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POLITICAL COMMITTEE DISCLOSURE REPORT

Name of Committee Committee To Elect Carl M. Allen, Jr.	SBOE ID Number
Address of Committee 7114 Power Line Rd.	Type of Report Final
City State ZIP Gibsonville, N. C. 27249	Period Covered From 10/22/00 To 01/05/01

Type of Committee (check one)

- Candidate Campaign PAC Party Referendum Individual

Treasurer Name Garland F. Steele Phone Number (optional) _____

Street Address P. O. Box 83

City/State/Zip Gibsonville, N. C. 27249

Assistant Treasurer Name Leonard M. Williams Phone Number (optional) _____

Street Address 507 Cook Rd.

City/State/Zip Elon College, N. C. 27244

Custodian of Books Name Carl M. Allen, Jr. Phone Number (optional) _____

Street Address 7114 Power Line Rd.

City/State/Zip Gibsonville, N. C. 27249

Depository Gibsonville Community Savings Bank

Address 220 Burlington Ave., Gibsonville, N. C. 27249

Account Number(s) 57445

VERIFICATION BY OATH OR AFFIRMATION

State North Carolina

County Guilford

Being duly sworn, I depose (affirm) and say 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.

Garland F. Steele
Signature of Appointed Treasurer

Subscribed and sworn (affirmed) to before me, this 5th day of January, ~~XIX~~ 2001.

Seal

Leonard M. Williams
Notary Public
My commission expires 11-23-2003

Is this an amendment? yes no

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

NAME OF COMMITTEE Committee To Elect Carl M. Allen, Jr.	SBOE ID Number	
	<u>Total this Period</u>	<u>This Election</u>
Cash on Hand January 1, 19 ____	XXXXXXXXXXXX	
Cash on Hand at Beginning of Reporting Period	183.91	XXXXXXXXXXXX
Receipts		
1. Contributions From:		
(a) Individuals other than Political Committees		
(i) Itemized _____	8,175.89	9,828.39
(ii) Unitemized _____	985.95	1,899.45
(iii) Total _____	9,161.84	11,727.84
(b) Political Party Committees _____		
(c) Other Political Committees (such as PACs) _____		300.00
(d) Total Contributions _____	9,161.84	12,027.84
2. Loan Proceeds _____	4,500.00	7,453.92
3. Interest Earned on Bank Accounts _____		
4. Refunds _____		
5. Total Receipts _____	13,845.75	19,481.76
Disbursements		
6. Operating Expenditures _____	6,391.83	12,027.84
7. Contributions to Candidates/Political Committees _____		
8. Coordinated Party Expenditures _____		
9. Loan Repayments _____	7,453.92	7,453.92
10. Total Disbursements _____	13,845.75	19,481.76
Cash on Hand at End of Reporting Period	None	None
Debts and Obligations owed TO the Committee		
Debts and Obligations owed BY the Committee		

ITEMIZED RECEIPTS

Use separate form for each category of the summary

Name of Committee (in full)			
Committee To Elect Carl M. Allen, Jr.			
Full Name, Mailing Address & Zip Code Odell Payne P. O. Box 6 McLeansville, N. C. 27301	Job Title or Profession Realtor	Date (month, day, year) 10/26/00	Amount of each receipt this period 200.00
	Employer's Name or Specific Field Self-Employed		
	Election Sum to Date \$ 350.00		
Full Name, Mailing Address & Zip Code David Teague 928 Golf House Rd. E. Gibsonville, N. C. 27249	Job Title or Profession Sales Representative	Date (month, day, year) 10/26/00	Amount of each receipt this period 400.00
	Employer's Name or Specific Field Southern States		
	Election Sum to Date \$ 400.00		
Full Name, Mailing Address & Zip Code Paul K. Treadway 6501 Burlington Rd. Gibsonville, N. C. 27249	Job Title or Profession Restarateur	Date (month, day, year) 11/06/00	Amount of each receipt this period 300.00
	Employer's Name or Specific Field Self-Employed		
	Election Sum to Date \$ 300.00		
Full Name, Mailing Address & Zip Code Carl M. Allen, Jr. 7114 Power Line Rd. Gibsonville, N. C. 27249	Job Title or Profession Physician's Assistant	Date (month, day, year) 01/05/01	Amount of each receipt this period 7,275.89
	Employer's Name or Specific Field Health Care		
	Election Sum to Date \$ 7,275.89		
Full Name, Mailing Address & Zip Code	Job Title or Profession	Date (month, day, year)	Amount of each receipt this period
	Employer's Name or Specific Field		
	Election Sum to Date \$		
Full Name, Mailing Address & Zip Code	Job Title or Profession	Date (month, day, year)	Amount of each receipt this period
	Employer's Name or Specific Field		
	Election Sum to Date \$		
Full Name, Mailing Address & Zip Code	Job Title or Profession	Date (month, day, year)	Amount of each receipt this period
	Employer's Name or Specific Field		
	Election Sum to Date \$		
TOTAL OF RECEIPTS THIS PAGE		\$	8,175.89

