

Disclosure Report Cover

Amendment
 Yes No

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.

I. Committee Information	
a. Full Name <u>Schatzman for Sheriff</u>	c. ID Number —
b. Mailing Address (include City, State and Zip Code) <u>90 Stephen C. Mathis 2521 Bitting Rd. Winston-Salem, NC 27104</u>	d. Date Filed <u>7/12/2010</u>
	e. Phone Number <u>336-722-1511</u>

2. Report Year <u>2010</u>	3. Period Start Date (mm/dd/yyyy) <u>4/18/2010</u>	4. Period End Date (mm/dd/yyyy) <u>6/30/2010</u>	5. Treasurer Full Name <u>Stephen C. Mathis</u>
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6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	Municipal	State/County	Referendum
<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 type="checkbox"/> Pre-election	<input checked="" type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Booster Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	10. Special Report Name
<input type="checkbox"/> Other:		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	—
8. Number of Fundraisers this Report		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
<u>None</u>			<input type="checkbox"/> Special	

II. Account Information		III. Account Information	
a. Financial Institution Full Name <u>Southern Community Bank</u>	b. Purpose <u>Campaign Activity</u>	a. Financial Institution Full Name —	b. Purpose —
c. Account Code <u>100</u>	d. Period Begin Balance <u>\$ 24,990.09</u>	c. Account Code —	d. Period Begin Balance \$ —

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:

Stephen C. Mathis Printed Name of Signer [Signature] Signature of Appointed Treasurer 7/12/2010 Date

FOR OFFICE USE ONLY

Date Received: 7/12/10 Employee: Judy Spears Delivery Method:
 Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed

Date Postmarked: _____ Employee: _____
 Date Scanned: _____ Employee: _____
 Date Data Entered: _____ Employee: _____
 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

Amendment
 Yes No

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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
Schatzman For Sheriff	2nd quarter - 2010	-
Start of Election Cycle: January 1, 2007	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 24,990.09	\$ 4,577.09
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 125.00	\$ 1,374.00
6) Contributions from Individuals (CRO-1210)	\$ 7,230.29	\$ 62,830.97
7) Contributions from Political Party Committees (CRO-1220)	\$ -	\$ 500.00
8) Contributions from Other Political Committees (CRO-1230)	\$ -	\$ -
9) Loan Proceeds (CRO-1410)	\$ 15,000.00	\$ 15,000.00
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$ -	\$ -
11) Other Receipt Sources		
11a) Interest on Bank Accounts (CRO-1250)	\$ 6.33	\$ 22.14
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)	\$ 22,361.62	\$ 79,727.11
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 28,972.16	\$ 50,332.92
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ -	\$ 500.00
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)	\$ 1,516.82	\$ 8,542.87
17) In-Kind Contributions (CRO-1510)	\$ 2,385.29	\$ 10,450.97
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 32,874.27	\$ 69,826.76
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 14,477.44	\$ 14,477.44
ADDITIONAL INFORMATION		
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$ -	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ 15,000.00	
22) Debts and Obligations owed by the Committee (CRO-1610)	\$ 14,465.65	
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)	\$ -	\$

FORSTEN COMPANY
 12 PM: 12:00
 SERVED

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) SCHATZMAN FOR SHERIFF	2. ID Number
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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
Bailey, Wesley 158 Westhaven Circle Winston-Salem NC 27104 (336) 768-0536			Attorney		
			c. Employers Name/Specific Field Bailey & Thomas, P.A.		
			e. Election Sum to Date		\$100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	100	Check 5652		5/5/2010	\$100.00
<input type="checkbox"/>					
<input type="checkbox"/>					

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
Bauer, Frederick C 104 Westhaven Cir Winston-Salem NC 27104 (336) 765-5157			Retired		
			c. Employers Name/Specific Field		
			e. Election Sum to Date		\$150.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	100	Check 4070		5/5/2010	\$150.00
<input type="checkbox"/>					
<input type="checkbox"/>					

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
Bland, James E. 109 Westhaven Cir Winston-Salem NC 27104 (336) 768-3757			President		
			c. Employers Name/Specific Field Transource Trucking		
			e. Election Sum to Date		\$200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	100	Check 1231		5/5/2010	\$200.00
<input type="checkbox"/>					
<input type="checkbox"/>					

4. Total only this Page	\$450.00
5. Total of ALL CRO-1210 Pages	\$7,230.29

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) SCHATZMAN FOR SHERIFF	2. ID Number
--	---------------------

