

# 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>				
a. Full Name <i>Denny Davis for Sheriff</i>			c. ID Number <i>TCE 667</i>	
b. Mailing Address (include City, State and Zip Code) <i>1126 Asbury Rd. Eastover, NC 29312</i>			d. Date Filed	
			e. Phone Number <i>(910) 323-1012</i>	
2. Report Year <i>2010</i>	3. Period Start Date (mm/dd/yy) <i>03/04/2010</i>	4. Period End Date (mm/dd/yy) <i>04/17/10</i>	5. Treasurer Full Name <i>DAWN BERKEY</i>	
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"/> Joint Fundraiser <input type="checkbox"/> Referendum <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Legal Expense Fund		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input checked="" 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"/> NC Political Party Financing 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 <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> 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 <i>1</i>		10. Special Report Name		
<b>11. Account Information</b>				
a. Financial Institution Full Name <i>RBC BANK</i>				
b. Purpose <i>Sheriff Campaign</i>		c. Account Code <i>1</i>		
		d. Period Begin Balance <i>\$ 333.50</i>		
<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 undisclosed 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				
<i>Dawn Berkey</i> Printed Name of Signer		<i>[Signature]</i> Signature of Appointed Treasurer		<i>4/16/10</i> Date
<b>FOR OFFICE USE ONLY</b>				
Date Received: _____	Employee: <i>[Signature]</i>	Delivery Method		
Date Postmarked: <i>APR 22 2010</i>	Employee: _____	<input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed		
Date Scanned: _____	Employee: _____	<input type="checkbox"/> Signer has not received mandatory training		
Date Data Entered: _____	Employee: _____			
<p><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.</p>				

# 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	
Denny Davis for Sheriff	First Quarter	TCE 667	
Start of Election Cycle: January 1, 2010	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 333.50	\$ 0	
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 935.00	\$ 935.00	
6) Contributions from Individuals (CRO-1210)	\$ 650.00	\$ 950.00	
7) Contributions from Political Party Committees (CRO-1220)	\$	\$	
8) Contributions from Other Political Committees (CRO-1230)	\$	\$	
9) Loan Proceeds (CRO-1410)	\$ 119.97	\$ 1719.97	
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)	\$	\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c and 11d)	\$ 1704.97	\$ 3609.97	
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 982.11	\$ 2548.61	
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)	\$ 119.97	\$ 119.97	
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)	\$ 1102.08	\$ 2668.58	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 936.39	\$ 936.39	
<b>ADDITIONAL INFORMATION</b>			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ 1600.00		
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-1710)	\$	\$	
26) Forgiven Loans (CRO-1440)	\$	\$	
27) 48-Hour Notice Reports Sum (CRO-2220)	\$	\$	
28) Contributions to be Refunded (CRO-1215)	\$	\$	

**RECEIVED**  
 JUL 12 2010

# 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)				2. ID Number	
DENNY PAWS for Sheriff				TCE 667	
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		03/06/2010	\$ 40.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	"		"	\$ 40.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	"		"	\$ 35.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	"		03/07/2010	\$ 10.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		"	\$ 10.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	"		03/07/2010	\$ 10.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	"		"	\$ 20.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		"	\$ 10.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	"		03/14/2010	\$ 10.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	"		"	\$ 40.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		03/18/2010	\$ 10.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	"		"	\$ 10.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	"		"	\$ 10.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	"		"	\$ 10.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	"		"	\$ 10.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		"	\$ 20.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	"		"	\$ 10.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	"		03/19/2010	\$ 40.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	"		"	\$ 20.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		"	\$ 10.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	"		03/20/2010	\$ 10.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	"		"	\$ 50.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	Cash		"	\$ 10.00
<b>4. Total only this Page</b>					\$ 445.00
<b>5. Total of ALL CRO-1205 Pages</b>					\$ 935.00
<small>(This line must be on line 5 of Detailed Summary Page CRO-1100)</small>					

# 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)** **2. ID Number**

*Denny Davis for Sheriff* *TCE 667*

**3. Contributor Information**

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input checked="" type="checkbox"/> Add	1	Cash		03/21/2010	\$ 10.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	1	"		"	\$ 10.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	1	"		03/24/2010	\$ 50.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	1	Cash		"	\$ 10.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	1	"		"	\$ 50.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	1	"		03/27/2010	\$ 50.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	1	"		03/28/2010	\$ 50.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	1	Cash		03/29/2010	\$ 10.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	1	"		04/02/2010	\$ 50.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	1	Cash		"	\$ 25.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	1	"		04/04/2010	\$ 45.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	1	"		"	\$ 40.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	1	"		04/05/2010	\$ 10.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	1	"		04/08/2010	\$ 40.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	1	Cash		04/08/2010	\$ 40.00
<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					\$

