

# Disclosure Report Cover

# COPY

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

Amendment  
 Yes  No

<b>1. Committee Information</b>	
a. Full Name <i>Chris D. Jones for Council</i>	c. ID Number <i>SCQ57Y</i>
b. Mailing Address (include City, State and Zip Code) <i>3501 Stancliff Road Clemmons, NC 27012</i>	d. Date Filed <i>10/26/09</i>
	e. Phone Number <i>336-766-0381</i>

2. Report Year <i>2009</i>	3. Period Start Date (mm/dd/yy) <i>07/10/09</i>	4. Period End Date (mm/dd/yy) <i>10/19/09</i>	5. Treasurer Full Name <i>Ann M. Jenkins</i>
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<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<b>Municipal</b>	<b>State/County</b>	<b>Referendum</b>
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
		<input checked="" type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

**7. Type of Fund (if applicable check one)**

Booster Fund

Building Fund

Other:

**8. Number of Fundraisers this Report**  
*none*

**10. Special Report Name**

<b>11. Account Information</b>		<b>11. Account Information</b>	
a. Financial Institution Full Name <i>Allegacy</i>	b. Purpose <i>To record all monetary receipts and disbursements</i>	a. Financial Institution Full Name	b. Purpose
c. Account Code <i>AJCT</i>	d. Period Begin Balance <i>\$ -0-</i>	c. Account Code	d. Period Begin Balance <i>\$</i>

2009 OCT 26 AM 10:54

**CERTIFICATION**

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

*Ann M. Jenkins* *Ann M. Jenkins* *10/19/2009*

Printed Name of Signer Signature of Appointed Treasurer Date

**FOR OFFICE USE ONLY**

Date Received: *10/26/09* Employee: *Judy Spear*

Date Postmarked: \_\_\_\_\_ Employee: \_\_\_\_\_

Date Scanned: \_\_\_\_\_ Employee: \_\_\_\_\_

Date Data Entered: \_\_\_\_\_ Employee: \_\_\_\_\_

**Delivery Method**

Normal Mail

Registered Mail

Hand Delivered

Electronically Filed

Signer has not received mandatory training

**Please Note:** This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

# Detailed Summary

Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment

Yes  No

1. Committee Full Name (and Fund if applicable) <i>Chris D. Jones for Council</i>	2. Type of Report <i>Pre-Election</i>	3. ID Number <i>SCQ57Y</i>
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Start of Election Cycle: <i>January 1, 2009</i>	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ - 0 -	\$ - 0 -

**RECEIPTS**

5) Aggregated Contributions from Individuals (CRO-1205)	\$ 350.00	\$ 350.00
6) Contributions from Individuals (CRO-1210)	\$ 4,239.82	\$ 4,239.82
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		
11a) Interest on Bank Accounts (CRO-1250)	\$	\$
11b) Contributions from Not-For-Profit Organizations (CRO-1250)	\$	\$
11c) Outside Sources of Income (CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$	\$
11e) Exempt Purchase Price Sales (CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 4,589.82	\$ 4,589.82

**EXPENDITURES**

13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 2,232.74	\$ 2,232.74
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures (CRO-1315)	\$	\$
15) Loan Repayments (CRO-1420)	\$	\$
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$	\$
17) In-Kind Contributions (CRO-1510)	\$ 284.82	\$ 284.82
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 2,517.56	\$ 2,517.56
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 2,072.26	\$ 2,072.26

**ADDITIONAL INFORMATION**

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 (CRO-2220)	\$	\$
28) Contributions to be Refunded (CRO-1215)	\$	\$

# Aggregated Contributions from Individuals

Optional form used to report NC Contributions From Individuals of \$50 or less

<b>1. Committee Full Name (and Fund if applicable)</b> Chris D. Jones for Council	<b>2. ID Number</b> SCQ57Y
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3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add	AJCT	check		09/10/2009	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	AJCT	check		09/20/2009	\$ 25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	AJCT	check		09/22/2009	\$ 25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	AJCT	check		09/29/2009	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	AJCT	check		09/30/2009	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	AJCT	cash		10/06/2009	\$ 25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	AJCT	check		10/05/2009	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	AJCT	check		10/06/2009	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	AJCT	cash		10/16/2009	\$ 25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
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<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$

