

Disclosure Report Cover

Amendment
 Yes No

Please note that this cover sheet cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.
 You must amend the Statement of Organization (CRO-2100A-E) to make those kinds of committee changes.
 Use the Addendum form (CRO-1010) if more entries are needed.

1. Committee Information	
a. Full Name Anthony Dennis For Sheriff	c. ID Number
b. Mailing Address (include City, State and Zip Code) 174 Hunting Bay Dr. Cape Carteret, NC 28584	d. Date Filed
	e. Phone Number 252-393-8565
2. Report Year	3. Period Start Date (mm/dd/yyyy) 07/01/05
	4. Period End Date (mm/dd/yyyy) 12/31/05
5. Treasurer Full Name Angela Lewis Clark	

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

10. Account Information		10. Account Information	
a. Financial Institution Full Name First Citizens Bank & Trust		a. Financial Institution Full Name	
b. Purpose Election Contributions & Expenses	c. Code E-1	b. Purpose	c. Code
	d. Period Begin Balance \$ 1185.06		d. Period Begin Balance \$

CERTIFICATION

I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct.

Angela L. Clark Angela L. Clark 1/20/06
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: 1-23-06 Employee: Andy Lewis

Date Postmarked: _____ Employee: _____

Date Scanned: _____ Employee: _____

Delivery Method
 Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed

RECEIVED
 JAN 23 2006

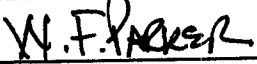
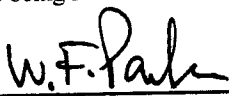
Angela Clark

Amendment
 Yes No

Detailed Summary

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
Anthony Dennis for Sheriff	Year End; Semi- Annual		
Start of Election Cycle: January 1, _____	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 1,185.06	\$ 0.00	
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 3,724.10	\$ 4,041.43	
6) Contributions from Individuals (CRO-1210)	\$ 10,310.00	\$ 11,810.00	
7) Contributions from Political Party Committees (CRO-1220)	\$	\$	
8) Contributions from Other Political Committees (CRO-1230)	\$	\$	
9) Loan Proceeds (CRO-1410)	\$	\$	
10) Refunds/Reimbursements To the Committee (CRO-1240)	\$	\$	
11) Other Receipt Sources (CRO-1250)			
11a) Interest on Bank Accounts (CRO-1250)	\$	\$	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)	\$	\$	
11c) Outside Sources of Income (CRO-1250)	\$	\$	
12) "Goods and Services" Contributions (CRO-1260)	\$	\$	
13) TOTAL RECEIPTS <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)</i>	\$ 14,034.10	\$ 15,851.43	
EXPENDITURES			
14) Disbursements (CRO-1310)			
14a) Operating Expenditures (CRO-1310)	\$ 3,560.59	\$ 4,192.86	
14b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$	
14c) Coordinated Party Expenditures (CRO-1310)	\$	\$	
15) Loan Repayments (CRO-1420)	\$	\$	
16) Refunds/Reimbursements From the Committee (CRO-1320)	\$	\$	
17) In-Kind Contributions (CRO-1510)	\$ 2,289.10	\$ 2,289.10	
18) TOTAL EXPENDITURES <i>(Add lines 14a, 14b, 14c, 15, 16, and 17)</i>	\$ 5849.69	\$ 6,481.96	
19) Cash on Hand at End <i>(Add lines 4 and 13 together, then subtract line 18)</i>	\$ 9,369.47	\$ 9,369.47	
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	\$ 1,000.00	\$ 1,000.00	

