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GLUILFORD COUNTY

BOARD OF ELECTIONS

Disclosure Report Cover Sheet

Please note that this cover sheet cannot be used to amend committee information such as the committee name, 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.

1. Name of Committee or Fund Routh for Board of Education Committee		6. Date April 27, 2002	
2. Address P.O. Box 115		7. ID Number	

3. City Pleasant Garden	4. State N.C.	5. Zip 27313	8. Phone 676-8275 or 674-7183
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9. Type of Report Quarterly	10. Period Covered Start: Jan '02 End: Apr. 20 '02	11. Amendment <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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12. Type of Committee or Fund (Check one)

<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> "Booster Fund"
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Soft Money Account	<input type="checkbox"/> Building Fund
<input type="checkbox"/> Other Fund: _____			

13. Treasurer Name  
Alice R. Pyle

14. Assistant Treasurer Name(s)

15. Custodian of Books Name  
Nancy R. Routh

16. Bank/Depository/Credit Account Information

a. Name	b. Purpose	c. Code	d. Period Begin Balance
First Citizens Bank	Campaign account		\$ 5000.00
			\$
			\$
			\$
			\$
			\$

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.

Alice R. Pyle  
Signature of Appointed Treasurer or Candidate

4-28-02  
Date

## Detailed Summary

1. Name of Committee or Fund	2. Type of Report	3. ID Number		
Routh for Board of Education Comm	Disclosure Rep.			
Start of Election Cycle: January 1, 20 <u>02</u>	Total this Period	Total this Election Cycle	For Office Use Only	
4) Cash on Hand at Start of Election Cycle		\$ 0.00		
5) Cash on Hand at Start of Present Reporting Period	\$ 0.00			
<b>RECEIPTS</b>				
6) Contributions from Individuals (CRO-1210)	\$ 6,265.00	\$ 6,265.00		
7) Contributions from Political Party Committees (CRO-1220)	\$ 0.00	\$ 0.00		
8) Contributions from Other Political Committees (CRO-1230)	\$ 0.00	\$ 0.00		
9) Loan Proceeds (CRO-1410)	\$ 5,000.00	\$ 5,000.00		
10) Refunds & Reimbursements to Committee (CRO-1240)	\$ 0.00	\$ 0.00		
11) Other Receipt Sources (CRO-1250)				
11a) Interest on Bank Accounts (CRO-1250)	\$ 1.76	\$ 1.76		
11b) Contributions from Not-for-Profit Organizations (CRO-1250)	\$ 0.00	\$ 0.00		
11c) Outside Sources of Income (CRO-1250)	\$ 0.00	\$ 0.00		
12) TOTAL RECEIPTS (Add lines 6, 7, 8, 9, 10, 11a, 11b, and 11c)	\$ 11,266.76	\$ 11,266.76		
<b>EXPENDITURES</b>				
13) Disbursements (CRO-1310)				
13a) Operating Expenditures (CRO-1310)	\$ 6,540.93	\$ 6,540.93		
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 0.00	\$ 0.00		
13c) Coordinated Party Expenditures (CRO-1310)	\$ 0.00	\$ 0.00		
14) Loan Repayments (CRO-1420)	\$ 0.00	\$ 0.00		
15) Refunds from Committee (CRO-1320)	\$ 0.00	\$ 0.00		
16) In-Kind Contributions (CRO-1510)	\$ 0.00	\$ 0.00		
17) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, and 16)	\$ 6,540.93	\$ 6,540.93		
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)	\$ 4,725.83	\$ 4,725.83		
<b>Additional Information</b>				
19) Non-Monetary Gifts Given to Committees (CRO-1330)	\$ 0.00			
20) Outstanding Loans (including ones from other campaigns) (CRO-1430)	\$ 5,000.00			
21) Debts and Obligations owed BY the Committee (CRO-1610)	\$ 0.00			
22) Debts and Obligations owed TO the Committee (CRO-1620)	\$ 0.00			
23) Parent Entity's Administrative Support (CRO-1710)	\$ 0.00			

Contributions from INDIVIDUALS

1. Name of Committee or Fund				2. ID Number			
Routh for Board of Education Committee							
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 274-4225	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Mary Kaye Digby 832 Olive St. Greensboro, N.C. 27401			Feb 25 02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession Instructor					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field UNC-C - Business		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 273-7924	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Julius Fulmore 2006 New Castle Rd. Greensboro, N.C. 27406			2/25/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession Retired					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) (828) 765-9489	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	<del>Pat</del> Guy Ross P.O. Box 288 Little Switzerland, N.C. 27896			3/5/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession Retired					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 275-2111	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Nancy Fuller 2105 Medford Ln. Greensboro, N.C. 27408			3/5/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession Librarian					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field First Presb. Church		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Terry Lee (674-6862) 5825 Hagan Stone Pk. Rd. Pleasant Garden, N.C. 27313			3/11/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 250 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession Managing Partner					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field Guilford Development, LLC		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$			
4. Total only this Page							\$ 600 -
5. Total of ALL CRO-1210 Pages (only show on last page)							\$
(This line must be on line 6 of Detailed Summary Page CRO-1100)							\$