<b>4. Total only this Page</b>	\$ 350.00
<b>5. Total of ALL CRO-1205 Pages</b> <small>(This line must be on line 5 of Detailed Summary Page CRO-1100)</small>	\$ 350.00

# 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) <b>Chris D. Jones for Council</b>	2. ID Number <b>SCQ57Y</b>
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3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>Chris D. Jones 176 Waddington Rd. Clemmons NC 27012 336-766-5316</b>	b. Job Title/Profession <b>Retired-RJR Tobacco Co.</b>	d. Comments
	c. Employer's Name/Specific Field	
		e. Election Sum to Date <b>\$ 639.82</b>

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		cash	filing fee	07/10/2009	\$ 5.00
<input type="checkbox"/>	AJCT	check		07/10/2009	\$ 100.00
<input type="checkbox"/>	AJCT	check		09/04/2009	\$ 500.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>Chris D. Jones (continue from above)</b>	b. Job Title/Profession	d. Comments
	c. Employer's Name/Specific Field	
		e. Election Sum to Date <b>\$</b>

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		credit card	Yahoo Website Activation	08/02/2009	\$ 29.82
<input type="checkbox"/>	AJCT	check		10/16/2009	\$ 5.00
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>Gerald H Long 7631 Lasater Rd. Clemmons, NC 27012 336-766-5920</b>	b. Job Title/Profession <b>Retired - RJR Tobacco Co.</b>	d. Comments
	c. Employer's Name/Specific Field	
		e. Election Sum to Date <b>\$ 250.00</b>

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	AJCT	check		08/31/2009	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ <b>889.82</b>
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>	\$

# 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) <b>Chris D. Jones for Council</b>	2. ID Number <b>SCQ57Y</b>
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3. Contributor Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>R M Winn, Jr. 196 Roquemore Rd. Clemmons, NC 27012 336-766-8076</b>	b. Job Title/Profession <b>Retired</b>	d. Comments
	c. Employer's Name/Specific Field	
		e. Election Sum to Date <b>\$ 500.00</b>

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	AJCT	check		10/01/2009	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>Ernest G. Golding 8092 Glengarriff Road Clemmons, NC 27012 336-766-1559</b>	b. Job Title/Profession <b>Food Manufacturing</b>	d. Comments
	c. Employer's Name/Specific Field <b>Golding Farm Foods</b>	
		e. Election Sum to Date <b>\$ 2,000.00</b>

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	AJCT	check		10/05/2009	\$ 2,000.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>Edward C. Jones 4340 Woodbourne Drive Clemmons, NC 27012 336-766-4084</b>	b. Job Title/Profession <b>Psychiatrist</b>	d. Comments
	c. Employer's Name/Specific Field <b>New River Behavioral Health Care</b>	
		e. Election Sum to Date <b>\$ 500.00</b>

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	AJCT	check		10/08/2009	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page **\$ 3,000.00**

5. Total of ALL CRO-1210 Pages **\$**  
(This line must be on line 6 of Detailed Summary Page CRO-1100)

# Contributions from Individuals

Page 3 of 3 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> Chris D. Jones for Council	<b>2. ID Number</b> SCQ57Y
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<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) Doug Stimmel 601 N. Trade St., Suite 600 Winston-Salem, NC 27101 336-723-1069	<b>b. Job Title/Profession</b> Owner	<b>c. Employer's Name/Specific Field</b> Stimmel Associates, PA	<b>d. Comments</b>
			<b>e. Election Sum to Date</b> \$ 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"/>			Graphic Assistance for Webpage	09/02/2009	\$ 250.00
<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) Col. Robert L. Gleason 3775 Brookdale Drive Clemmons, NC 27012 336-766-9974	<b>b. Job Title/Profession</b> Retired- USAF	<b>c. Employer's Name/Specific Field</b>	<b>d. Comments</b>
			<b>e. Election Sum to Date</b> \$ 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"/>	AJCT	check		07/30/2009	\$ 100.00
<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>c. Employer's Name/Specific Field</b>	<b>d. Comments</b>
			<b>e. Election Sum to Date</b> \$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

**4. Total only this Page** \$ 350.00

**5. Total of ALL CRO-1210 Pages** \$ 4,239.82  
(This line must be on line 6 of Detailed Summary Page CRO-1100)

# 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) <b>Chris D. Jones for Council</b>	2. ID Number <b>SCQ57Y</b>
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3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)

Operating Expenses     Contributions to Candidates/Political Committees     Coordinated Party Expenditures