48-Hour Notice

To be Used by Committees to Report Contributions of \$1,000 or more			
1. Committee Information			
a. Full Name		c. ID Number	
ANTHONY E. DENNIS FOR SHERIFF			
b. Mailing Address (include City, State and Zip Code)		d. Report Date	
174 HUNTING BAY DR, CAPE CARTERET, NC. 28584		11/21/2005	
		e. Phone Number	
		(252) 393-8565	
2. Contribution Information		2. Contribution Information	
a. Full Name, Mailing Address & Phone (include city, state, and zip)		a. Full Name, Mailing Address & Phone (include city, state, and zip)	
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
JEFF MELENBY 132 CEDAR PT. BLVD. SWANSBORO, NC. 28585			
b. Type of Contributor		b. Type of Contributor	
<input checked="" type="checkbox"/> Individual (if checked, must specify c2 and c3) <input type="checkbox"/> Political Party <input type="checkbox"/> Other Political Committee (if checked, must specify c1) <input type="checkbox"/> Not-for-Profit (if checked, must specify c4) <input type="checkbox"/> Other Source: _____		<input type="checkbox"/> Individual (if checked, must specify c2 and c3) <input type="checkbox"/> Political Party <input type="checkbox"/> Other Political Committee (if checked, must specify c1) <input type="checkbox"/> Not-for-Profit (if checked, must specify c4) <input type="checkbox"/> Other Source: _____	
b1. Type of Committee		b1. Type of Committee	
<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: _____ <input type="checkbox"/> State <input type="checkbox"/> Municipality: _____		<input type="checkbox"/> Federal <input type="checkbox"/> County: _____ <input type="checkbox"/> State <input type="checkbox"/> Municipality: _____	
b2. Job Title/Profession	b4. Federal ID Number	b2. Job Title/Profession	b4. Federal ID Number
RESTAURANT OWNER			
b3. Employer's Name/Specific Field	c. Form of Payment	b3. Employer's Name/Specific Field	c. Form of Payment
SELF	CASH		
d. Date (mm/dd/yyyy)	f. Amount	d. Date (mm/dd/yyyy)	f. Amount
11/19/2005	\$ 1,000.00		\$
e. Account Code	g. Election Cycle Sum to Date	e. Account Code	g. Election Cycle Sum to Date
E-1	\$ 1,000.00		\$
3. Total Contributions THIS Page (sum all the '2f' entries on this page)		\$ 1,000.00	
4. Total Contributions ALL Pages (if multi-page, only list on page 1)		\$	
CERTIFICATION			
I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true, correct, and the contributions were received no more than 48 hours prior to this notice being filed. All contributions received, not over \$1,000, will be reported on the next scheduled filing report.			
 Printed Name of Signer		 Signature of Appointed Treasurer	
		11/21/2005 Date	

Aggregated Contributions from Individuals

Page _____ of _____

Amendment

Yes No

1. Committee Full Name (and Fund if applicable)					2. ID Number
Anthony Dennis For Sheriff					
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 <input type="checkbox"/> Remove	E-1	Cash	—	11/19/05	\$ 20. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/19/05	\$ 20. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/19/05	\$ 40. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/19/05	\$ 10. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/19/05	\$ 10. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/19/05	\$ 10. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/19/05	\$ 10. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/19/05	\$ 10. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/19/05	\$ 60. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/19/05	\$ 40. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/19/05	\$ 20. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/19/05	\$ 20. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/19/05	\$ 20. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/19/05	\$ 20. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/19/05	\$ 20. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/19/05	\$ 10. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/22/05	\$ 50. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/21/05	\$ 100. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/19/05	\$ 100. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/19/05	\$ 60. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/19/05	\$ 10. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/19/05	\$ 100. ⁰⁰
<input type="checkbox"/> Add <input type="checkbox"/> Remove	"	"	—	11/19/05	\$ 60. ⁰⁰
4. Total only this Page					\$ 820. ⁰⁰
5. Total of ALL CRO-1205 Pages					\$ 3724. ¹⁰
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					

Aggregated Contributions from Individuals

Page _____ of _____

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

1. Committee Full Name (and Fund if applicable) Anthony Dennis For Sheriff	2. ID Number
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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	E-1	Cash	—	11/19/05	\$ 40. ⁰⁰
<input type="checkbox"/> Remove					\$ 80. ⁰⁰
<input type="checkbox"/> Add	"	"	—	"	\$ 40. ⁰⁰
<input type="checkbox"/> Remove	"	"	—	"	\$ 60. ⁰⁰
<input type="checkbox"/> Add	"	"	—	"	\$ 20. ⁰⁰
<input type="checkbox"/> Remove	"	"	—	"	\$ 20. ⁰⁰
<input type="checkbox"/> Add	"	"	—	"	\$ 20. ⁰⁰
<input type="checkbox"/> Remove	"	"	—	"	\$ 20. ⁰⁰
<input type="checkbox"/> Add	"	"	—	"	\$ 50. ⁰⁰
<input type="checkbox"/> Remove	"	"	—	"	\$ 100. ⁰⁰
<input type="checkbox"/> Add	"	in-kind	Huggies Advertisement	11/19/05	\$ 40. ⁰⁰
<input type="checkbox"/> Remove	"	Cash	—	11/19/05	\$ 50. ⁰⁰
<input type="checkbox"/> Add	"	"	—	11/19/05	\$ 40. ⁰⁰
<input type="checkbox"/> Remove	"	"	—	"	\$ 50. ⁰⁰
<input type="checkbox"/> Add	"	Check	—	11/9/05	\$ 25. ⁰⁰
<input type="checkbox"/> Remove	"	Check	—	11/3/05	\$ 100. ⁰⁰
<input type="checkbox"/> Add	"	Cash	—	10/23/05	\$ 100. ⁰⁰
<input type="checkbox"/> Remove	"	Cash	—	10/19/05	\$ 100. ⁰⁰
<input type="checkbox"/> Add	"	Check	—	10/17/05	\$ 100. ⁰⁰
<input type="checkbox"/> Remove	"	Check	—	10/15/05	\$ 100. ⁰⁰
<input type="checkbox"/> Add	"	Cash	—	10/14/05	\$ 100. ⁰⁰
<input type="checkbox"/> Remove	"	Check	—	10/10/05	\$ 100. ⁰⁰
<input type="checkbox"/> Add	"	Check	—	10/4/05	\$ 100. ⁰⁰
<input type="checkbox"/> Remove	"	Check	—	9/25/05	\$ 100. ⁰⁰
<input type="checkbox"/> Add	"	Cash	—	9/21/05	\$ 1485. ⁰⁰
<input type="checkbox"/> Remove					\$ 3724. ¹⁰

