

Disclosure Report Cover

Amendment
 Yes No

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

1. Committee Information	
a. Full Name VAN DUNCAN FOR SHERIFF COMMITTEE	c. ID Number
b. Mailing Address (include City, State and Zip Code) P.O. BOX 2272 LEICESTER, NC 29748	d. Date Filed 07/31/2009
	e. Phone Number (828) 683-0799

2. Report Year 2009	3. Period Start Date (mm/dd/yy) 01/01/2009	4. Period End Date (mm/dd/yy) 06/30/2009	5. Treasurer Full Name KEVIN CALHOUN
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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"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		Municipal	State/County	Referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<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"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
8. Number of Fundraisers this Report		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus	<input type="checkbox"/> Final
1		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third Plus	<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	10. Special Report Name
		<input type="checkbox"/> Year End	<input checked="" 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	

11. Account Information		11. Account Information	
a. Financial Institution Full Name FIRST CITIZEN'S BANK		a. Financial Institution Full Name	
b. Purpose PRIMARY CAMPAIGN ACCOUNT	c. Account Code FC943	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 5395.08		d. Period Begin Balance \$

CERTIFICATION

I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct and that I have been trained by the NC State Board of Elections according to Article 163.278.9(k).

KEVIN N. CALHOUN Kevin Calhoun 07/31/2009
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: 7/31/09 Employee: JB **Delivery Method**

Date Postmarked: _____ Employee: _____ Normal Mail

Date Scanned: _____ Employee: _____ Registered Mail

Date Data Entered _____ Employee: _____ 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	2. ID Number	
VAN DUNCAN FOR SHERIFF COMMITTEE	2009 Mid Year Semi-Annual		
Start of Election Cycle: January 1, <u>2007</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 5,395.08	\$ 811.42
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 1,190.00	\$ 3,030.00
6) Contributions from Individuals (CRO-1210)		\$ 2,268.33	\$ 8,571.31
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00	\$ 50.00
9) Loan Proceeds (CRO-1410)		\$ 0.00	\$ 0.00
10) Refunds/Reimbursements To the Committee (CRO-1240)		\$ 0.00	\$ 26.56
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
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, and 11c)		\$ 3,458.33	\$ 11,677.87
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 1,616.53	\$ 5,089.43
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 300.00	\$ 300.00
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00	\$ 0.00
14) Loan Repayments (CRO-1420)		\$ 0.00	\$ 0.00
15) Refunds/Reimbursements From the Committee (CRO-1320)		\$ 0.00	\$ 0.00
16) In-Kind Contributions (CRO-1510)		\$ 0.00	\$ 162.98
17) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, and 16)		\$ 1,916.53	\$ 5,552.41
18) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 17)		\$ 6,936.88	\$ 6,936.88
ADDITIONAL INFORMATION			
19) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00	
20) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0.00	
21) Debts and Obligations owed By the Committee (CRO-1610)		\$ 0.00	
22) Debts and Obligations owed To the Committee (CRO-1620)		\$ 0.00	
23) Account Transfers Within the Committee (CRO-1720)		\$ 0.00	
24) Administrative Support (CRO-1710)		\$ 0.00	\$ 0.00
25) Forgiven Loans (CRO-1440)		\$ 0.00	\$ 0.00
26) 48-Hour Notice Reports Sum		\$ 0.00	\$ 0.00

Aggregated Contributions from Individuals Page 1 of 2

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
VAN DUNCAN FOR SHERIFF COMMITTEE						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Check		04/14/2009	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Cash		05/02/2009	\$	40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Check		05/02/2009	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Check		03/25/2009	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Cash		05/02/2009	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Cash		05/02/2009	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Check		03/16/2009	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Cash		05/02/2009	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Check		05/02/2009	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Check		04/28/2009	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Check		05/02/2009	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Check		04/15/2009	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Cash		05/02/2009	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Cash		05/02/2009	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Check		04/10/2009	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Check		03/24/2009	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Check		05/02/2009	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Check		05/02/2009	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Check		04/13/2009	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Check		03/20/2009	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Check		04/16/2009	\$	30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Check		05/02/2009	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FC943	Check		05/02/2009	\$	30.00
4. Total only this Page					\$	\$770.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$	\$1,190.00