Contributions from INDIVIDUALS

1. Name of Committee or Fund				2. ID Number			
Routh for Board of Education Committee							
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 272-6249	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 3/11/02	g. In-Kind	h. Prior Report	i. Amount \$ 75 -
	Elizabeth Baynes 1201 Country Club Dr Greensboro, N.C. 27408				<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession homemaker					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date		\$	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 275-2217	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 3/11/02	g. In-Kind	h. Prior Report	i. Amount \$ 50 -
	David Lowack 1122 Virginia St. Greensboro, N.C. 27401				<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession Shopowners					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field HouseLine		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date		\$	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 294-4063	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 3/11/02	g. In-Kind	h. Prior Report	i. Amount \$ 50 -
	Patricia Wiseman 3701 Brown Bark Dr. Greensboro, N.C. 27410				<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession retired					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date		\$	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 656-4791	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 3/11/02	g. In-Kind	h. Prior Report	i. Amount \$ 50 -
	Ether Carter 7513 Oak Valley Lane Brown Summit, N.C. 27214				<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession retired					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date		\$	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 656-5216	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 3/11/02	g. In-Kind	h. Prior Report	i. Amount \$ 50 -
	June Valdes 8105 Summit Springsct. Brown Summit, N.C. 27214				<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession Exec. Dir.					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field Blackchild Dev.		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date		\$	
4. Total only this Page							\$ 275 -
5. Total of ALL CRO-1210 Pages (only show on last page)							\$
(This line must be on line 6 of Detailed Summary Page CRO-1100)							\$

Contributions from INDIVIDUALS

1. Name of Committee or Fund						2. ID Number			
Routh for Board of Ed. Committee									
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 272-2540 William & <del>the</del> Dexmark 204 W. Greenway south Greensboro, N.C. 27403			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 3/11/02	g. In-Kind	h. Prior Report	i. Amount \$ 100 -
	b. Job Title/Profession Retired (both)						<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field			j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date \$		
							<input type="checkbox"/>	<input type="checkbox"/>	\$
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 274-2288 <del>██████</del> Liz Blackwell 601 Woodland Dr Greensboro, N.C. 27408			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 3/11/02	g. In-Kind	h. Prior Report	i. Amount \$ 100 -
	b. Job Title/Profession retired						<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field			j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date \$		
							<input type="checkbox"/>	<input type="checkbox"/>	\$
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 674-2745 Ruth Jackson 2122 Ledford Rd Greensboro, N.C. 27406			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 3/11/02	g. In-Kind	h. Prior Report	i. Amount \$ 100 -
	b. Job Title/Profession retired						<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field			j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date \$		
							<input type="checkbox"/>	<input type="checkbox"/>	\$
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 275-9171 Denny Boyce 4003 Belvoir Dr. Greensboro, N.C. 27406			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 3/11/02	g. In-Kind	h. Prior Report	i. Amount \$ 100 -
	b. Job Title/Profession CEO						<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field Clark Industrial Truck			j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date \$		
							<input type="checkbox"/>	<input type="checkbox"/>	\$
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) Jennifer Schaal 4006 Rollingwood Dr Greensboro, N.C. 27410			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 3/11/02	g. In-Kind	h. Prior Report	i. Amount \$ 100 -
	b. Job Title/Profession Physician						<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field Private Practice			j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date \$		
							<input type="checkbox"/>	<input type="checkbox"/>	\$
4. Total only this Page								\$ 500	
5. Total of ALL CRO-1210 Pages (only show on last page)								\$	
(This line must be on line 6 of Detailed Summary Page CRO-1100)								\$	

**Contributions from INDIVIDUALS**

1. Name of Committee or Fund				2. ID Number			
Routh for Board of Ed. Committee							
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>674-4280</u>	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) <u>3/11/02</u>	g. In-Kind	h. Prior Report	i. Amount
	Deborah Jones 1 Smokerise Ct. Greensboro, N.C. 27407				<input type="checkbox"/>	<input type="checkbox"/>	\$ 50 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession <u>Principal</u>					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field <u>Gulford Co. Schools</u>		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date		\$	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>288-5247</u>	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) <u>3/11/02</u>	g. In-Kind	h. Prior Report	i. Amount
	Lucy Leary 1105 Surry Dr. Greensboro, N.C. 27408				<input type="checkbox"/>	<input type="checkbox"/>	\$ 30 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession <u>retired</u>					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date		\$	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>288-6252</u>	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) <u>3/11/02</u>	g. In-Kind	h. Prior Report	i. Amount
	Elizaluth Schwabeland 3410 Regents Park Ln. Greensboro, N.C. 27455				<input type="checkbox"/>	<input type="checkbox"/>	\$ 25 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession <u>retired</u>					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date		\$	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>274-6841</u>	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) <u>3/11/02</u>	g. In-Kind	h. Prior Report	i. Amount
	Betty Garcia 3405 Stonehaven Dr. Greensboro, N.C. 27406				<input type="checkbox"/>	<input type="checkbox"/>	\$ 25 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession <u>Deputy Clerk</u>					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field <u>Superior Court</u>		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date		\$	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>292-2482</u>	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) <u>3/11/02</u>	g. In-Kind	h. Prior Report	i. Amount
	Carolyn Bilyeu 2823 Northampton Dr. Greensboro, N.C. 27408				<input type="checkbox"/>	<input type="checkbox"/>	\$ 25 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession <u>retired</u>					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date		\$	
<b>4. Total only this Page</b>							\$ 155 -
<b>5. Total of ALL CRO-1210 Pages</b> (only show on last page)							\$
(This line must be on line 6 of Detailed Summary Page CRO-1100)							\$

