

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

| | | | | | | |
|-----------------------------------------------------------------------------------------------------------------|------------------------|---------------------------|------------------------------------------|-----------------------------|--------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| COMMITTEE TO ELECT RANDALL WILLIAMS | | | | | | |
| 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 | |
| MARY MARGARET FAUST 308 MARLOWE ROAD RALEIGH, NC 27609 | | | MOM | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 500.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | MAIN | Check | | 08/23/2011 | \$ 500.00 | |
| <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 | |
| EMILY PREYER FOUNTAIN 3509 CHAUCER PLACE RALEIGH, NC 27609 | | | MOM | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 500.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | MAIN | Check | | 08/17/2011 | \$ 500.00 | |
| <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 | |
| ROBERT E GADDY JR 205 DRUMMOND DRIVE RALEIGH, NC 27609 | | | PHYSICIAN | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | RETIRED | | e. Election Sum to Date | |
| | | | | | \$ 100.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | MAIN | Check | | 08/17/2011 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 1,100.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 24,950.00 | |

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

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|-----------------------------------------------------------------------------------------------------------------|------------------------|---------------------------|------------------------------------------|-----------------------------|--------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| COMMITTEE TO ELECT RANDALL WILLIAMS | | | | | | |
| 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 | |
| PICKETT M GUTHRIE 1904 BANBURY ROAD RALEIGH, NC 27608-1120 | | | MOM | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | | | 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"/> | MAIN | Check | | 08/17/2011 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| CHRISTINE L HAGLUND 4208 GLEN LAUREL DRIVE RALEIGH, NC 27612-3704 | | | MOM | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 1,000.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | MAIN | Check | | 08/17/2011 | \$ 1,000.00 | |
| <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 | |
| JOE D KALKHURST P.O. BOX 6588 RALEIGH, NC 27628 | | | REAL ESTATE BROKER | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | YORK COMMERCIAL | | | |
| | | | | | 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"/> | MAIN | Check | | 08/23/2011 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 1,200.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 24,950.00 | |

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

| | | | | | | | |
|-----------------------------------------------------------------------------------------------------------------|------------------------|---------------------------|-------------------------------|------------------------------------------|--|--------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | | | 2. ID Number | |
| COMMITTEE TO ELECT RANDALL WILLIAMS | | | | | | | |
| 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 | |
| JOHN M KANE P.O. BOX 19107 RALEIGH, NC 27619 | | | | DEVELOPER | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | KANE REALTY | | | |
| | | | | | | e. Election Sum to Date | |
| | | | | | | \$ 500.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | MAIN | Check | | 08/26/2011 | | \$ 500.00 | |
| <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 | |
| JUDITH L KELLY 3332 GRANVILLE DRIVE RALEIGH, NC 27609 | | | | MOM | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | | | | |
| | | | | | | e. Election Sum to Date | |
| | | | | | | \$ 500.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | MAIN | Check | | 08/23/2011 | | \$ 500.00 | |
| <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 | |
| STEPHEN KENNY 1105 SILVER OAKS COURT RALEIGH, NC 27609 | | | | REAL ESTATE DEVELOPER | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | THE KENNY COMPANIES | | | |
| | | | | | | e. Election Sum to Date | |
| | | | | | | \$ 1,000.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | MAIN | Check | | 08/12/2011 | | \$ 1,000.00 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 4. Total only this Page | | | | | | \$ 2,000.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | \$ 24,950.00 | |

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

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| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| COMMITTEE TO ELECT RANDALL WILLIAMS | | | | | | |
| 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 | |
| BEN KILGORE 705 CYPRESS CLUB DRIVE RALEIGH, NC 27609 | | | RETIRED | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 500.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | MAIN | Check | | 08/12/2011 | \$ 500.00 | |
| <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 | |
| SCOTT G KIRBY 1424 CANTERBURY ROAD RALEIGH, NC 27608 | | | PHYSICIAN | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | NC MEDICAL BOARD | | | |
| | | | | | 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"/> | MAIN | Check | | 08/23/2011 | \$ 100.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| HENRY O LINEBERGER JR 300 DRUMMOND DRIVE RALEIGH, NC 27609 | | | PHYSICIAN | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | RETIRED | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 500.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | MAIN | Check | | 08/26/2011 | \$ 500.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 1,100.00 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ 24,950.00 | |

Contributions from Individuals

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

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| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| COMMITTEE TO ELECT RANDALL WILLIAMS | | | | | | |
| 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 | |
| KATHLEEN S LYON 317 MARLOWE ROAD RALEIGH, NC 27609 | | | MOM | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 500.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | MAIN | Check | | 08/23/2011 | \$ 500.00 | |
| <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 | |
| ROBERT P MAJORS JR 3508 WILLIAMSBOROUGH COURT RALEIGH, NC 27609 | | | PHYSICIAN | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | RETIRED | | e. Election Sum to Date | |
| | | | | | \$ 250.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | MAIN | Check | | 08/26/2011 | \$ 250.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| TIFT MANN III 3409 WILLIAMSBOROUGH COURT RALEIGH, NC 27609 | | | PHYSICIAN | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | WAKE HEART ASSOCIATES | | e. Election Sum to Date | |
| | | | | | \$ 1,000.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | MAIN | Check | | 08/17/2011 | \$ 1,000.00 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 1,750.00 | |
| 5. Total of ALL CRO-1210 Pages | | | | | \$ 24,950.00 | |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | |