

# Disclosure Report Cover

Amendment  
 Yes  No

Please note that this cover sheet 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 those kinds of committee changes.  
 Use the Addendum form (CRO-1010) if more entries are needed.

## 1. Committee Information

a. Full Name		c. ID Number
Earl "Moose" Butler for Sheriff		
b. Mailing Address (include City, State and Zip Code)		d. Date Filed
P O Box 64215 Fayetteville, North Carolina 28306		01/08/2007
		e. Phone Number
		476-8642

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name
2006	10/22/2006	12/31/2006	Phyllis Robertson Williams

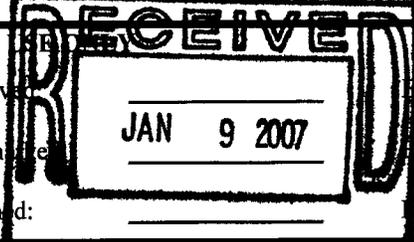
6. Type of Committee (Check one)		8. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<b>Municipal</b>	<b>State/County</b>	<b>Referendum</b>
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum		<input type="checkbox"/> Thirty-five day	Quarterly	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus	<input type="checkbox"/> Final
<input type="checkbox"/> Soft Money Account		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third Plus	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Political Party Financing Fund		<input type="checkbox"/> Mid Year	Semi-annual	9. Special Report Name
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Final	<input checked="" type="checkbox"/> Year End	
<input type="checkbox"/> Other:		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

10. Account Information		10. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
First Citizens Bank			
b. Purpose	c. Code	b. Purpose	c. Code
Checking	1		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 36,782.17		\$

## 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.

Phyllis Robertson Williams \_\_\_\_\_ 01/08/2007  
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE		Employee: <u>Inge</u>	Delivery Method
Date Received: _____		Employee: _____	<input type="checkbox"/> Normal Mail
Date Posted: _____		Employee: _____	<input type="checkbox"/> Registered Mail
Date Scanned: _____		Employee: _____	<input checked="" type="checkbox"/> Hand Delivered
			<input type="checkbox"/> Electronically Filed

# Detailed Summary

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
Earl Moose Butler for Sheriff	Year end		
<b>Start of Election Cycle: January 1, 2003</b>	<b>Total this Reporting Period</b>	<b>Total this Election Cycle</b>	
4) Cash on Hand at Start	\$ 36,782.17	\$ 18,761.64	
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$ 2,560.00	
6) Contributions from Individuals (CRO-1210)	\$ 2,130.00	\$ 57,731.22	
7) Contributions from Political Party Committees (CRO-1220)	\$	\$	
8) Contributions from Other Political Committees (CRO-1230)	\$	\$	
9) Loan Proceeds (CRO-1410)	\$	\$	
10) Refunds/Reimbursements To the Committee (CRO-1240)	\$	\$	
11) Other Receipt Sources (CRO-1250)			
11a) Interest on Bank Accounts (CRO-1250)	\$ 9.24	\$ 86.24	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)	\$	\$	
11c) Outside Sources of Income (CRO-1250)	\$	\$ 100.00	
12) "Goods and Services" Contributions (CRO-1260)	\$ 1,060.00	\$ 17,700.00	
13) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)	\$ 3,199.24	\$ 78,177.76	
<b>EXPENDITURES</b>			
14) Disbursements (CRO-1310)			
14a) Operating Expenditures (CRO-1310)	\$ 3,456.68	\$ 54,873.45	
14b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$ 500.00	
14c) Coordinated Party Expenditures (CRO-1310)	\$	\$	
15) Loan Repayments (CRO-1420)	\$	\$	
16) Refunds/Reimbursements From the Committee (CRO-1320)	\$	\$ 105.00	
17) In-Kind Contributions (CRO-1510)	\$	\$ 4,936.22	
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)	\$ 3,456.68	\$ 60,414.67	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)	\$ 36,524.73	\$ 36,524.73	
<b>ADDITIONAL INFORMATION</b>			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$		
22) Debts and Obligations owed By the Committee (CRO-1610)	\$		
23) Debts and Obligations owed To the Committee (CRO-1620)	\$		
24) Account Transfers Within the Committee (CRO-1720)	\$		
25) Administrative Support (CRO-1710)	\$	\$	
26) Forgiven Loans (CRO-1440)	\$	\$	
27) 48-Hour Notice Reports Sum	\$	\$	

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# Contributions from Individuals