Contributions from INDIVIDUALS

1. Name of Committee or Fund				2. ID Number			
<i>Roveth for Board of Ed. Committee</i>							
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>698-0752</i>	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) <i>3/11/02</i>	g. In-Kind	h. Prior Report	i. Amount
	<i>Charles O'Connor</i>				<input type="checkbox"/>	<input type="checkbox"/>	\$ 25 -
	<i>2314 Sharpe Rd.</i>				<input type="checkbox"/>	<input type="checkbox"/>	\$
	<i>Greensboro, N.C. 27406</i>				<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession	j. If Amendment, choose change type:		k. Election Cycle Sum to Date				
<i>Retired</i>	<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$				
c. Employer's Name/Specific Field							
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>674-2775</i>	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) <i>3/11/02</i>	g. In-Kind	h. Prior Report	i. Amount
	<i>Ruth Cox</i>				<input type="checkbox"/>	<input type="checkbox"/>	\$ 25 -
	<i>1112 Rwayne Rd.</i>				<input type="checkbox"/>	<input type="checkbox"/>	\$
	<i>Greensboro, N.C. 27406</i>				<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession	j. If Amendment, choose change type:		k. Election Cycle Sum to Date				
<i>retired</i>	<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$				
c. Employer's Name/Specific Field							
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>299-5247</i>	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) <i>3/11/02</i>	g. In-Kind	h. Prior Report	i. Amount
	<i>Owen Lewis</i>				<input type="checkbox"/>	<input type="checkbox"/>	\$ 25 -
	<i>2407 Springwood Dr.</i>				<input type="checkbox"/>	<input type="checkbox"/>	\$
	<i>Greensboro, N.C. 27403</i>				<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession	j. If Amendment, choose change type:		k. Election Cycle Sum to Date				
<i>Realtor</i>	<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$				
c. Employer's Name/Specific Field							
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>288-6132</i>	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) <i>3/11/02</i>	g. In-Kind	h. Prior Report	i. Amount
	<i>Naiter Chopra</i>				<input type="checkbox"/>	<input type="checkbox"/>	\$ 20 -
	<i>1803 Red Forest Rd.</i>				<input type="checkbox"/>	<input type="checkbox"/>	\$
	<i>Greensboro, N.C. 27410</i>				<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession	j. If Amendment, choose change type:		k. Election Cycle Sum to Date				
<i>retired Professor</i>	<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$				
c. Employer's Name/Specific Field							
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>274-7804</i>	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) <i>3/20/02</i>	g. In-Kind	h. Prior Report	i. Amount
	<i>Bettye Miller</i>				<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 -
	<i>1908 Finley St.</i>				<input type="checkbox"/>	<input type="checkbox"/>	\$
	<i>Greensboro, N.C. 27406</i>				<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession	j. If Amendment, choose change type:		k. Election Cycle Sum to Date				
<i>retired</i>	<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$				
c. Employer's Name/Specific Field							
4. Total only this Page							\$ 195 -
5. Total of ALL CRO-1210 Pages (only show on last page)							\$
(This line must be on line 6 of Detailed Summary Page CRO-1100)							\$

Contributions from INDIVIDUALS

1. Name of Committee or Fund				2. ID Number				
1. Name of Committee or Fund <i>Recruit for Board of Ed. Committee</i>				2. ID Number				
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>685-4698</i>		d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	<i>Norma Shepard</i> <i>2321 NC62</i> <i>Julian, N.C. 27283</i>				<i>3/20/02</i>	<input type="checkbox"/>	<input type="checkbox"/>	\$ <i>50 -</i>
						<input type="checkbox"/>	<input type="checkbox"/>	\$
						<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession						<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date				
		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$				
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>299-3355</i>		d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	<i>Peggy <del>Lee</del> Abernathy</i> <i>862 Jefferson <del>at</del> Wood Ln.</i> <i>Greensboro, N.C. 27410</i>				<i>3/20/02</i>	<input type="checkbox"/>	<input type="checkbox"/>	\$ <i>100 -</i>
						<input type="checkbox"/>	<input type="checkbox"/>	\$
						<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession						<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date				
<i>Jefferson - Pilot (Mortgage)</i>		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$				
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	<i>Ron Hamm</i> <i>5205 Mockingbird Rd.</i> <i>Greensboro, NC. 27406</i>				<i>3/20/02</i>	<input type="checkbox"/>	<input type="checkbox"/>	\$ <i>10 -</i>
						<input type="checkbox"/>	<input type="checkbox"/>	\$
						<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession						<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date				
		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$				
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>855-8081</i>		d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	<i>Jeanie Jayner</i> <i>4808 Penn Wyme Dr</i> <i>Greensboro, NC. 27410</i>				<i>3/20/02</i>	<input type="checkbox"/>	<input type="checkbox"/>	\$ <i>25 -</i>
						<input type="checkbox"/>	<input type="checkbox"/>	\$
						<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession						<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date				
		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$				
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>852-3207</i>		d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	<i>David Feagins</i> <i>1505 A. Nathan Hunt Rd.</i> <i>Greensboro, N.C. 27410</i>				<i>3/20/02</i>	<input type="checkbox"/>	<input type="checkbox"/>	\$ <i>50 -</i>
						<input type="checkbox"/>	<input type="checkbox"/>	\$
						<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession						<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date				
<i>Greensboro College</i>		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$				
4. Total only this Page							\$ <i>235 -</i>	
5. Total of ALL CRO-1210 Pages (only show on last page)							\$	
(This line must be on line 6 of Detailed Summary Page CRO-1100)							\$	