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
Camastra, Graziano 3133 Allerton Lake Dr Winston-Salem NC 27106 (336) 730-5227			Owner		\$100.00
			c. Employer's Name/Specific Field		
			Marco's Car Wash & Lube		
e. Election Sum to Date					
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	100	Check 4785		4/27/2010	\$100.00
<input type="checkbox"/>					
<input type="checkbox"/>					

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
Catoe, Abby S. 4121 Apperson Rd East Bend NC 27018 (336) 699-4428			Owner		\$100.00
			c. Employer's Name/Specific Field		
			As You Like It Landscapes, Inc.		
e. Election Sum to Date					
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	100	Check 2236		5/5/2010	\$100.00
<input type="checkbox"/>					
<input type="checkbox"/>					

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
Caviness, B. "Bob" F. 3113 Bentley Ct Winston-Salem NC 27104-1800 (336) 760-8997			Retired		\$100.00
			c. Employer's Name/Specific Field		
e. Election Sum to Date					
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	100	Check 1599		5/5/2010	\$100.00
<input type="checkbox"/>					
<input type="checkbox"/>					

4. Total only this Page	\$300.00
5. Total of ALL CRO-1210 Pages	\$7,230.29

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) SCHATZMAN FOR SHERIFF	2. ID Number
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Contributor Information Add Remove

a. Full Name, Mailing Address, Phone (include city, state, zip) Daly, Jon M. 525 Stonegate Lane Winston-Salem NC 27104 (336) 774-0982	b. Job Title/Profession Hotel Owner	d. Comments
c. Employer's Name/Specific Field The Daly Co.		e. Election Sum to Date \$300.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	100	Check 7372		5/5/2010	\$200.00
<input checked="" type="checkbox"/>	100	Check 7343		3/31/2010	\$100.00
<input type="checkbox"/>					

Contributor Information Add Remove

a. Full Name, Mailing Address, Phone (include city, state, zip) Dozier III, Graham P 3009 Buena Vista Rd Winston-Salem NC 27106 3367246074	b. Job Title/Profession Banker - Retired	d. Comments
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	k. Amount
<input type="checkbox"/>	100	Check 5756		4/21/2010	\$100.00
<input type="checkbox"/>					
<input type="checkbox"/>					

Contributor Information Add Remove

a. Full Name, Mailing Address, Phone (include city, state, zip) Eliason, Russell 4760 Blair Ct Winston-Salem NC 27104 (336) 768-4799	b. Job Title/Profession Judge	d. Comments
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	k. Amount
<input type="checkbox"/>	100	Check 431		5/7/2010	\$100.00
<input type="checkbox"/>					
<input type="checkbox"/>					

4. Total only this Page	\$400.00
5. Total of ALL CRO-1210 Pages	\$7,230.29

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) SCHATZMAN FOR SHERIFF	2. ID Number
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Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
Contributor Information a. Full Name, Mailing Address, Phone (include city, state, zip) Foster, T. Vernon 3940 Beechridge Rd Winston-Salem NC 27106 (336) 924-2205			b. Job Title/Profession Printing	d. Comments	
			c. Employer's Name/Specific Field J LaVerne Designs	e. Election Sum to Date \$100.00	
<input type="checkbox"/>	100	Check 1896		4/27/2010	\$100.00
<input type="checkbox"/>					
<input type="checkbox"/>					

Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
Contributor Information a. Full Name, Mailing Address, Phone (include city, state, zip) Hill, Edwin Frank 233 W Mountain St Kernersville NC 27284 (336) 785-2462			b. Job Title/Profession Financial Consultant	d. Comments	
			c. Employer's Name/Specific Field The Planning Group	e. Election Sum to Date \$220.00	
<input type="checkbox"/>	100	Check 1039		4/21/2010	\$20.00
<input checked="" type="checkbox"/>	100	Check 8280		2/19/2010	\$200.00
<input type="checkbox"/>					

Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
Contributor Information a. Full Name, Mailing Address, Phone (include city, state, zip) Jennings, Jerome E 1831 Greenbrier Rd Winston-Salem NC 27104 2321 (336) 722-2460			b. Job Title/Profession Surgeon	d. Comments	
			c. Employer's Name/Specific Field Jennings Clinic	e. Election Sum to Date \$500.00	
<input type="checkbox"/>	100	Check 2600		5/7/2010	\$500.00
<input type="checkbox"/>					
<input type="checkbox"/>					

