

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		c. ID Number	
a. Full Name CHIPP BAILEY FOR SHERIFF		3-GXN-5-J	
b. Mailing Address (include City, State and Zip Code) 2325 HUNTERSBLUFF DRIVE MATTHEWS, NC 28105		d. Date Filed 04/25/2010	
		e. Phone Number (704) 847-1644	
2. Report Year 2010	3. Period Start Date (mm/dd/yy) 01/01/2010	4. Period End Date (mm/dd/yy) 04/17/2010	5. Treasurer Full Name SHREEE TOMPKINS
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"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		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	
7. Type of Fund (if applicable, check one)		State/County	
<input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		<input type="checkbox"/> Organizational Quarterly <input checked="" type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
8. Number of Fundraisers this Report 2		10. Special Report Name	
11. Account Information		11. Account Information	
a. Financial Institution Full Name BB&T		a. Financial Institution Full Name	
b. Purpose CHECKING ACCOUNT	c. Account Code A	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 7,394.82		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.			
<u>Sheree Tompkins</u> Printed Name of Signer		<u>Sheree Tompkins</u> Signature of Appointed Treasurer	
		04/25/2010 Date	
FOR OFFICE USE ONLY			
Date Received:	<u>APR 26 2010</u>	Employee	<u>[Signature]</u>
Date Postmarked:	<u>BOARD OF ELECTIONS</u>	Employee	_____
Date Scanned:	_____	Employee	_____
Date Data Entered:	_____	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
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 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	
CHIPP BAILEY FOR SHERIFF	2010 First Quarter	3-GXN-5-I	
Start of Election Cycle: January 1, <u>2009</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 7,394.82	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 4,988.13	\$ 4,988.13	
6) Contributions from Individuals (CRO-1210)	\$ 16,310.99	\$ 33,715.94	
7) Contributions from Political Party Committees (CRO-1220)	\$ 0.00	\$ 250.00	
8) Contributions from Other Political Committees (CRO-1230)	\$ 0.00	\$ 500.00	
9) Loan Proceeds (CRO-1410)	\$ 0.00	\$ 0.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$ 25.00	\$ 25.00	
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)	\$ 21,324.12	\$ 39,479.07	
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 16,073.97	\$ 26,059.15	
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 120.00	\$ 595.00	
13c) Coordinated Party Expenditures (CRO-1310)	\$ 0.00	\$ 0.00	
14) Aggregated Non-Media Expenditures (CRO-1315)	\$ 295.59	\$ 295.59	
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)	\$ 356.92	\$ 656.87	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 16,846.48	\$ 27,606.61	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 11,872.46	\$ 11,872.46	
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

Page 1 of 14

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	
CHIPP BAILEY FOR SHERIFF					3-GXN-5-I	
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	A	Cash		03/03/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	2.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		04/07/2010	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/26/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/03/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/12/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		02/04/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/19/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		01/04/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		03/03/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	10.00
4. Total only this Page					\$	\$372.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$	\$4,988.13

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	
CHIPP BAILEY FOR SHERIFF					3-GXN-5-I	
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	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/25/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/25/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		03/11/2010	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/19/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/19/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/19/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/19/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/19/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		02/25/2010	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/26/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		03/11/2010	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/26/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	20.00
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>					\$	\$4,988.13

Aggregated Contributions from Individuals

Page 3 of 14

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

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

1. Committee Full Name (and Fund if applicable) CHIPP BAILEY FOR SHERIFF					2. ID Number 3-GXN-5-I	
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	A	Cash		03/11/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		03/11/2010	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		03/11/2010	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/26/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/03/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Credit Card		03/05/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/25/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/19/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		04/07/2010	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/25/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		03/11/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/03/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/03/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	5.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		04/06/2010	\$	25.00
4. Total only this Page					\$	\$435.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$	\$4,988.13

Aggregated Contributions from Individuals

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

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

1. Committee Full Name (and Fund if applicable) CHIPP BAILEY FOR SHERIFF					2. ID Number 3-GXN-5-I	
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	A	Cash		04/07/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/26/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		03/11/2010	\$	40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	4.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/30/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/19/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		03/30/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/26/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		04/07/2010	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/19/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/26/2010	\$	10.00
4. Total only this Page					\$	\$324.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$	\$4,988.13

Aggregated Contributions from Individuals

Page 5 of 14

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	
CHIPP BAILEY FOR SHERIFF					3-GXN-5-I	
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	A	Cash		03/26/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/03/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/03/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/03/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		03/26/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/25/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	14.07
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/03/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		04/07/2010	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/26/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/26/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/03/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
4. Total only this Page					\$	\$384.07
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$	\$4,988.13

Aggregated Contributions from Individuals

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

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

1. Committee Full Name (and Fund if applicable) CHIPP BAILEY FOR SHERIFF					2. ID Number 3-GXN-5-I	
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	A	Check		03/20/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	3.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/19/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/26/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		01/26/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		03/20/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/25/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/03/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/19/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
4. Total only this Page					\$	\$383.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$	\$4,988.13

Aggregated Contributions from Individuals

Page 7 of 14

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

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

1. Committee Full Name (and Fund if applicable) CHIPP BAILEY FOR SHERIFF					2. ID Number 3-GXN-5-I	
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	A	Cash		02/25/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		03/11/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/08/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		03/20/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		03/03/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Credit Card		03/04/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		03/12/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		03/11/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
4. Total only this Page					\$	\$500.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$	\$4,988.13

Aggregated Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	
CHIPP BAILEY FOR SHERIFF				3-GXN-5-I	
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	A	Cash		03/11/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 4.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/03/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 5.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/25/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/26/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/26/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/26/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/30/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/19/2010	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/19/2010	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/19/2010	\$ 40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/19/2010	\$ 30.00
4. Total only this Page					\$ 289.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 4,988.13

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
CHIPP BAILEY FOR SHERIFF					3-GXN-5-I	
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	A	Cash		04/16/2010	\$	13.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/03/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/26/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/03/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/03/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		02/25/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/25/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/25/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/25/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		04/07/2010	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		04/06/2010	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/19/2010	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/12/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		04/12/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/25/2010	\$	10.00
4. Total only this Page					\$	\$348.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$	\$4,988.13

Aggregated Contributions from Individuals

Page 10 of 14

Amendment

Yes No

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

1. Committee Full Name (and Fund if applicable) CHIPP BAILEY FOR SHERIFF	2. ID Number 3-GXN-5-I
--	----------------------------------

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	A	Cash		03/20/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/25/2010	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/30/2010	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$ 40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/25/2010	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 2.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 5.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/19/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		04/07/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 5.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/03/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/03/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		04/16/2010	\$ 40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/12/2010	\$ 10.00

4. Total only this Page \$ 352.00

5. Total of ALL CRO-1205 Pages \$ 4,988.13
(This line must be on line 5 of Detailed Summary Page CRO-1100)

Aggregated Contributions from Individuals

Page 11 of 14

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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	
CHIPP BAILEY FOR SHERIFF					3-GXN-5-I	
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	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/12/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		03/11/2010	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		04/16/2010	\$	14.06
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		04/16/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/10/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/26/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/03/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/26/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		04/07/2010	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/26/2010	\$	10.00
4. Total only this Page					\$	\$349.06
5. Total of ALL CRO-1205 Pages					\$	\$4,988.13
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

Aggregated Contributions from Individuals

Page 12 of 14

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	
CHIPP BAILEY FOR SHERIFF				3-GXN-5-I	
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	A	Cash		03/12/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/26/2010	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 15.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		02/25/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/26/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		03/11/2010	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		03/20/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 5.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 14.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		03/11/2010	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Credit Card		04/04/2010	\$ 30.00
4. Total only this Page				\$	\$404.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>				\$	\$4,988.13

Aggregated Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	
CHIPP BAILEY FOR SHERIFF				3-GXN-5-I	
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	A	Cash		04/16/2010	\$ 1.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$ 30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/20/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/26/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		04/07/2010	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		03/30/2010	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/16/2010	\$ 2.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		04/16/2010	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check		04/07/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Credit Card		03/30/2010	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		04/07/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/11/2010	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Cash		03/10/2010	\$ 10.00
4. Total only this Page				\$	\$363.00
5. Total of ALL CRO-1205 Pages				\$	\$4,988.13
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					

Aggregated Contributions from Individuals

Page 14 of 14

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	
CHIPP BAILEY FOR SHERIFF					3-GXN-5-I	
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	A	Cash		03/11/2010	\$	10.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	A	Cash		03/11/2010	\$	10.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	A	Cash		04/07/2010	\$	10.00
<input type="checkbox"/> Remove						
4. Total only this Page					\$	\$30.00
5. Total of ALL CRO-1205 Pages					\$	\$4,988.13
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

CRO-1205

NC State Board of Elections

April 2007

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) CHIPP BAILEY FOR SHERIFF	2. ID Number 3-GXN-5-1
--	----------------------------------

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) JOHN S. ARROWOOD 228 S. LAUREL AVE. CHARLOTTE, NC 28207	b. Job Title/Profession ATTORNEY	d. Comments
	c. Employer's Name/Specific Field JAMES, MCELROY & DIEHL	
	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"/>	A	Check		04/12/2010	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) BARBARA D BEAMER 8718 WILLIAMSBURG CIRCLE HUNTERVILLE, NC 28078	b. Job Title/Profession ADMIN SUPPORT ASSISTANT III	d. Comments
	c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE	
	e. Election Sum to Date \$ 80.00	

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input checked="" type="checkbox"/>	A	Check		08/13/2009	\$ 50.00
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 30.00
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) DONALD BELK 2402 KINGS FARM WAY INDIAN TRAIL, NC 28079	b. Job Title/Profession CAPTAIN	d. Comments
	c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE	
	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"/>	A	Check		04/07/2010	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ 330.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 16,310.99

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	
CHIPP BAILEY FOR SHERIFF						3-GXN-5-1	
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	
JOHN BEST 6303 WOLFHEAD CT WILMINGTON, NC 28411				HABERDASHER			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				BEST UNIFORMS, INC.		\$ 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"/>	A	Money Order		04/08/2010	\$ 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	
GERALD F BOYLE 3343 PERIMETER HILL DRIVE SUITE 200 NASHVILLE, TN 37211-4157				PRESIDENT			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				CORRECT CARE SOLUTIONS		\$ 950.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		04/07/2010	\$ 450.00		
<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	
ALLEN BOZARDT 10496 MOORES CHAPEL RD CHARLOTTE, NC 28214				CAPTAIN			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				MECKLENBURG COUNTY SHERIFF'S OFFICE		\$ 510.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		04/07/2010	\$ 10.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 660.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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	
CHIPP BAILEY FOR SHERIFF					3-GXN-5-I	
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	
JENNIFER BRYANT 4772 ASHLEY LANE DENVER, NC 28037			Housewife			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			Housewife		\$ 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"/>	A	Check		02/19/2010	\$ 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	
TANA W CALLOWAY 4710 HANWELL LN CONCORD, NC 28027			ADMINISTRATION			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			MECKLENBURG COUNTY SHERIFF'S OFFICE		\$ 345.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		04/16/2010	\$ 45.00	
<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	
IRWIN CARMICHAEL NC 1049 Mt. Zion Rd. Iron Station, NC 28080			FIREMAN			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			CITY OF CHARLOTTE		\$ 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"/>	A	Money Order		03/03/2010	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 645.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 16,310.99	

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	
CHIPP BAILEY FOR SHERIFF						3-GXN-5-1	
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	
DONIVON CARR 8355 ROCKY RIVER RD HARRISBURG, NC 28075				DEPUTY SHERIFF			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				MECKLENBURG COUNTY SHERIFF'S OFFICE		\$ 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"/>	A	Credit Card		04/07/2010	\$ 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	
JAMES I CATHEY 10402 BEVIN CT HUNTERVILLE, NC 28078				FISCAL ANALYST			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				MECKLENBURG COUNTY SHERIFF'S OFFICE		\$ 260.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 10.00		
<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	
ALICE CHARLES 4307 CANTEY PL CHARLOTTE, NC 28211				ADM SUPPORT ASST III			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				MECKLENBURG COUNTY SHERIFF'S OFFICE		\$ 360.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		03/11/2010	\$ 10.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 120.00	
5. Total of ALL CRO-1210 Pages						\$ 16,310.99	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-I
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) TRACEY H COLE 941 ASHWORTH DRIVE GASTONIA, NC 28054				b. Job Title/Profession SR IT BUSINESS ANALYST		d. Comments
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		
						e. Election Sum to Date \$ 55.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>	A	Check		09/18/2009	\$	35.00
<input type="checkbox"/>	A	Check		03/12/2010	\$	20.00
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) RODNEY M COLLINS 3323 WRANGLER LANE CHARLOTTE, NC 28213				b. Job Title/Profession MAJOR		d. Comments
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		
						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"/>	A	Cash		03/26/2010	\$	50.00
<input type="checkbox"/>	A	Cash		03/30/2010	\$	50.00
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) JAN COOK 126 SCOFIELD ROAD CHARLOTTE, NC 28209				b. Job Title/Profession DISPATCHER		d. Comments
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		
						e. Election Sum to Date \$ 120.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		01/15/2010	\$	100.00
<input type="checkbox"/>	A	Cash		02/25/2010	\$	10.00
<input type="checkbox"/>	A	Cash		03/03/2010	\$	10.00
						\$ 240.00
4. Total only this Page						\$ 240.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99

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) CHIPP BAILEY FOR SHERIFF	2. ID Number 3-GXN-5-I
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3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) DOROTHY COPLON 4316 BELLWOOD LN CHARLOTTE, NC 28270-0208	b. Job Title/Profession RETIRED	c. Employer's Name/Specific Field RETIRED	d. Comments
			e. Election Sum to Date \$ 150.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input checked="" type="checkbox"/>	A	Check		12/18/2009	\$ 50.00
<input type="checkbox"/>	A	Check		03/11/2010	\$ 100.00
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) G. MICHAEL COX 16422 NEW PROVIDENCE LN CHARLOTTE, NC 28277	b. Job Title/Profession REAL ESTATE MANAGEMENT	c. Employer's Name/Specific Field THE KEITH CORPORATION	d. Comments
			e. Election Sum to Date \$ 270.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	A	Check		03/20/2010	\$ 250.00
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 20.00
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) SHANE D. CRAWFORD 10510 HADDINGTON DRIVE CHARLOTTE, NC 28269	b. Job Title/Profession DEPUTY SHERIFF	c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE	d. Comments
			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"/>	A	Check		01/15/2010	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ 470.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 16,310.99

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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-I	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) FRANK DEATON II 3221 MONROE RD CHARLOTTE, NC 28205-7539				b. Job Title/Profession ACCOUNT REP		d. Comments	
				c. Employer's Name/Specific Field THE HOLIDAY GROUP		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 checked="" type="checkbox"/>	A	Check		12/18/2009	\$ 50.00		
<input type="checkbox"/>	A	Check		03/11/2010	\$ 50.00		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) ANTHONY R. DEPAOLO 9604 SKYBLUFF CIRCLE HUNTERVILLE, NC 28078				b. Job Title/Profession VP, SALES & MEMBERSHIP DEVELOPMENT		d. Comments	
				c. Employer's Name/Specific Field INTERNATIONAL FOODSERVICE MANUFACTURERS ASSOCIATION		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"/>	A	Check		03/23/2010	\$ 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) MICHAEL F DETOMMASO 4107 CITATION OAK COURT WAXHAW, NC 28173				b. Job Title/Profession MAJOR		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 330.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		02/25/2010	\$ 30.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 180.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 16,310.99	

