

Disclosure Report Cover

Amendment
 Yes No

Use this form for general report and committee information. must be signed and submitted along with other detailed forms.
 Do not use this form to update information

1. Committee Information	
a. Full Name Friends to elect Danny Blanton	c. ID Number
b. Mailing Address (include City, State and Zip Code) 1827 Creek Ridge Rd. Shelby, NC 28152	d. Date Filed
	e. Phone Number

2. Report Year 2022	3. Period Start Date (mm/dd/yy) 7-13-2022	4. Period End Date (mm/dd/yy) 11-1-2022	5. Treasurer Full Name Deborah Carpenter
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6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Municipal	<input type="checkbox"/> State/County	<input type="checkbox"/> Referendum
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
		<input checked="" type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	
7. Type of Fund (if applicable, check one)		10. Special Report Name		
<input type="checkbox"/> Booster Fund		CLEVELAND COUNTY BOE OCT 27 '22 AM 11:21		
<input type="checkbox"/> Building Fund				
<input type="checkbox"/> Other:				
8. Number of Fundraisers this Report				

11. Account Information		11. Account Information	
a. Financial Institution Full Name Bank of OZK	a. Financial Institution Full Name	b. Purpose campaign	c. Account Code
b. Purpose	c. Account Code	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 3115.84		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.

Deborah Carpenter Deborah Carpenter 10-14-22
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: 10-27-2022 Employee: CP

Date Postmarked: _____ Employee: _____

Date Scanned: _____ Employee: _____

Date Data Entered: _____ Employee: _____

Delivery Method
 Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed

Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.
 You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

Amendment
 Yes No

Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
Friends to elect Danny Blanton	2022 3rd quarter	
Start of Election Cycle: January 1, 2022	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 3115.84	\$
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$
6) Contributions from Individuals (CRO-1210)	\$ 6246. ⁰⁰	\$ 6246. ⁰⁰
7) Contributions from Political Party Committees (CRO-1220)	\$	\$
8) Contributions from Other Political Committees (CRO-1230)	\$	\$
9) Loan Proceeds (CRO-1410)	\$	\$
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$	\$
11) Other Receipt Sources		
11a) Interest on Bank Accounts (CRO-1250)	\$	\$
11b) Contributions from Not-For-Profit Organizations (CRO-1250)	\$	\$
11c) Outside Sources of Income (CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$	\$
11e) Exempt Purchase Price Sales (CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$	\$
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 7008.58	\$ 7008.58
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures (CRO-1315)	\$	\$
15) Loan Repayments (CRO-1420)	\$	\$
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$	\$
17) In-Kind Contributions (CRO-1510)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 7008.58	\$ 7008.58
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 2353.26	\$ 2353.26
ADDITIONAL INFORMATION		
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$	
22) Debts and Obligations owed by the Committee (CRO-1610)	\$	
23) Debts and Obligations owed to the Committee (CRO-1620)	\$	
24) Account Transfers Within the Committee (CRO-1720)	\$	
25) Administrative Support (CRO-1719)	\$	\$
26) Forgiven Loans (CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum (CRO-2220)	\$	\$
28) Contributions to be Refunded (CRO-1215)	\$	\$

CLEVELAND COUNTY BO
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Aggregated Contributions from Individuals

Page ___ of ___ Amendment Yes No

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

1. Committee Full Name (and Fund if applicable) Friends to elect Danny Blanton	2. ID Number CLEVELAND COUNTY BO OCT 27 '22 AM 11:22
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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		Cash			\$ 50.00
<input type="checkbox"/> Remove		Cash			\$ 10.00
<input type="checkbox"/> Add		Cash			\$ 20.00
<input type="checkbox"/> Remove		Cash			\$ 20.00
<input type="checkbox"/> Add		Cash			\$ 20.00
<input type="checkbox"/> Remove		Cash			\$ 20.00
<input type="checkbox"/> Add		Cash			\$ 20.00
<input type="checkbox"/> Remove		Cash			\$ 10.00
<input type="checkbox"/> Add		Cash			\$ 10.00
<input type="checkbox"/> Remove		Cash			\$ 25.00
<input type="checkbox"/> Add		Cash			\$ 20.00
<input type="checkbox"/> Remove		Cash			\$ 25.00
<input type="checkbox"/> Add		Cash			\$ 20.00
<input type="checkbox"/> Remove		Cash			\$ 25.00
<input type="checkbox"/> Add		Cash			\$ 20.00
<input type="checkbox"/> Remove		Cash			\$ 25.00
<input type="checkbox"/> Add		Cash			\$ 9.00
<input type="checkbox"/> Remove		Cash			\$ 30.00
<input type="checkbox"/> Add		Cash			\$ 50.00
<input type="checkbox"/> Remove		Cash			\$ 50.00
<input type="checkbox"/> Add		Cash			\$ 25.00
<input type="checkbox"/> Remove		Cash			\$ 20.00
<input type="checkbox"/> Add		Cash			\$ 20.00
<input type="checkbox"/> Remove		Cash			\$ 50.00
<input type="checkbox"/> Add		Cash			\$ 10.00