4. Total only this Page	\$620.00
5. Total of ALL CRO-1210 Pages	\$7,230.29

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) SCHATZMAN FOR SHERIFF	2. ID Number
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Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
Prior	Account Code	Form of Payment	In-Kind Description	Date	Amount
Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove Full Name/Mailing Address/Phone (include city, state, zip) Lewis, Ramona Darnell 1310 N Peacehaven Rd Winston-Salem NC 27104 (336) 765-5175			Job Title/Profession Retired Employers Name/Specific Field	Comments Election Sum to Date \$100.00	
<input type="checkbox"/>	100	Check 1021		5/5/2010	\$100.00
<input type="checkbox"/>					
<input type="checkbox"/>					

Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
Prior	Account Code	Form of Payment	In-Kind Description	Date	Amount
Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove Full Name/Mailing Address/Phone (include city, state, zip) Loye, C. "Gene" E. 460 Crossing Creek Dr Belews Creek NC 27009 9773 (336) 644-0399			Job Title/Profession President Employers Name/Specific Field Sentry Watch	Comments Election Sum to Date \$100.00	
<input type="checkbox"/>	100	Check 4459		5/5/2010	\$100.00
<input type="checkbox"/>					
<input type="checkbox"/>					

Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
Prior	Account Code	Form of Payment	In-Kind Description	Date	Amount
Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove Full Name/Mailing Address/Phone (include city, state, zip) McAllister, Thomas R. 5505 Brookberry Farm Rd Winston-Salem NC 27106 (336) 924-6673			Job Title/Profession Retired Employers Name/Specific Field	Comments Election Sum to Date \$200.00	
<input type="checkbox"/>	100	Check 5203		5/5/2010	\$200.00
<input type="checkbox"/>					
<input type="checkbox"/>					

4. Total only this Page	\$400.00
5. Total of ALL CRO-1210 Pages	\$7,230.29

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) SCHATZMAN FOR SHERIFF	2. ID Number
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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
Nagelski, Sue 15109 Chilgrove Lane Huntersville NC 28078			Housewife		
			c. Employer's Name/Specific Field		
			e. Election Sum to Date		\$600.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	100	Check 7181		5/5/2010	\$600.00
<input type="checkbox"/>					
<input type="checkbox"/>					

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
Pender, Richard 629 Jersey Ave Winston-Salem NC 27101			Manager		
			c. Employer's Name/Specific Field		
			Center for Community Safety		e. Election Sum to Date
					\$75.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	100	Check 2213		4/28/2010	\$75.00
<input type="checkbox"/>					
<input type="checkbox"/>					

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
Phillips Jr., John "Ben" 3048 Country Club Rd Winston-Salem NC 27104 (336) 765-0444			Retired		
			c. Employer's Name/Specific Field		
					e. Election Sum to Date
					\$200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	100	Check 6141		5/5/2010	\$100.00
<input checked="" type="checkbox"/>	100	Check 6063		1/26/2010	\$100.00
<input type="checkbox"/>					

4. Total only this Page	\$775.00
5. Total of ALL CRO-1210 Pages	\$7,230.29

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) SCHATZMAN FOR SHERIFF	2. ID Number
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Contributor Information Add Remove

a. Full Name, Mailing Address, Phone (include city, state, zip) Schatzman, William T 3450 Kirklees Rd Winston-Salem NC 27104	b. Job Title/Profession Sheriff	d. Comments
	c. Employers Name/Specific Field Forsyth County	e. Election Sum to Date \$8,192.87

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	100	In-Kind	Election Night Facility (Pauls Fine Dining)	5/4/2010	\$569.77
<input type="checkbox"/>	100	In-Kind	Yard Signs (Wooten Graphics)	4/30/2010	\$360.96
<input checked="" type="checkbox"/>	100	In-Kind	Postage	4/17/2010	\$56.00

Contributor Information Add Remove

a. Full Name, Mailing Address, Phone (include city, state, zip) Schatzman, William T (Continued) 3450 Kirklees Rd Winston-Salem NC 27104	b. Job Title/Profession Sheriff	d. Comments
	c. Employers Name/Specific Field Forsyth County	e. Election Sum to Date

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input checked="" type="checkbox"/>	100	In-Kind	Printer Supplies	4/16/2010	\$32.09
<input checked="" type="checkbox"/>	100	In-Kind	Paper for invitations & printer printer supplies	4/15/2010	\$98.00
<input checked="" type="checkbox"/>	100	In-Kind	Paper for invitations	4/13/2010	\$70.00