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	
CHIPP BAILEY FOR SHERIFF						3-GXN-5-1	
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	
JEFFREY S EASON 4723 HENDRIX CT CONCORD, NC 28025				CAPTAIN			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				MECKENBURG COUNTY SHERIFF'S OFFICE		\$ 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"/>	A	Cash		03/11/2010	\$ 10.00		
<input type="checkbox"/>	A	Cash		03/26/2010	\$ 90.00		
<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	
JOHN ENGLAND 6260 MOUNTAIN VINE AVENUE KANNAPOLIS, NC 28081				SERGEANT			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				MECKLENBURG COUNTY SHERIFF'S OFFICE		\$ 210.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		02/25/2010	\$ 10.00		
<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 ERDMAN 251 HUNTLEY PLACE CHARLOTTE, NC 28207-2215				ATTORNEY			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				ERAMAN HOCKFIELD & LEONE LLP		\$ 520.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		01/07/2010	\$ 500.00		
<input type="checkbox"/>	A	Cash		03/26/2010	\$ 20.00		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 630.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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	
CHIPP BAILEY FOR SHERIFF					3-GXN-5-1	
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	
MARK ERWIN 501 E MOREHEAD ST, STE#3 CHARLOTTE, NC 28202			INVESTOR			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			ERWIN CAPITAL, INC		\$ 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"/>	A	Check		01/09/2010	\$ 1,000.00	
<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	
RAY S. FARRIS 3035 BELVEDERE AVE CHARLOTTE, NC 28205			ATTORNEY			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			SELF EMPLOYED		\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		03/11/2010	\$ 150.00	
<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	
JASON D GALLELLI 3225 QUEENSLAND COURT FORT MILL, SC 29715-7788			UNIT MANAGER			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			MECKLENBURG COUNTY SHERIFF'S OFFICE		\$ 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"/>	A	Check		02/25/2010	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1,250.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 16,310.99	

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	
CHIPP BAILEY FOR SHERIFF						3-GXN-5-I	
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	
DEWEY S GANT III 128 CHEVRON DRIVE CHARLOTTE, NC 28211				SERGEANT			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				MECKLENBURG COUNTY SHERIFF'S OFFICE		\$ 120.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		02/19/2010	\$ 10.00		
<input type="checkbox"/>	A	Check		02/25/2010	\$ 100.00		
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 10.00		
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	
CYNTHIA GILBERT 7565 BLUFF POINT LANE DENVER, NC 28037				SR FISCAL ANALYST			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				MECKLENBURG COUNTY SHERIFF'S OFFICE		\$ 60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input checked="" type="checkbox"/>	A	Check		09/10/2009	\$ 25.00		
<input type="checkbox"/>	A	Cash		03/30/2010	\$ 20.00		
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 15.00		
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	
PATRICIA C GODOY 4308 STRANGFORD AVE CHARLOTTE, NC 28215				RETIRED			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				RETIRED		\$ 112.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		04/07/2010	\$ 100.00		
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 2.00		
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 10.00		
4. Total only this Page						\$ 267.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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	
CHIPP BAILEY FOR SHERIFF						3-GXN-5-I	
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	
NORMAN H GOODE JR 8915 CINDER LANE HUNTERSVILLE, NC 28078				CAPTAIN			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				MECKLENBURG COUNTY SHERIFF'S OFFICE		\$ 85.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		03/26/2010	\$ 10.00		
<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	
TAMMY S. GOODWIN 6605 FOREST CROSS DRIVE CHARLOTTE, NC 28216				DETENTION OFFICER			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				MECKLENBURG COUNTY SHERIFF'S OFFICE		\$ 60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		03/20/2010	\$ 10.00		
<input type="checkbox"/>	A	Money Order		03/20/2010	\$ 50.00		
<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 F. GRAMS JR 7600 BALTUSROL LN CHARLOTTE, NC 28210-4928				ATTORNEY			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				SELF EMPLOYED		\$ 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"/>	A	Check		04/12/2010	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 170.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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:	
CHIPP BAILEY FOR SHERIFF						3-GXN-5-1	
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	
BARBARA GREEN 5025 UNAKA DR CHARLOTTE, NC 28205				RETIRED			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				RETIRED		\$ 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"/>	A	Cash		04/07/2010	\$ 50.00		
<input type="checkbox"/>	A	Cash		04/08/2010	\$ 50.00		
<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	
MICHAEL C. GREER P.O. BOX 34131 CHARLOTTE, NC 28234				DEPUTY SHERIFF			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				MECKLENBURG COUNTY SHERIFF'S OFFICE		\$ 115.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		03/20/2010	\$ 100.00		
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 15.00		
<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	
GENEAL B. GREGORY 6633 NORTH LAKESIDE DR CHARLOTTE, NC 28215-4059				RETIRED			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				RETIRED		\$ 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"/>	A	Check		04/06/2010	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 415.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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	
CHIPP BAILEY FOR SHERIFF						3-GXN-5-1	
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	
JASON S. HAHN 6431 HARRISBURG RD P.O. BOX 690537 CHARLOTTE, NC 28221-7009				OPERATIONS MANAGER			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				KEITH & KEITH CORRECTIONS		\$ 410.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		04/07/2010	\$	10.00	
<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	
JUDY HARRISON-BARRY 520 N POPLAR ST CHARLOTTE, NC 28202				RETIRED			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				RETIRED		\$ 187.37	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		04/16/2010	\$	6.00	
<input type="checkbox"/>	A	Cash		04/16/2010	\$	20.00	
<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	
KENNY HARTLY 5216 HOVIS RD CHARLOTTE, NC 28208				SALES			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				CHEMTRON		\$ 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"/>	A	Cash		03/12/2010	\$	50.00	
<input type="checkbox"/>	A	Cash		03/15/2010	\$	50.00	
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 136.00	
5. Total of ALL CRO-1210 Pages						\$ 16,310.99	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-1	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) KAREN HELMS 248 KINGSWAY CIR CHARLOTTE, NC 28214				b. Job Title/Profession OFFICE MANAGER		d. Comments	
				c. Employer's Name/Specific Field AMERICAN AUTO		e. Election Sum to Date \$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		03/20/2010	\$ 50.00		
<input type="checkbox"/>	A	Cash		03/23/2010	\$ 10.00		
<input type="checkbox"/>	A	Cash		04/07/2010	\$ 40.00		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) KAREN HELMS 248 KINGSWAY CIR CHARLOTTE, NC 28214				b. Job Title/Profession OFFICE MANAGER		d. Comments	
				c. Employer's Name/Specific Field AMERICAN AUTO		e. Election Sum to Date \$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		04/08/2010	\$ 50.00		
<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) GARY S HEMRIC 214 TOWILL PLACE CHARLOTTE, NC 28211				b. Job Title/Profession ATTORNEY		d. Comments	
				c. Employer's Name/Specific Field JAMES, MCELROY & DIEHL		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"/>	A	Check		02/25/2010	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 250.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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) CHIPP BAILEY FOR SHERIFF	2. ID Number 3-GXN-5-I
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3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) MARILYN B HENSON 7422 SUMMIT DR DENVER, NC 28037		b. Job Title/Profession SERGEANT		d. Comments	
		c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 115.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 15.00
<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) DAVID HILL 8304 EMILY DRIVE HARRISBURG, NC 28075		b. Job Title/Profession DEPUTY SHERIFF/CAPTAIN		d. Comments	
		c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 400.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	A	Check		02/19/2010	\$ 400.00
<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) RONALD L HILL 4103 WANAMASSA DR CHARLOTTE, NC 28269-1204		b. Job Title/Profession CAPTAIN		d. Comments	
		c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 145.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 10.00
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 10.00
<input type="checkbox"/>					\$

