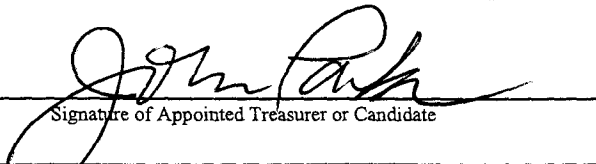


Rec-1-9-03
 4c 12:30

Disclosure Report Cover Sheet

JAN 09 2003

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.

1. Name of Committee or Fund CITIZENS For JOHN PARKS				6. Date	
2. Address 3313 Colony Drive				7. ID Number -	
3. City Jamestown		4. State NC.	5. Zip 27282	8. Phone 336-454-4254	
9. Type of Report Semi-annual (For 2002)			10. Period Covered		11. Amendment
			Start	07-01-02	<input type="checkbox"/> Yes
			End	12-31-02	<input checked="" type="checkbox"/> No
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"/> PAC		<input type="checkbox"/> Referendum		<input type="checkbox"/> "Booster Fund"	
<input type="checkbox"/> Other Fund: _____		<input type="checkbox"/> Soft Money Account		<input type="checkbox"/> Building Fund	
13. Treasurer Name John Parks					
14. Assistant Treasurer Name(s)					
15. Custodian of Books Name					
16. Bank/Depository/Credit Account Information					
a. Name	b. Purpose	c. Code	d. Period Begin Balance		
High Point Bank & Trust	Checking (Receipts/Disbursements)	001	\$ 14,469.85		
			\$		
			\$		
			\$		
			\$		
			\$		
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.					
 Signature of Appointed Treasurer or Candidate				1/9/2003 Date	

Detailed Summary

1. Name of Committee or Fund	2. Type of Report	3. ID Number	
CITIZENS FOR JOHN PARKS	Semi-Annual (for 2002)	—	
Start of Election Cycle: January 1, 2002	Total this Period	Total this Election Cycle	
4) Cash on Hand at Start of Election Cycle		\$ 14,469.85	
5) Cash on Hand at Start of Present Reporting Period	\$ 14,469.85		
RECEIPTS			
6) Contributions from Individuals (CRO-1210)	\$ 65.00	\$	
7) Contributions from Political Party Committees (CRO-1220)	\$	\$	
8) Contributions from Other Political Committees (CRO-1230)	\$	\$	
9) Loan Proceeds (CRO-1410)	\$	\$	
10) Refunds and Reimbursements TO the Committee (CRO-1240)	\$	\$	
11) Other Receipt Sources (CRO-1250)			
11a) Interest on Bank Accounts (CRO-1250)	\$	\$	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)	\$	\$	
11c) Outside Sources of Income (CRO-1250)	\$	\$	
12) "Goods and Services" Contributions (CRO-1260)	\$	\$	
13) Contributions based on Forgiven Loans (CRO-1440)	\$	\$	
14) 48-Hour Notice Reports Sum	\$	\$	
15) TOTAL RECEIPTS (Add lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 12, 13, and 14)	\$ 65.00	\$ 65.00	
EXPENDITURES			
16) Disbursements (CRO-1310)			
16a) Operating Expenditures (CRO-1310)	\$ 65.00	\$	
16b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$	
16c) Coordinated Party Expenditures (CRO-1310)	\$	\$	
17) Loan Repayments (CRO-1420)	\$	\$	
18) Forgiven Loans (CRO-1440)	\$	\$	
19) Refunds and Reimbursements FROM the Committee (CRO-1320)	\$	\$	
20) In-Kind Contributions (CRO-1510)	\$	\$	
21) TOTAL EXPENDITURES (Add lines 16a, 16b, 16c, 17, 18, 19, and 20)	\$ 65.00	\$ 65.00	
22) 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)	\$ 14,469.85	\$ 14,469.85	
Additional Information			
23) Non-Monetary Gifts Given to Committees (CRO-1330)	\$ NONE		
24) Outstanding Loans (including ones from other campaigns) (CRO-1430)	\$ NONE		
25) Debts and Obligations owed BY the Committee (CRO-1610)	\$ NONE		
26) Debts and Obligations owed TO the Committee (CRO-1620)	\$ NONE		
27) Parent Entity's Administrative Support (CRO-1710)	\$ NONE		
28) Account Transfers (CRO-1720)	\$ NONE		

Contributions from INDIVIDUALS

1. Name of Committee or Fund				2. ID Number			
<i>CITIZENS For John Parks</i>				—			
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>John Parks 3313 Colony Drive Spartanburg, N.C. 27282</i>		<i>Cash</i>	<i>12/31/02</i>	<input type="checkbox"/>	<input type="checkbox"/>	\$ <i>65.00</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>Private Commercial Properties</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
					<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:		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
					<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:		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
					<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:		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
					<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:		k. Election Cycle Sum to Date			
		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$			
4. Total only this Page							\$
5. Total of ALL CRO-1210 Pages <i>(only show on last page)</i>							\$
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