4. Total only this Page	\$ 564.00
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5. Total of ALL CRO-1205 Pages <small>(This line must be on line 5 of Detailed Summary Page CRO-1100)</small>	\$
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Aggregated Contributions from Individuals

Page ___ of ___ Amendment Yes No

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

CLEVELAND COUNTY BO
OCT 27 22 AM 11:22

1. Committee Full Name (and Fund if applicable) **Friends to elect Danny Blanton** 2. ID Number

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		CASH			\$ 20.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		CASH			\$ 22.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		CASH			\$ 20.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		CASH			\$ 40.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		CASH			\$ 20.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		CASH	Try To get take		\$ 50.00
<input type="checkbox"/> Remove			100.00 CASH Robert William		
<input type="checkbox"/> Add		CASH CK			\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		CASH CK			\$ 25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		CASH CK			\$ 15.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		CASH CK			\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		CASH CK			\$ 20.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		CASH CK			\$ 40.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		CASH CK			\$ 10.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$

4. Total only this Page \$ 382.00

5. Total of ALL CRO-1205 Pages \$

(This line must be on line 5 of Detailed Summary Page (CRO-1100))

Contributions from Individuals

Page of 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) Friends to elect Danny Blanton	2. ID Number
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3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Rodney Gordon 212 Fulton Dr. Kings Mt. NC 28086	b. Job Title/Profession HVAC Self employed	d. Comments
c. Employer's Name/Specific Field		e. Election Sum to Date \$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	check		9-22-22	\$ 100. ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Pete & Ethel Pedersen 2757 Carla Dr./ P.O. Box 156 Polkville, NC 28136	b. Job Title/Profession retired teacher	d. Comments
c. Employer's Name/Specific Field		e. Election Sum to Date \$

CLEVELAND COUNTY BO
OCT 27 '22 AM 11:22

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	check		9-22-2022	\$ 100. ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Larry Stephen Hord 110 Hatcher Rd. Shelby, NC 28150	b. Job Title/Profession Retired Farmer Carolina Freight	d. Comments
c. Employer's Name/Specific Field		e. Election Sum to Date \$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	check		09-22-2022	\$ 100. ⁰⁰
<input type="checkbox"/>					\$
<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)

Contributions from Individuals

Amendment Pg ____ of ____ 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) Friends to elect Danny Blanton	2. ID Number
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3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Kevin Gordon 1310 Stony Point Rd Shelby, NC 28150	b. Job Title/Profession Director of operations (Fire fighter)	d. Comments
	c. Employer's Name/Specific Field	
		e. Election Sum to Date \$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	check		09-22-2022	\$ 150. ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Mike & Elaine Falls 114 Dick Spangler Rd Shelby, NC 28150	b. Job Title/Profession Landscaper	d. Comments CLEVELAND COUNTY BO OCT 27 '22 AM 11:22
	c. Employer's Name/Specific Field	
		e. Election Sum to Date \$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	check		09-22-2022	\$ 150. ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Oliver Emmert Jr. 501 N. Washington St. Shelby, NC 28150	b. Job Title/Profession Alfa printing & mailing	d. Comments
	c. Employer's Name/Specific Field	
		e. Election Sum to Date \$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	check		09-22-2022	\$ 250. ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page \$ 550.⁰⁰

5. Total of ALL CRO-1210 Pages \$

Contributions from Individuals

Pg. _____ of _____ 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) Friends to elect Danny Blanton						2. ID Number	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Tom Martin 200 Belvedere Ave Shelby, NC 28150				b. Job Title/Profession Lawyer		d. Comments	
				c. Employer's Name/Specific Field		e. Election Sum to Date \$	
i. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	01	check		09-22-2022	\$ 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) Vallery & Tom McCoy 1516 Cherryville, Rd Cherryville, NC 28021				b. Job Title/Profession retired		d. Comments	
				c. Employer's Name/Specific Field		e. Election Sum to Date \$	
i. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	01	check		09-22-2022	\$ 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) Don & Darlene Edwards 2137 Robin Place Shelby, NC 28152				b. Job Title/Profession retired		d. Comments	
				c. Employer's Name/Specific Field		e. Election Sum to Date \$	
i. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	01	check		09-22-2022	\$ 100. ⁰⁰		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 300. ⁰⁰	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>						\$	