4. Payee Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>Hauser Publications P.O. Box 773 Clemmons, NC 27012 336-766-9823</b>	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:	e. Election Sum to Date <b>\$ 898.80</b>

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AJCT	check	B	09/05/2009	\$ 754.25	Printing of Political Handout Flyers
AJCT	check	B	10/12/2009	\$ 37.71	Printing of campaign cards

4. Payee Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>Hauser Publications (continue from above)</b>	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:	e. Election Sum to Date <b>\$</b>

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AJCT	check	B	10/16/2009	\$ 106.84	Printing of Mailers
				\$	

4. Payee Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>Wooten Graphics Draw 819 Welcome, NC 27374 336-731-4650</b>	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:	e. Election Sum to Date <b>\$ 683.56</b>

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AJCT	check	B	10/09/2009	\$ 338.87	Printing of Yard Signs
AJCT	check	B	10/14/2009	\$ 344.69	Printing of Yard Signs

5. Total only this Page **\$ 1582.36**

6. Total of ALL CRO-1310 Pages

(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)  
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)  
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

**\$**

7. Purpose Codes (List detailed expenditure code in (h.) above)

A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	O* - Other

\* Codes require detailed explanation in required remarks field (k)

# Disbursements

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) <b>Chris D. Jones for Council</b>	2. ID Number <b>SCQ57Y</b>
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3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)

Operating Expenses     Contributions to Candidates/Political Committees     Coordinated Party Expenditures

4. Payee Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>US Postal Service 3630 Clemmons Road Clemmons, NC 27012 336-766-6671</b>	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:	
		e. Election Sum to Date <b>\$ 126.00</b>

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AJCT	check	I	10/16/2009	\$ 126.00	Postage
				\$	

4. Payee Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>Clemmons Courier 3600 Clemmons Rd. Clemmons, NC 27012 336-766-4126</b>	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:	
		e. Election Sum to Date <b>\$ 504.38</b>

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AJCT	check	A	10/06/2009	\$ 260.00	Political Display Ad
AJCT	check	A	10/13/2009	\$ 244.38	Political Display Ad

4. Payee Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>West Forsyth High School 1735 Lewisville - Clemmons Rd. Clemmons, NC 27012 336-712-4400</b>	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:	
		e. Election Sum to Date <b>\$ 20.00</b>

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
AJCT	check	O	10/09/2009	\$ 20.00	Campaign Debate Fee
				\$	

5. Total only this Page **\$ 650.38**

6. Total of ALL CRO-1310 Pages **\$ 2232.74**

(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)  
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)  
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

7. Purpose Codes (List detailed expenditure code in (h.) above)

A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	O* - Other

\* Codes require detailed explanation in required remarks field (k)



# 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> <i>Chris D. Jones for Council</i>	<b>2. ID Number</b> <i>SCQ57Y</i>
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<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) <i>Doug Stimmel</i> <i>601 N. Trade St., Suite 600</i> <i>Winston-Salem, NC 27101</i> <i>336-723-1069</i>	<b>b. Type of Contributor</b> <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	<b>c. Comments</b>  <b>d. Election Sum to Date</b> \$ <i>250.00</i>
<b>e. Description</b> <i>Graphic Assistance for Webpage</i>	<b>f. Date (mm/dd/yyyy)</b> <i>09/02/2009</i>	<b>g. Fair Market Amount</b> \$ <i>250.00</i>
		\$
		\$

<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) <i>Chris D. Jones</i> <i>176 Waddington Rd.</i> <i>Clemmons, NC 27012</i> <i>336-766-5316</i>	<b>b. Type of Contributor</b> <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	<b>c. Comments</b>  <b>d. Election Sum to Date</b> \$ <i>34.82</i>
<b>e. Description</b> <i>Filing fee</i>	<b>f. Date (mm/dd/yyyy)</b> <i>7/10/2009</i>	<b>g. Fair Market Amount</b> \$ <i>5.00</i>
<i>Yahoo Website Activation</i>	<i>8/02/2009</i>	\$ <i>29.82</i>
		\$

<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. Type of Contributor</b> <input 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	<b>c. Comments</b>  <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>	\$ <i>284.82</i>
<b>5. Total of ALL CRO-1510 Pages</b> <small>(This line must be on line 17 of Detailed Summary Page CRO-1100)</small>	\$ <i>284.82</i>