 1,958 ⁶¹ | \$ 1,958 ⁶¹ |
| <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, and 11c)</i> | | | |
| 13) Disbursements | | | |
| 13a) Operating Expenditures | (CRO-1310) | \$ 999 ⁹⁸ | \$ 999 ⁹⁸ |
| 13b) Contributions to Candidates/Political Committees | (CRO-1310) | \$ 0 | \$ 0 |
| 13c) Coordinated Party Expenditures | (CRO-1310) | \$ 0 | \$ 0 |
| 14) Loan Repayments | (CRO-1420) | \$ 0 | \$ 0 |
| 15) Refunds/Reimbursements From the Committee | (CRO-1320) | \$ 0 | \$ 0 |
| 16) In-Kind Contributions | (CRO-1510) | \$ 93 ³⁶ | \$ 93 ³⁶ |
| 17) TOTAL EXPENDITURES | | \$ 1,093 ³⁴ | \$ 1,093 ³⁴ |
| <i>(Add lines 13a, 13b, 13c, 14, 15, and 16)</i> | | | |
| 18) Cash on Hand at End | | \$ 27,067 ¹⁴ | \$ 27,067 ¹⁴ |
| <i>(Add lines 4 and 12 together, then subtract line 17)</i> | | | |
| 19) Non-Monetary Gifts Given to Other Committees | (CRO-1330) | \$ 0 | |
| 20) Outstanding Loans (incl. ones from other campaigns) | (CRO-1430) | \$ 0 | |
| 21) Debts and Obligations owed By the Committee | (CRO-1610) | \$ 0 | |
| 22) Debts and Obligations owed To the Committee | (CRO-1620) | \$ 0 | |
| 23) Account Transfers Within the Committee | (CRO-1720) | \$ 20,000 ⁰⁰ | |
| 24) Administrative Support | (CRO-1710) | \$ 0 | \$ 0 |
| 25) Forgiven Loans | (CRO-1440) | \$ 0 | \$ 0 |
| 26) 48-Hour Notice Reports Sum | | \$ 0 | \$ 0 |

Contributions from Individuals

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 | |
| BS Barnes 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 | |
| Kenneth L. Whitesell 3513 Friedens Wood Drive Gibsonville NC 27249 | | | | deputy | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | law enforcement | | e. Election Sum to Date | |
| | | | | | | \$ 9336 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | | | Cards for rally | 2-25-07 | \$ 4815 | | |
| <input type="checkbox"/> | | | drinks for rally | 2-25-07 | \$ 4521 | | |
| <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 | | | | | | \$ | |
| 5. Total of ALL CRO-1210 Pages | | | | | | \$ | |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | | |

Contributions from Other Political Committees

Page 1 of 1 Amendment Yes No

Use this form to report contributions from other candidate, referendum or PAC committees

| | | | | | |
|---|--------------------|------------------------|---|-----------------------|-------------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | 2. ID Number | |
| BJ Barnes 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 Committee | | d. Comments |
| Committee to Elect Vernon Ward 5250 Sweetwater Ct Greensboro NC 27407 | | | <input type="checkbox"/> Candidate <input type="checkbox"/> PAC | | |
| | | | <input type="checkbox"/> Referendum | | |
| | | | c. Level Registered (Specify) | | |
| | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: | | e. Election Sum to Date |
| | | | <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ |
| | | | | | \$ |
| 7. Account Code | g. Form of Payment | h. In-Kind Description | i. Date (mm/dd/yyyy) | j. Amount | |
| a | ck | | 1-10-07 | \$ 1861 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 Committee | | d. Comments |
| | | | <input type="checkbox"/> Candidate <input type="checkbox"/> PAC | | |
| | | | <input type="checkbox"/> Referendum | | |
| | | | c. Level Registered (Specify) | | |
| | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: | | e. Election Sum to Date |
| | | | <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ |
| | | | | | \$ |
| 7. Account Code | g. Form of Payment | h. In-Kind Description | i. Date (mm/dd/yyyy) | j. 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 Committee | | d. Comments |
| | | | <input type="checkbox"/> Candidate <input type="checkbox"/> PAC | | |
| | | | <input type="checkbox"/> Referendum | | |
| | | | c. Level Registered (Specify) | | |
| | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: | | e. Election Sum to Date |
| | | | <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ |
| | | | | | \$ |
| 7. Account Code | g. Form of Payment | h. In-Kind Description | i. Date (mm/dd/yyyy) | j. Amount | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| 4. Total only this Page | | | | \$ | |
| 5. Total of ALL CRO-1230 Pages | | | | \$ 1861 ⁰⁰ | |
| <i>(This line must be on line 8 of Detailed Summary Page CRO-1100)</i> | | | | | |