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
VAN DUNCAN FOR SHERIFF COMMITTEE						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (m m/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add	FC943	Check		03/26/2009	\$	50.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	FC943	Check		05/02/2009	\$	50.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	FC943	Check		05/02/2009	\$	10.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	FC943	Check		05/07/2009	\$	50.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	FC943	Cash		05/02/2009	\$	30.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	FC943	Cash		05/02/2009	\$	30.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	FC943	Cash		05/02/2009	\$	30.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	FC943	Cash		05/02/2009	\$	30.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	FC943	Cash		05/02/2009	\$	30.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	FC943	Cash		05/02/2009	\$	30.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	FC943	Cash		05/02/2009	\$	30.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	FC943	Cash		05/02/2009	\$	30.00
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	FC943	Check		05/02/2009	\$	20.00
<input type="checkbox"/> Remove						
4. Total only this Page					\$	\$420.00
5. Total of ALL CRO-1205 Pages					\$	\$1,190.00
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

1. Committee Full Name (and Fund if applicable)					2. ID Number	
VAN DUNCAN FOR SHERIFF COMMITTEE						
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	
MYRON SCOTT ALLEN PO BOX 1436 ENKA, NC 28728			LAW ENFORCEMENT			
			c. Employer's Name/Specific Field			
			Justice, Public Order, and Safety Activities		e. Election Sum to Date	
					\$ 60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FC943	Check		05/02/2009	\$ 60.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
DAVID ANDERS 780 OLIVETTE RD ASHEVILLE, NC 28804			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FC943	Check		05/02/2009	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
SANDRA BUCKNER 4 JONQUIL LANE CANDLER, NC 28715			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>	FC943	Check		10/28/2007	\$ 40.00	
<input type="checkbox"/>	FC943	Check		05/02/2009	\$ 20.00	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 280.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,268.33	

Contributions from Individuals

1. Committee Full Name (and Fund if applicable)						2. ID Number	
VAN DUNCAN FOR SHERIFF COMMITTEE							
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	
CHARLES BULLINGS P.O. BOX 611 BLACK MOUNTAIN, NC 28711				LAW ENFORCEMENT			
				c. Employer's Name/Specific Field			
				STATE OF NC			
						e. Election Sum to Date	
						\$ 95.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	FC943	Check		04/12/2009	\$ 30.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DONNA CARAKER 524 THIRD AVE WEST HENDERSONVILLE, NC 28739 (828) 250-4474				PROFESSIONAL OFFICE ASSISTANT			
				c. Employer's Name/Specific Field			
				Administrative and Support Services			
						e. Election Sum to Date	
						\$ 70.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input checked="" type="checkbox"/>	FC943	Check		10/29/2007	\$ 40.00		
<input type="checkbox"/>	FC943	Check		04/04/2009	\$ 30.00		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JACK VAN DUNCAN 43 BLUE RIDGE ACRES DRIVE ASHEVILLE, NC 28806 (828) 250-4474				SHERIFF			
				c. Employer's Name/Specific Field			
				BUNCOMBE COUNTY NORTH CAROLINA			
						e. Election Sum to Date	
						\$ 60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	FC943	Check		05/02/2009	\$ 60.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 120.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 2,268.33	

Contributions from Individuals

1. Committee Full Name (and Fund if applicable)						2. ID Number	
VAN DUNCAN FOR SHERIFF COMMITTEE							
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	
PEGGY DUNCAN 37 MELROSE ST WAYNESVILLE, NC 28786				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED		e. Election Sum to Date	
				\$		250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	FC943	Check		05/04/2009	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MARGARET GRIFFIN 22 ASPEN CT ASHEVILLE, NC 28806				OWNER			
				c. Employer's Name/Specific Field			
				GRIFFIN WASTE MANAGEMENT		e. Election Sum to Date	
				\$		100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	FC943	Check		05/03/2009	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ELOISE HALL 1233 DIXIE STREET NEWTON, NC 28658				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED		e. Election Sum to Date	
				\$		100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	FC943	Check		05/03/2009	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 450.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 2,268.33	

Contributions from Individuals

1. Committee Full Name (and Fund if applicable)						2. ID Number	
VAN DUNCAN FOR SHERIFF COMMITTEE							
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	
JERRY JACKSON 272 MOCKINGBIRD RD SWANNANOVA, NC 28778				CHIEF PROBATION OFFICER			
				c. Employer's Name/Specific Field			
				NC DEPT OF CORRECTIONS		e. Election Sum to Date	
						\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input checked="" type="checkbox"/>	FC943	Cash		10/28/2007	\$ 25.00		
<input type="checkbox"/>	FC943	Check		04/06/2009	\$ 30.00		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ROBERT LINDSEY 96 CLIFFVIEW DRIVE ASHEVILLE, NC 28803				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED		e. Election Sum to Date	
						\$ 633.33	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	FC943	Check		05/02/2009	\$ 333.33		
<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	
KIM MARTIN 6 RASADA DR WEAVERVILLE, NC 28787				LAW ENFORCEMENT			
				c. Employer's Name/Specific Field			
				Justice, Public Order, and Safety Activities		e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input checked="" type="checkbox"/>	FC943	Cash		10/28/2007	\$ 40.00		
<input type="checkbox"/>	FC943	Check		04/21/2009	\$ 60.00		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 423.33	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 2,268.33	