CLEVELAND COUNTY BOE
OCT 27 '22 AM 11:22

Contributions from Individuals

Amendment
Pg ____ of ____ 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) Friends to elect Danny Blanton	2. ID Number
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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) Don Blanton 1605 N. Oak Dr. Shelby, NC 28150			b. Job Title/Profession retired		d. Comments	
			c. Employer's Name/Specific Field		e. Election Sum to Date \$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	01	check		09-22-2022	\$ 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) Charles E Betty Carrigan 320 Range Rd King Mt, NC 28084			b. Job Title/Profession Auto auction		d. Comments CLEVELAND COUNTY BOE OCT 27 '22 AM 11:22	
			c. Employer's Name/Specific Field		e. Election Sum to Date \$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	01	check		07-21-22	\$ 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) Dwayne Hord 332 Yarbrough Rd Kings Mt, NC 28084			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field		e. Election Sum to Date \$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	01	check		9-12-22	\$ 500. ⁰⁰	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	

4. Total only this Page	\$ 1,100
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1190)</small>	\$

Contributions from Individuals

Amendment
 Pg. ___ of ___ 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) Friends to elect Danny Blanton	2. ID Number
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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)		b. Job Title/Profession		d. Comments	
Sandra Stroud 417 Beaumont Ave Shelby, NC 28152		retired			
		c. Employer's Name/Specific Field			
				e. Election Sum to Date \$ 250.00	
Prior	Account Code	Form of Payment	In-Kind Description	Date (mm/dd/yyyy)	Amount
<input type="checkbox"/>	01	check		8-27-22	\$ 200.00
<input type="checkbox"/>	01	check		9-22-22	\$ 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	
Doug Brown 1402 Stonegate Dr. Shelby, NC 28152		Boss/enterprise		CLEVELAND COUNTY BOE OCT 27 '22 AM 11:22	
		c. Employer's Name/Specific Field			
				e. Election Sum to Date \$	
Prior	Account Code	Form of Payment	In-Kind Description	Date (mm/dd/yyyy)	Amount
<input type="checkbox"/>	01	check		8-30-22	\$ 1800
<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	
Anthony Berry PO Box 324 Shelby, NC 28152		Self employed			
		c. Employer's Name/Specific Field			
				e. Election Sum to Date \$	
Prior	Account Code	Form of Payment	In-Kind Description	Date (mm/dd/yyyy)	Amount
<input type="checkbox"/>	01	check	8-29-22 2000	8-29-22	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ 2550.00
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>	\$

Contributions from Individuals

Amendment Pg ____ of ____ 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) Friends to elect Danny Blanton	2. ID Number
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3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Wayne King PO Box 944 Kings Mt, NC 28084	b. Job Title/Profession	d. Comments
	c. Employer's Name/Specific Field	
		e. Election Sum to Date \$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	01	check		8-29-22	\$ 500. ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
	c. Employer's Name/Specific Field	
		e. Election Sum to Date \$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
	c. Employer's Name/Specific Field	
		e. Election Sum to Date \$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page \$ 500.⁰⁰

5. Total of ALL CRO-1210 Pages \$ 5300.⁰⁰
(This line must be on line 6 of Detailed Summary Page CRO-1190)

CLEVELAND COUNTY BO
OCT 27 '22 AM 11:22

Disbursements

Amendment
Pg ____ of ____ 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) **Friends to elect Danny Blanton** 2. ID Number

3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)
 Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
**Cleveland Co. Fairgrounds
 1751 E. Marion Street
 Shelby, N**

b. Coordinated Committee Name

c. Level Registered (Specify)
 Federal County
 State Municipality

d. Comments

e. Election Sum to Date
\$ 685.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	check	0	7-29-22	\$ 500.00	
01	check	0	9-27-22	\$ 185.00	campaigning

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
**Alpha Mailing
 PO Box 231
 Shelby, NC 28151**

b. Coordinated Committee Name

c. Level Registered (Specify)
 Federal County
 State Municipality

d. Comments

e. Election Sum to Date
\$ 775.18

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	check	B	8-1-22	\$ 576.45	printing
01	check	B	8-31-22	\$ 198.73	printing

