

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 | |
| BIZZELL FOR SHERIFF | | 2018 Second Quarter | | JOH-71VPHR-C-001 | |
| Start of Election Cycle: January 1, 2015 | | | Total this Reporting Period | | Total this Election Cycle |
| 4) Cash on Hand at Start | | | \$ 31,380.36 | | \$ 36,634.94 |
| RECEIPTS | | | | | |
| 5) Aggregated Contributions from Individuals (CRO-1205) | | \$ 455.00 | | \$ 2,750.00 | |
| 6) Contributions from Individuals (CRO-1210) | | \$ 6,350.00 | | \$ 31,912.68 | |
| 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) | | \$ 230.00 | | \$ 230.00 | |
| 11) Other Receipt Sources | | | | | |
| 11 a) Interest on Bank Accounts (CRO-1250) | | \$ 0.00 | | \$ 0.00 | |
| 11 b) Contributions from Not-For-Profit Organizations (CRO-1250) | | \$ 0.00 | | \$ 0.00 | |
| 11 c) Outside Sources of Income (CRO-1250) | | \$ 0.00 | | \$ 0.00 | |
| 11 d) Legal Expense Fund - Other Sources (CRO-1270) | | \$ 0.00 | | \$ 0.00 | |
| 11 e) 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) | | \$ 7,035.00 | | \$ 34,892.68 | |
| EXPENDITURES | | | | | |
| 13) Disbursements | | | | | |
| 13a) Operating Expenditures (CRO-1310) | | \$ 13,561.84 | | \$ 42,857.31 | |
| 13b) Contributions to Candidates/Political Committees (CRO-1310) | | \$ 0.00 | | \$ 2,450.00 | |
| 13c) Coordinated Party Expenditures (CRO-1310) | | \$ 0.00 | | \$ 0.00 | |
| 14) Aggregated Non-Media Expenditures (CRO-1315) | | \$ 0.00 | | \$ 461.43 | |
| 15) Loan Repayments (CRO-1420) | | \$ 0.00 | | \$ 0.00 | |
| 16) Refunds/Reimbursements from the Committee (CRO-1320) | | \$ 1,100.00 | | \$ 1,552.68 | |
| 17) In-Kind Contributions (CRO-1510) | | \$ 1,100.00 | | \$ 1,552.68 | |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) | | \$ 15,761.84 | | \$ 48,874.10 | |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) | | \$ 22,653.52 | | \$ 22,653.52 | |
| ADDITIONAL INFORMATION | | | | | |
| 20) Non-Monetary Gifts Given to Other Committees (CRO-1330) | | \$ 0.00 | | | |
| 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) | | \$ 0.00 | | | |
| 22) Debts and Obligations owed by the Committee (CRO-1610) | | \$ 0.00 | | | |
| 23) Debts and Obligations owed to the Committee (CRO-1620) | | \$ 0.00 | | | |
| 24) Account Transfers Within the Committee (CRO-1720) | | \$ 0.00 | | | |
| 25) Administrative Support (CRO-1710) | | \$ 0.00 | | \$ 0.00 | |
| 26) Forgiven Loans (CRO-1440) | | \$ 0.00 | | \$ 0.00 | |
| 27) 48-Hour Notice Reports Sum (CRO-2220) | | \$ 0.00 | | \$ 0.00 | |
| 28) Contributions to be Refunded (CRO-1215) | | \$ 0.00 | | \$ 0.00 | |

