

COPY

Disclosure Report Cover Sheet

Please note that this cover sheet cannot be used to amend committee information such as the committee address; treasurer, assistant treasurer, or custodian of books information; or depository information. You must amend the Statement of Organization (CRO-2100) to make those kinds of committee changes.

JAN 31 03

1. Name of Committee or Fund: CITIZENS TO ELECT TIM KEMP FOR SHERIFF 6. Date: 1/31/03

2. Address: 6010 ELKVue DR 7. ID Number: _____

3. City: PRAFFTOWN 4. State: NC 5. Zip: 27040 8. Phone: 924-3260

9. Type of Report: END OF YEAR REPORT 10. Period Covered: Start July 31, 02 End July 31, 02 11. Amendment: Yes No

12. Type of Committee or Fund (Check one):
 Candidate Campaign Party Joint Fundraiser "Booster Fund"
 PAC Referendum Soft Money Account Building Fund
 Other Fund: _____

13. Treasurer Name: Timothy E Kemp 6010 ELKVue DR PRAFFTOWN N.C. 27040

14. Assistant Treasurer Name(s): _____

15. Custodian of Books Name: _____

16. Bank/Depository/Credit Account Information WACHOVIA BANK Acct # ~~0000000000~~

| a. Name | b. Purpose | c. Code | 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.

Timothy E Kemp
 Signature of Appointed Treasurer or Candidate

1/31/03
 Date

Detailed Summary

| 1. Name of Committee or Fund | | 2. Type of Report | | 3. ID Number | |
|---|--|-------------------|---------------------------|---------------------|--|
| CITIZENS TO ELECT TIM KEMP FOR SHERIFF | | | | | |
| Start of Election Cycle: January 1, 20 <u>23</u> | | Total this Period | Total this Election Cycle | For Office Use Only | |
| 4) Cash on Hand at Start of Election Cycle | | | \$ 23.08 | | |
| 5) Cash on Hand at Start of Present Reporting Period | | \$ 23.08 | | | |
| RECEIPTS | | | | | |
| 6) Contributions from Individuals | (CRO-1210) | \$ 0 | \$ 0 | | |
| 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 Committee | (CRO-1240) | \$ | \$ | | |
| 11) Other Receipt Sources | (CRO-1250) | | | | |
| 11a) Interest on Bank Accounts | (CRO-1250) | \$ 0 | \$ 0 | | |
| 11b) Contributions from Not-for-Profit Organizations | (CRO-1250) | \$ | \$ | | |
| 11c) Outside Sources of Income | (CRO-1250) | \$ | \$ | | |
| 12) TOTAL RECEIPTS | (Add lines 6, 7, 8, 9, 10, 11a, 11b, and 11c) | \$ 23.08 | \$ 23.08 | | |
| EXPENDITURES | | | | | |
| 13) Disbursements | (CRO-1310) | | | | |
| 13a) Operating Expenditures | (CRO-1310) | \$ 0 | \$ 0 | | |
| 13b) Contributions to Candidates/Political Committees | (CRO-1310) | \$ | \$ | | |
| 13c) Coordinated Party Expenditures | (CRO-1310) | \$ | \$ | | |
| 14) Loan Repayments | (CRO-1420) | \$ | \$ | | |
| 15) Refunds from Committee | (CRO-1320) | \$ | \$ | | |
| 16) In-Kind Contributions | (CRO-1510) | \$ | \$ | | |
| 17) TOTAL EXPENDITURES | (Add lines 13a, 13b, 13c, 14, 15, and 16) | \$ 0 | \$ 0 | | |
| 18) Cash on Hand at End of Reporting Period | (For this Period, add lines 5 and 12 together, then subtract line 17) (For this Election Cycle, add lines 4 and 12 together, then subtract line 17) | \$ 23.08 | \$ 23.08 | | |
| Additional Information | | | | | |
| 19) Non-Monetary Gifts Given to Committees | (CRO-1330) | \$ | | | |
| 20) Outstanding Loans (including ones from other campaigns) | (CRO-1430) | \$ | | | |
| 21) Debts and Obligations owed BY the Committee | (CRO-1610) | \$ | | | |
| 22) Debts and Obligations owed TO the Committee | (CRO-1620) | \$ | | | |
| 23) Parent Entity's Administrative Support | (CRO-1710) | \$ | | | |

