

# Contributions from Individuals

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

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

|   |                        |                           |  |                             |                                |                  |
|---|------------------------|---------------------------|--|-----------------------------|--------------------------------|------------------|
| <b>1. Committee Full Name (and Fund if applicable)</b>  |                        |                           |  |                             | <b>2. ID Number</b>            |                  |
| The Committee to Elect Gordon Smith   |                        |                           |  |                             | 6DHQ18                         |                  |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                  |                        |                           |  |                             |                                |                  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |                  |
| Henry Bostwick<br>1930 Carter Rd SW<br>Roanoke, VA 24015  |                        |                           | Attorney                                 |                             |                                |                  |
|   |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |                  |
|   |                        |                           |  |                             | <b>e. Election Sum to Date</b> |                  |
|   |                        |                           |  |                             | \$ 145                         |                  |
| <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"/>  | 2                      | PayPal                    |  | 07/01/2009                  |                                | \$ 145           |
| <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><br>(include city, state, & zip)                                |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |                  |
| David Flander<br>627 Beaverdam Rd<br>Asheville, NC 28804  |                        |                           | President                                |                             |                                |                  |
|   |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |                  |
|   |                        |                           | DFPro Inc                                |                             | <b>e. Election Sum to Date</b> |                  |
|   |                        |                           |  |                             | \$ 125                         |                  |
| <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"/>  | 2                      | Check                     |  | 07/01/2009                  |                                | \$ 125           |
| <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><br>(include city, state, & zip)                                |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |                  |
| Barry Summers<br>62 Ben Lippen Rd<br>ASheville, NC 28806  |                        |                           | Self-Employed                            |                             |                                |                  |
|   |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |                  |
|   |                        |                           |  |                             | <b>e. Election Sum to Date</b> |                  |
|   |                        |                           |  |                             | \$ 100                         |                  |
| <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                      | Cash                      |  | 03/19/09                    |                                | \$ 50            |
| <input type="checkbox"/>  | 2                      | Cash                      |  | 07/14/2009                  |                                | \$ 50            |
| <input type="checkbox"/>  |                        |                           |  |                             |                                | \$               |
| <b>4. Total only this Page</b>  |                        |                           |  |                             | \$ 370                         |                  |
| <b>5. Total of ALL CRO-1210 Pages</b><br><i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> |                        |                           |  |                             | \$ 7,690                       |                  |

# Contributions from Individuals

Amendment  Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

|  |                        |                           |                                |                             |                                |  |
|--|------------------------|---------------------------|--------------------------------|-----------------------------|--------------------------------|--|
| <b>1. Committee Full Name (and Fund if applicable)</b>   |                        |                           |                                |                             | <b>2. ID Number</b>            |  |
| The Committee to Elect Gordon Smith  |                        |                           |                                |                             | 6DHQ18                         |  |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove |                        |                           |                                |                             |                                |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)               |                        |                           | <b>b. Job Title/Profession</b> |                             | <b>d. Comments</b>             |  |
| James Samsel<br>52 Glendale Rd<br>Asheville, NC 28804  |                        |                           | Glendale Architects            |                             |                                |  |
|  |                        |                           |                                |                             |                                |  |
|  |                        |                           |                                |                             | <b>e. Election Sum to Date</b> |  |
|  |                        |                           |                                |                             | \$ 75                          |  |
| <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"/>   | 2                      | Check                     |                                | 06/25/2009                  | \$ 74                          |  |
| <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><br>(include city, state, & zip)               |                        |                           | <b>b. Job Title/Profession</b> |                             | <b>d. Comments</b>             |  |
| Patsey Keever<br>17 Braddock Way<br>Asheville, NC 28803<br>274-0114                            |                        |                           | Retired/Teacher                |                             |                                |  |
|  |                        |                           |                                |                             |                                |  |
|  |                        |                           |                                |                             | <b>e. Election Sum to Date</b> |  |
|  |                        |                           |                                |                             | \$ 55                          |  |
| <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"/>   | 2                      | Cash                      |                                | 06/25/2009                  | \$ 30                          |  |
| <input type="checkbox"/>   | 2                      | Cash                      |                                | 5/14/2009                   | \$ 25                          |  |
| <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><br>(include city, state, & zip)               |                        |                           | <b>b. Job Title/Profession</b> |                             | <b>d. Comments</b>             |  |
|  |                        |                           |                                |                             |                                |  |
|  |                        |                           |                                |                             |                                |  |
|  |                        |                           |                                |                             | <b>e. Election Sum to Date</b> |  |
|  |                        |                           |                                |                             | \$                             |  |
| <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"/>   |                        |                           |                                |                             | \$                             |  |
| <input type="checkbox"/>   |                        |                           |                                |                             | \$                             |  |
| <input type="checkbox"/>   |                        |                           |                                |                             | \$                             |  |
| <b>4. Total only this Page</b>   |                        |                           |                                |                             | \$ 130                         |  |
| <b>5. Total of ALL CRO-1210 Pages</b>  |                        |                           |                                |                             | \$ 7,690                       |  |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>                         |                        |                           |                                |                             |                                |  |