4. Total only this Page	\$ 435.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$ 16,310.99

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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-I
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) MARK HINSON 14242 LAKE CROSSING DRIVE CHARLOTTE, NC 28278			b. Job Title/Profession CAPTAIN		d. Comments	
			c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		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"/>	A	Check		03/20/2010	\$ 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) STEVEN A. HOCKFIELD 5819 MCALPINE FARM ROAD CHARLOTTE, NC 28226			b. Job Title/Profession ATTORNEY		d. Comments	
			c. Employer's Name/Specific Field SELF EMPLOYED		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"/>	A	Check		03/11/2010	\$ 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) MICHAEL T HOLDER 8224 BRISBIN DR WAXHAW, NC 28173			b. Job Title/Profession DEPUTY SHERIFF		d. Comments	
			c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 110.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Cash		03/11/2010	\$ 10.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 210.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 16,310.99	

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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-I	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) BOBBY J HOOD 2014 DUGAN DRIVE CHARLOTTE, NC 28270				b. Job Title/Profession DEPUTY SHERIFF		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 120.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		01/26/2010	\$ 100.00		
<input type="checkbox"/>	A	Cash		03/26/2010	\$ 20.00		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) MARY E HOPSON 7541 PETREA LANE CHARLOTTE, NC 28227				b. Job Title/Profession CAPTAIN		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		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"/>	A	Check		02/19/2010	\$ 100.00		
<input type="checkbox"/>	A	Check		03/20/2010	\$ 100.00		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) G. PATRICK HUNTER JR 3123 CLOVERFIELD RD CHARLOTTE, NC 28211				b. Job Title/Profession ATTORNEY		d. Comments	
				c. Employer's Name/Specific Field SELF EMPLOYED		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"/>	A	Check		03/11/2010	\$ 1,000.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1,320.00	
5. Total of ALL CRO-1210 Pages						\$ 16,310.99	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

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	
CHIPP BAILEY FOR SHERIFF						3-GXN-5-I	
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	
WILLIAM HYATT 1526 STERLING RD CHARLOTTE, NC 28209				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"/>	A	Check		04/06/2010	\$ 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	
MELISSA JENNINGS 12419 JACQUELYN COURT CHARLOTTE, NC 28273				BANKER			
				c. Employer's Name/Specific Field			
				US BANK			
						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"/>	A	Check		03/20/2010	\$ 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	
RONALD L JENNINGS 12419 JACQUELYN CT CHARLOTTE, NC 28273				CAPTAIN			
				c. Employer's Name/Specific Field			
				MECKLENBURG COUNTY SHERIFF'S OFFICE			
						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"/>	A	Check		01/07/2010	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 850.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-1	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) DANIEL E JOHNSON 1516 BRADLEY DR MONROE, NC 28112				b. Job Title/Profession CAPTAIN		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 120.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 20.00		
<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) JENNIFER R. JONES 324 RED ROAN PL CHARLOTTE, NC 28215				b. Job Title/Profession CAPTAIN		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 125.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		03/20/2010	\$ 125.00		
<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) TERESA B JORDAN 1520 DENDY LN PINEVILLE, NC 28134				b. Job Title/Profession CAPTAIN		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 390.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		04/07/2010	\$ 90.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 235.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 16,310.99	

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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-I	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) HARRIET A. KAPLAN 4316 BELLWOOD LN CHARLOTTE, NC 28270				b. Job Title/Profession RETIRED		d. Comments	
				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"/>	A	Check		03/11/2010	\$ 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) STEVE KEARNEY 1401 EAST 7TH ST CHARLOTTE, NC 28201				b. Job Title/Profession ATTORNEY		d. Comments	
				c. Employer's Name/Specific Field SELF EMPLOYED		e. Election Sum to Date \$ 120.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		03/26/2010	\$ 20.00		
<input type="checkbox"/>	A	Check		04/07/2010	\$ 100.00		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) HARRY S KIRK JR 114 ONSLOW CT MOORESVILLE, NC 28117				b. Job Title/Profession CAPTAIN		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 310.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		03/20/2010	\$ 10.00		
<input type="checkbox"/>	A	In-Kind	BAILEY FOR SHERIFF BANNER	03/26/2010	\$ 100.00		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 330.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-I	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) HARRY S. KIRK SR 7008 MALLARD CREEK RD. CHARLOTTE, NC 28262				b. Job Title/Profession RETIRED		d. Comments	
				c. Employer's Name/Specific Field RETIRED		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"/>	A	Check		04/06/2010	\$ 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) LINDA S. KLEIN 915 NASSAU BLVD CHARLOTTE, NC 28205				b. Job Title/Profession ATTORNEY		d. Comments	
				c. Employer's Name/Specific Field SELF EMPLOYED		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"/>	A	Check		03/11/2010	\$ 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) FRANCES S. KNOX P.O. BOX 30848 CHARLOTTE, NC 28230				b. Job Title/Profession ATTORNEY		d. Comments	
				c. Employer's Name/Specific Field SELF EMPLOYED		e. Election Sum to Date \$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		03/26/2010	\$ 150.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 450.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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	
CHIPP BAILEY FOR SHERIFF						3-GXN-5-I	
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 KYDD 701 WINTERWOOD DRIVE MATTHEWS, NC 28105				SHERIFF'S SERGEANT			
				c. Employer's Name/Specific Field			
				MECKLENBURG COUNTY SHERIFF'S OFFICE			
						e. Election Sum to Date	
						\$ 170.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		03/03/2010	\$ 20.00		
<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	
HENRY MAGWOOD 6605 FOREST CROSS DR CHARLOTTE, NC 28216				LAW ENFORCEMENT			
				c. Employer's Name/Specific Field			
				MECKLENBURG COUNTY SHERIFF'S OFFICE			
						e. Election Sum to Date	
						\$ 125.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		02/19/2010	\$ 125.00		
<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	
JEFFREY P. MANER 6922 LINDA LAKE DR CHARLOTTE, NC 28215				IT DIRECTOR			
				c. Employer's Name/Specific Field			
				MECKLENBURG COUNTY SHERIFF'S OFFICE			
						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"/>	A	Check		03/11/2010	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 245.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-I	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) STEPHANIE L MARSHALL 9536 OLD GATE DR MATTHEWS, NC 28105				b. Job Title/Profession DEPUTY SHERIFF		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 110.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 10.00		
<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) FELICIA HOWARD MCADOO 4825 BANFSHIRE ROAD CHARLOTTE, NC 28215				b. Job Title/Profession CHIEF DEPUTY		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 415.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		02/19/2010	\$ 100.00		
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 15.00		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) LEE MCCOY 9824 BEATTIES FORD RD HUNTERSVILLE, NC 28078				b. Job Title/Profession RETIRED		d. Comments	
				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"/>	A	Cash		03/12/2010	\$ 50.00		
<input type="checkbox"/>	A	Cash		03/15/2010	\$ 50.00		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 225.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