Additional Disclosure Report Cover Sheet Information

If there is not enough room on the Disclosure Report Cover Sheet form (CRO-1000) to include all assistant treasurers or accounts use this form to include any additions and attach it to the Cover Sheet form.

| | |
|---|--------------|
| 1. Name of Committee or Fund <i>CITIZENS TO ELECT TIM KEMP FOR SHERIFF</i> | 2. ID Number |
|---|--------------|

3. Assistant Treasurer Name(s)

*N
A*

4. Bank/Depository/Credit Account Information

| a. Name | b. Purpose | c. Code | d. Period Begin Balance |
|---------|------------|---------|-------------------------|
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |

*N
A*

Disbursements

| | | | | | | | | |
|---|---|---|--|--|---|---------------------------|---------------------------------------|------------------|
| 1. Name of Committee or Fund <i>CITIZENS TO ELECT TIM KEMP FOR SHERIFF</i> | | | | | | 2. ID Number | | |
| 3. Type of Disbursement <i>(Please use separate CRO-1330 forms for each type of Disbursements.)</i> | | | | | | | | |
| <input type="checkbox"/> Operating Expenses | | <input type="checkbox"/> Contributions to Candidates/Political Committees | | | <input type="checkbox"/> Coordinated Party Expenditures | | | |
| 4. Payee | a. Full Name, Mailing Address & Phone <i>(include city, state, and zip)</i> | | | d. Purpose | e. Account Number/Code | f. Form of Payment | g. Date <i>(mm/dd/yyyy)</i> | h. Amount |
| | | | | | | | | \$ |
| b. If Contribution to County Committee, specify: | | c. If Coordinated Party Expense, list office: | | i. If Amendment, choose change type: | | | j. Election Cycle Sum To Date | |
| | | | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | \$ | |
| 4. Payee | a. Full Name, Mailing Address & Phone <i>(include city, state, and zip)</i> | | | d. Purpose | e. Account Number/Code | f. Form of Payment | g. Date <i>(mm/dd/yyyy)</i> | h. Amount |
| | | | | | | | | \$ |
| b. If Contribution to County Committee, specify: | | c. If Coordinated Party Expense, list office: | | i. If Amendment, choose change type: | | | j. Election Cycle Sum To Date | |
| | | | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | \$ | |
| 4. Payee | a. Full Name, Mailing Address & Phone <i>(include city, state, and zip)</i> | | | d. Purpose | e. Account Number/Code | f. Form of Payment | g. Date <i>(mm/dd/yyyy)</i> | h. Amount |
| | | | | | | | | \$ |
| b. If Contribution to County Committee, specify: | | c. If Coordinated Party Expense, list office: | | i. If Amendment, choose change type: | | | j. Election Cycle Sum To Date | |
| | | | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | \$ | |
| 4. Payee | a. Full Name, Mailing Address & Phone <i>(include city, state, and zip)</i> | | | d. Purpose | e. Account Number/Code | f. Form of Payment | g. Date <i>(mm/dd/yyyy)</i> | h. Amount |
| | | | | | | | | \$ |
| b. If Contribution to County Committee, specify: | | c. If Coordinated Party Expense, list office: | | i. If Amendment, choose change type: | | | j. Election Cycle Sum To Date | |
| | | | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | \$ | |
| 4. Payee | a. Full Name, Mailing Address & Phone <i>(include city, state, and zip)</i> | | | d. Purpose | e. Account Number/Code | f. Form of Payment | g. Date <i>(mm/dd/yyyy)</i> | h. Amount |
| | | | | | | | | \$ |
| b. If Contribution to County Committee, specify: | | c. If Coordinated Party Expense, list office: | | i. If Amendment, choose change type: | | | j. Election Cycle Sum To Date | |
| | | | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | \$ | |
| 4. Payee | a. Full Name, Mailing Address & Phone <i>(include city, state, and zip)</i> | | | d. Purpose | e. Account Number/Code | f. Form of Payment | g. Date <i>(mm/dd/yyyy)</i> | h. Amount |
| | | | | | | | | \$ |
| b. If Contribution to County Committee, specify: | | c. If Coordinated Party Expense, list office: | | i. If Amendment, choose change type: | | | j. Election Cycle Sum To Date | |
| | | | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | \$ | |
| 5. Total only this Page | | | | | | | \$ | |
| 6. Total of ALL CRO-1310 Related Pages <i>(only show on last page)</i> | | | | | | | \$ | |
| <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> | | | | | | | | |
| <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> | | | | | | | | |
| <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> | | | | | | | | |