Contributions from Individuals

1. Committee Full Name (and Fund if applicable)						2. ID Number	
VAN DUNCAN FOR SHERIFF COMMITTEE							
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	
PAUL MEEKER 16 WENDOVER RD ASHEVILLE, NC 28806				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
				e. Election Sum to Date			
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	FC943	Check		05/02/2009	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DANIEL MILLSPAUGH P.O. BOX 904 DONNA LANE FAIRVIEW, NC 28730				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
				e. Election Sum to Date			
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input checked="" type="checkbox"/>	FC943	Check		10/28/2007	\$ 50.00		
<input type="checkbox"/>	FC943	Check		05/02/2009	\$ 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	
JERRY PLEMMONS 1191 NEWFOUND RD LEICESTER, NC 28748				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
				e. Election Sum to Date			
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	FC943	Check		05/02/2009	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 250.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 2,268.33	

Contributions from Individuals

1. Committee Full Name (and Fund if applicable)						2. ID Number	
VAN DUNCAN FOR SHERIFF COMMITTEE							
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	
BOB RAY P.O. BOX 280 ENKA, NC 28728				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						e. Election Sum to Date	
						\$ 120.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	FC943	Check		05/01/2009	\$ 120.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
RONALD ROGERS 2791 NEW LEICESTER HIGHWAY LEICESTER, NC 28748				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	FC943	Check		05/09/2009	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
TERRY ROGERS 6 BLUEBERRY HILL RD ASHEVILLE, NC 28804				LAW ENFORCEMENT			
				c. Employer's Name/Specific Field			
				Justice, Public Order, and Safety Activities			
						e. Election Sum to Date	
						\$ 400.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	FC943	Check		01/28/2009	\$ 100.00		
<input type="checkbox"/>	FC943	Check		05/05/2009	\$ 100.00		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 420.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 2,268.33	

Contributions from Individuals

1. Committee Full Name (and Fund if applicable)						2. ID Number	
VAN DUNCAN FOR SHERIFF COMMITTEE							
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		
T KEITH THOMSON 1 BRIDLE PATH RD ASHEVILLE, NC 28804			SYSTEMS ENGINEER				
			c. Employer's Name/Specific Field				
			SYSADMIN SERVICES INC		e. Election Sum to Date		
					\$ 90.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date (mm/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>	FC943	Check			10/28/2007	\$ 40.00	
<input type="checkbox"/>	FC943	Check			05/02/2009	\$ 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		
HEATHER WELCH 307 ROWLAND RD SWANNANOVA, NC 28778			LAW ENFORCEMENT OFFICER				
			c. Employer's Name/Specific Field				
			Justice, Public Order, and Safety Activities		e. Election Sum to Date		
					\$ 95.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date (mm/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>	FC943	Check			10/28/2007	\$ 40.00	
<input type="checkbox"/>	FC943	Check			05/02/2009	\$ 55.00	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
JANE WHILDEN 8 BUSBEE RD ASHEVILLE, NC 28803			STATE REPRESENTATIVE				
			c. Employer's Name/Specific Field				
			NC STATE HOUSE		e. Election Sum to Date		
					\$ 140.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date (mm/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>	FC943	Check			09/21/2007	\$ 40.00	
<input type="checkbox"/>	FC943	Check			05/02/2009	\$ 100.00	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 205.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 2,268.33	

Contributions from Individuals

1. Committee Full Name (and Fund if applicable)				2. ID Number	
VAN DUNCAN FOR SHERIFF COMMITTEE					
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
ROGER WILLIAMS 33 NEWFOUND RD ASHEVILLE, NC 28806		BUSINESS OWNER			
		c. Employer's Name/Specific Field			
		WILCO COMPANY-ASHEVILLE, NC			
				e. Election Sum to Date	
				\$ 120.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	FC943	Check		04/06/2009	\$ 120.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page				\$ 120.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>				\$ 2,268.33	