Contributions from Individuals

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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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-I	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) ROGER L MCCOY 7760 ORCHARD PARK CR HARRISBURG, NC 28075				b. Job Title/Profession CAPTAIN		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		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"/>	A	Cash		03/12/2010	\$ 50.00		
<input type="checkbox"/>	A	Cash		03/15/2010	\$ 50.00		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) CHRISTOPHER D MCDANIEL 1300 EARNHARDT SHOP RD MOUNT PLEASANT, NC 28124				b. Job Title/Profession SERGEANT		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 120.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		03/20/2010	\$ 20.00		
<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) PENDER R MCELROY 2127 NORTON RD CHARLOTTE, NC 28207				b. Job Title/Profession ATTORNEY		d. Comments	
				c. Employer's Name/Specific Field JAMES, MCELROY & DIEHL, PA		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"/>	A	Check		01/04/2010	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 220.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-I	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) PENDER R MCELROY 2127 NORTON ROAD CHARLOTTE, NC 28207				b. Job Title/Profession ATTORNEY		d. Comments	
				c. Employer's Name/Specific Field JAMES, MCELROY & DIEHL, PA		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"/>	A	Check		02/25/2010	\$ 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) WILLIE L MCFADDEN 4637 MAPLECREST PLACE HARRISBURG, NC 28075-6514				b. Job Title/Profession CAPTAIN		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 600.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		03/26/2010	\$ 50.00		
<input type="checkbox"/>	A	Check		03/26/2010	\$ 50.00		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) C STAN MCGEE 6844 SILVERWOOD LANE CHARLOTTE, NC 28215				b. Job Title/Profession CAPTAIN		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		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"/>	A	Check		03/20/2010	\$ 50.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 350.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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	
CHIPP BAILEY FOR SHERIFF						3-GXN-5-1	
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	
VANCE C MCGEE III 8472 HARVELL ROAD STANFIELD, NC 28163				CAPTAIN			
				c. Employer's Name/Specific Field			
				MECKLENBURG COUNTY SHERIFF'S OFFICE			
						e. Election Sum to Date	
						\$ 135.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 10.00		
<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	
LUKEISHA MCHWAIN 602 WINBORNE AVE CONCORD, NC 28025				DETENTION CAPTAIN			
				c. Employer's Name/Specific Field			
				MECKLENBURG COUNTY SHERIFF'S OFFICE			
						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"/>	A	Check		02/19/2010	\$ 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	
ALICE MCKENZIE 8125 S TEVENS MILL ROAD MATTHEWS, NC 28104				ADM SUPPORT ASST II			
				c. Employer's Name/Specific Field			
				MECKLENBURG COUNTY SHERIFF'S OFFICE			
						e. Election Sum to Date	
						\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input checked="" type="checkbox"/>	A	Check		07/18/2009	\$ 25.00		
<input type="checkbox"/>	A	Cash		02/25/2010	\$ 10.00		
<input type="checkbox"/>	A	Cash		03/10/2010	\$ 10.00		
						\$ 130.00	
4. Total only this Page						\$ 130.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-I
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) ALICE MCKENZIE 8125 S TEVENS MILL ROAD MATTHEWS, NC 28104			b. Job Title/Profession ADM SUPPORT ASST II		d. Comments	
			c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Cash		03/11/2010	\$ 10.00	
<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) MARK D. MCLAUGHLIN 5000 CURRITUCK ROAD CHARLOTTE, NC 28210			b. Job Title/Profession CAPTAIN		d. Comments	
			c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 315.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		02/19/2010	\$ 100.00	
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 5.00	
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 10.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) BRUCE C MCLAURY 1405 HILL RIVER ROAD HIDDENITE, NC 28636			b. Job Title/Profession SERGEANT		d. Comments	
			c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>	A	Check		07/17/2009	\$ 50.00	
<input type="checkbox"/>	A	Cash		03/26/2010	\$ 10.00	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 135.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 16,310.99	

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	
CHIPP BAILEY FOR SHERIFF						3-GXN-5-I	
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	
LUTHER T. MOORE 3914 CHARMAL PLACE CHARLOTTE, NC 28226				ATTORNEY			
				c. Employer's Name/Specific Field			
				SELF EMPLOYED			
						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"/>	A	Check		03/11/2010	\$ 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	
STEPHEN MORIN 9312 WINTER ELM LANE CHARLOTTE, NC 28227				SERGEANT			
				c. Employer's Name/Specific Field			
				MECKLENBURG COUNTY SHERIFF'S OFFICE			
						e. Election Sum to Date	
						\$ 110.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		02/25/2010	\$ 10.00		
<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	
WALTER S MULL 1431 HONEYSUCKLE RIDGE DR MATTHEWS, NC 28105				CAPTAIN			
				c. Employer's Name/Specific Field			
				MECKLENBURG COUNTY SHERIFF'S OFFICE			
						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"/>	A	Check		02/19/2010	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 310.00	
5. Total of ALL CRO-1210 Pages						\$ 16,310.99	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-1	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) MATTHEW ROYCE MYERS 412 CHARING CROSS DRIVE MATTHEWS, NC 28105				b. Job Title/Profession ATTORNEY		d. Comments	
				c. Employer's Name/Specific Field SELF EMPLOYED		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"/>	A	Check		04/07/2010	\$ 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) NICK NOVANSY 1431 GROVEWOOD DRIVE CHARLOTTE, NC 28208				b. Job Title/Profession DEPUTY OFFICER		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		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"/>	A	Check		01/15/2010	\$ 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) LEE OLIVE 200 QUEENS RD. 2ND FLOOR CHARLOTTE, NC 28207				b. Job Title/Profession ATTORNEY		d. Comments	
				c. Employer's Name/Specific Field OLIVE LAW FIRM		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"/>	A	Cash		04/07/2010	\$ 50.00		
<input type="checkbox"/>	A	Cash		04/08/2010	\$ 50.00		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 300.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-I	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) LORETTA H PAGAN 7316 ROCKWOOD FOREST LN CHARLOTTE, NC 28212-6464				b. Job Title/Profession MAJOR		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 531.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		03/20/2010	\$ 10.00		
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 1.00		
<input type="checkbox"/>	A	Check		04/16/2010	\$ 30.00		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) LORETTA H PAGAN 7316 ROCKWOOD FOREST LN CHARLOTTE, NC 28212-6464				b. Job Title/Profession MAJOR		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 531.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 50.00		
<input type="checkbox"/>	A	Cash		04/17/2010	\$ 40.00		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) PETER A. PAPPAS 7500 BALTUSROL LN CHARLOTTE, NC 28210				b. Job Title/Profession REAL ESTATE DEVELOPMENT		d. Comments	
				c. Employer's Name/Specific Field PAPPAS PROPERTIES		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"/>	A	Check		04/12/2010	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 231.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-I	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) DAVID S PEARSON 8727 WOODCOCK LN CHARLOTTE, NC 28216-9737				b. Job Title/Profession DETENTION OFFICER		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 110.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		03/11/2010	\$ 10.00		
<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) JAMES A. PLOGER P O BOX 1048 DAVIDSON, NC 28036				b. Job Title/Profession CAPTAIN		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 290.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		03/11/2010	\$ 40.00		
<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) LARRY PLUMMER 1711 BYRUM ST CHARLOTTE, NC 28216				b. Job Title/Profession RETIRED		d. Comments	
				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"/>	A	Check		02/19/2010	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 150.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-1	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) THOMAS MICHAEL PLUMMER 5505 HICKORY LEAF COURT MOUNT HOLLY, NC 28120				b. Job Title/Profession MAJOR		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 630.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	A	Cash		04/16/2010		\$ 30.00	
<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) MARILYN PORTER 771 KING FREDRICK LN CONCORD, NC 28027				b. Job Title/Profession ATTORNEY		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 1,060.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	A	Check		02/04/2010		\$ 250.00	
<input type="checkbox"/>	A	Check		02/19/2010		\$ 250.00	
<input type="checkbox"/>	A	Cash		03/11/2010		\$ 20.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) MARILYN PORTER 771 KING FREDRICK LN CONCORD, NC 28027				b. Job Title/Profession ATTORNEY		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 1,060.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	A	Check		03/11/2010		\$ 250.00	
<input type="checkbox"/>	A	Cash		04/16/2010		\$ 40.00	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 840.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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	
CHIPP BAILEY FOR SHERIFF						3-GXN-5-1	
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 POSEY 5419 HOLLIROSE DRIVE CHARLOTTE, NC 28227				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						e. Election Sum to Date	
						\$ 65.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		04/07/2010	\$ 40.00		
<input type="checkbox"/>	A	Check		04/16/2010	\$ 25.00		
<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	
JEFF PUCKETT NC 7112 Pleasant Grove Rd. Charlotte, NC 28216				Self-Employed			
				c. Employer's Name/Specific Field			
				Self-Employed			
						e. Election Sum to Date	
						\$ 80.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		03/12/2010	\$ 50.00		
<input type="checkbox"/>	A	Cash		03/15/2010	\$ 30.00		
<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	
WALTER W. PUMMELL 8041 PENMAN SPRINGS DRIVE WAXHAW, NC 28173				MAJOR			
				c. Employer's Name/Specific Field			
				MECKLENBURG COUNTY SHERIFF'S OFFICE			
						e. Election Sum to Date	
						\$ 270.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		03/11/2010	\$ 10.00		
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 10.00		
<input type="checkbox"/>					\$		
						\$ 165.00	
4. Total only this Page							\$ 165.00
5. Total of ALL CRO-1210 Pages							\$ 16,310.99
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