(Handwritten signature/initials)

Loan Proceeds

| 1. Name of Committee or Fund | | | 2. ID Number | | |
|--|---|--|-----------------------------------|--------------------|------------------------|
| <i>CITIZENS TO ELECT TIM KEMP FOR SHERIFF</i> | | | | | |
| | | | | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Start Date (mm/dd/yyyy) | c. End Date (mm/dd/yyyy) | d. Interest Rate % | i. Account Number/Code |
| | | | | | |
| | | e. Job Title/Profession | f. Employer's Name/Specific Field | | j. Form of Payment |
| | | g. Security Pledged | | | |
| | | h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | k. Amount \$ |
| | | | | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Start Date (mm/dd/yyyy) | c. End Date (mm/dd/yyyy) | d. Interest Rate % | i. Account Number/Code |
| | | | | | |
| | | e. Job Title/Profession | f. Employer's Name/Specific Field | | j. Form of Payment |
| | | g. Security Pledged | | | |
| | | h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | k. Amount \$ |
| | | | | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Start Date (mm/dd/yyyy) | c. End Date (mm/dd/yyyy) | d. Interest Rate % | i. Account Number/Code |
| | | | | | |
| | | e. Job Title/Profession | f. Employer's Name/Specific Field | | j. Form of Payment |
| | | g. Security Pledged | | | |
| | | h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | k. Amount \$ |
| | | | | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Start Date (mm/dd/yyyy) | c. End Date (mm/dd/yyyy) | d. Interest Rate % | i. Account Number/Code |
| | | | | | |
| | | e. Job Title/Profession | f. Employer's Name/Specific Field | | j. Form of Payment |
| | | g. Security Pledged | | | |
| | | h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | k. Amount \$ |
| | | | | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Start Date (mm/dd/yyyy) | c. End Date (mm/dd/yyyy) | d. Interest Rate % | i. Account Number/Code |
| | | | | | |
| | | e. Job Title/Profession | f. Employer's Name/Specific Field | | j. Form of Payment |
| | | g. Security Pledged | | | |
| | | h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | k. Amount \$ |
| | | | | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Start Date (mm/dd/yyyy) | c. End Date (mm/dd/yyyy) | d. Interest Rate % | i. Account Number/Code |
| | | | | | |
| | | e. Job Title/Profession | f. Employer's Name/Specific Field | | j. Form of Payment |
| | | g. Security Pledged | | | |
| | | h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | k. Amount \$ |
| | | | | | |
| 4. Total only this Page | | | | | \$ |
| 5. Total of ALL CRO-1410 Pages (only show on last page) | | | | | \$ 0.00 |
| <i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i> | | | | | |

Loan Repayments

| | | | |
|---|---|--|-----------------------------------|
| 1. Name of Committee or Fund | | 2. ID Number | |
| CITIZENS TO ELECT TIM FERGUSON FOR SHERIFF | | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Original Loan Date (mm/dd/yyyy) | c. Repayment Date (mm/dd/yyyy) |
| | | d. Original Loan Amount | e. Remaining Balance of Loan |
| | | \$ | \$ |
| | | f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | |
| | | | g. Account Number/Code |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Original Loan Date (mm/dd/yyyy) | c. Repayment Date (mm/dd/yyyy) |
| | | d. Original Loan Amount | e. Remaining Balance of Loan |
| | | \$ | \$ |
| | | f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | |
| | | | g. Account Number/Code |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Original Loan Date (mm/dd/yyyy) | c. Repayment Date (mm/dd/yyyy) |
| | | d. Original Loan Amount | e. Remaining Balance of Loan |
| | | \$ | \$ |
| | | f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | |
| | | | g. Account Number/Code |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Original Loan Date (mm/dd/yyyy) | c. Repayment Date (mm/dd/yyyy) |
| | | d. Original Loan Amount | e. Remaining Balance of Loan |
| | | \$ | \$ |
| | | f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | |
| | | | g. Account Number/Code |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Original Loan Date (mm/dd/yyyy) | c. Repayment Date (mm/dd/yyyy) |
| | | d. Original Loan Amount | e. Remaining Balance of Loan |
| | | \$ | \$ |
| | | f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | |
| | | | g. Account Number/Code |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Original Loan Date (mm/dd/yyyy) | c. Repayment Date (mm/dd/yyyy) |
| | | d. Original Loan Amount | e. Remaining Balance of Loan |
| | | \$ | \$ |
| | | f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | |
| | | | g. Account Number/Code |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Original Loan Date (mm/dd/yyyy) | c. Repayment Date (mm/dd/yyyy) |
| | | d. Original Loan Amount | e. Remaining Balance of Loan |
| | | \$ | \$ |
| | | f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | |
| | | | g. Account Number/Code |
| 4. Total only this Page | | \$ 0.00 | |
| 5. Total of ALL CRO-1420 Pages (only show on last page) | | \$ 0.00 | |
| <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i> | | | |

Outstanding Loans

| 1. Name of Committee or Fund | | | | 2. ID Number | |
|--|--|-------------------------|-----------------------------------|--|----------------------------|
| CITIZENS TO ELECT TIM KEMP FOR STATE | | | | b. Start Date (mm/dd/yyyy) | c. End Date (mm/dd/yyyy) |
| | | | | j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | e. Job Title/Profession | f. Employer's Name/Specific Field | d. Interest Rate % | h. Original Loan Amount \$ |
| | g. Security Pledged | | i. Loan Balance \$ | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | e. Job Title/Profession | f. Employer's Name/Specific Field | d. Interest Rate % | h. Original Loan Amount \$ |
| | g. Security Pledged | | i. Loan Balance \$ | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | e. Job Title/Profession | f. Employer's Name/Specific Field | d. Interest Rate % | h. Original Loan Amount \$ |
| | g. Security Pledged | | i. Loan Balance \$ | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | e. Job Title/Profession | f. Employer's Name/Specific Field | d. Interest Rate % | h. Original Loan Amount \$ |
| | g. Security Pledged | | i. Loan Balance \$ | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | e. Job Title/Profession | f. Employer's Name/Specific Field | d. Interest Rate % | h. Original Loan Amount \$ |
| | g. Security Pledged | | i. Loan Balance \$ | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | e. Job Title/Profession | f. Employer's Name/Specific Field | d. Interest Rate % | h. Original Loan Amount \$ |
| | g. Security Pledged | | i. Loan Balance \$ | | |
| 4. Total only this Page | | | | \$ | |
| 5. Total of ALL CRO-1430 Pages (only show on last page) | | | | \$ | 00 |
| (This line must be on line 20 of Detailed Summary Page CRO-1100) | | | | | |

In-Kind Contributions

| | | | | |
|--|---|--|-------------------------|-------------------------------------|
| 1. Name of Committee or Fund | | | 2. ID Number | |
| <i>CITIZENS TO ELECT IM K AND FOR SHERIFF</i> | | | | |
| 3. Contributor | a. Full Name, Mailing Address & Phone (include city, state, and zip) | c. Description | d. Date (mm/dd/yyyy) | e. Fair Market Amount |
| | | | | |
| b. Type of Contributor | | | | |
| <input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source | | f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | g. Election Cycle Sum to Date \$ |
| 3. Contributor | a. Full Name, Mailing Address & Phone (include city, state, and zip) | c. Description | d. Date (mm/dd/yyyy) | e. Fair Market Amount |
| | | | | |
| b. Type of Contributor | | | | |
| <input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source | | f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | g. Election Cycle Sum to Date \$ |
| 3. Contributor | a. Full Name, Mailing Address & Phone (include city, state, and zip) | c. Description | d. Date (mm/dd/yyyy) | e. Fair Market Amount |
| | | | | |
| b. Type of Contributor | | | | |
| <input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source | | f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | g. Election Cycle Sum to Date \$ |
| 3. Contributor | a. Full Name, Mailing Address & Phone (include city, state, and zip) | c. Description | d. Date (mm/dd/yyyy) | e. Fair Market Amount |
| | | | | |
| b. Type of Contributor | | | | |
| <input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source | | f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | g. Election Cycle Sum to Date \$ |
| 3. Contributor | a. Full Name, Mailing Address & Phone (include city, state, and zip) | c. Description | d. Date (mm/dd/yyyy) | e. Fair Market Amount |
| | | | | |
| b. Type of Contributor | | | | |
| <input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source | | f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | g. Election Cycle Sum to Date \$ |
| 3. Contributor | a. Full Name, Mailing Address & Phone (include city, state, and zip) | c. Description | d. Date (mm/dd/yyyy) | e. Fair Market Amount |
| | | | | |
| b. Type of Contributor | | | | |
| <input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source | | f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | g. Election Cycle Sum to Date \$ |
| 4. Total only this Page | | | | \$ |
| 5. Total of ALL CRO-1510 Pages (only show on last page) | | | | \$ |
| <i>(This line must be on line 16 of Detailed Summary Page CRO-1100)</i> | | | | |