Contributions from INDIVIDUALS

1. Name of Committee or Fund						2. ID Number										
<i>Committee for Board of Ed. Committee</i>																
								a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
								Mike Renn 934 Greenwood Dr. Greensboro, N.C. 27410					3/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 -
														<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession			j. If Amendment, choose change type:			k. Election Cycle Sum to Date										
Educator			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$										
c. Employer's Name/Specific Field						Guilf. Co. Sch & Ctr. (Creative Lead)										
3. Contributor																
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount								
Sylvia Stone 151 Wolftrail Rd. Greensboro, N.C. 27406					3/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50 -								
b. Job Title/Profession			j. If Amendment, choose change type:			k. Election Cycle Sum to Date										
Pres.			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$										
c. Employer's Name/Specific Field						GBA Systems										
3. Contributor																
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount								
Mike & Chris McDonald 4101 Ashmore Dr. Greensboro, N.C. 27405					3/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 -								
b. Job Title/Profession			j. If Amendment, choose change type:			k. Election Cycle Sum to Date										
retired			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$										
c. Employer's Name/Specific Field																
3. Contributor																
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount								
Tessa Jones 1105 E. Ritterstake Rd. Greensboro, NC. 27406					3/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 20 -								
b. Job Title/Profession			j. If Amendment, choose change type:			k. Election Cycle Sum to Date										
retired			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$										
c. Employer's Name/Specific Field																
3. Contributor																
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount								
Jack Baldwin 3407 Woodlea Dr. Greensboro, N.C. 27406					3/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50 -								
b. Job Title/Profession			j. If Amendment, choose change type:			k. Election Cycle Sum to Date										
retired			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$										
c. Employer's Name/Specific Field																
3. Contributor																
4. Total only this Page						\$ 320 -										
5. Total of ALL CRO-1210 Pages (only show on last page)						\$										
(This line must be on line 6 of Detailed Summary Page CRO-1100)																

Contributions from INDIVIDUALS

1. Name of Committee or Fund						2. ID Number			
Routh for Board of Ed. Committee									
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 277-3139			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 3/20/02	g. In-Kind	h. Prior Report	i. Amount \$ 100 -
	Tom <del>Danna</del> Routh 402-B Fisher Park Cir. Greensboro, N.C. 27401						<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession Real Estate Dev.						<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field (not listed)			j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date \$		
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 545-9068			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 3/20/02	g. In-Kind	h. Prior Report	i. Amount \$ 50 -
	Joanne Schlagenhauter 4004 Hazel Ln. Greensboro, N.C. 27408						<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession retired						<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field			j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date \$		
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 274-7360			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 3/20/02	g. In-Kind	h. Prior Report	i. Amount \$ 100 -
	Marilyn Dalton 923 N. Church St #1 Greensboro, N.C. 27401						<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession consultant						<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field Center for Creative Leadership			j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date \$		
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 697-8924			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 3/20/02	g. In-Kind	h. Prior Report	i. Amount \$ 100 -
	Shirley Pyle 2043 Stewart Hutchens Rd. Whitsett, N.C. 27377						<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession Professor						<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field A&T State Univ.			j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date \$		
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 292-4396			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 3/20/02	g. In-Kind	h. Prior Report	i. Amount \$ 100 -
	Jane <del>Dan</del> Darnell 5006 Lancaster Rd. Greensboro, N.C. 27410						<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession Retired						<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field			j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date \$		
4. Total only this Page						\$ 450 -			
5. Total of ALL CRO-1210 Pages (only show on last page)						\$			
(This line must be on line 6 of Detailed Summary Page CRO-1100)									

Contributions from INDIVIDUALS

1. Name of Committee or Fund				2. ID Number			
Rouffalo Board of Education Committee							
3. Contributor	a. Full Name, Mailing Address & Phone (Include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Charles Wallace 3704 Hotts Chapel Rd. Greensboro, N.C. 27401			3/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession							\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$			
3. Contributor	a. Full Name, Mailing Address & Phone (Include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Jean Nydegger Nydegger Rd. Little Switzerland, NC 27896			3/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession							\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$			
3. Contributor	a. Full Name, Mailing Address & Phone (Include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Jane Cline 3410 Wilshire Dr Greensboro, N.C. 27408			3/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 10 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession							\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Catherine Barnes 1502 Forest Valley Rd. Greensboro, N.C. 27410			3/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 10 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession							\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Mary Ellen Cobb 1503 N. Halder Rd. Greensboro, N.C. 27408			3/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession							\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$			
4. Total only this Page						\$ 320 -	
5. Total of ALL CRO-1210 Pages (only show on last page)						\$	
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