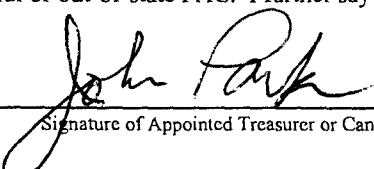
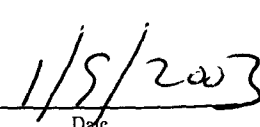
Disbursements

1. Name of Committee or Fund						2. ID Number		
<i>Citizens For John Park</i>						_____		
3. Type of Disbursement <i>(Please use separate CRO-1330 forms for each type of Disbursements.)</i>								
<input checked="" 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 (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	<i>U.S. Postal Service High Point, N.C.</i>			<i>rent</i>			<i>12/31/2001</i>	<i>\$ 65.00</i>
								\$
								\$
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 (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	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 (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	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 (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	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 (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	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>							\$	

Statement of Organization

1. Name of Committee Citizens For John Parks						7. Date
2. Address of Committee 3313 Colony Drive						8. ID Number —
3. City Jamestown		4. State N.C.	5. Zip 27282	6. Phone 336-454-4234	9. Amendment <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Type of Committee (Check one and complete the respective information required below.)						
<input checked="" type="checkbox"/> 10. Candidate Committee <input type="checkbox"/> Primary Candidate Committee						
<i>(If office sought is nonpartisan, write "Nonpartisan" in (d) Party Affiliation.)</i>						
a. Name of Candidate John Parks		b. Candidate ID Number —	c. Office Commissioner	d. Party Affiliation Democrat	e. Dist/Cty/Mun County AT-Large	
<input type="checkbox"/> 11. Joint Candidate Committee or Fundraiser <input type="checkbox"/> Primary Candidate Committee						
a. If Fundraiser, Name of Event			b. If Fundraiser, Event Location			
c. Candidate Names			d. Candidate ID Number	e. Office	f. Party Affiliation	g. Share of Profits %
						%
						%
						%
<input type="checkbox"/> 12. Party Committee						
a. Type (Check one)					b. Party	
<input type="checkbox"/> National		<input type="checkbox"/> State		<input type="checkbox"/> Subordinate		
<input type="checkbox"/> 13. General Political Committee						
a. Category (Check one)						
<input type="checkbox"/> Banking/Finance		<input type="checkbox"/> Conservative/Liberal		<input type="checkbox"/> Health	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Trade
<input type="checkbox"/> Building/Real Estate		<input type="checkbox"/> Environment		<input type="checkbox"/> Insurance	<input type="checkbox"/> Minority	<input type="checkbox"/> Utilities
<input type="checkbox"/> Religious		<input type="checkbox"/> Get Out the Vote		<input type="checkbox"/> Legal	<input type="checkbox"/> Information Tech/Telecommunications	
<input type="checkbox"/> Political Party not part of the Party Plan of Organization						
<input type="checkbox"/> Other:						
b. Type (Check one)			c. Definition of Type			
<input type="checkbox"/> Parent Entity		<input type="checkbox"/> Political Purpose				
<input type="checkbox"/> Economic Interest						
d. Member Definition						
Connected Organization or Affiliated Committee						
e. Name		f. Mailing Address (include city, state, & zip)			g. Relationship	
<input type="checkbox"/> 14. Referendum Committee						
a. Name of Referendum			b. Referendum Date		c. Declaration (Check one)	
					<input type="checkbox"/> Support	
					<input type="checkbox"/> Oppose	

Statement of Organization

15. Treasurer Information					
a. Name	b. Address	c. City	d. State	e. Zip	f. Phone
John Parks	3313 Colony Drive	Jamestown	NC	27282	336-434-4254
g. Email Address					
16. Assistant Treasurer Information					
a. Name	b. Address	c. City	d. State	e. Zip	f. Phone
g. Email Address					
17. Custodian of Books Information					
a. Name	b. Address	c. City	d. State	e. Zip	f. Phone
g. Email Address					
18. Bank/Depository/Credit Account Information					
a. Name	b. Address	c. City	d. State	e. Zip	f. Acct Type & Number
High Point Bank + Trust	300 North Main Street	High Point	NC	27260	Checking 040-134246
g. Purpose				h. Code	
g. Purpose				h. Code	
Receipts and disbursements					001
19. Certification of Threshold (for Candidate and Party Committees Only)					
<input type="checkbox"/> I certify that this committee intends to neither receive nor expend more than \$3,000 during the campaign under the procedures set forth in G.S. 163-278.10A. This certification will remain until the end of the election cycle for this committee. I further understand that should the above circumstances change at any time during the election cycle, it will be necessary for the person responsible for filing financial reports to immediately notify the appropriate Board of Elections Campaign Reporting Office and to commence filing campaign reports with the next scheduled report; such report to include all funds received and spent since the beginning of the committee's current election cycle. By checking this box, I am not required to file an organizational report.					
<input type="checkbox"/> I am amending this Statement of Organization to withdraw my Certification to remain under the \$3000 threshold. I will now be required to file a report of all contributions and expenditures from the beginning of the election cycle that have not been previously reported. This report will be referred to as a "Threshold Report". I further agree to file all future reports required.					
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.					
 _____ Signature of Appointed Treasurer or Candidate				 _____ Date	