4. Total only this Page

5. Total of ALL CRO-1205 Pages

(This line must be on line 5 of Detailed Summary Page CRO-1100)

Aggregated Contributions from Individuals

Page ___ of ___

Amendment

Yes No

1. Committee Full Name (and Fund if applicable) Anthony Dennis For Sheriff	2. ID Number
--	--------------

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	E-1	in-kind	Advertising	07/01/05	\$ 65.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	"	"	08/01/05	\$ 65.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	"	"	09/01/05	\$ 65.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	"	"	10/01/05	\$ 65.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	"	"	11/01/05	\$ 65.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	"	"	12/01/05	\$ 65.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	"	"	09/01/05	\$ 65.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	"	"	10/01/05	\$ 65.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	"	"	11/01/05	\$ 65.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	"	"	12/01/05	\$ 65.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	"	"	10/01/05	\$ 100.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	"	Office Supplies	11/30/05	\$ 19.10
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	Cash	—	11/19/05	\$ 20.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	Cash	—	11/19/05	\$ 10.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	Cash	—	11/19/05	\$ 10.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	Cash	—	11/19/05	\$ 10.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	Cash	—	11/19/05	\$ 40.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	Cash	—	11/19/05	\$ 40.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	Cash	—	11/19/05	\$ 40.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	Cash	—	11/19/05	\$ 40.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	Cash	—	11/19/05	\$ 20.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	"	Cash	—	11/19/05	\$ 20.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$

4. Total only this Page \$ 1019.10

5. Total of ALL CRO-1205 Pages \$ 3724.10

(This line must be on line 5 of Detailed Summary Page CRO-1100)

Contributions from Individuals

1. Committee Full Name (and Fund if applicable) **Anthony Dennis For Sheriff** 2. ID Number

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
**Phillip Panzarella
 103 C Dunes Ave
 Atlantic Beach, NC 28512**

b. Job Title/Profession
Retail Store Owner

c. Employer's Name/Specific Field

d. Comments

e. Election Cycle Sum to Date
 \$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	E-1	in-kind	Signs	11/19/05	\$ 320. ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
**Jeff Melenby
 132 Cedar Point Blvd.
 Swansboro, NC 28585**

b. Job Title/Profession
Restuarant Owner

c. Employer's Name/Specific Field

d. Comments

e. Election Cycle Sum to Date
 \$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	E-1	Cash		11/19/05	\$ 1000. ⁰⁰
<input type="checkbox"/>	(Already Reported on 48 hour notice form)				\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)