**4. Total only this Page** \$ *490.00*

**5. Total of ALL CRO-1205 Pages** \$ *935.00*  
(This line must be on line 5 of Detailed Summary Page CRO-1100)

# 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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Denny DAVIS FOR Sheriff					1CE667	
<b>3. Contributor Information</b> <input checked="" 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>	
DAVIS GAVIN 3745 Dunn Rd Eastover, NC 28312			Retail Owner			
			<b>c. Employer's Name/Specific Field</b>			
			IGA GROCERY STORE			
					<b>e. Election Sum to Date</b>	
					\$ 621.50	
<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"/>	1	check		03/18/2010	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input checked="" 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>	
Akash Talatin 2848 Bragg Blvd Fayetteville, NC 28303 485-4163			Manager			
			<b>c. Employer's Name/Specific Field</b>			
			Knights Inn			
					<b>e. Election Sum to Date</b>	
					\$ 721.50	
<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"/>	1	check		03/18/2010	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input checked="" 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>	
Tommy Honeycott 455 Russell St. Fayetteville NC 28301 483-7374			RETAIL OWNER			
			<b>c. Employer's Name/Specific Field</b>			
			TOLER Plumbing Supply			
					<b>e. Election Sum to Date</b>	
					\$ 849.09	
<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"/>	1	check		03/28/2010	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 300.00	
<b>5. Total of ALL CRO-1210 Pages</b> <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					\$ 1150.00	

# Contributions from Individuals

Pg \_\_\_\_\_ of \_\_\_\_\_  Yes  No  Amendment

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) <b>DENNY DAVIS For Sheriff</b>	2. ID Number <b>TCE 667</b>
---	--------------------------------

3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>Cheryl D Perry, MD 152 Westwick Ln. Fayetteville, NC 015-8084</b>			b. Job Title/Profession <b>Medical Doctor</b>		d. Comments <b>RAFFLE tickets</b>	
			c. Employer's Name/Specific Field <b>Cape Fear Valley Medical CTR</b>		e. Election Sum to Date <b>\$ 372.50</b>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	check		03/09/2010	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	

3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>William Gross, MD 1638 Owen DR. Fayetteville, NC 28304 015-8084</b>			b. Job Title/Profession <b>Medical Doctor</b>		d. Comments <b>Raffle Tickets</b>	
			c. Employer's Name/Specific Field <b>Cape Fear Valley Medical CTR</b>		e. Election Sum to Date <b>\$ 472.50</b>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	check		03/09/2010	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	

3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>Larry Goodbold 334 Rock Hill Rd. Fayetteville, NC 070-9543</b>			b. Job Title/Profession <b>Police Chief</b>		d. Comments <b>RAFFLE Tickets</b>	
			c. Employer's Name/Specific Field <b>Field Force SECURITY / POLICE</b>		e. Election Sum to Date <b>\$ 572.50</b>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	check		03/09/2010	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	

4. Total only this Page	\$ 350.00
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>	\$ 050.00

# 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) <i>Denny Davis for Sheriff</i>	2. ID Number <i>TPE667</i>
---	-------------------------------

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) <i>Fayetteville Press 2635 Sycamore Dairy Rd Fayetteville, NC 28303 323-3120</i>	b. Coordinated Committee Name	d. Comments
c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
		e. Election Sum to Date <i>\$ 173.50</i>

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
<i>1</i>	<i>Certified check</i>	<i>A</i>	<i>03/04/2010</i>	<i>\$ 160.00</i>	<i>newspaper ad</i>
				\$	

4. Payee Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>RBC Bank 454 Ramsey St. Fayetteville, NC 28301 868-1516</i>	b. Coordinated Committee Name	d. Comments
c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
		e. Election Sum to Date <i>\$ 167.50</i>

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
<i>1</i>	<i>account deduction</i>	<i>O</i>	<i>03/04/2010</i>	<i>\$ 6.00</i>	<i>check fee</i>
				\$	