Amendment  
 Yes  No

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
Earl Moose Butler for Sheriff							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Harold Smelcer 3209 BooneTrail Fayetteville nc 28306				owner			
				<b>c. Employer's Name/Specific Field</b>			
				Smelcer Fence Company		<b>e. Election Cycle Sum to Date</b>	
						\$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	1	ck		10/25/2006	\$ 140.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
John Briggs 623 Galloway Dr Fayetteville NC 28303				Owner			
				<b>c. Employer's Name/Specific Field</b>			
				Briggs and Sons		<b>e. Election Cycle 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"/>	1	ck		10/26/2006	\$ 140.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Chris Joyce 240 Fair Oaks Dr Fayetteville NC 28311				Retired			
				<b>c. Employer's Name/Specific Field</b>			
						<b>e. Election Cycle Sum to Date</b>	
						\$ 150.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	1	ck		10/26/2006	\$ 150.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 430.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
Earl Moose Butler for Sheriff							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
William Simpson 10725 Clay Fork rd Roseboro, NC 28382				Retired			
				<b>c. Employer's Name/Specific Field</b>			
				<b>e. Election Cycle 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"/>	1	ck		10/25/2006	\$ 300.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Michael Boose 214 Dick St Fayetteville NC 28302				Owner			
				<b>c. Employer's Name/Specific Field</b>			
				Attorney			
				<b>e. Election Cycle Sum to Date</b>		\$ 600.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	1	ck		10/26/2006	\$ 400.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Janene Allison P O Box 36158 Fayetteville, NC 28303				Owner			
				<b>c. Employer's Name/Specific Field</b>			
				Attorney			
				<b>e. Election Cycle Sum to Date</b>		\$ 1,000.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	1	ck		11/06/2006	\$ 500.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 1,200.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

# Contributions from Individuals

Amendment  
 Yes  No

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
Earl Moose Butler for Sheriff							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
D. Keith Allsion 401 Harlow Fayetteville, NC 28303				owner			
				<b>c. Employer's Name/Specific Field</b>			
				Systel		<b>e. Election Cycle Sum to Date</b>	
						\$ 2,140.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	1	ck		11/06/2006	\$ 500.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b>			
						<b>e. Election Cycle 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>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b>			
						<b>e. Election Cycle 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>						\$ 500.00	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 2,130.00	

# Other Receipt Sources

Pg \_\_\_\_ of \_\_\_\_

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Earl Moose Butler for Sheriff						
<b>3. Type of Receipt Source</b> <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>						
<input checked="" type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input type="checkbox"/> Outside Sources of Income						
<b>4. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Not-for-Profit Federal ID #</b>		<b>d. Comments</b>	
October - 3.06 November 3.05 December 3.13					interest	
			<b>c. Outside Source Explanation</b>			
					<b>e. Election Cycle 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>		
				\$ 9.24		
				\$		
<b>4. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Not-for-Profit Federal ID #</b>		<b>d. Comments</b>	
			<b>c. Outside Source Explanation</b>			
					<b>e. Election Cycle 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. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Not-for-Profit Federal ID #</b>		<b>d. Comments</b>	
			<b>c. Outside Source Explanation</b>			
					<b>e. Election Cycle 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>5. Total only this Page</b>					\$ 9.24	
<b>6. Total of ALL CRO-1250 Pages</b>					\$	
<i>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</i>						
<i>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</i>						
<i>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</i>						

**Goods and Services (including Fundraisers)**

Amendment  
 Yes  No

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>				
Earl Moose Butler for Sheriff								
<b>3. Event Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove								
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Attendance (approx. count)</b>		<b>d. Date(s) Held (mm/dd/yyyy)</b>		
Kings Grant Golf Tournament Ramsey Street Fayetteville, NC				95		FROM: 10/26/2006		
				<b>c. Description</b>		TO:		
				Golf Tournament		<b>e. Total Event Amount</b>		
						\$ 8,020.00		
<b>4. Items (goods and/or services) Sold</b>								
a. Cnt	b. Payment Breakdown			c. Item Description	d. Acct Code	e. Date (mm/dd/yyyy)	f. Amount per Item	g. Total Amount
	Check	Cash	Other					
	x			50.00 per pl;yer	1	10/26/2006	\$ 50.00	\$
	x			100.00 per sponser			\$ 100.00	\$
							\$	\$
							\$	\$
							\$	\$
							\$	\$
							\$	\$
							\$	\$
							\$	\$
<b>5. Total only this Page</b> <i>(This should be the sum of all item '4g' from this page)</i>							\$	1,060.00
<b>6. Total of ALL CRO-1260 Pages</b> <i>(This line must be on line 12 of Detailed Summary Page CRO-1100)</i>							\$	

# Disbursements

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

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
Earl Moose Butler for Sheriff					
<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 checked="" type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
<b>4. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
Crown Trophy Robeson Street Fay nc 28301					
			<b>c. Level Registered (Specify)</b>		
			<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County:		<b>e. Election Cycle Sum to Date</b>
			<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	ck	trophys golf tourn	10/23/2006	\$	70.41
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
Sams Club Skibo Rd fay Nc 28314					
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		<b>e. Election Cycle Sum to Date</b>
			<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	ck	golf toun - food, door prizes	10/23/2006	\$	99.38
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
King Sign raford Rd Fay NC 28304					
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		<b>e. Election Cycle Sum to Date</b>
			<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	ck	signs for golf tournament	10/24/2006	\$	53.50
				\$	
<b>5. Total only this Page</b>				\$ 223.29	
<b>6. Total of ALL CRO-1310 Pages</b>				\$	
<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>					