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	
CHIPP BAILEY FOR SHERIFF						3-GXN-5-I	
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	
KRIS RAHE 2456 CHERRY LN DENVER, NC 28037				CAPTAIN			
				c. Employer's Name/Specific Field			
				MECKLENBURG COUNTY SHERIFF'S OFFICE			
						e. Election Sum to Date	
						\$ 90.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input checked="" type="checkbox"/>	A	Money Order		09/11/2009	\$ 50.00		
<input type="checkbox"/>	A	Cash		02/19/2010	\$ 40.00		
<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	
SUSAN L. RALL 2811 COUGAR HILL CT CHARLOTTE, NC 28216				UNIT MANAGER			
				c. Employer's Name/Specific Field			
				MECKLENBURG COUNTY SHERIFF'S OFFICE			
						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"/>	A	Check		03/26/2010	\$ 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	
EBEN T RAWLS 14200 FOUNTAIN LANE CHARLOTTE, NC 28278				ATTORNEY			
				c. Employer's Name/Specific Field			
				SELF EMPLOYED			
						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"/>	A	Check		04/07/2010	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 240.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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) CHIPP BAILEY FOR SHERIFF	2. ID Number 3-GXN-5-1
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3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) JAY C. RIVERS 2620 HAMPTON AVE CHARLOTTE, NC 28207	b. Job Title/Profession ATTORNEY	d. Comments
	c. Employer's Name/Specific Field SELF EMPLOYED	
		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"/>	A	Check		03/11/2010	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) JULIA RUSH 139 ROYAL OAKS LANE GASTONIA, NC 28056	b. Job Title/Profession DEPUTY DIVISION DIRECTOR II	d. Comments
	c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE	
		e. Election Sum to Date \$ 278.07

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	A	Check		02/25/2010	\$ 60.00
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 4.00
<input type="checkbox"/>	A	Check		04/16/2010	\$ 14.07

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) JACKIE SAMUELS 4600 EASTHAVEN DR CHARLOTTE, NC 28212	b. Job Title/Profession ATTORNEY	d. Comments
	c. Employer's Name/Specific Field SELF EMPLOYED	
		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"/>	A	Check		03/11/2010	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page \$ 278.07

5. Total of ALL CRO-1210 Pages \$ 16,310.99
(This line must be on line 6 of Detailed Summary Page CRO-1100)

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	
CHIPP BAILEY FOR SHERIFF						3-GXN-5-I	
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	
ANGELA H SHERRILL 1201 GUM TREE LANE CHARLOTTE, NC 28214				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"/>	A	Check		02/19/2010	\$ 80.00		
<input type="checkbox"/>	A	Cash		03/11/2010	\$ 20.00		
<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	
TINA SHERRILL 6002 VILLAGE DRIVE CONCORD, NC 28027				FACILITY MANAGER			
				c. Employer's Name/Specific Field			
				THE KEITH CORPORATION			
						e. Election Sum to Date	
						\$ 650.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		02/25/2010	\$ 170.00		
<input type="checkbox"/>	A	Cash		03/20/2010	\$ 50.00		
<input type="checkbox"/>	A	Cash		04/07/2010	\$ 30.00		
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	
ELIZABETH ANN SIBLEY 1604 ONSLOW DRIVE CHARLOTTE, NC 28205				ATTORNEY			
				c. Employer's Name/Specific Field			
				SELF EMPLOYED			
						e. Election Sum to Date	
						\$ 118.73	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	In-Kind	FOOD AND BEVERAGES FOR FUNDRAISER AT	03/04/2010	\$ 98.73		
<input type="checkbox"/>	A	Check		04/07/2010	\$ 20.00		
<input type="checkbox"/>					\$		
						\$ 468.73	
4. Total only this Page						\$ 468.73	
5. Total of ALL CRO-1210 Pages						\$ 16,310.99	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-1	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) JOHN D SIMMONS 15620 CENTENNIAL FOREST DR HUNTERSVILLE, NC 28078				b. Job Title/Profession CAPTAIN		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		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"/>	A	Check		02/25/2010	\$ 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) KAREN L SIMON 137 CREEK SIDE DR MOUNT HOLLY, NC 28120				b. Job Title/Profession PROGRAM DIRECTOR		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		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"/>	A	Check		02/04/2010	\$ 250.00		
<input type="checkbox"/>	A	Check		04/07/2010	\$ 50.00		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) DOROTHY V. SMITH 3431 FINCHER BLVD CHARLOTTE, NC 28269				b. Job Title/Profession RETIRED		d. Comments	
				c. Employer's Name/Specific Field RETIRED		e. Election Sum to Date \$ 80.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		03/26/2010	\$ 80.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 480.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-I	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) DOUGLAS P. SMITH 2780 SHERRILL COVE WAY DENVER, NC 28037				b. Job Title/Profession DEPUTY SHERIFF		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		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"/>	A	Check		03/20/2010	\$ 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) MICHAEL F SMITH 1248 E HUDSON BLVD APT V GASTONIA, NC 28054-6127				b. Job Title/Profession CAPTAIN		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 435.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		02/12/2010	\$ 350.00		
<input type="checkbox"/>	A	Cash		03/12/2010	\$ 50.00		
<input type="checkbox"/>	A	Cash		03/15/2010	\$ 20.00		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) MICHAEL F SMITH 1248 E HUDSON BLVD APT V GASTONIA, NC 28054-6127				b. Job Title/Profession CAPTAIN		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 435.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 15.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 535.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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	
CHIPP BAILEY FOR SHERIFF						3-GXN-5-1	
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	
MICHAEL R. SMITH 10610 SOUTH HAMPTON DR CHARLOTTE, NC 28227				CAPTAIN			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				MECKLENBURG COUNTY SHERIFF'S OFFICE		\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input checked="" type="checkbox"/>	A	Check		07/20/2009	\$ 50.00		
<input type="checkbox"/>	A	Check		02/12/2010	\$ 100.00		
<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	
SARA S. SPENCER 528 E. KINGSTON AVE. CHARLOTTE, NC 28203				RETIRED			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				RETIRED		\$ 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"/>	A	Check		03/11/2010	\$ 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	
DAVID SUDDRETH 981 ADKINS ROAD YORK, SC 29745-8489				RESOURCE SPECIALIST			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				MECKLENBURG COUNTY SHERIFF'S OFFICE		\$ 125.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		03/11/2010	\$ 25.00		
<input type="checkbox"/>	A	Check		04/08/2010	\$ 100.00		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 325.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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	
CHIPP BAILEY FOR SHERIFF						3-GXN-5-1	
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	
MARILYN SULLINS 6745 POPPY HILLS LANE APT 228 CHARLOTTE, NC 28226				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"/>	A	Check		03/11/2010	\$ 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	
LAURENCE D THOMAS 10313 BON MEADE LANE CORNELIUS, NC 28031				DEPUTY SHERIFF			
				c. Employer's Name/Specific Field			
				MECKLENBURG COUNTY SHERIFF'S OFFICE			
						e. Election Sum to Date	
						\$ 105.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input checked="" type="checkbox"/>	A	Check		08/09/2009	\$ 50.00		
<input type="checkbox"/>	A	Check		04/16/2010	\$ 55.00		
<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	
LAURA TOSTI PO BOX 1604 INDIAN TRAIL, NC 28079				TAX ACCOUNTANT			
				c. Employer's Name/Specific Field			
				HOBBS & CROSSLEY, PA			
						e. Election Sum to Date	
						\$ 60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 60.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 215.00	
5. Total of ALL CRO-1210 Pages						\$ 16,310.99	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