Contributions from INDIVIDUALS

1. Name of Committee or Fund				2. ID Number			
North Star Board of Ed. Committee a. Full Name, Mailing Address & Phone (include city, state, & zip) 854-9386 b. Job Title/Profession Media Dir & Professor c. Employer's Name/Specific Field Guilford Co. Schools + UNC-G				d. Account Number/Code e. Form of Payment f. Date (mm/dd/yyyy) 3/20/02 g. In-Kind h. Prior Report i. Amount \$ 100 - \$ \$ \$			
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				k. Election Cycle Sum to Date \$			
a. Full Name, Mailing Address & Phone (include city, state, & zip) 294-5948 b. Job Title/Profession Retired Man Inst. Services c. Employer's Name/Specific Field Visiting International Faculty				d. Account Number/Code e. Form of Payment f. Date (mm/dd/yyyy) 3/20/02 g. In-Kind h. Prior Report i. Amount \$ 50 - \$ \$			
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				k. Election Cycle Sum to Date \$			
a. Full Name, Mailing Address & Phone (include city, state, & zip) 272-6664 b. Job Title/Profession Prof. c. Employer's Name/Specific Field UNC-G				d. Account Number/Code e. Form of Payment f. Date (mm/dd/yyyy) 3/20/02 g. In-Kind h. Prior Report i. Amount \$ 25 - \$ \$			
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				k. Election Cycle Sum to Date \$			
a. Full Name, Mailing Address & Phone (include city, state, & zip) 454-4007 b. Job Title/Profession Retired c. Employer's Name/Specific Field				d. Account Number/Code e. Form of Payment f. Date (mm/dd/yyyy) 3/20/02 g. In-Kind h. Prior Report i. Amount \$ 50 - \$ \$			
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				k. Election Cycle Sum to Date \$			
a. Full Name, Mailing Address & Phone (include city, state, & zip) 674-2792 b. Job Title/Profession Retired c. Employer's Name/Specific Field				d. Account Number/Code e. Form of Payment f. Date (mm/dd/yyyy) 3/20/02 g. In-Kind h. Prior Report i. Amount \$ 25 - \$ \$			
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				k. Election Cycle Sum to Date \$			
4. Total only this Page				\$ 250 -			
5. Total of ALL CRO-1210 Pages (only show on last page) (This line must be on line 6 of Detailed Summary Page CRO-1100)				\$			

Contributions from INDIVIDUALS

1. Name of Committee or Fund				2. ID Number			
Routh for Board of Education Committee							
3. Contributor	a. Full Name, Mailing Address & Phone (Include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	F.P. Bodenheimer, Jr. 5309 Dorchester Rd. Greensboro, N.C. 27409			3/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 250 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
Retired		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$			
3. Contributor	a. Full Name, Mailing Address & Phone (Include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Thomas Hubert 222 S. Tremont St Greensboro, N.C. 27403			3/26/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 25 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
Realtor		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$			
3. Contributor	a. Full Name, Mailing Address & Phone (Include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Merrilou Williams 2003 Dumaine Ct. Greensboro, N.C. 27409			3/26/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
Teacher Assist.		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$			
3. Contributor	a. Full Name, Mailing Address & Phone (Include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Linda McDougle 5803 Groometoux Rd. High Point, N.C. 27263			3/26/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 250 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
Retired		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$			
3. Contributor	a. Full Name, Mailing Address & Phone (Include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	<del>Wanda</del> Doris Hockett 6301 Hunt Rd. Pleasant Garden, N.C. 27313			3/26/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
Retired		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$			
4. Total only this Page				\$ 625 -			
5. Total of ALL CRO-1210 Pages (only show on last page)				\$			
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

Contributions from INDIVIDUALS

1. Name of Committee or Fund						2. ID Number		
Routh for Board of Ed. Committee								
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount	
	Mary Kearns 6743 Kearney Rd. Pleasant Garden, N.C. 27313			3/26/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 25 -	
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$	
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$	
			j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date			
					\$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount	
	Bob & <del>Barbara</del> Thomas 200 E Avondale Dr Greensboro, N.C. 27403			3/26/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 -	
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$	
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$	
			j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date			
					\$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount	
	Dan & <del>Barbara</del> McAlister 2408 Marston Rd. Greensboro, N.C. 27408			3/26/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 -	
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$	
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$	
			j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date			
					\$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount	
	Jim Long 3105 Round Hill Rd. Greensboro, N.C. 27408			3/26/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 20 -	
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$	
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$	
			j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date			
					\$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount	
	Kathy Treanor 123 Beverly Place Greensboro, N.C. 27403			3/26/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 25 -	
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$	
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$	
			j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date			
					\$			
4. Total only this Page						\$ 270 -		
5. Total of ALL CRO-1210 Pages (only show on last page)						\$		
(This line must be on line 6 of Detailed Summary Page CRO-1100)								