48-Hour Notice

To be Used by Committees to Report Contributions of over \$1,000

| | | | | | | | | |
|--|--|--------------------------|--|--|---|---|----|--|
| 1. Committee Name | | | | | | 7. Date | | |
| 2. Committee Address | | | | | | 8. ID Number | | |
| 3. City | | 4. State | | 5. Zip | | 6. Phone | | |
| | | | | | | 9. Amendment <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| 10. Treasurer Name | | | | | | | | |
| 11. Contributions Received <i>(Submit multiple forms if additional space is required.)</i> | | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, and zip) | | | b. Specify Type of Contributor: <input type="checkbox"/> Individual <input type="checkbox"/> Political Party <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Not-for-Profit <input type="checkbox"/> Other Source: _____ | | | c. If Not-for-Profit, list Fed ID #: | | |
| | | | d. If Other Committee, specify Type of Committee: <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> County: _____ | | | | | |
| | | | e. If Ind, list Job Title/Profession: _____ | | f. If Ind, list Employer's Name/Specific Field: _____ | | | |
| g. Election Cycle Sum to Date | | h. In-Kind | i. Account Number/Code | j. Form of Payment | k. Date (mm/dd/yyyy) | l. Amount | | |
| \$ | | <input type="checkbox"/> | | | | \$ | | |
| a. Full Name, Mailing Address & Phone (include city, state, and zip) | | | b. Specify Type of Contributor: <input type="checkbox"/> Individual <input type="checkbox"/> Political Party <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Not-for-Profit <input type="checkbox"/> Other Source: _____ | | | c. If Not-for-Profit, list Fed ID #: | | |
| | | | d. If Other Committee, specify Type of Committee: <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> County: _____ | | | | | |
| | | | e. If Ind, list Job Title/Profession: _____ | | f. If Ind, list Employer's Name/Specific Field: _____ | | | |
| g. Election Cycle Sum to Date | | h. In-Kind | i. Account Number/Code | j. Form of Payment | k. Date (mm/dd/yyyy) | l. Amount | | |
| \$ | | <input type="checkbox"/> | | | | \$ | | |
| a. Full Name, Mailing Address & Phone (include city, state, and zip) | | | b. Specify Type of Contributor: <input type="checkbox"/> Individual <input type="checkbox"/> Political Party <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Not-for-Profit <input type="checkbox"/> Other Source: _____ | | | c. If Not-for-Profit, list Fed ID #: | | |
| | | | d. If Other Committee, specify Type of Committee: <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> County: _____ | | | | | |
| | | | e. If Ind, list Job Title/Profession: _____ | | f. If Ind, list Employer's Name/Specific Field: _____ | | | |
| g. Election Cycle Sum to Date | | h. In-Kind | i. Account Number/Code | j. Form of Payment | k. Date (mm/dd/yyyy) | l. Amount | | |
| \$ | | <input type="checkbox"/> | | | | \$ | | |
| 12. Total Contributions ALL Pages <i>(if multi-page, only list on page 1)</i> | | | \$ | 13. Total Contributions THIS Page <i>(sum all the 111 entries on this page)</i> | | | \$ | |

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.

Justin E. Kemp

 Signature of Appointed Treasurer or Candidate
(if multi-page, only sign on page 1)

1/31/23

 Date