b. Job Title/Profession

c. Employer's Name/Specific Field

d. Comments

e. Election Cycle Sum to Date
 \$

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 \$ **1320.00**

5. Total of ALL CRO-1210 Pages \$ **10,310.00**

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Pg _____ of _____

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

1. Committee Full Name (and Fund if applicable) ANTHONY DENNIS FOR SHERIFF						2. ID Number																																																																																									
<table border="1"> <tr> <td colspan="8">3. Contributor Information</td> </tr> <tr> <td colspan="8" style="text-align: right;"><input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove</td> </tr> <tr> <td colspan="4">a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td colspan="2">b. Job Title/Profession</td> <td colspan="2">d. Comments</td> </tr> <tr> <td colspan="4">AL FELTON 150 S LEWIS ST. NEWPORT NC. 28570</td> <td colspan="2">RETIRED</td> <td colspan="2"></td> </tr> <tr> <td colspan="4"></td> <td colspan="2">c. Employer's Name/Specific Field</td> <td colspan="2"></td> </tr> <tr> <td colspan="4"></td> <td colspan="2"></td> <td colspan="2">e. Election Cycle Sum to Date</td> </tr> <tr> <td colspan="4"></td> <td colspan="2"></td> <td colspan="2">\$ 200.00</td> </tr> <tr> <td>f. Prior</td> <td>g. Account Code</td> <td>h. Form of Payment</td> <td>i. In-Kind Description</td> <td>j. Date (mm/dd/yyyy)</td> <td colspan="3">k. Amount</td> </tr> <tr> <td><input type="checkbox"/></td> <td>E-1</td> <td>CASH</td> <td></td> <td>08/13/2005</td> <td colspan="3">\$ 200.00</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td colspan="3">\$</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td colspan="3">\$</td> </tr> </table>								3. Contributor Information								<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove								a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments		AL FELTON 150 S LEWIS ST. NEWPORT NC. 28570				RETIRED								c. Employer's Name/Specific Field										e. Election Cycle Sum to Date								\$ 200.00		f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount			<input type="checkbox"/>	E-1	CASH		08/13/2005	\$ 200.00			<input type="checkbox"/>					\$			<input type="checkbox"/>					\$		
3. Contributor Information																																																																																															
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f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount																																																																																										
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<table border="1"> <tr> <td colspan="8">3. Contributor Information</td> </tr> <tr> <td colspan="8" style="text-align: right;"><input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove</td> </tr> <tr> <td colspan="4">a. Full Name, Mailing Address & Phone (include city, state, & zip)</td> <td colspan="2">b. Job Title/Profession</td> <td colspan="2">d. Comments</td> </tr> <tr> <td colspan="4">JAMES W. MCDANIEL 3100 FREEDOM WAY HUBERT NC. 28539</td> <td colspan="2">CAR DEALER</td> <td colspan="2"></td> </tr> <tr> <td colspan="4"></td> <td colspan="2">c. Employer's Name/Specific Field</td> <td colspan="2"></td> </tr> <tr> <td colspan="4"></td> <td colspan="2"></td> <td colspan="2">e. Election Cycle Sum to Date</td> </tr> <tr> <td colspan="4"></td> <td colspan="2"></td> <td colspan="2">\$ 200.00</td> </tr> <tr> <td>f. Prior</td> <td>g. Account Code</td> <td>h. Form of Payment</td> <td>i. In-Kind Description</td> <td>j. Date (mm/dd/yyyy)</td> <td colspan="3">k. Amount</td> </tr> <tr> <td><input type="checkbox"/></td> <td>E-1</td> <td>CHECK</td> <td></td> <td>08/25/2005</td> <td colspan="3">\$ 200.00</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td colspan="3">\$</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td colspan="3">\$</td> </tr> </table>								3. Contributor Information								<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove								a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments		JAMES W. MCDANIEL 3100 FREEDOM WAY HUBERT NC. 28539				CAR DEALER								c. Employer's Name/Specific Field										e. Election Cycle Sum to Date								\$ 200.00		f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount			<input type="checkbox"/>	E-1	CHECK		08/25/2005	\$ 200.00			<input type="checkbox"/>					\$			<input type="checkbox"/>					\$		
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3. Contributor Information																																																																																															
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f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount																																																																																										
<input type="checkbox"/>	E-1	CHECK		08/25/2005	\$ 150.00																																																																																										
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<input type="checkbox"/>					\$																																																																																										
4. Total only this Page						\$ 550.00																																																																																									
5. Total of ALL CRO-1210 Pages						\$ 10,310.00																																																																																									
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>																																																																																															

Contributions from Individuals

Pg ____ of ____

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) ANTHONY DENNIS FOR SHERIFF						2. ID Number	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) RAYMOND S. MASON JR. 226 MILL BRANCH CT. SWANSBORO, NC. 28584				b. Job Title/Profession SELF EMPLOYED		d. Comments	
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date \$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	E-1	CASH		09/13/2005	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) CHARLES J. BORIE 101 SUTTON DR. CAPE CARTERET, NC. 28584				b. Job Title/Profession RETIRED		d. Comments	
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date \$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	E-1	CHECK		10/01/2005	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) HUBERT SMITH 2502 LENNOXVILLE RD. BEAUFORT, NC. 28516				b. Job Title/Profession RETIRED		d. Comments	
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date \$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	E-1	CASH		10/07/2005	\$ 300.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 700.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 10,310.00	

Contributions from Individuals

Pg ____ of ____

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) **Anthony Dennis For Sheriff** 2. ID Number

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) William F. Parker 565 Neptune Dr. Swansboro, NC 28584	b. Job Title/Profession Trucking Buss.	d. Comments
	c. Employer's Name/Specific Field	
e. Election Cycle Sum to Date		\$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	E-1	Cash		11/19/05	\$ 250. ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) John W. Dennis 310 Daisy Ct. Jacksonville, NC 28540	b. Job Title/Profession Retired	d. Comments
	c. Employer's Name/Specific Field	
e. Election Cycle Sum to Date		\$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	E-1	Cash		11/19/05	\$ 700. ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Phillip Panzerella 103C Dunes Ave. Atlantic Beach, NC 28512	b. Job Title/Profession Retail Store Owner	d. Comments
	c. Employer's Name/Specific Field	
e. Election Cycle Sum to Date		\$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	E-1	in kind	Advertising	10/1/05	\$ 175. ⁰⁰
<input type="checkbox"/>	E-1	in kind	Advertising	11/1/05	\$ 175. ⁰⁰
<input type="checkbox"/>	E-1	in kind	Advertising	12/1/05	\$ 175. ⁰⁰
					\$ 1475. ⁰⁰