# Contributions from Other Political Committees

Use this form to report contributions from other candidate, referendum or PAC committees

|  |                           |   |                             |                                |  |
|--|---------------------------|---|-----------------------------|--------------------------------|--|
| <b>1. Committee Full Name (and Fund if applicable)</b>   |                           |   |                             | <b>2. ID Number</b>            |  |
| The Committee to Elect Gordon Smith  |                           |   |                             | 6DHQ18                         |  |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove |                           |   |                             |                                |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)               |                           | <b>b. Type of Committee</b>   |                             | <b>d. Comments</b>             |  |
| Democracy for America Asheville<br>108 Hillside St<br>Asheville, NC 28801                      |                           | <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC<br><input type="checkbox"/> Referendum                                     |                             |                                |  |
|  |                           | <b>c. Level Registered (Specify)</b>  |                             |                                |  |
|  |                           | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality: |                             |                                |  |
|  |                           |   |                             | <b>e. Election Sum to Date</b> |  |
|  |                           |   |                             | \$ 30                          |  |
| <b>f. Account Code</b>   | <b>g. Form of Payment</b> | <b>h. In-Kind Description</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>               |  |
| 1  | Check                     |   | 02/02/2009                  | \$ 30                          |  |
|  |                           |   |                             | \$                             |  |
|  |                           |   |                             | \$                             |  |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove |                           |   |                             |                                |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)               |                           | <b>b. Type of Committee</b>   |                             | <b>d. Comments</b>             |  |
|  |                           | <input type="checkbox"/> Candidate <input type="checkbox"/> PAC<br><input type="checkbox"/> Referendum  |                             |                                |  |
|  |                           | <b>c. Level Registered (Specify)</b>  |                             |                                |  |
|  |                           | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality:            |                             |                                |  |
|  |                           |   |                             | <b>e. Election Sum to Date</b> |  |
|  |                           |   |                             | \$                             |  |
| <b>f. Account Code</b>   | <b>g. Form of Payment</b> | <b>h. In-Kind Description</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>               |  |
|  |                           |   |                             | \$                             |  |
|  |                           |   |                             | \$                             |  |
|  |                           |   |                             | \$                             |  |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove |                           |   |                             |                                |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)               |                           | <b>b. Type of Committee</b>   |                             | <b>d. Comments</b>             |  |
|  |                           | <input type="checkbox"/> Candidate <input type="checkbox"/> PAC<br><input type="checkbox"/> Referendum  |                             |                                |  |
|  |                           | <b>c. Level Registered (Specify)</b>  |                             |                                |  |
|  |                           | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality:            |                             |                                |  |
|  |                           |   |                             | <b>e. Election Sum to Date</b> |  |
|  |                           |   |                             | \$                             |  |
| <b>f. Account Code</b>   | <b>g. Form of Payment</b> | <b>h. In-Kind Description</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>               |  |
|  |                           |   |                             | \$                             |  |
|  |                           |   |                             | \$                             |  |
|  |                           |   |                             | \$                             |  |
| <b>4. Total only this Page</b>   |                           |   |                             | \$ 30                          |  |
| <b>5. Total of ALL CRO-1230 Pages</b>  |                           |   |                             | \$ 30                          |  |
| <i>(This line must be on line 8 of Detailed Summary Page CRO-1100)</i>                         |                           |   |                             |                                |  |