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	
CHIPP BAILEY FOR SHERIFF						3-GXN-5-I	
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	
RACHEL VANHOY 9523 CEDAR RIVER ROAD HUNTERSVILLE, NC 28078				SR FISCAL ADMINISTRATOR			
				c. Employer's Name/Specific Field			
				MECKLENBURG COUNTY SHERIFF'S OFFICE			
						e. Election Sum to Date	
						\$ 468.19	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	In-Kind	1000 TICKETS	02/15/2010	\$ 158.19		
<input type="checkbox"/>	A	Credit Card		03/05/2010	\$ 25.00		
<input type="checkbox"/>	A	Cash		04/07/2010	\$ 20.00		
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	
RACHEL VANHOY 9523 CEDAR RIVER ROAD HUNTERSVILLE, NC 28078				SR FISCAL ADMINISTRATOR			
				c. Employer's Name/Specific Field			
				MECKLENBURG COUNTY SHERIFF'S OFFICE			
						e. Election Sum to Date	
						\$ 468.19	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 15.00		
<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	
RICHARD A. VINROOT 325 CHEROKEE PLACE CHARLOTTE, NC 28207				ATTORNEY			
				c. Employer's Name/Specific Field			
				SELF EMPLOYED			
						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"/>	A	Check		03/11/2010	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 318.19	
5. Total of ALL CRO-1210 Pages						\$ 16,310.99	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

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	
CHIPP BAILEY FOR SHERIFF						3-GXN-5-I	
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 ALICE WARREN 3103 WILD LARK CT CHARLOTTE, NC 28210				SR CREDIT ANALYST			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				TCF BANK		\$ 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"/>	A	Check		01/04/2010	\$ 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	
OLIVIA WATTS 12520 SAM FURR ROAD HUNTERSVILLE, NC 28078				HUMAN RESOURCES			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				MECKLENBURG COUNTY SHERIFF'S OFFICE		\$ 90.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		04/07/2010	\$ 90.00		
<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	
NAPOLEON WHITE P.O. BOX 26231 CHARLOTTE, NC 28269				DEPUTY SHERIFF			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				MECKLENBURG COUNTY SHERIFF'S OFFICE		\$ 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"/>	A	Money Order		01/26/2010	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 290.00	
5. Total of ALL CRO-1210 Pages						\$ 16,310.99	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-I	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) TELISA E WHITE 1919 WEDDINGTON RD MATTHEWS, NC 28105				b. Job Title/Profession DETENTION CAPTAIN		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 147.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		02/25/2010	\$ 20.00		
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 2.00		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) MARY WILKINS 11000 MCCOY ROAD HUNTERSVILLE, NC 28078				b. Job Title/Profession RETIRED		d. Comments	
				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"/>	A	Cash		03/12/2010	\$ 50.00		
<input type="checkbox"/>	A	Cash		03/15/2010	\$ 50.00		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) DORIS WILSON 3700 MIRANDA ROAD CHARLOTTE, NC 28216				b. Job Title/Profession ADMIN SUPPORT ASST. III		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 115.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		04/16/2010	\$ 15.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 137.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-I	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) ROBIN E. WRIGHT 11604 SHIMMERING LAKE DR CHARLOTTE, NC 28214				b. Job Title/Profession EXEC ASST/PARALEGAL		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 120.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		04/07/2010	\$ 20.00		
<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) CHARLES J YONGUE 8433 REAMES ROAD CHARLOTTE, NC 28216				b. Job Title/Profession SERGEANT		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		e. Election Sum to Date \$ 1,010.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Cash		03/11/2010	\$ 10.00		
<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) CELESTE D. YOUNGBLOOD 2821 WINDALE DR. CHARLOTTE, NC 28213				b. Job Title/Profession DETENTION OFFICER		d. Comments	
				c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE		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"/>	A	Cash		04/07/2010	\$ 50.00		
<input type="checkbox"/>	A	Cash		04/08/2010	\$ 50.00		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 130.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 16,310.99	

Refunds/Reimbursements To the Committee

Page 1 of 1

Amendment
 Yes 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) CHIPP BAILEY FOR SHERIFF			2. ID Number 3-GXN-5-I		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) DANIEL E BAILEY 2325 HUNTERSBLUFF DRIVE MATTHEWS, NC 28105			d. Type of Committee <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: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
			g. Comments		
			h. Original Expenditure Date 02/04/2010		
			i. Original Expenditure Amt \$ 100.00		
b. Job Title/Profession SHERIFF		c. Employer's Name/Specific Field MECKLENBURG COUNTY SHERIFF'S OFFICE	f. Purpose REIMBURSE LUNCH EXPENSE AND OVERPAYMENT IN		j. Election Sum to Date \$ 288.40
k. Account Code A	l. Form of Payment Check	m. In-Kind Description		n. Date (mm/dd/yyyy) 02/19/2010	o. Amount \$ 25.00
4. Total only this Page					\$ 25.00
5. Total of ALL CRO-1240 Pages (This line must be on line 10 of Detailed Summary Page CRO-1100)					\$ 25.00

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

1. Committee Full Name (and Fund if applicable) CHIPP BAILEY FOR SHERIFF					2. ID Number 3-GXN-5-1
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input type="checkbox"/> Operating Expenses <input checked="" type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> 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> BLACK POLITICAL CAUCUS OF CHARLOTTE-MECKLENBURG P.O. BOX 16550 CHARLOTTE, NC 28297			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Sum to Date \$ 120.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A	Check	G	03/16/2010	\$ 120.00	
				\$	
5. Total only this Page					\$ 120.00
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>					\$ 120.00
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>					
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)					

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

1. Committee Full Name (and Fund if applicable) CHIPP BAILEY FOR SHERIFF	2. ID Number 3-GXN-5-1
--	----------------------------------

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) ADVANCED LANGUAGE AND MEDIA SERVICES 8102 HUNLEY RIDGE RD MATTHEWS, NC 28104	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 \$ 50.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A	Check	A	01/05/2010	\$ 50.00	PROVIDE EVENT PHOTOS
				\$	

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) DANIEL E BAILEY 2325 HUNTERSBLUFF DRIVE MATTHEWS, NC 28105	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 \$ 288.40

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A	Check	O	02/04/2010	\$ 100.00	DUES FOR UPTOWN
A	Check	I	02/25/2010	\$ 158.40	DEMO FORUM

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) DANIEL E BAILEY JR 2325 HUNTERS BLUFF MATTHEWS, NC 28105-8804	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 \$ 219.66

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A	Check	I	01/16/2010	\$ 35.20	
				\$	

5. Total only this Page \$ 343.60

6. Total of ALL CRO-1310 Pages \$ 16,073.97
(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)

- 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)