4. Total only this Page \$ 1475.⁰⁰

5. Total of ALL CRO-1210 Pages \$ 10,310.⁰⁰

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Pg _____ of _____

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

1. Committee Full Name (and Fund if applicable) Anthony Dennis For Sheriff	2. ID Number
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3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Rennie White 161 Bluff Rd. Cedar Pt., NC 28584	b. Job Title/Profession Retired
	c. Employer's Name/Specific Field
	d. Comments
	e. Election Cycle Sum to Date \$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	E-1	Cash		11/19/05	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Sonny Mason 226 Mill Branch Ct. Swansboro, NC 28584	b. Job Title/Profession RV Maintenance
	c. Employer's Name/Specific Field
	d. Comments
	e. Election Cycle Sum to Date \$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	E-1	Cash		9/13/05	\$ 200.00
<input type="checkbox"/>	E-1	Cash		11/19/05	\$ 250.00
<input type="checkbox"/>					\$

3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Paul Pittman 3916 Arendell St. Morehead City, NC 28557	b. Job Title/Profession Car Salesman
	c. Employer's Name/Specific Field
	d. Comments
	e. Election Cycle Sum to Date \$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	E-1	Cash		11/19/05	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ 900.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 10,310.00

Contributions from Individuals

Pg ____ of ____

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Anthony Dennis For Sheriff							
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Robert V. O'chat 172 Hunting Bay Dr. Swansboro, NC 28584				Construction Worker			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	E-1	Cash		11-19-05	\$ 200. ⁰⁰		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Randy Russell 174 Fox Dr. Cape Carteret, NC 28584				Construction Worker			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	E-1	in-kind	Plywood	12/27/05	\$ 375. ⁰⁰		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Chris Johns % Rucker Johns Restuarant Emerald Plantation Emerald Isle, NC 28594				Restuarant Owner			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	E-1	Cash		11/19/05	\$ 200. ⁰⁰		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 775. ⁰⁰	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 10,310. ⁰⁰	

Contributions from Individuals

Pg _____ of _____

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) **Anthony Dennis For Sheriff** 2. ID Number

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Robin Cannon 305 Salty Shores Rd. Newport, NC 28570	b. Job Title/Profession Construction	d. Comments
	c. Employer's Name/Specific Field	
		e. Election Cycle Sum to Date \$ 260.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	E-1	Cash		11/19/05	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Roy Dennis 4304 Dawnwood Dr Gastonia, NC 28056	b. Job Title/Profession Retired	d. Comments
	c. Employer's Name/Specific Field	
		e. Election Cycle Sum to Date \$ 360.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	E-1	Cash	-	11/19/05	\$ 300.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Doug Murray 111 Casscdate Dr. Goldsboro, NC 27534	b. Job Title/Profession Piggly Wiggly	d. Comments
	c. Employer's Name/Specific Field	
		e. Election Cycle Sum to Date \$ 240.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	E-1	Cash		11/19/05	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
					\$ 700.00

4. Total only this Page \$ **10,310.00**
 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) \$ **10,310.00**

Contributions from Individuals

Pg _____ of _____

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) Anthony Dennis for Sheriff						2. ID Number	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Alonzo Ward Jr. 104 Oak Dr. Morehead City, NC 28557				b. Job Title/Profession Sheriffs Detective		d. Comments	
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date \$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	E-1	Cash	—	11-19-2005	\$ 260.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Ritchie Creech 3316 Emerald Dr Emerald Isle, NC 28594				b. Job Title/Profession Retail Store Owner		d. Comments	
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date \$ 670.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	E-1	in kind	Tournament Promo	11/8/05	\$ 300.00		
<input type="checkbox"/>	E-1	Cash		11/19/05	\$ 280.00		
<input type="checkbox"/>					\$		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Curtis Jones 407 Koonce Fork Rd. Richlands, NC				b. Job Title/Profession Car Dealer		d. Comments	
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date \$ 350.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	E-1	Cash		11/19/05	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1090.00	
5. Total of ALL CRO-1210 Pages						\$ 10,310.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

1,090.00

Contributions from Individuals

Pg _____ of _____

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) Anthony Dennis For Sheriff						2. ID Number
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Charlie Alford 1708 Benvenue Forest Rd. Rocky Mount, NC 27804			b. Job Title/Profession Insurance Rep.		d. Comments	
			c. Employer's Name/Specific Field		e. Election Cycle Sum to Date \$ 210.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	E-1	check	—	11-19-2005	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Linwood Hood 1045 Cedar Pt. Blvd. Swansboro, NC 28584			b. Job Title/Profession Electrician		d. Comments	
			c. Employer's Name/Specific Field		e. Election Cycle 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"/>	E-1	Cash	—	11-19-2005	\$ 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) Allan Pike 910-64 Cedar Pt. Blvd. Swansboro, NC 28584			b. Job Title/Profession Fence Sales		d. Comments	
			c. Employer's Name/Specific Field		e. Election Cycle Sum to Date \$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	E-1	Cash	—	11-19-2005	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 650.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 10,310.00	