Aggregated Contributions from Individuals

Amendment
 Yes No

Optional form used to report NC Contributions From Individuals of \$50 or less

| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
|---|-----------------|--------------------|------------------------|----------------------|---------------------|----------|
| BIZZELL FOR SHERIFF | | | | | JOH-71VPHR-C-001 | |
| 3. Contributor Information | | | | | | |
| a. Amend | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount | |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | SB1 | Check | | 04/26/2018 | \$ | 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | SB1 | Check | | 05/11/2018 | \$ | 15.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | SB1 | Check | | 05/11/2018 | \$ | 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | SB1 | Check | | 05/11/2018 | \$ | 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | SB1 | Check | | 05/11/2018 | \$ | 20.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | SB1 | Check | | 04/26/2018 | \$ | 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | SB1 | Check | | 05/11/2018 | \$ | 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | SB1 | Check | | 05/11/2018 | \$ | 50.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | SB1 | Check | | 04/26/2018 | \$ | 30.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | SB1 | Check | | 05/11/2018 | \$ | 25.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | SB1 | Check | | 05/11/2018 | \$ | 50.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | SB1 | Check | | 05/11/2018 | \$ | 50.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | SB1 | Check | | 05/11/2018 | \$ | 15.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | SB1 | Check | | 06/25/2018 | \$ | 50.00 |
| <input type="checkbox"/> Add <input type="checkbox"/> Remove | SB1 | Check | | 04/26/2018 | \$ | 25.00 |
| 4. Total only this Page | | | | | \$ | \$455.00 |
| 5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> | | | | | \$ | \$455.00 |

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 | |
| BIZZELL FOR SHERIFF | | | | | | JOH-71VPHR-C-001 | |
| 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 | |
| ROGER STEVE BIZZELL 4515 BIZZELL GROVE CHURCH ROAD PRINCETON, NC 27569 | | | | SHERIFF | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | JOHNSTON COUNTY | | e. Election Sum to Date | |
| | | | | | | \$ 0.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | | In-Kind | GAS TO VOLUNTEERS FOR DISTRIBUTING | 05/11/2018 | \$ 1,100.00 | | |
| <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 | |
| HERBERT I BUNDY III PO BOX 1243 FOUR OAKS, NC 27524 | | | | ENVIRONMENTAL SERVICES | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | ARAMARK | | e. Election Sum to Date | |
| | | | | | | \$ 100.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | SB1 | Check | | 05/11/2018 | \$ 100.00 | | |
| <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 | |
| REBECCA DELL FLOWERS 10865 BUFFALO ROAD CLAYTON, NC 27527 | | | | PRESIDENT/OWNER-DEVELOPER | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | FLOWERS PLANTATION | | e. Election Sum to Date | |
| | | | | | | \$ 1,000.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | SB1 | Check | | 06/05/2018 | \$ 1,000.00 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 4. Total only this Page | | | | | | \$ 2,200.00 | |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | | \$ 6,350.00 | |

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 | |
| BIZZELL FOR SHERIFF | | | | | | JOH-71VPHR-C-001 | |
| 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 | |
| CATHY P HARGIS 1199 CRANTOCK ROAD SMITHFIELD, NC 27577 | | | | RETIRED | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | HARGIS CONSTRUCTION | | | |
| | | | | 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"/> | SB1 | Check | | 05/04/2018 | | \$ 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 | |
| JOAN P JOHNSON 3070 STRICKLAND CROSSROADS ROAD FOUR OAKS, NC 27524 | | | | ADMINISTRATIVE SUPPORT | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | COUNTY OF JOHNSTON | | | |
| | | | | e. Election Sum to Date | | | |
| | | | | | | \$ 300.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | SB1 | Check | | 04/26/2018 | | \$ 300.00 | |
| <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 | |
| PAULA KORNEGAY 610 WORLEY ROAD PRINCETON, NC 27569 | | | | FARMER | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | SELF EMPLOYED | | | |
| | | | | e. Election Sum to Date | | | |
| | | | | | | \$ 1,250.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | SB1 | Check | | 05/11/2018 | | \$ 1,250.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 4. Total only this Page | | | | | | \$ 1,750.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | \$ 6,350.00 | |

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 | |
| BIZZELL FOR SHERIFF | | | | | | JOH-71VPHR-C-001 | |
| 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 | |
| DANIEL KORNEGAY III 427 WORLEY ROAD PRINCETON, NC 27569 | | | | FARMER | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | SELF EMPLOYED | | e. Election Sum to Date | |
| | | | | | | \$ 500.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | SB1 | Check | | 05/11/2018 | | \$ 500.00 | |
| <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 | |
| DAVID D LENNON 2013 MOUNTAIN LAUREL DRIVE CLAYTON, NC 27527 | | | | PROJECT MANAGER | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | DUKE UNIVERSITY | | e. Election Sum to Date | |
| | | | | | | \$ 350.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | SB1 | Check | | 05/11/2018 | | \$ 350.00 | |
| <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 | |
| MITCHELL J LEQUIRE 145 WORLEY ROAD PRINCETON, NC 27569 | | | | PHARMACIST | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | SELF EMPLOYED | | 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"/> | SB1 | Check | | 05/11/2018 | | \$ 250.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 4. Total only this Page | | | | | | \$ 1,100.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | \$ 6,350.00 | |