# Disbursements

Amendment  
 Yes  No

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

|  |                           |  |                             |                                     |                               |
|--|---------------------------|--|-----------------------------|-------------------------------------|-------------------------------|
| <b>1. Committee Full Name (and Fund if applicable)</b><br>The Committee to Elect Gordon Smith  |                           |  |                             |                                     | <b>2. ID Number</b><br>6DHQ18 |
| <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   |                           |  |                             |                                     |                               |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br>Cheney Graphics<br>2000 Riverside Dr #4<br>Asaheville, NC 28804<br>828-236-9004  |                           | <b>b. Coordinated Committee Name</b>   |                             | <b>d. Comments</b>                  |                               |
|  |                           | <b>c. Level Registered (Specify)</b><br><input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                             | <b>e. Election Sum to Date</b>      |                               |
|  |                           |  |                             | \$ 974                              |                               |
| <b>f. Account Code</b>   | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>                    | <b>k. Required Remarks</b>    |
| 1  | Check                     | B  | Various                     | \$743                               | TShirts/Sticker               |
| 2  | Check                     | B  | 05/14/2009                  | \$231                               | TShirts/Sticker               |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                           |  |                             |                                     |                               |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br>Flood Gallery<br>49 Euclid Blvd<br>Asheville, NC 28801<br>828-254-2166   |                           | <b>b. Coordinated Committee Name</b>   |                             | <b>d. Comments</b>                  |                               |
|  |                           | <b>c. Level Registered (Specify)</b><br><input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                             | <b>e. Election Sum to Date</b>      |                               |
|  |                           |  |                             | \$ 300                              |                               |
| <b>f. Account Code</b>   | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>                    | <b>k. Required Remarks</b>    |
| 1  | Check                     | C  | 07/02/2009                  | \$300                               | Room Rental                   |
|  |                           |  |                             | \$                                  |                               |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                           |  |                             |                                     |                               |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br>WNC Disc Golf Association<br>1726 Walker Branch<br>Mars Hill, NC 28754<br>828-680-9626   |                           | <b>b. Coordinated Committee Name</b>   |                             | <b>d. Comments</b>                  |                               |
|  |                           | <b>c. Level Registered (Specify)</b><br><input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                             | <b>e. Election Sum to Date</b>      |                               |
|  |                           |  |                             | \$ 100                              |                               |
| <b>f. Account Code</b>   | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>                    | <b>k. Required Remarks</b>    |
| 2  | Check                     | A  | 05/15/2009                  | \$100                               | Campaign Ad Space             |
|  |                           |  |                             | \$                                  |                               |
| <b>5. Total only this Page</b>   |                           |  |                             |                                     | \$ 1,374                      |
| <b>6. Total of ALL CRO-1310 Pages</b><br><i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i><br><i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i><br><i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> |                           |  |                             |                                     | \$ 8,293                      |
| <b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)   |                           |  |                             |                                     |                               |
| A* - Media   |                           | B* - Printing  |                             | C* - Fundraising                    |                               |
| E - Salaries   |                           | F* - Equipment   |                             | G - Political Party                 |                               |
| I - Postage  |                           | J - Penalties  |                             | K* - Office Expenses                |                               |
|  |                           |  |                             | D - To Another Candidate            |                               |
|  |                           |  |                             | H* - Holding Public 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