Refunds/Reimbursements To the Committee

Use this form to report refunds received by the committee or reimbursements for a previous expenditure

| | | | | | |
|--|---------------------------|--|--|------------------------------------|-------------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | 2. ID Number | |
| BJ Barnes for Sheriff | | | | | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | d. Type of Committee | | g. Comments |
| WFMY News 2 1615 Phillips Avenue P.O. Box TV-2 Greensboro NC 27420 | | | <input type="checkbox"/> Candidate <input type="checkbox"/> PAC | | |
| | | | <input type="checkbox"/> Referendum <input type="checkbox"/> Party | | |
| | | | e. Level Registered (Specify) | | h. Original Expenditure Date |
| <input type="checkbox"/> Federal <input type="checkbox"/> County: | | | | | |
| <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | | | | |
| | | | | i. Original Expenditure Amt | |
| | | | | \$ | |
| b. Job Title/Profession | | c. Employer's Name/Specific Field | | f. Purpose | |
| | | | | refund | |
| | | | | j. Election Sum to Date | |
| | | | | \$ | |
| k. Account Code | l. Form of Payment | m. In-Kind Description | | n. Date (mm/dd/yyyy) | o. Amount |
| a | ck | | | 1-10-07 | \$ 4 ²⁵ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | d. Type of Committee | | g. Comments |
| | | | <input type="checkbox"/> Candidate <input type="checkbox"/> PAC | | |
| | | | <input type="checkbox"/> Referendum <input type="checkbox"/> Party | | |
| | | | e. Level Registered (Specify) | | h. Original Expenditure Date |
| <input type="checkbox"/> Federal <input type="checkbox"/> County: | | | | | |
| <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | | | | |
| | | | | i. Original Expenditure Amt | |
| | | | | \$ | |
| b. Job Title/Profession | | c. Employer's Name/Specific Field | | f. Purpose | |
| | | | | | |
| | | | | j. Election Sum to Date | |
| | | | | \$ | |
| k. Account Code | l. Form of Payment | m. In-Kind Description | | n. Date (mm/dd/yyyy) | o. Amount |
| | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | d. Type of Committee | | g. Comments |
| | | | <input type="checkbox"/> Candidate <input type="checkbox"/> PAC | | |
| | | | <input type="checkbox"/> Referendum <input type="checkbox"/> Party | | |
| | | | e. Level Registered (Specify) | | h. Original Expenditure Date |
| <input type="checkbox"/> Federal <input type="checkbox"/> County: | | | | | |
| <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | | | | |
| | | | | i. Original Expenditure Amt | |
| | | | | \$ | |
| b. Job Title/Profession | | c. Employer's Name/Specific Field | | f. Purpose | |
| | | | | | |
| | | | | j. Election Sum to Date | |
| | | | | \$ | |
| k. Account Code | l. Form of Payment | m. In-Kind Description | | n. Date (mm/dd/yyyy) | o. Amount |
| | | | | | \$ |
| 4. Total only this Page | | | | | \$ |
| 5. Total of ALL CRO-1240 Pages | | | | | \$ 4 ²⁵ |
| <small>(This line must be on line 10 of Detailed Summary Page CRO-1100)</small> | | | | | |

Disbursements

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) BJ Barnes For Sheriff | 2. ID Number |
|---|---------------------|

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) Cheap Copies 1306 East Wendover Ave Greensboro NC 27405 | b. Coordinated Committee Name | d. Comments |
| | c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> 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 |
|-----------------|--------------------|-----------------|----------------------|----------------------|---------------------|
| a | ck | B | 1-11-2007 | \$ 310 ³⁰ | greeting cards |
| | | | | \$ | |