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 | |
| BIZZELL FOR SHERIFF | | | | | | JOH-71VPHR-C-001 | |
| 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 | |
| BOBBY R LEWIS 1019 COWPER DRIVE RALEIGH, NC 27608 | | | | OWNER | | | |
| | | | | c. Employer's Name/Specific Field LEWIS CONSTRUCTION CO | | | |
| | | | | e. Election Sum to Date | | \$ 500.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | SB1 | Check | | 06/05/2018 | \$ 500.00 | | |
| <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 | |
| MARY A RICHARDSON PO BOX 1559 KENLY, NC 27542 | | | | RETIRED | | | |
| | | | | c. Employer's Name/Specific Field RETIRED | | | |
| | | | | e. Election Sum to Date | | \$ 500.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | SB1 | Check | | 05/04/2018 | \$ 500.00 | | |
| <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 | |
| JEAN TUNSTALL 5273 RALEIGH ROAD BENSON, NC 27504 | | | | RETIRED TEACHER | | | |
| | | | | c. Employer's Name/Specific Field JOHNSTON COUNTY | | | |
| | | | | e. Election Sum to Date | | \$ 100.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | | |
| <input type="checkbox"/> | SB1 | Check | | 05/11/2018 | \$ 100.00 | | |
| <input type="checkbox"/> | | | | | \$ | | |
| <input type="checkbox"/> | | | | | \$ | | |
| 4. Total only this Page | | | | | | \$ 1,100.00 | |
| 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | | \$ 6,350.00 | |

Contributions from Individuals

| | |
|------------------------------|--|
| Amendment | |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> 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 | |
| BIZZELL FOR SHERIFF | | | | | JOH-71VPHR-C-001 | |
| 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 | |
| SHELIA D WARRICK 2800 WARRICK CIRCLE GOLDSBORO, NC 27534 | | | RETIRED | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | RETIRED | | e. Election Sum to Date | |
| | | | | | \$ 100.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | SB1 | Check | | 05/04/2018 | \$ 100.00 | |
| <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 | |
| JASPER M WARRICK JR 2800 WARRICK CIRCLE GOLDSBORO, NC 27534 | | | RETIRED | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | RETIRED | | e. Election Sum to Date | |
| | | | | | \$ 100.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | SB1 | Check | | 05/04/2018 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 200.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 6,350.00 | |

Refunds/Reimbursements To the Committee

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

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 | |
| BIZZELL FOR SHERIFF | | | JOH-71VPHR-C-001 | |
| 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 |
| JOHNSTON COUNTY AGRICULTURAL CENTER 2736 NC 210 HIGHWAY SMITHFIELD, NC 27577 | | <input type="checkbox"/> Candidate <input type="checkbox"/> PAC | | |
| | | <input type="checkbox"/> Referendum <input type="checkbox"/> Party | | |
| | | e. Level Registered (Specify) | | |
| | | <input type="checkbox"/> Federal <input type="checkbox"/> County: | | h. Original Expenditure Date |
| | | <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | 02/13/2018 |
| | | | | i. Original Expenditure Amt |
| | | | | \$ 1,500.00 |
| b. Job Title/Profession | c. Employer's Name/Specific Field | f. Purpose | | j. Election Sum to Date |
| | | RETURN OF DEPOSIT | | \$ 1,270.00 |
| k. Account Code | l. Form of Payment | m. In-Kind Description | n. Date (mm/dd/yyyy) | o. Amount |
| SB1 | Check | | 04/26/2018 | \$ 230.00 |
| 4. Total only this Page | | | | \$ 230.00 |
| 5. Total of ALL CRO-1240 Pages (This line must be on line 10 of Detailed Summary Page CRO-1100) | | | | \$ 230.00 |