|   |                    |  |                      |                                     |                        |
|---|--------------------|--|----------------------|-------------------------------------|------------------------|
| 1. Committee Full Name (and Fund if applicable)<br>The Committee to Elect Gordon Smith  |                    |  |                      |                                     | 2. ID Number<br>6DHQ18 |
| 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<br>(include city, state, & zip)<br>ITS<br>45 Asheland Ave<br>Asheville, NC 28801<br>828-854-9536  |                    | b. Coordinated Committee Name  |                      | d. Comments                         |                        |
|   |                    |  |                      |                                     |                        |
|   |                    | c. Level Registered (Specify)  |                      | e. Election Sum to Date             |                        |
|   |                    | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                      | \$ 867                              |                        |
| f. Account Code   | g. Form of Payment | h. Purpose Code  | i. Date (mm/dd/yyyy) | j. Amount                           | k. Required Remarks    |
| 2   | Check              | B  | 06/30/2009           | \$867                               | Various Printing       |
|   |                    |  |                      | \$                                  |                        |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                    |  |                      |                                     |                        |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)<br>Graphics Four<br>9 Broad St.<br>Asheville, NC 28801<br>828-252-2252  |                    | b. Coordinated Committee Name  |                      | d. Comments                         |                        |
|   |                    |  |                      |                                     |                        |
|   |                    | c. Level Registered (Specify)  |                      | e. Election Sum to Date             |                        |
|   |                    | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                      | \$ 91                               |                        |
| f. Account Code   | g. Form of Payment | h. Purpose Code  | i. Date (mm/dd/yyyy) | j. Amount                           | k. Required Remarks    |
| 1   | Check              | B  | 05/01/2009           | \$46                                | Stickers               |
| 1   | Check              | B  | 05/29/2009           | \$45                                | Stickers               |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                    |  |                      |                                     |                        |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)<br>JBA Network Inc<br>311 Montford Ave<br>Asheville, NC 28801<br>828-232-0016   |                    | b. Coordinated Committee Name  |                      | d. Comments                         |                        |
|   |                    |  |                      |                                     |                        |
|   |                    | c. Level Registered (Specify)  |                      | e. Election Sum to Date             |                        |
|   |                    | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                      | \$ 360                              |                        |
| f. Account Code   | g. Form of Payment | h. Purpose Code  | i. Date (mm/dd/yyyy) | j. Amount                           | k. Required Remarks    |
| 1   | Check              | A  | Monthly              | \$360                               | Web Space              |
|   |                    |  |                      | \$                                  |                        |
| 5. Total only this Page   |                    |  |                      |                                     | \$ 1,318               |
| 6. Total of ALL CRO-1310 Pages<br><i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i><br><i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i><br><i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> |                    |  |                      |                                     | \$ 8,293               |
| 7. Purpose Codes (List detailed expenditure code in (h.) above)   |                    |  |                      |                                     |                        |
| A* - Media  |                    | B* - Printing  |                      | C* - Fundraising                    |                        |
| E - Salaries  |                    | F* - Equipment   |                      | G - Political Party                 |                        |
| I - Postage   |                    | J - Penalties  |                      | K* - Office Expenses                |                        |
|   |                    |  |                      | D - To Another Candidate            |                        |
|   |                    |  |                      | H* - Holding Public 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>        |
| The Committee to Elect Gordon Smith   |                           |  |                             |                                     | 6DHQ18                     |
| <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  |                           |  |                             |                                     |                            |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)  |                           | <b>b. Coordinated Committee Name</b>   |                             | <b>d. Comments</b>                  |                            |
| Asheville Greenworks<br>357 Depot St.<br>Asheville, NC 28801<br>828-254-1776  |                           |  |                             |                                     |                            |
|   |                           | <b>c. Level Registered (Specify)</b>   |                             | <b>e. Election Sum to Date</b>      |                            |
|   |                           | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                             | \$ 100                              |                            |
| <b>f. Account Code</b>  | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>                    | <b>k. Required Remarks</b> |
| 2   | Check                     | O  | 4/23/2009                   | \$100                               | Event Fee                  |
|   |                           |  |                             | \$                                  |                            |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove  |                           |  |                             |                                     |                            |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)  |                           | <b>b. Coordinated Committee Name</b>   |                             | <b>d. Comments</b>                  |                            |
| Asheville Printwerk<br>120 Coxe Ave., Ste 1A<br>Asheville, NC 28801<br>828-252-4180   |                           |  |                             |                                     |                            |
|   |                           | <b>c. Level Registered (Specify)</b>   |                             | <b>e. Election Sum to Date</b>      |                            |
|   |                           | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                             | \$ 256                              |                            |
| <b>f. Account Code</b>  | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>                    | <b>k. Required Remarks</b> |
| 1   | Check                     | B  | 07/09/2009                  | \$256                               | Envelopes                  |
|   |                           |  |                             | \$                                  |                            |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove  |                           |  |                             |                                     |                            |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)  |                           | <b>b. Coordinated Committee Name</b>   |                             | <b>d. Comments</b>                  |                            |
| Asheville Brewing Company<br>77 Coxe Ave<br>Asheville, NC 28801<br>828-255-4077   |                           |  |                             |                                     |                            |