4. Payee Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Michael Perez 2711 Ponderosa Rd Cameron, NC 28326 919-356-9389</i>	b. Coordinated Committee Name	d. Comments
c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
		e. Election Sum to Date <i>\$</i>

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
<i>1</i>	<i>check 101</i>	<i>B</i>	<i>03/15/2010</i>	<i>\$ 20.00</i>	<i>ink for printing ads</i>
				\$	

5. Total only this Page: *\$ 186.00*

6. Total of ALL CRO-1310 Pages *\$ 982.11*  
 (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	O* - Other

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

# 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> Denny Davis For Sheriff	<b>2. ID Number</b> TCE667
---	-------------------------------

<b>3. Type of Disbursement</b> (Please use separate CRO-1310 forms for each type of Disbursement.) <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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Allegra Print + Imaging 3724 Sycamore Dairy Rd. Fayetteville, NC 28303 864-8100	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>	
<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 521.50	

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check 102	B	03/17/2010	\$ 81.00	print raffle tickets
				\$	

<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Allegra Print + Imaging 3724 Sycamore Dairy Rd. Fayetteville, NC 28303 864-8100	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>	
<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 309.09	

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check 103	B	03/22/2010	\$ 211.41	raffle tickets
				\$	

<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Fayetteville Press 2635 Sycamore Dairy Rd Fayetteville, NC 28303 323-3120	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>	
<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 911.09	

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check #105	A	03/30/2010	\$ 160.00	News Paper Ad
				\$	

**5. Total only this Page**     Level Registered (Specify)    \$ 452.41

**6. Total of ALL CRO-1310 Pages**     State     Municipality:  
 (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)  
 \$ 982.11

- 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 | O* - Other                          |

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

# 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>
DENNY DAVIS For Sheriff	TCE667

**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

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
C+E Gun Shows 4225 Fortress DR Blacksburg, VA 24060 (540) 953-0016		table price
<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>
<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 851.09

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check #106	C	04/02/2010	\$ 60	selling of raffle tickets
				\$	

**4. Payee Information**     Add     Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
Allegra Print & Imaging 3724 Sycamore Dairy Rd Fayetteville, NC 28303 864-8100		
<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>
<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 737.39

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check #107	B	04/07/2010	\$ 283.70	yard signs
				\$	

**4. Payee Information**     Add     Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>
<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	

**5. Total only this Page**    **c. Level Registered (Specify)**    \$ 343.70

**6. Total of ALL CRO-1310 Pages**     State     Municipality    \$ 982.11

(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	O* - Other

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

**Loan Proceeds**

Pg \_\_\_\_ of \_\_\_\_ Amendment  Yes  No

Use this form to report proceeds from a loan and loan endorser's information  
 A loan proceeds statement must accompany each loan that is from an individual

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
DENNY DAVIS FOR SHERIFF				TCE 667	
<b>3. Lender Information</b> <input checked="" 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>	
Denny Davis 1126 Asbury Rd Eastover, NC 28312		Law Enforcement Officer		Initial business card order	
		<b>c. Employer's Name/Specific Field</b>		<b>e. Start Date (mm/dd/yyyy)</b>	
		Allied Party Security/Police		03/02/2010	
				<b>f. End Date (mm/dd/yyyy)</b>	
				03/06/2010	
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Account Code</b>	<b>j. Form of Payment</b>	<b>k. Amount</b>	
%		1	Cash	\$ 119.97	
<b>l. Full Name of Lending Institution</b>				<b>m. Loan Number</b>	
SELF					
<b>4. Endorsers/Makers</b> (The people who guarantee the loan.)					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b>		<b>e. Amount</b>	
		%		\$	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b>		<b>e. Amount</b>	
		%		\$	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b>		<b>e. Amount</b>	
		%		\$	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b>		<b>e. Amount</b>	
		%		\$	
<b>5. Total of ALL CRO-1410 Pages</b>				<b>k. Amount</b>	
(This line must be on line 9 of Detailed Summary Page CRO-1100)				\$ 119.97	

# Loan Repayments

Amendment  
Pg \_\_\_\_ of \_\_\_\_  Yes  No

Use this form to report payments on an existing loan.

