

JUL 11 2018

# 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.

<b>1. Committee Information</b>				
<b>a. Full Name</b>			<b>c. ID Number</b>	
FRIENDS OF ALAN NORMAN			-QBC115--	
<b>b. Mailing Address (include City, State and Zip Code)</b>			<b>d. Date Filed</b>	
568 OAK GROVE CLOVER HILL CH ROAD LAWNDALE, NC 28090			07/10/2018	
			<b>e. Phone Number</b>	
			(704) 472-6480	
<b>2. Report Year</b>	<b>3. Period Start Date (mm/dd/yy)</b>	<b>4. Period End Date (mm/dd/yy)</b>	<b>5. Treasurer Full Name</b>	
2018	04/22/2018	06/30/2018	KRISTEN HAMRICK	
<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>		
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		<b>Municipal</b> <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		
<b>7. Type of Fund (if applicable, check one)</b>		<b>State/County</b>		
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:		<input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input checked="" 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		
<b>8. Number of Fundraisers this Report</b>		<b>10. Special Report Name</b>		
0				
<b>3. Account Information</b>			<b>3. Account Information</b>	
<b>a. Financial Institution Full Name</b>			<b>a. Financial Institution Full Name</b>	
BB&T				
<b>b. Purpose</b>	<b>c. Account Code</b>	<b>b. Purpose</b>	<b>c. Account Code</b>	
CAMPAIGN FINANCES	01			
	<b>d. Period Begin Balance</b>		<b>d. Period Begin Balance</b>	
	\$ 38,671.24		\$	
<b>CERTIFICATION</b>				
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				
<u>Kristen Benton Hamrick</u> Printed Name of Signer		<u>Kristen Benton Hamrick</u> Signature of Appointed Treasurer		<u>07/10/2018</u> Date
<b>FOR OFFICE USE ONLY</b>				
Date Received:	<u>7/11/18</u>	Employee:	<u>BT</u>	<b>Delivery Method</b>
Date Postmarked:	_____	Employee:	_____	<input type="checkbox"/> Normal Mail
Date Scanned:	_____	Employee:	_____	<input type="checkbox"/> Registered Mail
Date Data Entered:	_____	Employee:	_____	<input checked="" type="checkbox"/> Hand Delivered
				<input type="checkbox"/> Electronically Filed
				<input type="checkbox"/> Signer has not received mandatory training
<b>Please Note:</b> 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 OF ALAN NORMAN	2018 Second Quarter	-QBC115--	
Start of Election Cycle: January 1, <u>2015</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 38,671.24	\$ 41,046.35
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 0.00	\$ 85.00
6) Contributions from Individuals (CRO-1210)		\$ 14,051.00	\$ 20,351.00
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00	\$ 0.00
9) Loan Proceeds (CRO-1410)		\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00	\$ 0.00
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)		\$ 14,051.00	\$ 20,436.00
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 50.00	\$ 4,810.11
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 0.00	\$ 0.00
15) Loan Repayments (CRO-1420)		\$ 0.00	\$ 4,000.00
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00	\$ 0.00
17) In-Kind Contributions (CRO-1510)		\$ 0.00	\$ 0.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 50.00	\$ 8,810.11
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 52,672.24	\$ 52,672.24
<b>ADDITIONAL INFORMATION</b>			
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

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**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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
FRIENDS OF ALAN NORMAN						-QBCL15--	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ANTHONY BERRY PO BOX 326 SHELBY, NC 28151				OWNER			
				<b>c. Employer's Name/Specific Field</b>			
				BERRYS SOLUTIONS		<b>e. Election Sum to Date</b>	
						\$ 5,000.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	01	Check		05/05/2018	\$ 5,000.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ROBERT HAGER 140 DUNNS DRIVE KINGS MOUNTAIN, NC 28086				OWNER			
				<b>c. Employer's Name/Specific Field</b>			
				HAGER INVESTMENTS		<b>e. Election Sum to Date</b>	
						\$ 251.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	01	Check		05/17/2018	\$ 251.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ROY JAYNES 106 SIVERADO DRIVE GROVER, NC 28073				OWNER			
				<b>c. Employer's Name/Specific Field</b>			
				DEER BROOK GOLF COURSE		<b>e. Election Sum to Date</b>	
						\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	01	Check		05/20/2018	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 5,351.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 14,051.00	

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**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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
FRIENDS OF ALAN NORMAN					-QBC115--	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
DONNA JOLLEY 2440 JENKINS SHELBY, NC 28150			OWNER			
			<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
			JOLLEY ELECTRIC		\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	01	Check		05/16/2018	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
CHARLES JONES 2702 BAILEY ROAD MOORESBORO, NC 28114			OWNER			
			<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
			CHARLES JONES PRODUCE, LLC		\$ 2,000.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	01	Check		05/01/2018	\$ 2,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
PATRICK OLEARY PO BOX 6929 STATESVILLE, NC 28687			FARMER			
			<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
			Crop Production		\$ 5,200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	01	Check		05/04/2018	\$ 5,200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 7,700.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 14,051.00	

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# NORTH CAROLINA

State Board of Elections & Public Information

## Contribution from a Business Account Statement

I, the undersigned, hereby declare that I am the individual making the contribution and that the funds are their own personal funds.

I am submitting this statement with the Election Board where the committee's reports are filed.

I, Charles Jones, am the individual making the contribution of \$ 2000 to the RE-Elect Alan NORMAN Committee.

The account from which the funds are drawn is in the name of Charles Jones Produce LLC.

Check if the contribution is a draft from a paycheck.

I do not have a personal checking account, in my name, from which this contribution could be made or this contribution is made as a result of a draft from personal funds. If the contribution is a draft, please include a written statement from the employer. This statement should be a signed agreement by the contributor that the funds drafted were derived from the personal salary of the contributor.

The funds from which this contribution is derived are my own personal funds and not that of any other individual or "business entity". For purposes of this Statement, the term "business entity" will include any "corporation, business entity, labor union, professional association, or insurance company".

I further understand that by signing this Statement I am declaring all of the above information is true and accurate. Signing this Statement with any portion not being true could result in a Class 2 Misdemeanor.

Signature of Contributor Charles Lee Jones

**Note to the treasurer:** Please attach a photocopy of the check submitted with this Statement. Maintain this information in your records to be made available upon request.

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**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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
FRIENDS OF ALAN NORMAN					-QBC115--	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
TERRY RIDDLEY 2825 W STAGE COACH TRAIL SHELBY, NC 28150			OWNER			
			<b>c. Employer's Name/Specific Field</b>			
			RIDDLEY RETAIL FIXTURES		<b>e. Election Sum to Date</b>	
					\$ 1,000.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	01	Check		05/01/2018	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 1,000.00	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 14,051.00	

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Amendment

Pg 1 of 1  Yes  No

**Disbursements**

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

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
FRIENDS OF ALAN NORMAN				-QBCT15--	
<b>3. Type of Disbursement</b> <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					
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
USPS 405 DEKALB ST SHELBY, NC 28150					
			c. Level Registered (Specify)		e. Election Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 50.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (m/m/dd/yyyy)	j. Amount	k. Required Remarks
01	Check	I	05/18/2018	\$ 50.00	
				\$	
<b>5. Total only this Page</b>					\$ 50.00
<b>6. Total of ALL CRO-1310 Pages</b>					\$ 50.00
<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>					
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		D - To Another Candidate	
I - Postage		J - Penalties		G - Political Party	
O* Other				H* - Holding Public Office Expenses	
				K* - Office Expenses	
				Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k)					