|   |                           | <b>c. Level Registered (Specify)</b>   |                             | <b>e. Election Sum to Date</b>      |                            |
|   |                           | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                             | \$ 152                              |                            |
| <b>f. Account Code</b>  | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>                    | <b>k. Required Remarks</b> |
| 1   | Check                     | O  | 03/23/2009                  | \$152                               | Pizza for Event            |
|   |                           |  |                             | \$                                  |                            |
| <b>5. Total only this Page</b>  |                           |  |                             |                                     | \$ 508                     |
| <b>6. Total of ALL CRO-1310 Pages</b>   |                           |  |                             |                                     | \$ 8,293                   |
| <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i><br><i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i><br><i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> |                           |  |                             |                                     |                            |
| <b>7. Purpose Codes</b> <i>(List detailed expenditure code in (h.) above)</i>   |                           |  |                             |                                     |                            |
| A* - Media  |                           | B* - Printing  |                             | C* - Fundraising                    |                            |
| E - Salaries  |                           | F* - Equipment   |                             | G - Political Party                 |                            |
| I - Postage   |                           | J - Penalties  |                             | K* - Office Expenses                |                            |
|   |                           |  |                             | D - To Another Candidate            |                            |
|   |                           |  |                             | H* - Holding Public 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>        |
| The Committee to Elect Gordon Smith   |                           |  |                             |                                     | 6DHQ18                     |
| <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  |                           |  |                             |                                     |                            |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br><i>(include city, state, &amp; zip)</i>   |                           | <b>b. Coordinated Committee Name</b>   |                             | <b>d. Comments</b>                  |                            |
| Imaging Technologies<br>PO Box 13426<br>Atlanta, GA 30324<br>828-254-9536   |                           |  |                             |                                     |                            |
|   |                           | <b>c. Level Registered (Specify)</b>   |                             | <b>e. Election Sum to Date</b>      |                            |
|   |                           | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                             | \$ 2,168                            |                            |
| <b>f. Account Code</b>  | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>                    | <b>k. Required Remarks</b> |
| 1   | Check                     | B  | Various                     | \$327                               | Various Printing           |
| 2   | Check                     | B  | Various                     | \$1841                              | Various Printing           |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove  |                           |  |                             |                                     |                            |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br><i>(include city, state, &amp; zip)</i>   |                           | <b>b. Coordinated Committee Name</b>   |                             | <b>d. Comments</b>                  |                            |
| Gordon Smith<br>49 Euclid Blvd<br>Asheville, NC 28806<br>828-279-2551   |                           |  |                             |                                     |                            |
|   |                           | <b>c. Level Registered (Specify)</b>   |                             | <b>e. Election Sum to Date</b>      |                            |
|   |                           | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                             | \$ 305                              |                            |
| <b>f. Account Code</b>  | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>                    | <b>k. Required Remarks</b> |
| 2   | Check                     | K  | 5/25/2009                   | \$305                               | Phone Reimbursement        |
|   |                           |  |                             | \$                                  |                            |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove  |                           |  |                             |                                     |                            |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br><i>(include city, state, &amp; zip)</i>   |                           | <b>b. Coordinated Committee Name</b>   |                             | <b>d. Comments</b>                  |                            |
| Ferris Camp<br>16 Pinecroft Rd<br>Asheville, NC 28804   |                           |  |                             |                                     |                            |
|   |                           | <b>c. Level Registered (Specify)</b>   |                             | <b>e. Election Sum to Date</b>      |                            |
|   |                           | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                             | \$ 83                               |                            |
| <b>f. Account Code</b>  | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>                    | <b>k. Required Remarks</b> |
| 2   | Check                     | K  | 05/26/2009                  | \$83                                | Food Reimbursement         |
|   |                           |  |                             | \$                                  |                            |
| <b>5. Total only this Page</b>  |                           |  |                             |                                     | \$ 2,556                   |
| <b>6. Total of ALL CRO-1310 Pages</b>   |                           |  |                             |                                     | \$ 8,293                   |
| <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i><br><i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i><br><i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> |                           |  |                             |                                     |                            |
| <b>7. Purpose Codes</b> <i>(List detailed expenditure code in (h.) above)</i>   |                           |  |                             |                                     |                            |
| A* - Media  |                           | B* - Printing  |                             | C* - Fundraising                    |                            |
| E - Salaries  |                           | F* - Equipment   |                             | G - Political Party                 |                            |
| I - Postage   |                           | J - Penalties  |                             | K* - Office Expenses                |                            |
|   |                           |  |                             | D - To Another Candidate            |                            |
|   |                           |  |                             | H* - Holding Public Office Expenses |                            |
|   |                           |  |                             | O* - Other                          |                            |
| * Codes require detailed explanation in required remarks field (k)  |                           |  |                             |                                     |                            |