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) BIZZELL FOR SHERIFF | 2. ID Number JOH-7IVPHR-C-001 |
|---|---|

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 <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> WILSON MILLS FIRE DEPARTMENT 145 FIRE DEPOT ROAD CLAYTON, NC 27527 | | | b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | d. Comments e. Election Sum to Date \$ 100.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| SB1 | Check | O | 05/11/2018 | \$ 100.00 | DONATION |
| | | | | \$ | |

| | | | | | |
|--|---------------------------|------------------------|--|------------------|---|
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> WTSB 1090, LAMM MEDIA GROUP, LLC PO BOX 90 SMITHFIELD, NC 27577 | | | b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | d. Comments e. Election Sum to Date \$ 3,360.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| SB1 | Check | A | 05/22/2018 | \$ 3,360.00 | RADIO ADS, INTERNET |
| | | | | \$ | BANNERS, INTERVIEWS |

| | |
|--|--------------|
| 5. Total only this Page | \$ 3,460.00 |
| 6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> | \$ 13,561.84 |

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 | Q* - Donation to Legal Expense Fund |
| O* Other | | | |

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

Refunds/Reimbursements From the Committee Pg 1 of 1

Amendment
 Yes No

Use this form to report refunds/reimbursements, including contributions returned to the contributor

| | | | | | |
|---|---------------------------|---|--|-----------------------------------|------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | 2. ID Number | |
| BIZZELL FOR SHERIFF | | | | JOH-71VPHR-C-001 | |
| 3. Payee 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 | |
| ROGER STEVE BIZZELL 4515 BIZZELL GROVE CHURCH ROAD PRINCETON, NC 27569 | | <input type="checkbox"/> Candidate <input type="checkbox"/> PAC | | | |
| | | <input type="checkbox"/> Referendum <input type="checkbox"/> Party | | | |
| | | e. Level Registered (Specify) | | | |
| | | <input type="checkbox"/> Federal <input type="checkbox"/> County: | | h. Original Receipt Date | |
| | | <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | 05/11/2018 | |
| | | | | i. Original Receipt Amount | |
| | | | | \$ 1,100.00 | |
| b. Job Title/Profession | | c. Employer's Name/Specific Field | | f. Purpose Code | |
| SHERIFF | | JOHNSTON COUNTY | | P | |
| | | | | j. Election Sum to Date | |
| | | | | \$ 0.00 | |
| k. Account Code | l. Form of Payment | m. Required Remarks | | n. Date (mm/dd/yyyy) | o. Amount |
| SB1 | Check | GAS FOR VOLUNTEERS DISTRIBUTING SIGNS, HELP FOR | | 05/11/2018 | \$ 1,100.00 |
| 4. Total only this Page | | | | | \$ 1,100.00 |
| 5. Total of ALL CRO-1320 Pages (This line must be on line 15 of Detailed Summary Page CRO-1100) | | | | | \$ 1,100.00 |
| 6. Purpose Codes (List detailed disbursement code in (f) above) | | | | | |
| L - Returned to Contributor | | M - Overpayment for Service | | N - Exceeded Contribution Limit | |
| P* - Reimbursement of In-Kin | | O* Other | | | |
| * Codes require detailed explanation in required remarks field (m) | | | | | |

CRO-1320

NC State Board of Elections

July 2007

In-Kind Contributions

| | |
|------------------------------|--|
| Amendment | |
| <input type="checkbox"/> Yes | <input checked="" 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 | |
| BIZZELL FOR SHERIFF | | JOH-71VPHR-C-001 | |
| 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 | |
| ROGER STEVE BIZZELL 4515 BIZZELL GROVE CHURCH ROAD PRINCETON, NC 27569 | | <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 | |
| | | \$ 0.00 | |
| e. Description | | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| GAS TO VOLUNTEERS FOR DISTRIBUTING SIGNS, HELP DURING RALLY, ELECTION NIGHT RALLY WAITRESSES & COOKS | | 05/11/2018 | \$ 1,100.00 |
| | | | \$ |
| | | | \$ |
| 4. Total only this Page | | \$ 1,100.00 | |
| 5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i> | | \$ 1,100.00 | |