LOAN PROCEEDS

Name of Committee (in full) Committee To Elect Carl M. Allen, Jr.				
Source of Loan Full Name, Address and Zip Code Carl M. Allen, Jr. 7114 Power Line Rd. Gibsonville, N. C. 27249	Job Title or Profession Physician's Assistant	Date loan begins/ends 10/31/00	Amount of Endorsement	Rate of Interest Security Pledged None
	Employer's Name or Specific Field Health Care			
Total Amount of Loan \$ 4,500.00				
Source of Loan Full Name, Address and Zip Code	Job Title or Profession	Date loan begins/ends	Amount of Endorsement	Rate of Interest Security Pledged
	Employer's Name or Specific Field			
Total Amount of Loan \$				
TOTAL OF LOAN PROCEEDS THIS PAGE			\$ 4,500.00	

LOAN REPAYMENTS

Name of Committee (in full) Committee To Elect Carl M. Allen, Jr.				
Full Name, Address and Zip Code Carl M. Allen, Jr. 7114 Power Line Rd. Gibsonville, N. C. 27249	Date of Repayment 01/05/01	Original Loan Date 10/17/00	Amount of Repayment 178.03	Balance of Loan 7,285.89
	01/05/01	10/31/00	7,275.89	0.00
FORGIVENESS OF DEBT				
Full Name, Address and Zip Code	Date of Repayment	Original Loan Date	Amount of Repayment	Balance of Loan
TOTAL OF LOAN REPAYMENTS THIS PAGE				
			\$ 7,453.92	

ITEMIZED DISBURSEMENTS

Name of Committee (in full)			
Committee To Elect Carl M. Allen, Jr.			
Full Name, Address and Zip Code WPET P. O. Box 16924 Greensboro, NC 27416	Purpose of Disbursement Advertising	Date (month, day, year) 10/26/00	Amount of each Disbursement this period 216.00
	Election Sum to Date \$ 216.00		
Full Name, Address and Zip Code Arrowhead Graphics 508 Houston St. Greensboro, NC 27401	Purpose of Disbursement Mailings	Date (month, day, year) 10/31/00	Amount of each Disbursement this period 5,971.45
	Election Sum to Date \$ 6284.15		
Full Name, Address and Zip Code Office Depot 1825 S. Church St. Burlington, NC 27215	Purpose of Disbursement Office Supplies	Date (month, day, year) 11/17/00	Amount of each Disbursement this period 79.50
	Election Sum to Date \$ 79.50		
Full Name, Address and Zip Code Events Unlimited 111 Piedmont Ave. Gibsonville, NC 27249	Purpose of Disbursement Supplies	Date (month, day, year) 11/07/00	Amount of each Disbursement this period 62.00
	Election Sum to Date \$ 462.15		
Full Name, Address and Zip Code Office Depot 1825 S. Church St. Burlington, NC 27215	Purpose of Disbursement Office Supplies	Date (month, day, year) 11/17/00	Amount of each Disbursement this period 38.88
	Election Sum to Date \$ 118.38		
Full Name, Address and Zip Code Adams Sign Service 300 W. Main St. Gibsonville, NC 27249	Purpose of Disbursement Signs	Date (month, day, year) 11/16/00	Amount of each Disbursement this period 24.00
	Election Sum to Date \$ 24.00		
Full Name, Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of each Disbursement this period
	Election Sum to Date \$		
TOTAL OF DISBURSEMENTS THIS PAGE			\$.6,391.83

DEBTS AND OBLIGATIONS

Name of Committee (in full) Committee To Elect Carl M. Allen, Jr.				
Full Name, Mailing Address and Zip Code Carl M. Allen, Jr. 7114 Power Line Rd. Gibsonville, N. C. 27249	Outstanding Balance Beginning this period 2,953.92	Amount Incurred this period 4,500.00	Payment this period 178.03	Outstanding Balance this period 7,275.89
Nature of Debt (purpose) Campaign Finance				
Full Name, Mailing Address and Zip Code	Outstanding Balance Beginning this period	Amount Incurred this period	Payment this period	Outstanding Balance this period
Nature of Debt (purpose)				
Full Name, Mailing Address and Zip Code	Outstanding Balance Beginning this period	Amount Incurred this period	Payment this period	Outstanding Balance this period
Nature of Debt (purpose)				
Full Name, Mailing Address and Zip Code	Outstanding Balance Beginning this period	Amount Incurred this period	Payment this period	Outstanding Balance this period
Nature of Debt (purpose)				
Full Name, Mailing Address and Zip Code	Outstanding Balance Beginning this period	Amount Incurred this period	Payment this period	Outstanding Balance this period
Nature of Debt (purpose)				
Full Name, Mailing Address and Zip Code	Outstanding Balance Beginning this period	Amount Incurred this period	Payment this period	Outstanding Balance this period
Nature of Debt (purpose)				
TOTAL OF DEBTS AND OBLIGATIONS THIS PAGE			\$	7,275.89