# Disbursements

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

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

|   |                           |  |                             |                                     |                            |
|---|---------------------------|--|-----------------------------|-------------------------------------|----------------------------|
| <b>1. Committee Full Name (and Fund if applicable)</b>  |                           |  |                             |                                     | <b>2. ID Number</b>        |
| The Committee to Elect Gordon Smith   |                           |  |                             |                                     | 6DHQ18                     |
| <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  |                           |  |                             |                                     |                            |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)  |                           | <b>b. Coordinated Committee Name</b>   |                             | <b>d. Comments</b>                  |                            |
| Feral Chihuahuas<br>35 E Walnut St<br>Asheville, NC 28801<br>828-254-1320   |                           |  |                             |                                     |                            |
|   |                           | <b>c. Level Registered (Specify)</b>   |                             | <b>e. Election Sum to Date</b>      |                            |
|   |                           | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                             | \$ 150                              |                            |
| <b>f. Account Code</b>  | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>                    | <b>k. Required Remarks</b> |
| 2   | Check                     | A  | 06/17/2009                  | \$150                               | Campaign Ad                |
|   |                           |  |                             | \$                                  |                            |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove  |                           |  |                             |                                     |                            |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)  |                           | <b>b. Coordinated Committee Name</b>   |                             | <b>d. Comments</b>                  |                            |
| David Roat<br>41 Kendall St<br>Asheville, NC 28806<br>828-231-7812  |                           |  |                             |                                     |                            |
|   |                           | <b>c. Level Registered (Specify)</b>   |                             | <b>e. Election Sum to Date</b>      |                            |
|   |                           | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                             | \$ 1,765                            |                            |
| <b>f. Account Code</b>  | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>                    | <b>k. Required Remarks</b> |
| 1   | Check                     | K  | Various                     | \$1765                              | Various Reimbursement      |
|   |                           |  |                             | \$                                  |                            |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove  |                           |  |                             |                                     |                            |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)  |                           | <b>b. Coordinated Committee Name</b>   |                             | <b>d. Comments</b>                  |                            |
| Fedex Kinko's<br>17 Bryson St<br>Asheville, NC 28803<br>800-463-3339  |                           |  |                             |                                     |                            |
|   |                           | <b>c. Level Registered (Specify)</b>   |                             | <b>e. Election Sum to Date</b>      |                            |
|   |                           | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                             | \$ 146                              |                            |
| <b>f. Account Code</b>  | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>                    | <b>k. Required Remarks</b> |
| 1   | Check                     | B  | 06/17/2009                  | \$61                                | Various Printing           |
| 1   | Check                     | B  | 06/30/2009                  | \$85                                | Various Printing           |
| <b>5. Total only this Page</b>  |                           |  |                             |                                     | \$ 2,061                   |
| <b>6. Total of ALL CRO-1310 Pages</b>   |                           |  |                             |                                     | \$ 8,293                   |
| <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i><br><i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i><br><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   |                             | G - Political Party                 |                            |
| I - Postage   |                           | J - Penalties  |                             | K* - Office Expenses                |                            |
|   |                           |  |                             | D - To Another Candidate            |                            |
|   |                           |  |                             | H* - Holding Public 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