# Disbursements

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

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
Earl Moose Butler for Sheriff					
<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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
Kings Grant Ramsey St Fay NC					
			<b>c. Level Registered (Specify)</b>		
			<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b>
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	ck	Golf Tourn	10/26/2006	\$ 1,980.00	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
Kinlaws Grocery Cedar Creek Fay., NC 28301					
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b>
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	ck	golf tourn - food, door prizes	10/26/2006	\$ 36.00	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
Jimmy Black 131 Dick St Fay NC 28301					
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b>
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	ck	signs for golf tournament	10/26/2006	\$ 223.00	
				\$	
<b>5. Total only this Page</b>				\$ 2,239.00	
<b>6. Total of ALL CRO-1310 Pages</b>				\$	
<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>					

# Disbursements

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

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
Earl Moose Butler for Sheriff					
<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 checked="" type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
<b>4. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
Southview High School Elk Rd Hope mills NC 283048					
			<b>c. Level Registered (Specify)</b>		
			<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County:		
			<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b>
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	ck	doantion	10/31/2006	\$ 100.00	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
International Food Service Fay NC					
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		
			<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b>
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	ck	golf toum - food, door prizes	11/01/2006	\$ 142.09	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
Cumberland County Democratic Party Fay NC 28301					
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		
			<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b>
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	ck	doantion	11/01/2006	\$ 100.00	
				\$	
<b>5. Total only this Page</b>				\$ 342.09	
<b>6. Total of ALL CRO-1310 Pages</b>				\$	
<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>					

# Disbursements

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Earl Moose Butler for Sheriff						
<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 checked="" type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures		
<b>4. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
Myrover Reese Wilkes Rd Fayetteville NC						
				<b>c. Level Registered (Specify)</b>		
				<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County:		
				<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Cycle Sum to Date</b>
						\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>		<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	ck	donation		11/09/2006	\$ 100.00	
					\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
United Way of Cumberland County Fay NC						
				<b>c. Level Registered (Specify)</b>		
				<input type="checkbox"/> Federal <input type="checkbox"/> County:		
				<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Cycle Sum to Date</b>
						\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>		<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	ck	donation		11/14/2006	\$ 50.00	
					\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
U S Postmaster Fay NC 28301						
				<b>c. Level Registered (Specify)</b>		
				<input type="checkbox"/> Federal <input type="checkbox"/> County:		
				<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Cycle Sum to Date</b>
						\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>		<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	ck	box rental		11/17/2006	\$ 80.00	
					\$	
<b>5. Total only this Page</b>					\$ 230.00	
<b>6. Total of ALL CRO-1310 Pages</b> <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>					\$	

# Disbursements

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Earl Moose Butler for Sheriff						
<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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
Fayetteville Cumberland County Ministerial Council P O Box 2696 Fay NC 28302						
			<b>c. Level Registered (Specify)</b>		<b>e. Election Cycle Sum to Date</b>	
			<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>		
1	ck	donation	12/01/2006	\$ 134.00		
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
Alberta Greene Person St Fay NC 28301						
			<b>c. Level Registered (Specify)</b>		<b>e. Election Cycle Sum to Date</b>	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>		
1	ck	donation- Womens Home	12/14/2006	\$ 100.00		
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
Salvation Army Russell St Fay NC 28301						
			<b>c. Level Registered (Specify)</b>		<b>e. Election Cycle Sum to Date</b>	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>		
1	ck	donation	12/14/2006	\$ 50.00		
				\$		
<b>5. Total only this Page</b>					\$ 284.00	
<b>6. Total of ALL CRO-1310 Pages</b>					\$	
<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>						

# Disbursements

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
Earl Moose Butler for Sheriff					
<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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
T N T Produce Cumberland Rd Fay NC 28306			<b>c. Level Registered (Specify)</b>		
			<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
			<b>e. Election Cycle Sum to Date</b>		\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	ck	donation	12/19/2006	\$	16.84
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
Sams Club Skibo Rd Fay NC 28314			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
			<b>e. Election Cycle Sum to Date</b>		\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	ck	Food Christmas	12/21/2006	\$	100.94
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
Food Lion Hope mills Nc 28348			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
			<b>e. Election Cycle Sum to Date</b>		\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	ck	Food Christmas	12/21/2006	\$	20.52
				\$	
<b>5. Total only this Page</b>				\$	138.30
<b>6. Total of ALL CRO-1310 Pages</b>				\$	3,456.68
<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>					