Contributor Information Add Remove

a. Full Name, Mailing Address, Phone (include city, state, zip) Schatzman, William T (Continued) 3450 Kirklees Rd Winston-Salem NC 27104	b. Job Title/Profession Sheriff	d. Comments
	c. Employers Name/Specific Field Forsyth County	e. Election Sum to Date

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input checked="" type="checkbox"/>	100	In-Kind	Lincoln Reagan Day Dinner	4/12/2010	\$250.00
<input checked="" type="checkbox"/>	100	In-Kind	Salem College Event	4/1/2010	\$80.00
<input checked="" type="checkbox"/>	100	In-Kind	Postage	3/24/2010	\$44.00

4. Total only this Page	\$930.73
5. Total of ALL CRO-1210 Pages	\$7, 230.29

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) SCHATZMAN FOR SHERIFF	2. ID Number
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Contributor Information Add Remove

a. Full Name, Mailing Address, Phone (include city, state, zip) Schatzman, William T (Continued) 3450 Kirklees Rd Winston-Salem NC 27104	b. Job Title/Profession Sheriff	d. Comments
	c. Employer Name/Specific Field Forsyth County	e. Election Start to Date

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input checked="" type="checkbox"/>	100	In-Kind	Republican Party Dinner - Forsyth County	3/15/2010	\$250.00
<input checked="" type="checkbox"/>	100	In-Kind	Wire frames for signs	3/12/2010	\$48.49
<input checked="" type="checkbox"/>	100	In-Kind	Postage	2/22/2010	\$88.00

Contributor Information Add Remove

a. Full Name, Mailing Address, Phone (include city, state, zip) Schatzman, William T (Continued) 3450 Kirklees Rd Winston-Salem NC 27104	b. Job Title/Profession Sheriff	d. Comments
	c. Employer Name/Specific Field Forsyth County	e. Election Start to Date

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input checked="" type="checkbox"/>	100	In-Kind	Printing folders and envelopes	2/16/2010	\$458.89
<input checked="" type="checkbox"/>	100	In-Kind	Republican Lunch Meeting	1/6/2010	\$51.54
<input checked="" type="checkbox"/>	100	In-Kind	Postage	12/29/2009	\$8.15

Contributor Information Add Remove

a. Full Name, Mailing Address, Phone (include city, state, zip) Schatzman, William T (Continued) 3450 Kirklees Rd Winston-Salem NC 27104	b. Job Title/Profession Sheriff	d. Comments
	c. Employer Name/Specific Field Forsyth County	e. Election Start to Date

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input checked="" type="checkbox"/>	100	In-Kind	Postage	12/23/2009	\$15.40
<input checked="" type="checkbox"/>	100	In-Kind	Greeting Cards	12/22/2009	\$43.01
<input checked="" type="checkbox"/>	100	In-Kind	Postage	12/14/2009	\$112.00

4. Total only this Page	
5. Total of ALL CRO-1210 Pages	\$7,230.29

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) SCHATZMAN FOR SHERIFF	2. ID Number
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Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address, Phone (include city, state, zip) Schatzman, William T (Continued) 3450 Kirklees Rd Winston-Salem NC 27104	b. Job Title/Profession Sheriff c. Employers Name/Specific Field Forsyth County	d. Comments e. Election Sum to Date

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input checked="" type="checkbox"/>	100	In-Kind	Greeting Cards	12/13/2009	\$208.87
<input checked="" type="checkbox"/>	100	In-Kind	Forsyth County Republican Event	12/8/2009	\$100.00
<input checked="" type="checkbox"/>	100	In-Kind	Forsyth County Republican Event	9/23/2009	\$500.00

Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address, Phone (include city, state, zip) Schatzman, William T (Continued) 3450 Kirklees Rd Winston-Salem NC 27104	b. Job Title/Profession Sheriff c. Employers Name/Specific Field Forsyth County	d. Comments e. Election Sum to Date

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input checked="" type="checkbox"/>	100	In-Kind	All Prior In-kind Contributions for	6/30/2009	\$4,747.70
<input type="checkbox"/>					
<input type="checkbox"/>					

Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address, Phone (include city, state, zip) Schmalfeldt, R. Scott 380 Coventry Park Lane Winston-Salem NC 27104 (336) 765-2929	b. Job Title/Profession Retired - CFO c. Employers Name/Specific Field RJR	d. Comments e. Election Sum to Date \$200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	100	Check 3532		5/5/2010	\$200.00
<input type="checkbox"/>					
<input type="checkbox"/>					

4. Total only this Page	\$200.00
5. Total of ALL CRO-1210 Pages	\$7,230.29

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) SCHATZMAN FOR SHERIFF	2. ID Number
---	---------------------

Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
Contributor Information Full Name, Mailing Address, Phone (include city, state, zip) Simon, Robert S. 8949 Centergrove Place Dr. Clemmons NC 27012 (336) 712-1688			b. Job Title/Profession Owner	d. Comments	
			c. Employer's Name/Specific Field Windsor Jewelry	e. Election Sum to Date \$100.00	
<input type="checkbox"/>	100	Check 2514		5/5/2010	\$100.00
<input type="checkbox"/>					
<input type="checkbox"/>					

Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
Contributor Information Full Name, Mailing Address, Phone (include city, state, zip) Spencer, William L. 367 Pine Valley Rd Winston-Salem NC 27104 3367229819			b. Job Title/Profession President	d. Comments	
			c. Employer's Name/Specific Field JKS Motorsports	e. Election Sum to Date \$1,000.00	
<input type="checkbox"/>	100	Check 5447		4/28/2010	\$750.00
<input checked="" type="checkbox"/>	100	Check 5402		2/25/2010	\$250.00
<input type="checkbox"/>					

Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
Contributor Information Full Name, Mailing Address, Phone (include city, state, zip) Tharpe, Dare S. 113 Westhaven Circle Winston-Salem NC 27104 (336) 768-0087			b. Job Title/Profession Retired	d. Comments	
			c. Employer's Name/Specific Field	e. Election Sum to Date \$1,954.56	
<input type="checkbox"/>	100	In-Kind	Food & Staff (Fundraising Party)	5/2/2010	\$1,454.56
<input checked="" type="checkbox"/>	100	Check 494		2/1/2010	\$500.00
<input type="checkbox"/>					

4. Total only this Page	\$2,304.56
5. Total of ALL CRO-1210 Pages	\$7,230.29

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) SCHATZMAN FOR SHERIFF	2. ID Number
---	--------------

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			
Tisdale Jr., D. Kenneth 1250 Yorkshire Rd Winston-Salem NC 27106 (336) 724-3994	Attorney				
	c. Employers Name/Specific Field				
	Self-employed	e. Election Sum to Date \$1,250.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	100	Check 2546		4/27/2010	\$250.00
<input checked="" type="checkbox"/>	100	Check 2112		1/17/2007	\$1,000.00
<input type="checkbox"/>					

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			
Tisdale Sr., Donald K. 280 Stanton Dr Winston-Salem NC 27106 3367657926	Attorney				
	c. Employers Name/Specific Field				
	Self-Employed	e. Election Sum to Date \$2,250.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	100	Check 869		4/27/2010	\$500.00
<input checked="" type="checkbox"/>	100	Check 867		2/4/2010	\$500.00
<input checked="" type="checkbox"/>	100	Check 1705		1/9/2007	\$1,250.00

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			
Woodruff, Grier A. 4025 Kilmurry Hill Rd Pfafftown NC 27040 (336) 924-5031	Supervisor				
	c. Employers Name/Specific Field				
	Taylor Brothers Tobacco	e. Election Sum to Date \$100.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	100	Check 4032		5/5/2010	\$100.00
<input type="checkbox"/>					
<input type="checkbox"/>					

4. Total only this Page	\$850.00
5. Total of ALL CRO-1210 Pages	\$7,230.29

Loan Proceeds

Pg 1 of 1

Amendment
 Yes No

Use this form to report proceeds from a loan and loan endorser's information
 A loan proceeds statement must accompany each loan that is from an individual

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Schatzman for Sheriff		-	
3. Lender 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
William T. Schatzman 3450 Kirkless Rd. Winston-Salem, NC 27104 <336> 760-3450		Sheriff	-
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		Forsyth County	6/15/2010
			f. End Date (mm/dd/yyyy)
			open
g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment
-0-%	None	100	check
			k. Amount
			\$ 15,000.00
l. Full Name of Lending Institution			m. Loan Number
-			-
4. Endorsers/Makers (do not include the loan officer)			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field
N/A			
		d. Percentage	e. Amount
		%	\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field
✓			
		d. Percentage	e. Amount
		%	\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field
✓			
		d. Percentage	e. Amount
		%	\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field
✓			
		d. Percentage	e. Amount
		%	\$
5. Total of ALL CRO-1410 Pages (This line must be on line 9 of Detailed Summary Page CRO-1100)			\$ 15,000.00

