48-Hour Notice

Amendment Yes

 \boxtimes No

Use this form to report all contributions of \$1,000 or more.

Notice must be filed within 48 hours of receipt of contribution. The 48-Hour reporting period begins the day after the last day of the 1st Quarter-Plus report period and ends the day of the Primary Election and begins the day after the last day of the 3rd Quarter-Plus report period and ends the day of the General Election. All 48 Hour In-Kind Contributions must be recorded on CRO-1510 and attached.

This notice may be faxed in order to meet the 48 hour deadline.			
1. Committee Information			
B. Pull Name			e. ID Number
Friends of Chad Stewart JO			JOH-06H7AY-C-001
b. Mailing Address (include City, State and Zip Code) d. Rep			l. Report Date
PO Box 701 Clayton, NC 27528			4/25/18
		e. Phone Number	
			919-550-2100
2. Contribution Information		2. Contribution Information	
a. Full Name, Mailing Address & Phone	Add	a. Full Name, Mailing Address & Phone	Add
(include city, state, and zip)	Remove	(include city, state, and zip)	Remové
Wade Corbett		Ronnie Stephens	
54 Makers Way		6508 Southern Times Drive	
Garner, NC 27529		Raleigh, NC 27603	
Garler, NC 27527		1.000.000.000.0000.0000	
b. Type of Contributor		b. Type of Contributor	
☐ Individual (if checked, must specify b2 and b3) ☐ Individual		☐ Individual (if ca	hecked, must specify b2 and b3)
Political Party		Political Party	
Other Political Committee (if checked, must specify b1)		Other Political Committee (if checked, must specify b1)	
Not-for-Profit (if checked, must specify b4)		Not-for-Profit (if checked, must specify b4)	
Other Source: Other Source:			
- I		b1. Type of Committee	
Federal County: State Municipality:		Federal County: State Municipality:	
b2. Job Title/Profession	b4. Federal ID Number	b2. Job Title/Profession	b4. Federal ID Number
Real Estate Broker		Owner	
b3. Employer's Name/Specific Field	c. Form of Payment	b3. Employer's Name/Specific Field	c. Form of Payment
Re/Max	ck	Carolina Conduit	ck
		Systems	
d. Date (mm/dd/yyyy)	f. Amount	d. Date (mm/dd/yyyy)	f. Amount
4/23/18	\$ 1000.00	4/23/18	\$ 3500.00
e. Account Code	g. Election Sum to Date	e. Account Code	g. Election Sum to Date
CS1	\$ 1000.00	CS1	\$ 3500.00
3. Total Contributions THIS Page	(sum all the '2f' entries on th	nis page)	\$ 4500.00
4. Total Contributions ALL Pages	(if milti-page, only list on p	age()	\$ 4500.00
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, correct and that I have been trained by the NC State Board of Elections. The contributions were received no more than 48 hours prior to this notice being filed. I understand that all contributions including those reported on this notice must also be reported on the next scheduled campaign disclosure report. Heather Ford Printed Name of Signer Signature of Appointed Treasurer Date			
Printed Name of Signer Signature of Appointed Treasures			