|   |                    |   |                      |                                     |                        |
|---|--------------------|---|----------------------|-------------------------------------|------------------------|
| 1. Committee Full Name (and Fund if applicable)<br>The Committee to Elect Gordon Smith  |                    |   |                      |                                     | 2. ID Number<br>6DHQ18 |
| 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<br>(include city, state, & zip)<br>Buncombe County<br>Board of Elections<br>189 College St<br>Asheville, NC 28801<br>828-250-4200   |                    | b. Coordinated Committee Name   |                      | d. Comments                         |                        |
|   |                    | c. Level Registered (Specify)<br><input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                      | e. Election Sum to Date             |                        |
|   |                    |   |                      | \$ 75                               |                        |
| f. Account Code   | g. Form of Payment | h. Purpose Code   | i. Date (mm/dd/yyyy) | j. Amount                           | k. Required Remarks    |
| 2   | Check              | O   | 07/16/2009           | \$75                                | Filing Fee             |
|   |                    |   |                      | \$                                  |                        |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                    |   |                      |                                     |                        |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)<br>Rachael Smith<br>49 Euclid Blvd<br>Asheville, NC 28806<br>828-231-7812   |                    | b. Coordinated Committee Name   |                      | d. Comments                         |                        |
|   |                    | c. Level Registered (Specify)<br><input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                      | e. Election Sum to Date             |                        |
|   |                    |   |                      | \$ 256                              |                        |
| f. Account Code   | g. Form of Payment | h. Purpose Code   | i. Date (mm/dd/yyyy) | j. Amount                           | k. Required Remarks    |
| 2   | Check              | K   | 04/23/2009           | \$126                               | Phone Reimbursement    |
| 2   | Check              | K   | 06/24/2009           | \$130                               | Phone Reimbursement    |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                    |   |                      |                                     |                        |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)<br>Aggregated Non-media Expenditures  |                    | b. Coordinated Committee Name   |                      | d. Comments                         |                        |
|   |                    | c. Level Registered (Specify)<br><input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                      | e. Election Sum to Date             |                        |
|   |                    |   |                      | \$                                  |                        |
| f. Account Code   | g. Form of Payment | h. Purpose Code   | i. Date (mm/dd/yyyy) | j. Amount                           | k. Required Remarks    |
| 1   | Check              | K   | 06/01/2009           | \$44                                |                        |
| 1   | Bank Fee           | O   | 02/04/2009           | \$19                                |                        |
| 5. Total only this Page   |                    |   |                      |                                     | \$ 394                 |
| 6. Total of ALL CRO-1310 Pages<br><i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i><br><i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i><br><i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> |                    |   |                      |                                     | \$ 8,293               |
| 7. Purpose Codes (List detailed expenditure code in (h.) above)   |                    |   |                      |                                     |                        |
| A* - Media  |                    | B* - Printing   |                      | C* - Fundraising                    |                        |
| E - Salaries  |                    | F* - Equipment  |                      | G - Political Party                 |                        |
| I - Postage   |                    | J - Penalties   |                      | K* - Office Expenses                |                        |
|   |                    |   |                      | D - To Another Candidate            |                        |
|   |                    |   |                      | H* - Holding Public Office Expenses |                        |
|   |                    |   |                      | O* - Other                          |                        |
| * Codes require detailed explanation in required remarks field (k)  |                    |   |                      |                                     |                        |

# Disbursements

Amendment  Yes  No

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

|  |                           |  |                             |                                |                               |
|--|---------------------------|--|-----------------------------|--------------------------------|-------------------------------|
| <b>1. Committee Full Name (and Fund if applicable)</b><br>The Committee to Elect Gordon Smith  |                           |  |                             |                                | <b>2. ID Number</b><br>6DHQ18 |
| <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   |                           |  |                             |                                |                               |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br>Aggregated Non-media Expenditures  |                           | <b>b. Coordinated Committee Name</b>   |                             | <b>d. Comments</b>             |                               |
|  |                           | <b>c. Level Registered (Specify)</b><br><input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                             | <b>e. Election Sum to Date</b> |                               |
|  |                           |  |                             | \$                             |                               |
| <b>f. Account Code</b>   | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>               | <b>k. Required Remarks</b>    |
| 2  | Check                     | K  | 05/03/2009                  | \$18                           |                               |
| 2  | Check                     | K  | 05/11/2009                  | \$22                           |                               |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                           |  |                             |                                |                               |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br>Aggregated Non-media Expenditures  |                           | <b>b. Coordinated Committee Name</b>   |                             | <b>d. Comments</b>             |                               |
|  |                           | <b>c. Level Registered (Specify)</b><br><input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                             | <b>e. Election Sum to Date</b> |                               |
|  |                           |  |                             | \$                             |                               |
| <b>f. Account Code</b>   | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>               | <b>k. Required Remarks</b>    |
| 2  | Check                     | O  | 04/29/2009                  | \$25                           |                               |
| 1  | Check                     | I  | 03/06/2009                  | \$17                           |                               |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                           |  |                             |                                |                               |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)   |                           | <b>b. Coordinated Committee Name</b>   |                             | <b>d. Comments</b>             |                               |
|  |                           | <b>c. Level Registered (Specify)</b><br><input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                             | <b>e. Election Sum to Date</b> |                               |
|  |                           |  |                             | \$                             |                               |
| <b>f. Account Code</b>   | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>   | <b>i. Date (mm/dd/yyyy)</b> | <b>j. Amount</b>               | <b>k. Required Remarks</b>    |
|  |                           |  |                             | \$                             |                               |
|  |                           |  |                             | \$                             |                               |
| <b>5. Total only this Page</b>   |                           |  |                             |                                | \$ 82                         |
| <b>6. Total of ALL CRO-1310 Pages</b><br><i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i><br><i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i><br><i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> |                           |  |                             |                                | \$ 8,293                      |
| <b>7. Purpose Codes</b> (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)   |                           |  |                             |                                |                               |