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
**Alpha Mailing
 PO Box 231
 Shelby, NC 28151**

b. Coordinated Committee Name

c. Level Registered (Specify)
 Federal County
 State Municipality

d. Comments

e. Election Sum to Date
\$ 249.26

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	check	B	9-23-22	\$ 249.26	printing

5. Total only this Page **\$ 1,709.44**

6. Total of ALL CRO-1310 Pages **\$**
 (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)

CLEVELAND COUNTY BO
 OCT 27 '22 AM 11:21

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)

2. ID Number

Friends to elect Danny Blanton

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)

Shelby City Park
PO Box 207 W. Sumter St.
Shelby, NC 28152

b. Coordinated Committee Name

d. Comments

c. Level Registered (Specify)

- Federal County:
 State Municipality:

e. Election Sum to Date

\$ 395.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	check	C	8-26-22	\$ 350.00	Fundraising
01	check	C	9-6-22	\$ 45.00	Fundraising

4. Payee Information

Add Remove

a. Full Name, Mailing Address & Phone
(include city, state, & zip)

Lowes
425 Earl Rd.
Shelby, NC 28152

b. Coordinated Committee Name

d. Comments

c. Level Registered (Specify)

- Federal County:
 State Municipality:

e. Election Sum to Date

\$ 209.24

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	check	F	8-22-22	\$ 51.50	posts/2x4
01	check	F	9-14-22	\$ 157.74	wire stakes -

4. Payee Information

Add Remove

a. Full Name, Mailing Address & Phone
(include city, state, & zip)

Headrick: Rental
One Freedom Square
Laurel, Mississippi 39440

b. Coordinated Committee Name

d. Comments

c. Level Registered (Specify)

- Federal County:
 State Municipality:

e. Election Sum to Date

\$ 1,000.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	check	A	8-29-22	\$ 500.00	media/ad
01	check	A	9-28-22	\$ 500.00	media/ad

5. Total only this Page

\$ 1604.24

6. Total of ALL CRO-1310 Pages

(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)

CLEVELAND COUNTY BOE
OCT 27 '22 AM 11:21

Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

Amendment
Pg ____ of ____ Yes No

1. Committee Full Name (and Fund if applicable)

2. ID Number

Friends to elect Danny Blanton

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)

M E D
Hwy 180 South
Shelby, NC 28021

b. Coordinated Committee Name

d. Comments

c. Level Registered (Specify)

Federal County
 State Municipality

e. Election Sum to Date

\$ 152.92

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	check	0	9-21-22	\$ 100. ⁰⁰	gas
01	check	0	10-8-22	\$ 52.92	gas

4. Payee Information

Add Remove

a. Full Name, Mailing Address & Phone
(include city, state, & zip)

M E D
Hwy 180 South
Shelby, NC 28021

b. Coordinated Committee Name

d. Comments

c. Level Registered (Specify)

Federal County
 State Municipality

e. Election Sum to Date

\$ 123.76

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	check	0	10-14-22	\$ 67.22	gas
01	check	0	9-27-22	\$ 56.54	gas

4. Payee Information

Add Remove

a. Full Name, Mailing Address & Phone
(include city, state, & zip)

W O H S Radio Station
1416 Shelby Hwy.
Cherryville, NC 28021

b. Coordinated Committee Name

d. Comments

c. Level Registered (Specify)

Federal County
 State Municipality

e. Election Sum to Date

\$ 300.⁰⁰

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	check	A	9-29-22	\$ 300. ⁰⁰	radio ad

5. Total only this Page

\$ 576.68

6. Total of ALL CRO-1310 Pages

\$

(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)

CLEVELAND COUNTY BO
OCT 27 '22 AM 11:21

Disbursements

Amendment
 Page ___ of ___ 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)

2. ID Number

Friends to elect Danny Blanton

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)

b. Coordinated Committee Name

d. Comments

Shelby Shopper
 503 N. Lafayette St.
 Shelby, NC 28150

c. Level Registered (Specify)

Federal County:
 State Municipality:

e. Election Sum to Date

\$ 128.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	check	A	8-31-22	\$ 128.00	BBQ Ad

4. Payee Information

Add Remove

a. Full Name, Mailing Address & Phone
 (include city, state, & zip)

b. Coordinated Committee Name

d. Comments

EO
 Big Print Signs
 PO Box 248
 Shelby, NC 28151

c. Level Registered (Specify)

Federal County:
 State Municipality:

e. Election Sum to Date

\$ 160.13

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	check	A	8-31-22	\$ 160.13	Ad/Sign