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
Denny Davis for Sheriff				TCE667	
<b>3. Lender Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Comments</b>	
Denny Davis 1126 Asbury Rd. Eastover, NC 28312				initial order for business cards	
				<b>c. Original Loan Date</b>	
				03/04/2010	
				<b>d. Original Loan Amount</b>	
				\$ 119.97	
<b>e. Remaining Loan Balance</b>	<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Date (mm/dd/yyyy)</b>	<b>i. Repayment Amount</b>	
\$ 0	1	check #104	03/06/2010	\$ 119.97	
\$				\$	
<b>3. Lender 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. Comments</b>	
				<b>c. Original Loan Date</b>	
				<b>d. Original Loan Amount</b>	
				\$	
<b>e. Remaining Loan Balance</b>	<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Date (mm/dd/yyyy)</b>	<b>i. Repayment Amount</b>	
\$				\$	
\$				\$	
<b>3. Lender 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. Comments</b>	
				<b>c. Original Loan Date</b>	
				<b>d. Original Loan Amount</b>	
				\$	
<b>e. Remaining Loan Balance</b>	<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Date (mm/dd/yyyy)</b>	<b>i. Repayment Amount</b>	
\$				\$	
\$				\$	
<b>4. Total only this Page</b>				\$ 119.97	
<b>5. Total of ALL CRO-1420 Pages</b>				\$ 119.97	
<small>(This line must be on line 15 of Detailed Summary Page CRO-1100)</small>					

# Outstanding Loans

Amendment  
Pg \_\_\_\_ of \_\_\_\_  Yes  No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Denny Davis for Sheriff		TCE 667	
<b>3. Lender 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>
Denny Davis 1126 Asbury Rd. Eastover, NC 28312		Law Enforcement Officer	for initial account setup
		<b>c. Employer's Name/Specific Field</b>	<b>e. Start Date (mm/dd/yyyy)</b>
		Allied Barton SECURITY/Police	02/19/2010
			<b>f. End Date (mm/dd/yyyy)</b>
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Original Loan Amount</b>	<b>j. Remaining Loan Balance</b>
%		\$ 1600.00	\$ 1600.00
<b>k. Full Name of Lending Institution</b>			<b>l. Loan Number</b>
SELF			
<b>3. Lender 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>
Denny DAVIS 1126 Asbury Rd. Eastover, NC 28312		Law Enforcement Officer	initial order of business cards
		<b>c. Employer's Name/Specific Field</b>	<b>e. Start Date (mm/dd/yyyy)</b>
		Allied Barton SECURITY/Police	03/02/2010
			<b>f. End Date (mm/dd/yyyy)</b>
			03/06/2010
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Original Loan Amount</b>	<b>j. Remaining Loan Balance</b>
%		\$ 119.97	\$ 0
<b>k. Full Name of Lending Institution</b>			<b>l. Loan Number</b>
SELF			
<b>3. Lender 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>
		<b>c. Employer's Name/Specific Field</b>	<b>e. Start Date (mm/dd/yyyy)</b>
			<b>f. End Date (mm/dd/yyyy)</b>
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Original Loan Amount</b>	<b>j. Remaining Loan Balance</b>
%		\$	\$
<b>k. Full Name of Lending Institution</b>			<b>l. Loan Number</b>
<b>4. Total only this Page</b>		\$ 1600.00	
<b>5. Total of ALL CRO-1430 Pages</b> (This line must be on line 21 of Detailed Summary Page CRO-1100)		\$ 1600.00	

# Debts and Obligations Owed By the Committee

Pg \_\_\_\_\_ of \_\_\_\_\_ Amendment  Yes  No

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card payments.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Denny Davis for Sheriff		TCE 667	
<b>3. Creditor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
Jimmy Cook 500 Ramsey St Fayetteville, NC 28301 483-2191		<b>b. Description of Creditor</b> Individual	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ 350.00	\$ 0	\$	\$ 350.00
<b>g. Incurred Debts (what the committee received)</b>			
<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>	<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>
03/15/2010	\$		\$
<b>g3. Item Description</b>		<b>g3. Item Description</b>	
Stephens 30-06 Rifle: for RAFFLE			
<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	
on hold - not yet purchased			
<b>3. Creditor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
		<b>b. Description of Creditor</b>	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$	\$	\$	\$
<b>g. Incurred Debts (what the committee received)</b>			
<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>	<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>
	\$		\$
<b>g3. Item Description</b>		<b>g3. Item Description</b>	
<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	
<b>4. Total only this Page</b> (This should be the sum of all item 3f. from this page)		\$ 350.00	
<b>5. Total of ALL CRO-1610 Pages</b> (This line must be on line 22 of Detailed Summary Page CRO-1100)		\$ 350.00	