Contributions from Individuals

Pg ____ of ____

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) Anthony Dennis For Sheriff						2. ID Number
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Brad Lanto 138 Megans Way Cedar Point, NC 28584			School Employee			
			c. Employer's Name/Specific Field			
					e. Election Cycle Sum to Date	
					\$ 200. ⁰⁰	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	E-1	Cash		11/19/05	\$ 200. ⁰⁰	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Tony Weeks 3007 Monticello Dr. Kinston, NC 28504			NCDMV Inspector			
			c. Employer's Name/Specific Field			
					e. Election Cycle Sum to Date	
					\$ 200. ⁰⁰	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	E-1	Cash	—	11/19/05	\$ 200. ⁰⁰	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Roger Brown 314 Plantation Lane Swansboro, NC 28584			Insurance Sales			
			c. Employer's Name/Specific Field			
					e. Election Cycle 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"/>	E-1	Cash	—	11/19/05	\$ 250. ⁰⁰	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 650. ⁰⁰	
5. Total of ALL CRO-1210 Pages					\$ 10,310. ⁰⁰	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

Pg ____ of ____

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) Anthony Dennis For Sheriff						2. ID Number
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Eric Luhman 409 Somerset Way Newport, NC 28570			b. Job Title/Profession Wine Distributor		d. Comments	
			c. Employer's Name/Specific Field		e. Election Cycle 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"/>	E-1	Check		12/20/05	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$ 500	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Frank Erwin 7004 Sound Dr. Emerald Isle, NC 28594			b. Job Title/Profession Attorney		d. Comments	
			c. Employer's Name/Specific Field		e. Election Cycle 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"/>	E-1	Check	—	11/22/05	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Vann Parker P.O. Box 4131 Emerald Isle, NC 28594			b. Job Title/Profession Real Estate Agent		d. Comments	
			c. Employer's Name/Specific Field		e. Election Cycle 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"/>	E-1	Cash	—	11/19/05	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1500.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 10,310.00	

In-Kind Contributions

Pg ____ of ____

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Anthony Dennis 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	
Robert OChat 172 Hunting Bay Dr. Swansboro, NC 28584		<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	
		c. Comments	
		d. Election Cycle Sum to Date	
		\$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Copier supplies		11/30/05	\$ 19.10
			\$
			\$
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	
Randy Russell 174 Fox Dr. Cape Carteret, NC 28584		<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	
		c. Comments	
		d. Election Cycle Sum to Date	
		\$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Plywood		12/27/05	\$ 375.00
			\$
			\$
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	
Ritchie Creech 3316 Emerald Dr. Emerald Isle, NC 28594		<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	
		c. Comments	
		d. Election Cycle Sum to Date	
		\$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Tournament Insurance Policy		11/08/05	\$ 300.00
			\$
			\$
4. Total only this Page			\$ 694.10
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$

In-Kind Contributions

Pg ____ of ____

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

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Anthony Dennis 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	
Phillip Panzarella 103C Dunes Ct Atlantic Beach, NC 28512		<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	
		c. Comments	
		d. Election Cycle Sum to Date	
		\$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Newspaper Ad		07/01/05	\$ 65. ⁰⁰
" "		08/01/05	\$ 65. ⁰⁰
" "		09/01/05	\$ 65. ⁰⁰
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	
" "		<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	
		c. Comments	
		d. Election Cycle Sum to Date	
		\$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Newspaper Ad		10/1/05	\$ 65. ⁰⁰
" "		11/1/05	\$ 65. ⁰⁰
" "		12/1/05	\$ 65. ⁰⁰
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	
" "		<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	
		c. Comments	
		d. Election Cycle Sum to Date	
		\$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Newspaper Ad		9/1/05	\$ 65. ⁰⁰
" "		10/1/05	\$ 65. ⁰⁰
" "		11/1/05	\$ 65. ⁰⁰
4. Total only this Page		\$ 585.00	
5. Total of ALL CRO-1510 Pages		\$	
(This line must be on line 17 of Detailed Summary Page CRO-1100)			

In-Kind Contributions

Pg ____ of ____

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) Anthony Dennis for Sheriff		2. ID Number	
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
Phillip Panzarella 103c Dunes Ct Atlantic Beach, NC 28512		<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 Cycle Sum to Date
			\$
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Newspaper Ad		12/1/05	\$ 65. ⁰⁰
" "		10/1/05	\$ 100. ⁰⁰
Golf Tourn. signs		11/19/05	\$ 320. ⁰⁰
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 Cycle Sum to Date
			\$
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Newspaper Ad		10/1/05	\$ 175. ⁰⁰
" "		11/1/05	\$ 175. ⁰⁰
" "		12/1/05	\$ 175. ⁰⁰
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 Cycle Sum to Date
			\$
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
4. Total only this Page			\$ 1010.00
5. Total of ALL CRO-1510 Pages <small>(This line must be on line 17 of Detailed Summary Page CRO-1100)</small>			\$