Contributions from INDIVIDUALS

1. Name of Committee or Fund						2. ID Number			
Routh for Board of Ed. Committee									
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 286-5228			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Kathryn Crayton 3777 Greene's Cr. Greensboro, N.C. 27410					3/26/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 -
	b. Job Title/Profession Teacher						<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field Guilford County Schools			j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) (828) 765-0701			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Delphia Lamberson Strawberry Ridge Little Switzerland, N.C. 27896					3/26/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50 -
	b. Job Title/Profession Retired						<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field			j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 454-4379			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Laurel Purvis 2808 Overview Terrace High Point, N.C. 27265					3/26/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 25 -
	b. Job Title/Profession Retired						<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field			j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 294-5916			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Carolyn Witman 1400 McDowell Dr. Greensboro, N.C. 27408					3/26/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 25 -
	b. Job Title/Profession Retired						<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field			j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 299-6131			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Unita Hayden 3404 Stone Haven Dr. Greensboro, N.C. 27406					3/26/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 -
	b. Job Title/Profession Retired						<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field			j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$			
4. Total only this Page						\$ 300 -			
5. Total of ALL CRO-1210 Pages (only show on last page)						\$			
(This line must be on line 6 of Detailed Summary Page CRO-1100)									

Contributions from INDIVIDUALS

1. Name of Committee or Fund						2. ID Number		
Routh for Board of Education Committee								
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 379-9911	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 3/26/02	g. In-Kind	h. Prior Report	i. Amount \$ 50 -	
	Brenda Boyce P.O. Box 29144 Greensboro, N.C. 27429				<input type="checkbox"/>	<input type="checkbox"/>	\$	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
b. Job Title/Profession Reader					<input type="checkbox"/>	<input type="checkbox"/>	\$	
c. Employer's Name/Specific Field Measurement Inc.		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 274-3133	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 3/26/02	g. In-Kind	h. Prior Report	i. Amount \$ 25 -	
	Frances Fickling 405 Westmounter. Greensboro, N.C. 27403				<input type="checkbox"/>	<input type="checkbox"/>	\$	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
b. Job Title/Profession					<input type="checkbox"/>	<input type="checkbox"/>	\$	
c. Employer's Name/Specific Field		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 275-8775	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 4/1/02	g. In-Kind	h. Prior Report	i. Amount \$ 100 -	
	Don + Adey Bohlen 205 S. Tremont Dr. Greensboro, N.C. 27403				<input type="checkbox"/>	<input type="checkbox"/>	\$	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
b. Job Title/Profession Retired / Teacher					<input type="checkbox"/>	<input type="checkbox"/>	\$	
c. Employer's Name/Specific Field Guilford Co. Schools		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 852-5466	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 4/1/02	g. In-Kind	h. Prior Report	i. Amount \$ 25 -	
	Nal Lewis 3800 Plantation Dr. Greensboro, N.C.				<input type="checkbox"/>	<input type="checkbox"/>	\$	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
b. Job Title/Profession Retired					<input type="checkbox"/>	<input type="checkbox"/>	\$	
c. Employer's Name/Specific Field		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 273-7072	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 4/1/02	g. In-Kind	h. Prior Report	i. Amount \$ 100 -	
	Helin Wolff 100 Irving Park Ct. Greensboro, N.C. 27408				<input type="checkbox"/>	<input type="checkbox"/>	\$	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
b. Job Title/Profession Retired					<input type="checkbox"/>	<input type="checkbox"/>	\$	
c. Employer's Name/Specific Field		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date \$			
4. Total only this Page						\$ 300 -		
5. Total of ALL CRO-1210 Pages (only show on last page)						\$		
(This line must be on line 6 of Detailed Summary Page CRO-1100)								

Contributions from INDIVIDUALS

1. Name of Committee or Fund				2. ID Number			
Routh for Board of Ed. Committee							
3. Contributor	a. Full Name, Mailing Address & Phone (Include city, state, & zip) 697-1305	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 4/1/02	g. In-Kind	h. Prior Report	i. Amount \$ 50 -
	Paul Durham 3313 Janet Ln. Greensboro, N.C. 27405				<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession Retired				<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (Include city, state, & zip) 674-6369	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 4/1/02	g. In-Kind	h. Prior Report	i. Amount \$ 250 -
	Jean Langdon 5001 Sparrow Ct. Pleasant Garden, N.C. 27313				<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession Family business				<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field P.G. Drug Store		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (Include city, state, & zip) 345-4086	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 4/1/02	g. In-Kind	h. Prior Report	i. Amount \$ 100 -
	Julia Banks 2 Teabury Ct. Greensboro, N.C. 27455				<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession Retired				<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (Include city, state, & zip) 294-4194	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 4/1/02	g. In-Kind	h. Prior Report	i. Amount \$ 75 -
	Dan Jones 902 Montrose Dr. Greensboro, N.C. 27410				<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession Retired				<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (Include city, state, & zip) 852-5910	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy) 4/1/02	g. In-Kind	h. Prior Report	i. Amount \$ 15 -
	Betty Neighbors 1019 Bridgewater Dr. Greensboro, N.C. 27410				<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession Retired				<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$			
4. Total only this Page							\$ 490 -
5. Total of ALL CRO-1210 Pages (only show on last page)							\$
(This line must be on line 6 of Detailed Summary Page CRO-1100)							\$