4. Payee Information

Add Remove

a. Full Name, Mailing Address & Phone
 (include city, state, & zip)

b. Coordinated Committee Name

d. Comments

MED
 Hwy 180 South
 Shelby, NC 28021

c. Level Registered (Specify)

Federal County:
 State Municipality:

e. Election Sum to Date

\$ 111.46

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	check	0	8-22-22	\$ 55.01	gas
01	check	0	9-9-22	\$ 56.45	gas

5. Total only this Page

\$ 399.59

6. Total of ALL CRO-1310 Pages

\$

(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)

CLEVELAND COUNTY BO
 OCT 27 '22 AM 11:21

Disbursements

Page of 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) **Friends to elect Danny Blanton** 2. ID Number

3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)
 Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip):
**Hobbie Lobby
 1728 E. Dixon Blvd
 Shelby, NC 28152**

b. Coordinated Committee Name

c. Level Registered (Specify):
 Federal County:
 State Municipality:

d. Comments

e. Election Sum to Date
 \$ **13.33**

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	check	F	9-27-22	\$ 13.33	Flag

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip):
**Webb Chemical
 12500 W. Dixon Blvd.
 Shelby, NC 28152**

b. Coordinated Committee Name

c. Level Registered (Specify):
 Federal County:
 State Municipality:

d. Comments

e. Election Sum to Date
 \$ **70.05**

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	check	C	9-22-22	\$ 70.05	Fundraiser

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip):
**Food Lion
 122 S. Post Rd.
 Shelby, NC 28152**

b. Coordinated Committee Name

c. Level Registered (Specify):
 Federal County:
 State Municipality:

d. Comments

e. Election Sum to Date
 \$ **79.00**

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	check	C	9-19-22	\$ 79.00	plates, napkins

5. Total only this Page \$ **162.38**

6. Total of ALL CRO-1310 Pages
 (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			

CLEVELAND COUNTY BO
 OCT 27 '22 AM 11:22

Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

Amendment Pg ____ of ____ Yes No

1. Committee Full Name (and Fund if applicable) 2. ID Number
Friends to elect Danny Blanton

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)
**Janet Whistant
 Polkville Rd
 Shelby, NC 28152**

b. Coordinated Committee Name

c. Level Registered (Specify)
 Federal County
 State Municipality

d. Comments

e. Election Sum to Date
 \$ **502.50**

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	check	A	9-14-22	\$ 502.50	Signs

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
**Nathan Phillips
 PO Box 1634
 Boiling Springs, NC**

b. Coordinated Committee Name

c. Level Registered (Specify)
 Federal County
 State Municipality

d. Comments

e. Election Sum to Date
 \$ **1550.00**

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	check	C	9-28-22	\$ 1550.00	BBA

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
**M E D
 Hwy 180 South
 Shelby, NC 28021**

b. Coordinated Committee Name

c. Level Registered (Specify)
 Federal County
 State Municipality

d. Comments

e. Election Sum to Date
 \$ **66.25**

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	check	O	9-13-22	\$ 66.25	gas

5. Total only this Page \$ 2118.75

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

CLEVELAND COUNTY BO
 OCT 27 '22 AM 11:22

Disbursements

Page of 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) Friends to elect Danny Blanton	2. ID Number
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3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> <input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures	
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4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove	
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a. Full Name, Mailing Address & Phone (include city, state, & zip) Kidney Foundation CRRRA Washington St. Shelby, NC 28152	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 \$ 100.00

f. Account Code 01	g. Form of Payment check	h. Purpose Code 0	i. Date (mm/dd/yyyy) 8-26-22	j. Amount \$ 100.00	k. Required Remarks donation
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4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove	
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a. Full Name, Mailing Address & Phone (include city, state, & zip) Parents Against Bullying 2720 W. Dixon Blvd. Shelby, NC 28152	b. Coordinated Committee Name	d. Comments CLEVELAND COUNTY BO OCT 27 '22 AM 11:22
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 \$ 150.00

f. Account Code 01	g. Form of Payment check	h. Purpose Code 0	i. Date (mm/dd/yyyy) 8-8-22	j. Amount \$ 150.00	k. Required Remarks donation
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4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove	
--	--

a. Full Name, Mailing Address & Phone (include city, state, & zip) Lowes 425 Earl Rd. Shelby, NC 28152	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 \$ 187.50

f. Account Code 01	g. Form of Payment check	h. Purpose Code F	i. Date (mm/dd/yyyy) 10-14-22	j. Amount \$ 187.50	k. Required Remarks wire stands/post
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5. Total only this Page	\$ 437.50
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6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>	\$ 7,008.58
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<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)