Disbursements

Pg _____ of _____

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
ANTHONY DENNIS FOR SHERIFF					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
COASTAL PRESS 502 ARENDELL ST. MOREHEAD CITY NC. 28557					BUSINESS CARDS
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	CHECK		11/01/2005	\$ 64.09	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
MORTON PUBLISHING P.O. BOX 98 NEWPORT NC. 28570					CAMPAIGN AD
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 100.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	CHECK		11/02/2005	\$ 50.00	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
QWIK PACK AND SHIP 101 DOLPHIN ST. CAPE CARTERET NC. 28584					STAMPS
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 40.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	CHECK		11/07/2005	\$ 40.00	
				\$	
5. Total only this Page				\$ 154.09	
6. Total of ALL CRO-1310 Pages				\$ 3560.59	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

Disbursements

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Anthony Dennis For Sheriff					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Tournament Promotions 261 Loder Ave. Wilmington, NC 28409					Golf Tournament
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date
					\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	Check		11/8/05	\$ 50. ⁰⁰	
				\$	
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
RAD Communications					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date
					\$ 216.94
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	Check		11/1/05	\$ 216.94	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Don Lilly Mann St. Newport, NC 28570					Pig Cooking for Golf Tournament
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date
					\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	Check		11/22/05	\$ 120. ⁰⁰	
				\$	
5. Total only this Page				\$ 386.94	
6. Total of ALL CRO-1310 Pages				\$ 3560.59	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

Disbursements

Pg ____ of ____

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures			
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Clarke America Check Co. % First Citizens Bank Cape Carteret, NC 28584				c. Level Registered (Specify)		Reorder	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				e. Election Cycle Sum to Date		\$ 55.61	
f. Account Code		g. Form of Payment		h. Purpose		i. Date (mm/dd/yyyy)	j. Amount
E-1		Check		Check Reorder		8/18/05	\$ 55.61
							\$
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Phillip Panzarella 103 C Dunes Ave. Atlantic Beach, NC 28512				c. Level Registered (Specify)		Signs + shirts	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				e. Election Cycle Sum to Date		\$	
f. Account Code		g. Form of Payment		h. Purpose		i. Date (mm/dd/yyyy)	j. Amount
E-1		Check		Signs + shirts		11/18/05	\$ 130. ⁰⁰
							\$
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 Cycle Sum to Date		\$	
f. Account Code		g. Form of Payment		h. Purpose		i. Date (mm/dd/yyyy)	j. Amount
							\$
							\$
5. Total only this Page						\$ 185.61	
6. Total of ALL CRO-1310 Pages						\$.3560.59	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							

Disbursements

1. Committee Full Name (and Fund if applicable)				2. ID Number	
ANTHONY DENNIS FOR SHERIFF					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
B & B OFFICE PRODUCTS 534 CEDAR PT. BLVD SWANSBORO NC. 28584					PRINT CART.
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date
					\$ 36.35
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	CHECK		08/10/2005	\$ 36.35	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
STAPLES 5185 HWY 70 MOREHEAD CITY NC. 28557					ENVELOPES
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date
					\$ 6.41
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	CHECK		08/14/2005	\$ 6.41	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
WALMART HWY 70 MOREHEAD CITY NC. 28557					OFFICE SUPPLIES
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date
					\$ 12.10
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	CHECK		08/14/2005	\$ 12.10	
				\$	
5. Total only this Page				\$ 54.86	
6. Total of ALL CRO-1310 Pages				\$ 3560.59	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

Disbursements

Pg ____ of ____

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) ANTHONY DENNIS FOR SHERIFF				2. ID Number	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) FUTURE FARMERS OF AMERICA COUNTRY CLUB RD MOREHEAD CITY NC. 28557		b. Coordinated Committee Name		d. Comments MULLET FEST. PARADE	
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date \$	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	CHECK		09/23/2005	\$ 100.00	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) PLAYA GRAPHICS P. O. BOX 4251 EMERALD ISLE NC. 28594		b. Coordinated Committee Name		d. Comments BANNER & MAGNETIC SIGNS	
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date \$ 262.66	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	CHECK		09/23/2005	\$ 262.66	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) SWANSBORO MULL FEST. COMM SWNASBORO NC. 28584		b. Coordinated Committee Name		d. Comments PARADE ENTRY FEE	
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date \$ 25.00	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	CHECK		10/01/2005	\$ 25.00	
				\$	
5. Total only this Page				\$ 387.66	
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>				\$ 3560.59	