Contributions from INDIVIDUALS

1. Name of Committee or Fund						2. ID Number	
Routh for Board of Education Committee							
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 760-3039	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Susan Law 224 Forest Brook Dr. Winston Salem, N.C. 27106			4/1/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession	c. Employer's Name/Specific Field		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date	\$
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Spencer Dayna 4104 Queen Beth Dr. Greensboro, N.C. 27405			4/1/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession	c. Employer's Name/Specific Field		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date	\$
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 691-9341	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Suzanne Powell 322 S. Davis St. Apt. 412 Greensboro, N.C. 27401			4/1/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 25 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession	c. Employer's Name/Specific Field		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date	\$
	Ed. Consultant Frank Porter Graham Foy						
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 294-1411	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Shirley Morrison 803 Scott Ave. Greensboro, N.C. 27403			4/1/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession	c. Employer's Name/Specific Field		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date	\$
	Exec. Dir. Numan Res. Guilf. Co. Schools						
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 370-8034	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Mary Joe Lentz 5803 Groomtown Rd. High Point, N.C. 27283			4/8/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 30 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession	c. Employer's Name/Specific Field		j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date	\$
	Principal Guilf. Co. Schools						
4. Total only this Page						\$ 305 -	
5. Total of ALL CRO-1210 Pages (only show on last page)						\$	
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

Contributions from INDIVIDUALS

1. Name of Committee or Fund						2. ID Number			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	C.A. (Al) Rubio (282-3233)					4/8/02	<input type="checkbox"/>	<input type="checkbox"/>	\$100 -
	P.O. Box 41312						<input type="checkbox"/>	<input type="checkbox"/>	\$
	Greensboro, N.C. 27404						<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Director of Spec. Prog			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
c. Employer's Name/Specific Field									
Visiting Instr. Faculty Prog									
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Karen Kennedy 5800 Napa St. Rd. Pleasant Garden, N.C. 27313					4/8/02	<input type="checkbox"/>	<input type="checkbox"/>	\$50 -
							<input type="checkbox"/>	<input type="checkbox"/>	\$
							<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Nurse			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
c. Employer's Name/Specific Field									
self									
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Jean Arison 700 Ritters Lake Rd. Greensboro, N.C. 27406					4/8/02	<input type="checkbox"/>	<input type="checkbox"/>	\$100 -
							<input type="checkbox"/>	<input type="checkbox"/>	\$
							<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Retired			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
c. Employer's Name/Specific Field									
self									
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Theresa Sims 311 Willoughby Blvd. Greensboro, N.C. 27408					4/8/02	<input type="checkbox"/>	<input type="checkbox"/>	\$100 -
							<input type="checkbox"/>	<input type="checkbox"/>	\$
							<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Retired			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
c. Employer's Name/Specific Field									
self									
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Wendy Schaitberger 2407 Princess Ann St Greensboro, N.C. 27408					4/8/02	<input type="checkbox"/>	<input type="checkbox"/>	\$50 -
							<input type="checkbox"/>	<input type="checkbox"/>	\$
							<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Physical Therapist			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
c. Employer's Name/Specific Field									
self									
4. Total only this Page								\$400 -	
5. Total of ALL CRO-1210 Pages (only show on last page)								\$	
(This line must be on line 6 of Detailed Summary Page CRO-1100)									

Contributions from INDIVIDUALS

1. Name of Committee or Fund						2. ID Number		
Routh for Board of Ed. Committee								
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 375-7144		d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Dentrice Houston 610 Cardilla Dr. Greensboro, N.C. 27405				4/8/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50 -
	b. Job Title/Profession					<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field					<input type="checkbox"/>	<input type="checkbox"/>	\$
		j. If Amendment, choose change type:		k. Election Cycle Sum to Date				
		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$				
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 674-0714		d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Jillie Karsdell 10712 Randleman Rd. Randleman, N.C. 27317				4/15/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 25 -
	b. Job Title/Profession					<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field					<input type="checkbox"/>	<input type="checkbox"/>	\$
		j. If Amendment, choose change type:		k. Election Cycle Sum to Date				
		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$				
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 292-6088		d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Sarah Greener 4134 Donigal Dr. Greensboro, N.C. 27406				4/15/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50 -
	b. Job Title/Profession					<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field					<input type="checkbox"/>	<input type="checkbox"/>	\$
		j. If Amendment, choose change type:		k. Election Cycle Sum to Date				
		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$				
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 621-4018		d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Betty Dean 4509 Honeydew Dr. Mc Leansville, N.C. 27301				4/15/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 -
	b. Job Title/Profession					<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field					<input type="checkbox"/>	<input type="checkbox"/>	\$
		j. If Amendment, choose change type:		k. Election Cycle Sum to Date				
		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$				
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) 273-1520		d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Myrtle Wells 1206 Eton Dr. Greensboro, N.C. 27406				4/15/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50 -
	b. Job Title/Profession					<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field					<input type="checkbox"/>	<input type="checkbox"/>	\$
		j. If Amendment, choose change type:		k. Election Cycle Sum to Date				
		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$				
4. Total only this Page						\$ 275 -		
5. Total of ALL CRO-1210 Pages (only show on last page)						\$ 6265 -		
(This line must be on line 6 of Detailed Summary Page CRO-1100)								

