

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT GALE ADCOCK							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
GALE ADCOCK 300 LEGAULT DRIVE CARY, NC 27513 (919) 531-6077				NP			
				c. Employer's Name/Specific Field			
				SAS INSTITUTE			
						e. Election Sum to Date	
						\$ 1,070.86	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	In Kind	PURCHASE OF DOMAIN NAMES FOR CAMPAIGN	07/29/2007	\$ 60.86		
<input type="checkbox"/>	A	In Kind	FILING FEE	07/19/2007	\$ 10.00		
<input type="checkbox"/>	A	Check		07/28/2007	\$ 1,000.00		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CHRIS MCLAMB 5005 S RIVER SCHOOL ROAD WADE, NC 28395				PROGRAM DIRECTOR			
				c. Employer's Name/Specific Field			
				NC DEPARTMENT OF CORRECTIONS			
						e. Election Sum to Date	
						\$ 75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		07/20/2007	\$ 75.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
HAZEL MOORE 224 JACK PLACE WINTERVILLE, NC 28590				REGISTERED NURSE			
				c. Employer's Name/Specific Field			
				UNC-CHAPEL HILL			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	A	Check		07/21/2007	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1,245.86	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 1,495.86	

Contributions from Individuals

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

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT GALE ADCOCK					
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments
KEVIN ADCOCK 300 LEGAULT DRIVE CARY, NC 27513			HR CONSULTANT		
			c. Employer's Name/Specific Field		
					e. Election Sum to Date
					\$ 250.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	A	Check		07/28/2007	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 250.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 1,495.86

CRO-1210

Contributions from Other Political Committees Pg 1 of 1

Amendment
 Yes No

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

1. Committee Full Name (and Fund if applicable)			2. ID Number	
COMMITTEE TO ELECT GALE ADCOCK				
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee		d. Comments
GREER BEATY CAMPAIGN FUND PO BOX 1143 CARY, NC 27512		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		
		c. Level Registered (Specify)		
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
				\$ 250.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
A	Check		07/28/2007	\$ 250.00
				\$
				\$
4. Total only this Page				\$ 250.00
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$ 250.00

CRO-1230

NC State Board of Elections

April 2007

Disbursements

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

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

1. Committee Full Name (and Fund if applicable)		2. ID Number	
COMMITTEE TO ELECT GALE ADCOCK			
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)			
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures			
4. Payee Information			
<input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments
STAPLES 220 GRANDE HEIGHTS DRIVE CARY, NC 27513			
		c. Level Registered (Specify)	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
			e. Election Sum to Date
			\$ 69.10
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)
A	Check	F	07/28/2007
			\$
			k. Required Remarks
			PRINTER PAPER; THUMB DRIVE
5. Total only this Page			\$ 69.10
6. Total of ALL CRO-1310 Pages			
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>			\$ 69.10
7. Purpose Codes (List detailed expenditure code in (h.) above)			
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund
O* Other			
* Codes require detailed explanation in required remarks field (k)			

In-Kind Contributions

Pg 1 of 1

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

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.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
COMMITTEE TO ELECT GALE ADCOCK			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
GALE ADCOCK 300 LEGAULT DRIVE CARY, NC 27513 (919) 531-6077		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 1,070.86	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
PURCHASE OF DOMAIN NAMES FOR CAMPAIGN WEBSITE		07/29/2007	\$ 60.86
FILING FEE		07/19/2007	\$ 10.00
			\$
4. Total only this Page			\$ 70.86
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>			\$ 70.86

CRO-1510

NC State Board of Elections

December 2007