Disbursements

1. Committee Full Name (and Fund if applicable)				2. ID Number	
ANTHONY DENNIS FOR SHERIFF					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
STAPLES 5185 HWY 70 MOREHEAD CITY NC. 28557					OFFICE SUPPLIES Copy Paper
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input checked="" type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	CHECK	Copy Paper	10/06/2005	\$ 18.46	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
TURNER OFFICE SUPPLIES 668 W CORBETT AVE. SWANSBORO NC, 28584					File Cabinet
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 70.71
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	CHECK	File Cabinet	10/13/2005	\$ 70.71	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
SHELL RAPID LUBE 4311 ARENDELL ST. MOREHEAD CITY NC. 28557					oil change
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 33.33
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	CHECK	oil change	10/22/2005	\$ 33.33	
				\$	
5. Total only this Page				\$ 122.50	
6. Total of ALL CRO-1310 Pages				\$ 3560.59	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

Disbursements

Pg _____ of _____

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Anthony Dennis For Sheriff					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
CVS Pharmacy 300 Mangrove Dr. Emerald Isle, NC 28594				Film Developing	
		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 57.07	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	VISA	Film Developing	11/21/05	\$ 57.07	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Bakery Thrift Store Hwy 70 Goldsboro, NC				Food For Tournament	
		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 49.60	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	Check	Food For Tournament	11/18/05	\$ 49.60	
				\$	
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	
Bogue Banks Country Club Oak leaf Dr. Pine Knoll Shores, NC 28512				Golf Tournament	
		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	Check	Golf Tournament	11/19/05	\$ 1848.00	
				\$	
5. Total only this Page				\$ 1954.67	
6. Total of ALL CRO-1310 Pages				\$ 3560.59	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

Disbursements

Pg ____ of ____

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Anthony Dennis For Sheriff					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Kangaroo Store Hwy. 24 Cape Carterct, NC 28584				Gas	
		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	Check	Gas	12/1/05	\$ 29.00	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Morton Publishing Co. P.O. Box 98 Newport, NC 28570				Newspaper Ad	
		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	Check	Newspaper Ad	12/19/05	\$ 100.00	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
B+B office Products 534 Cedar Point Blvd. Swansboro, NC 28584				Folders	
		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	Visa	Folders	9/1/05	\$ 5.87	
				\$	
5. Total only this Page				\$ 134.87	
6. Total of ALL CRO-1310 Pages				\$ 3560.59	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

Disbursements

1. Committee Full Name (and Fund if applicable)				2. ID Number	
ANTHONY DENNIS FOR SHERIFF					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
STAPLES 5185 HWY 70 MOREHEAD CITY NC. 28557					DESK
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	CHECK	Desk	08/01/2005	\$ 106.94 93.06	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
STAPLES 5185 HWY 70 MOREHEAD CITY NC. 28557					CORKBOARD
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 22.45
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	CHECK	Corkboard	08/04/2005	\$ 22.45	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
MORTON PUBLISHING P.O. BOX 98 NEWPORT NC. 28570					PAPER AD
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 50.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
E-1	CHECK	Newspaper Ad	08/04/2005	\$ 50.00	
				\$	
5. Total only this Page				\$ 179.39 165.31	
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>				\$ 3560.59	

year end semi annual

Detailed Summary

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)		2. Type of Report	3. ID Number
Anthony Dennis for Sheriff			
Start of Election Cycle: January 1, _____		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1,185.06	\$ 0
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 3,724.10	\$ 4,041.43 ✓
6) Contributions from Individuals (CRO-1210)		\$ 10,310.00	\$ 11,810.00 ✓
7) Contributions from Political Party Committees (CRO-1220)		\$	\$
8) Contributions from Other Political Committees (CRO-1230)		\$	\$
9) Loan Proceeds (CRO-1410)		\$	\$
10) Refunds/Reimbursements To the Committee (CRO-1240)		\$	\$
11) Other Receipt Sources (CRO-1250)			
11a) Interest on Bank Accounts (CRO-1250)		\$	\$
11b) Contributions from Not-for-Profit Organizations (CRO-1250)		\$	\$
11c) Outside Sources of Income (CRO-1250)		\$	\$
12) "Goods and Services" Contributions (CRO-1260)		\$	\$
13) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)		\$ 14,034.10	\$ 15,951.43 15,851.43
EXPENDITURES			
14) Disbursements (CRO-1310)			
14a) Operating Expenditures (CRO-1310)		\$ 3,560.59	\$ 4,192.86
14b) Contributions to Candidates/Political Committees (CRO-1310)		\$	\$
14c) Coordinated Party Expenditures (CRO-1310)		\$	\$
15) Loan Repayments (CRO-1420)		\$	\$
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$	\$
17) In-Kind Contributions (CRO-1510)		\$ 2,289.10	\$ 2,289.10
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)		\$ 5,849.69	\$ 6,681.96 6,481.96
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)		\$ 9,269.47 9,369.47	\$ 9,269.47 9,369.47 ← 9,369.47 * in both places
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		\$ 1,000.00	\$ 1,000.00