**Disbursements**

<b>1. Name of Committee or Fund</b>					<b>2. ID Number</b>		
Routh for Board of Education Committ ee							
<b>3. Type of Disbursement</b> (Please use separate CRO-1330 forms for each type of Disbursements.)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
<b>4. Payee</b>	<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, and zip)		<b>d. Purpose</b>	<b>e. Account Number/Code</b>	<b>f. Form of Payment</b>	<b>g. Date</b> (mm/dd/yyyy)	<b>h. Amount</b>
	Blackwelder Communications 1700 Elkhart Drive Greensboro, NC 27408 (336) 288-6235		Consulting	Campaign exp	check	02/13/2002	\$ 500.00
			consulting/ mailing/printing	campaign expense	check	03/11/2002	\$ 963.50
			Consulting	campaign expense	check	04/04/2002	\$ 500.00
<b>b. If Contribution to County Committee, specify:</b>		<b>c. If Coordinated Party Expense, list office:</b>	<b>i. If Amendment, choose change type:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete		<b>j. Election Cycle Sum To Date</b> \$ 1963.50		
<b>4. Payee</b>	<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, and zip)		<b>d. Purpose</b>	<b>e. Account Number/Code</b>	<b>f. Form of Payment</b>	<b>g. Date</b> (mm/dd/yyyy)	<b>h. Amount</b>
	Mitzi Carpenter 8505 Cedar Hollow Road Greensboro, NC 27455 (336) 644-9890		Graphics	Graphics design	check	02/25/2002	\$ 1373.50
			Graphics/printing <del>Advertising</del>	Graphics design <del>Advertising</del>	check	03/17/2002	\$ 2863.93
			Advertising	Advertising	check	04/04/2002	\$ 215.00
<b>b. If Contribution to County Committee, specify:</b>		<b>c. If Coordinated Party Expense, list office:</b>	<b>i. If Amendment, choose change type:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete		<b>j. Election Cycle Sum To Date</b> \$ 4452.43		
<b>4. Payee</b>	<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, and zip)		<b>d. Purpose</b>	<b>e. Account Number/Code</b>	<b>f. Form of Payment</b>	<b>g. Date</b> (mm/dd/yyyy)	<b>h. Amount</b>
	NAACP c/o Mark Gray 108 N. Elm Street Greensboro, NC 27401 (336) 273-1222		Advertising	Advertising	check	03/18/2002	\$ 125.00
							\$
							\$
<b>b. If Contribution to County Committee, specify:</b>		<b>c. If Coordinated Party Expense, list office:</b>	<b>i. If Amendment, choose change type:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete		<b>j. Election Cycle Sum To Date</b> \$ 125.00		
<b>4. Payee</b>	<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, and zip)		<b>d. Purpose</b>	<b>e. Account Number/Code</b>	<b>f. Form of Payment</b>	<b>g. Date</b> (mm/dd/yyyy)	<b>h. Amount</b>
							\$
							\$
							\$
<b>b. If Contribution to County Committee, specify:</b>		<b>c. If Coordinated Party Expense, list office:</b>	<b>i. If Amendment, choose change type:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete		<b>j. Election Cycle Sum To Date</b> \$		
<b>4. Payee</b>	<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, and zip)		<b>d. Purpose</b>	<b>e. Account Number/Code</b>	<b>f. Form of Payment</b>	<b>g. Date</b> (mm/dd/yyyy)	<b>h. Amount</b>
							\$
							\$
							\$
<b>b. If Contribution to County Committee, specify:</b>		<b>c. If Coordinated Party Expense, list office:</b>	<b>i. If Amendment, choose change type:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete		<b>j. Election Cycle Sum To Date</b> \$		
<b>5. Total only this Page</b>						\$ 6540.93	
<b>6. Total of ALL CRO-1310 Related Pages</b> (only show on last page)						\$	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)							
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						6540.93	

**Outstanding Loans**

1. Name of Committee or Fund			2. ID Number		
Routh for Board of Education Committee					
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	h. Original Loan Amount
	Nancy R. Routh P.O. Box 428 Pleasant Garden, NC 27313 (336) 674-7083	01/01/2002	04/20/2002	0 %	\$ 5,000.00
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
		Retired Educator	N/A		\$ 5,000.00
		g. Security Pledged			
	N/A				
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)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate	h. Original Loan Amount
				%	\$
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
					\$
		g. Security Pledged			
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)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate	h. Original Loan Amount
				%	\$
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
					\$
		g. Security Pledged			
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)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate	h. Original Loan Amount
				%	\$
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
					\$
		g. Security Pledged			
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)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate	h. Original Loan Amount
				%	\$
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
					\$
		g. Security Pledged			
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)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate	h. Original Loan Amount
				%	\$
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
					\$
		g. Security Pledged			
j. If Amendment, choose change type:					
<input type="checkbox"/> Add <input type="checkbox"/> Delete					
4. Total only this Page					\$ 5,000.00
5. Total of ALL CRO-1430 Pages (only show on last page)					\$ 5,000.00
<i>(This line must be on line 20 of Detailed Summary Page CRO-1100)</i>					