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

1. Committee Full Name (and Fund if applicable) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-1
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) DAN MCCORKLE/DATA CONSULTANT 3144 EAST FORD ROAD CHARLOTTE, NC 28205				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 \$ 14,600.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	O	01/04/2010	\$ 2,000.00	CAMPAIGN MGMT FEE	
A	Check	O	01/21/2010	\$ 800.00	CAMPAIGN CONSULTANT	

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) DAN MCCORKLE/DATA CONSULTANT 3144 EAST FORD ROAD CHARLOTTE, NC 28205				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 \$ 14,600.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	O	02/09/2010	\$ 2,200.00	CONSULTING FEE	
A	Check	O	03/02/2010	\$ 1,600.00	CONSULTING FEE	

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) DAN MCCORKLE/DATA CONSULTANT 3144 EAST FORD ROAD CHARLOTTE, NC 28205				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 \$ 14,600.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	O	03/20/2010	\$ 400.00	CONSULTING FEE	
A	Check	O	04/01/2010	\$ 1,400.00	CONSULTANT	

5. Total only this Page						\$ 8,400.00
6. Total of ALL CRO-1310 Pages						\$ 16,073.97
<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>						

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)			

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

1. Committee Full Name (and Fund if applicable) CHPP BAILEY FOR SHERIFF	2. ID Number 3-GXN-5-1
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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) FREAKINWEAR P.O. BOX 2993 HUNTERSVILLE, NC 28070	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 \$ 856.02

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A	Check	O	03/30/2010	\$ 387.43	BUTTONS
A	Check	O	03/30/2010	\$ 468.59	TSHIRTS

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) INTERNATIONAL MINUTE PRESS 525 N POLK STREET PINEVILLE, NC 28134	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 \$ 1,032.90

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A	Check	A	01/04/2010	\$ 628.16	CHRISTMAS CARDS AND
A	Check	B	02/25/2010	\$ 404.74	ROUND LABELS PLEDGE CARDS, LETTERHEAD, ENV

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) KING INTERNATIONAL 275 S. MAIN STREET KING, NC 27021	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 \$ 821.59

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A	Check	B	03/23/2010	\$ 821.59	SIGNS AND STAKES

5. Total only this Page \$ 2,710.51

6. Total of ALL CRO-1310 Pages \$ 16,073.97
 (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)

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			

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) CHIPP BAILEY FOR SHERIFF	2. ID Number 3-GXN-5-1
--	----------------------------------

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) MECKLENBURG COUNTY BOARD OF ELECTIONS P.O. BOX 31788 CHARLOTTE, NC 28231	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 \$ 855.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A	Check	H	02/04/2010	\$ 855.00	FILING FEE
				\$	

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) MECKLENBURG COUNTY DEMOCRATIC PARTY 500 E. MOREHEAD STREET SUITE 106 CHARLOTTE, NC 28202	b. Coordinated Committee Name	d. Comments
c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
		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
A	Check	A	03/15/2010	\$ 100.00	HALF PAGE ADVERTISEMENT
				\$	

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) BUCKY OATES 1032 GUM BRANCH CHARLOTTE, NC 28214	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 \$ 2,434.92

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A	Check	O	03/23/2010	\$ 479.72	BARBECUE SUPPLIES
A	Check	O	03/24/2010	\$ 469.60	REIMBURSEMENT BARBECUE SUPPLIES
					REIMBURSEMENT

5. Total only this Page \$ 1,904.32

6. Total of ALL CRO-1310 Pages \$ 16,073.97
 (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)

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)

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

1. Committee Full Name (and Fund if applicable) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-I	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> 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> BUCKY OATES 1032 GUM BRANCH CHARLOTTE, NC 28214				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 \$ 2,434.92	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
A	Check	O	03/25/2010	\$ 1,264.51	BARBECUE EXPENSES		
A	Check	O	03/29/2010	\$ 221.09	REIMBURSED BARBECUE EXPENSE REIMBURSEMENT		

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> TOLER, BLY & ASSOCIATES, CPA, PLLC 212 W. MATTHEWS STREET SUITE 102 MATTHEWS, NC 28105				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 \$ 500.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
A	Check	O	04/07/2010	\$ 500.00	TAX PREPARATION		
				\$			

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> TUCAT STUDIO 841 RIVERWOOD ROAD CHARLOTTE, NC 28270				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 \$ 500.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
A	Check	A	02/04/2010	\$ 500.00	WEBSITE DESIGN		
				\$			

5. Total only this Page						\$ 2,485.60	
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>						\$ 16,073.97	

7. Purpose Codes <i>(List detailed expenditure code in (h) above)</i>			
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)			

Disbursements

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

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) CHIPP BAILEY FOR SHERIFF						2. ID Number 3-GXN-5-1	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) RACHEL VANHOY 9523 CEDAR RIVER ROAD HUNTERSVILLE, NC 28078				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 \$ 725.38	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
A	Check	O	03/30/2010	\$ 61.53	BARBECUE SUPPLIES		
				\$	REIMBURSEMENT		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) JANE WHITLEY 3144 EAST FORD ROAD CHARLOTTE, NC 28205				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 \$ 168.41	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
A	Check	O	01/21/2010	\$ 61.68	FOOD FOR NEW		
A	Check	O	03/12/2010	\$ 106.73	OUTREACH EVENT REFRESHMENTS FOR EVENT		
5. Total only this Page						\$ 229.94	
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>						\$ 16,073.97	
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)							

Aggregated Non-Media Expenditures

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

Optional form used to report NC Non-Media Expenditures of \$50 or less.

1. Committee Full Name (and Fund if applicable)						2. ID Number
CHIPP BAILEY FOR SHERIFF						3-GXN-5-I
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check	B	02/19/2010	\$ 5.00	100 COPIES AT FILING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check	B	03/30/2010	\$ 50.00	BOND FOR SIGNS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check	O	01/16/2010	\$ 24.58	MEAL EXPENSE FOR MEETING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check	O	04/14/2010	\$ 47.03	CAMPAIGN MEETING DINNER
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check	D	03/16/2010	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check	G	02/19/2010	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check	G	03/07/2010	\$ 45.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Draft	O	03/10/2010	\$ 4.61	ACH SERVICE CHARGE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Draft	O	04/12/2010	\$ 13.40	ACH SERVICE CHARGE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	A	Check	B	03/29/2010	\$ 25.97	TICKETS FOR BARBECUE
4. Total only this Page					\$	295.59
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$	295.59
6. Purpose Codes (List detailed expenditure code in (d) above)						
	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* - Donations to Legal Expense Fund			
O* - Other						
* Codes require detailed explanation in required remarks field (g)						

In-Kind Contributions

Pg 1 of 1

Amendment
 Yes 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) CHIPP BAILEY FOR SHERIFF		2. ID Number 3-GXN-5-I	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) HARRY S KIRK JR 114 ONSLOW CT MOORESVILLE, NC 28117		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 \$ 310.00	
e. Description BAILEY FOR SHERIFF BANNER		f. Date (mm/dd/yyyy) 03/26/2010	g. Fair Market Amount \$ 100.00
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) ELIZABETH ANN SIBLEY 1604 ONSLOW DRIVE CHARLOTTE, NC 28205		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 \$ 118.73	
e. Description FOOD AND BEVERAGES FOR FUNDRAISER AT SECRET GARDEN		f. Date (mm/dd/yyyy) 03/04/2010	g. Fair Market Amount \$ 98.73
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) RACHEL VANHOY 9523 CEDAR RIVER ROAD HUNTERSVILLE, NC 28078		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 \$ 468.19	
e. Description 1000 TICKETS		f. Date (mm/dd/yyyy) 02/15/2010	g. Fair Market Amount \$ 158.19
			\$
			\$
4. Total only this Page		\$ 356.92	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 356.92	