Other Receipt Sources

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Schatzman for Sheriff		-	
3. Type of Receipt Source (Please use separate CRO-1250 forms for each type of Receipt Source)			
<input checked="" type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input type="checkbox"/> Outside Sources of Income			
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Not-for-Profit Federal ID #	d. Comments
Southern Community Bank PO Box 26134 Winston-Salem, NC 27114 (336) 765-8500		-	Interest
		c. Outside Source Explanation	
		-	e. Election Sum to Date
			\$ ↓
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)
100	Bank credit	-	4/30/2010
✓	✓ ✓	-	5/31/2010
			j. Amount
			\$ 2.09
			\$ 2.08
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Not-for-Profit Federal ID #	d. Comments
SCB - cont		-	✓
		c. Outside Source Explanation	
		-	e. Election Sum to Date
			\$ 22.14
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)
✓	✓ ✓	-	6/30/2010
			j. Amount
			\$ 2.16
			\$
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Not-for-Profit Federal ID #	d. Comments
		c. Outside Source Explanation	
			e. Election Sum to Date
			\$
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)
			j. Amount
			\$
			\$
5. Total only this Page			\$ 6.33
6. Total of ALL CRO-1250 Pages			\$ 6.33
<small>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Interest)</small> <small>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</small> <small>(This line goes in line 11e of Detailed Summary Page CRO-1100 if Outside Sources of Income)</small>			

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) Schatzman for Sheriff						2. ID Number -
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
Horn + Stronach 315 N. Spruce St. Winston-Salem, NC 27101 (336) 721-2992				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
						\$ 44,382.87
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
100	check	0	6/15/2010	\$ 28,972.16	Advertising	
				\$		
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
-				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
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
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
-				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
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
5. Total only this Page						\$ 28,972.16
6. Total of ALL CRO-1310 Pages						\$ 28,972.16
(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 (k) 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)						

Refunds/Reimbursements From the Committee

Pg 1 of 1

Amendment
 Yes No

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Schatzman for Sheriff			
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee	h. Original Receipt Date
William T. Schatzman 3450 Kinklives Rd, Winston-Salem, NC 27104 (336) 760-3450		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	
		e. Level Registered	i. Original Receipt Amount
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	\$
		f. Purpose Code	j. Election Sum to Date
		P	\$ ↓
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments	k. Account Code
Sheriff	Forsyth County	-	100
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount
check	see schedule	4/19/2010	\$ 586.09
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee	h. Original Receipt Date
Schatzman (cont)		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	
		e. Level Registered	i. Original Receipt Amount
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	\$
		f. Purpose Code	j. Election Sum to Date
		P	\$ ↓
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments	k. Account Code
✓	✓	-	
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount
check	✓		\$ 360.96
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee	h. Original Receipt Date
Schatzman (cont)		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	
		e. Level Registered	i. Original Receipt Amount
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	\$
		f. Purpose Code	j. Election Sum to Date
		P	\$ 8,192.87
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments	k. Account Code
✓	✓	-	
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount
check	✓		\$ 569.77
4. Total only this Page		\$ 1,516.82	
5. Total on ALL CRO-1320 Pages (This line must be on line 16 of Detailed Summary Page CRO-1100)		\$ 1,516.82	
6. Purpose Codes (List detailed disbursement code in (f) above)			
L - Returned to Contributor	M - Overpayment for Service	N - Exceeded Contribution Limit	
P* - Reimbursement of In-Kind	O* - Other		
Codes require detailed explanation in required remarks field (m)			

Schatzman for Sheriff
William T. Schatzman - in kind contributions refunds
Form CRO - 1320