4. Payee Information Add Remove

| | | |
|--|--|---|
| a. Full Name, Mailing Address & Phone (include city, state, & zip) News + Record P.O. Box 21966 Greensboro NC 27420 | b. Coordinated Committee Name | d. Comments |
| | c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | e. Election Sum to Date \$ 58 ²⁴ |

| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
|-----------------|--------------------|-----------------|----------------------|---------------------|---------------------|
| a | ck | A | 2-05-07 | \$ 29 ¹² | newspaper |
| a | ck | A | 4-05-07 | \$ 29 ¹² | subscription |

4. Payee Information Add Remove

| | | |
|---|--|--------------------------------------|
| a. Full Name, Mailing Address & Phone (include city, state, & zip) Susan Whitesell 3513 Friedens Wood Drive Gibsonville NC 27249 | b. Coordinated Committee Name | d. Comments |
| | c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> 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 |
|-----------------|--------------------|-----------------|----------------------|----------------------|-----------------------------|
| a | ck | C | 2-28-2007 | \$ 207 ⁵¹ | supplies for campaign rally |
| | | | | \$ | |

5. Total only this Page \$ 576⁰⁵

6. Total of ALL CRO-1310 Pages
 (This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)
 (This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)
 (This line goes in line 14c 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 | O* - Other |

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

Disbursements

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) BJ Barnes For Sheriff | 2. ID Number |
|---|---------------------|

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 <i>(include city, state, & zip)</i> Sandra W. Carter 4273 McIntyre Road Gibsonville NC 27249 | b. Coordinated Committee Name | d. Comments |
| c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> 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 |
|-----------------|--------------------|-----------------|----------------------|---------------------|-------------------------|
| a | ck | C | 2-28-2007 | \$124 ²³ | Food for campaign rally |
| | | | | \$ | |

4. Payee Information Add Remove

| | | |
|--|--------------------------------------|--------------------------------------|
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> Guilford College Community Citizens P.O. Box 8695 Greensboro NC 27419 | b. Coordinated Committee Name | d. Comments |
| c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> 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 |
|-----------------|--------------------|-----------------|----------------------|--------------------|---------------------|
| a | ck | A | 4-05-2007 | \$30 ⁰⁰ | ad in show program |
| | | | | \$ | |

4. Payee Information Add Remove

| | | |
|--|--------------------------------------|--------------------------------------|
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> | b. Coordinated Committee Name | d. Comments |
| c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> 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 |
|-----------------|--------------------|-----------------|----------------------|-----------|---------------------|
| | | | | \$ | |
| | | | | \$ | |

| | |
|--|----------------------|
| 5. Total only this Page | \$ 154 ²³ |
| 6. Total of ALL CRO-1310 Pages <i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> | \$ 999 ⁹⁸ |

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 | O* - Other |

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

In-Kind Contributions

Use this form to report non-monetary contributions, donations, goods or services

| | |
|---|---------------------|
| 1. Committee Full Name (and Fund if applicable) BJ Barnes For Sheriff | 2. ID Number |
|---|---------------------|

| | | |
|--|---|---|
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) Kenneth L. Whitesell 3573 Friedens Wood Drive Gibsonville NC 27249 | b. Type of Contributor <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 | c. Comments |
| | | d. Election Sum to Date \$ 9336 |
| e. Description | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| cards for rally | 2-25-07 | \$ 48 ¹⁵ |
| drinks for rally | 2-25-07 | \$ 45 ²¹ |
| | | \$ |

| | | |
|--|--|--------------------------------------|
| 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 <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 | c. Comments |
| | | 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 <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 | c. Comments |
| | | d. Election Sum to Date \$ |
| e. Description | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| | | \$ |
| | | \$ |
| | | \$ |

| | |
|--------------------------------|----|
| 4. Total only this Page | \$ |
|--------------------------------|----|

| | |
|--|---------|
| 5. Total of ALL CRO-1510 Pages <i>(This line must be on line 16 of Detailed Summary Page CRO-1100)</i> | \$ 9336 |
|--|---------|