Disbursements

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
VAN DUNCAN FOR SHERIFF COMMITTEE							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input type="checkbox"/> Operating Expenses		<input checked="" type="checkbox"/> Contributions to Candidates/Political Committees			<input type="checkbox"/> Coordinated Party Expenditures		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
YOUNG DEMOCRATS OF NORTH CAROLINA 220 HILLSBOROUGH ST RALEIGH, NC 27603							
				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	
						\$ 300.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
FC943	Check	O	03/06/2009	\$ 300.00	EVENT SPONSORSHIP ADMISSIONS		
				\$			
5. Total only this Page						\$ 300.00	
6. Total of ALL CRO-1310 Pages						\$ 300.00	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>							
<i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>							
<i>(This line goes in line 14c 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		O* - Other	
* Codes require detailed explanation in required remarks field (k)							

Disbursements

1. Committee Full Name (and Fund if applicable)						2. ID Number	
VAN DUNCAN FOR SHERIFF COMMITTEE							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ASHEVILLE PARKS AND RECREATION P.O. BOX 7148 ASHEVILLE, NC 28802				c. Level Registered (Specify)		e. Election Sum to Date \$ 185.00	
				<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		
FC943	Check	O	02/20/2009	\$ 100.00	RENTAL FEE CARRIER PARK		
FC943	Check	O	03/11/2009	\$ 60.00	RENTAL FEE		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
BEST BUY #44 SOUTH TUNNEL RD ASHEVILLE, NC 28805				c. Level Registered (Specify)		e. Election Sum to Date \$ 661.83	
				<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		
FC943	Debit Card	F	05/27/2009	\$ 661.83	LAPTOP COMPUTER		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
EASYSTREAM NETWORKS, LLC 6433 TOPANGA CANYON BLVD #350 CANOGA PARK, CA 91401 (800) 572-6798				c. Level Registered (Specify)		e. Election Sum to Date \$ 334.60	
				<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		
FC943	Debit Card	O	01/08/2009	\$ 11.95	STREAMING VIDEO/WEBSITE MAINT		
FC943	Debit Card	O	02/04/2009	\$ 11.95	STREAMING VIDEO FEES		
5. Total only this Page						\$ 845.73	
6. Total of ALL CRO-1310 Pages						\$ 1,616.53	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>							
<i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>							
<i>(This line goes in line 14c 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		O* - Other	
* Codes require detailed explanation in required remarks field (k)							

Disbursements

1. Committee Full Name (and Fund if applicable)						2. ID Number	
VAN DUNCAN FOR SHERIFF COMMITTEE							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees			<input type="checkbox"/> Coordinated Party Expenditures		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
EASYSTREAM NETWORKS, LLC 6433 TOPANGA CANYON BLVD #350 CANOGA PARK, CA 91401 (800) 572-6798				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:			
						\$ 334.60	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
FC943	Debit Card	O	03/04/2009	\$ 11.95	STREAMING VIDEO FEES		
FC943	Debit Card	O	04/08/2009	\$ 11.95	STREAMING VIDEO FEE		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
EASYSTREAM NETWORKS, LLC 6433 TOPANGA CANYON BLVD #350 CANOGA PARK, CA 91401 (800) 572-6798				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:			
						\$ 334.60	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
FC943	Debit Card	O	05/06/2009	\$ 11.95	STREAMING VIDEO FEE		
FC943	Debit Card	O	06/03/2009	\$ 11.95	STREAMING VIDEO FEE		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
UNITED STATES POSTAL SERVICE NEW LEICESTER HIGHWAY LEICESTER, NC 28748				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:			
						\$ 300.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
FC943	Check	IO	03/26/2009	\$ 54.00	PO BOX RENTAL		
				\$			
5. Total only this Page						\$ 101.80	
6. Total of ALL CRO-1310 Pages						\$ 1,616.53	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>							
<i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>							
<i>(This line goes in line 14c 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		O* - Other	
* Codes require detailed explanation in required remarks field (k)							

Disbursements

1. Committee Full Name (and Fund if applicable)						2. ID Number	
VAN DUNCAN FOR SHERIFF COMMITTEE							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees			<input type="checkbox"/> Coordinated Party Expenditures		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
WAGON WHEEL CATERERS 390 CARL ELLER RD MARS HILL, NC 28754						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	
						\$ 309.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
FC943	Check	O	05/07/2009	\$ 309.00	CATERING SERVICES FOR EVENT		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
WNC FRIENDS OF THE NRA P.O. BOX 1376 ARDEN, NC 28704 (828) 691-0801						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	
						\$ 660.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
FC943	Check	O	01/29/2009	\$ 360.00	EVENT SPONSORSHIP ADMISSIONS		
				\$			
5. Total only this Page						\$ 669.00	
6. Total of ALL CRO-1310 Pages						\$ 1,616.53	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>							
<i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>							
<i>(This line goes in line 14c 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		O* - Other	
* Codes require detailed explanation in required remarks field (k)							