<u>Original</u> <u>Receipt Date</u>	<u>Required Remarks</u>	<u>Original</u> <u>Receipt Amount</u>	
04/12/10	Lincoln-Reagan Dinner	250.00	
04/01/10	Salem College Republicans Dinner	80.00	
04/16/10	Target (print cartridges)	32.09	
04/15/10	Staples (print cartridges)	98.00	
04/17/10	Fed Ex (mailers)	70.00	
04/17/10	US Postmaster (postage stamps)	56.00	
	Reimbursement - check # 1160	<u>586.09</u>	4/19/2010
04/30/10	Wooten Graphics (yard signs)	360.96	
	Reimbursement - check # 1161	<u>360.96</u>	4/30/2010
05/04/10	Paul's Fine Italian Rest (election night gathering)	569.77	
	Reimbursement - check # 1162	<u>569.77</u>	5/6/2010
	Total for 6/30/2010 reporting period	<u><u>1,516.82</u></u>	

In-Kind Contributions

Pg 1 of 1 Amendment Yes 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
Schatzman for Sheriff		-
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	c. Comments
William T. Schatzman 3450 Kirklees Rd. Winston-Salem, NC 27104 (336) 760-3450	<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	-
		d. Election Sum to Date
		\$ 8,192.87
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
see schedule	see schedule	\$ 930.73
		\$
		\$
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	c. Comments
Dare Tharpe 113 Westhaven Circle Winston-Salem, NC 27104 (336) 768-0087	<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	-
		d. Election Sum to Date
		\$ 1,454.56
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Fundraising party - food + staff	5/2/2010	\$ 1,454.56
		\$
		\$
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	c. Comments
-	<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	
		d. Election Sum to Date
		\$
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		\$
		\$
		\$
4. Total only this Page		\$ 2,385.29
5. Total of ALL CRO-1510 Pages <small>(This line must be on line 17 of Detailed Summary Page CRO-1100)</small>		\$ 2,385.29

**Schatzman for Sheriff
Bill Schatzman - in kind contributions
Form - CRO 1510**

Balance at 4/17/2010

7,262.14

<u>Description</u>	<u>Date</u>	<u>Fair Market Amount</u>	
Wooten Graphics (yard signs)	04/30/10	360.96	
Paul's Fine Italian Rest (election ni	05/04/10	<u>569.77</u>	
			<u>930.73</u>
Balance at 6/30/2010			<u><u>8,192.87</u></u>

Outstanding Loans

Pg 1 of 1

Amendment
 Yes No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Schatzman for Sheriff			
3. Lender 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
William T. Schatzman 3450 Kirkless Rd. Winston-Salem, NC 27104 (336) 760-3450		Sheriff	—
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		Forsyth County	6/15/2010
			f. End Date (mm/dd/yyyy)
			open
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
-0%	None	\$ 15,000.00	\$ 15,000.00
k. Full Name of Lending Institution		l. Loan Number	
—		—	
3. Lender 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
—			
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$	\$
k. Full Name of Lending Institution		l. Loan Number	
—		—	
3. Lender 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
—			
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$	\$
k. Full Name of Lending Institution		l. Loan Number	
—		—	
4. Total only this Page		\$ 15,000.00	
5. Total of ALL CRO-1430 Pages <small>(This line must be on page 2) of Detailed Summary Page CRO-1100.</small>		\$ 15,000.00	

Debts and Obligations Owed By the Committee

Pg 1 of 1

Amendment
 Yes No

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card payments.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Schatzman for Sheriff		-	
3. Creditor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
Horn + Stronach 315 N. Spruce St. Winston-Salem, NC 27101 (336) 721-2992		b. Description of Creditor Advertising / Media Consultant	
c. Beginning Balance	d. Total Amount Paid	e. Total Amount Incurred	f. Remaining Balance
\$ -0-	\$ 28,972.16	\$ 43,437.81	\$ 14,465.65
g. Incurred Debts (what the committee received)			
g1. Date (mm/dd/yyyy)	g2. Amount	g1. Date (mm/dd/yyyy)	g2. Amount
	\$		\$
g3. Item Description		g3. Item Description	
g4. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g4. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)	
3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
		b. Description of Creditor	
c. Beginning Balance	d. Total Amount Paid	e. Total Amount Incurred	f. Remaining Balance
\$	\$	\$	\$
g. Incurred Debts (what the committee received)			
g1. Date (mm/dd/yyyy)	g2. Amount	g1. Date (mm/dd/yyyy)	g2. Amount
	\$		\$
g3. Item Description		g3. Item Description	
g4. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g4. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)	
4. Total only this Page <i>(This should be the sum of all items 3f from this page)</i>		\$ 14,465.65	
5. Total of ALL CRO-1610 Pages <i>(This line must be on line 22 of Detailed Summary Page CRO-1100)</i>		\$ 14,465.65	