# In-Kind Contributions

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.  
 Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

|   |  |                                |
|---|--|--------------------------------|
| <b>1. Committee Full Name (and Fund if applicable)</b>  |  | <b>2. ID Number</b>            |
| The Committee to Elect Gordon Smith   |  | 6DHQ18                         |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove            |  |                                |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                          | <b>b. Type of Contributor</b>  | <b>c. Comments</b>             |
| Jodi Rhoden<br>225 Haywood Rd<br>Asheville, NC 28806<br>828-236-9462                                      | <input checked="" type="checkbox"/> Individual<br><input type="checkbox"/> Candidate<br><input type="checkbox"/> Party<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Other Receipt Source |                                |
|   |  | <b>d. Election Sum to Date</b> |
|   |  | \$ 45                          |
| <b>e. Description</b>   | <b>f. Date (mm/dd/yyyy)</b>  | <b>g. Fair Market Amount</b>   |
| Cupcakes  | 04/23/2009   | \$ 15                          |
| Cupcakes  | 05/07/2009   | \$ 15                          |
| Cupcakes  | 05/21/2009   | \$ 15                          |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove            |  |                                |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                          | <b>b. Type of Contributor</b>  | <b>c. Comments</b>             |
| Trip Howell<br>242 Clingman Ave.<br>Asheville, NC 28801<br>828-253-2177                                   | <input checked="" type="checkbox"/> Individual<br><input type="checkbox"/> Candidate<br><input type="checkbox"/> Party<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Other Receipt Source |                                |
|   |  | <b>d. Election Sum to Date</b> |
|   |  | \$ 32                          |
| <b>e. Description</b>   | <b>f. Date (mm/dd/yyyy)</b>  | <b>g. Fair Market Amount</b>   |
| Iced Tea  | 04/23/2009   | \$ 16                          |
| Iced Tea  | 05/07/2009   | \$ 16                          |
|   |  | \$                             |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove            |  |                                |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                          | <b>b. Type of Contributor</b>  | <b>c. Comments</b>             |
|   | <input type="checkbox"/> Individual<br><input type="checkbox"/> Candidate<br><input type="checkbox"/> Party<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Other Receipt Source            |                                |
|   |  | <b>d. Election Sum to Date</b> |
|   |  | \$                             |
| <b>e. Description</b>   | <b>f. Date (mm/dd/yyyy)</b>  | <b>g. Fair Market Amount</b>   |
|   |  | \$                             |
|   |  | \$                             |
|   |  | \$                             |
| <b>4. Total only this Page</b>  |  | \$ 77                          |
| <b>5. Total of ALL CRO-1510 Pages</b><br>(This line must be on line 17 of Detailed Summary Page CRO-1100) |  | \$ 77                          |

# Account Transfers Within the Committee

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

Use this form to transfer money between multiple bank, depository or credit accounts.

| <b>1. Committee Full Name (and Fund if applicable)</b>                  |        |                                  |                                | <b>2. ID Number</b>  |           |  |
|---|--------|----------------------------------|--------------------------------|----------------------|-----------|--|
| The Committee to Elect Gordon Smith                                     |        |                                  |                                | 6DHQ18               |           |  |
| <b>3. Transfer Information</b>  |        |                                  |                                |                      |           |  |
| a. Amend  |        | b. Account Code Transferred From | c. Account Code Transferred To | d. Date (mm/dd/yyyy) | e. Amount |  |
| <input type="checkbox"/>  | Add    | 1                                | 2                              | 04/07/2009           | \$ 500    |  |
| <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 |                                  |                                |                      |           |  |
| <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 |                                  |                                |                      |           |  |
| <input type="checkbox"/>  | Add    |                                  |                                |                      | \$        |  |
| <input type="checkbox"/>  | Remove |                                  |                                |                      |           |  |
| <input type="checkbox"/>  | Add    |                                  |                                |                      | \$        |  |
| <input type="checkbox"/>  | Remove |                                  |                                |                      |           |  |
| <b>4. Total only this Page</b>  |        |                                  |                                |                      | \$ 500    |  |
| <b>5. Total of ALL CRO-1720 Pages</b>                                   |        |                                  |                                |                      | \$ 500    |  |
| <i>(This line must be on line 24 of Detailed Summary Page CRO-1100)</i> |        |                                  |                                |                      |           |  |