


Disclosure Report Cover Sheet

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

1. Name of Committee or Fund					6. Date	
Arnold J. Koonce, Jr. - Campaign For Mayor					7/8/2002	
2. Address					7. ID Number	
1002 Nuthatch Court						
3. City			4. State	5. Zip	8. Phone	
High Point			NC	27262	336-882-1320	
9. Type of Report				10. Period Covered		11. Amendment
2002 Second Quarter Report				Start	4/21/02	<input type="checkbox"/> Yes
				End	6/30/02	<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"/> "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						
Mrs. Julia C. Haworth 915 Flicker Lane High Point, NC 27262						
14. Assistant Treasurer Name(s)						
15. Custodian of Books Name						
Mrs. Julia C. Haworth 915 Flicker Lane High Point, NC 27262						
16. Bank/Depository/Credit Account Information						
a. Name	b. Purpose			c. Code	d. Period Begin Balance	
Wachovia - Westchester Drive	For all campaign expenses			004	\$ 542.61	
Arnold J. Koonce, Jr. - Campaign For Mayor					\$	
# 4026 303004 (Checking)					\$	
					\$	
<p>CERTIFICATION</p> <p>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.</p> <p> Signature of Appointed Treasurer or Candidate</p> <p><u>7/8/2002</u> Date</p>						

Detailed Summary

1. Name of Committee or Fund	Campaign	2. Type of Report	3. ID Number
Arnold J. Koonce, Jr. - For Mayor		2002 Second Quarter	
Start of Election Cycle: January 1, 2002		Total this Period	Total this Election Cycle
4) Cash on Hand at Start of Election Cycle			\$ 517.61
5) Cash on Hand at Start of Present Reporting Period		\$ 542.61	
RECEIPTS			
6) Contributions from Individuals	(CRO-1210)	\$ 3,815.50	\$ 3,865.50
7) Contributions from Political Party Committees	(CRO-1220)	\$.00	\$.00
8) Contributions from Other Political Committees	(CRO-1230)	\$.00	\$.00
9) Loan Proceeds	(CRO-1410)	\$.00	\$.00
10) Refunds and Reimbursements TO the Committee	(CRO-1240)	\$.00	\$.00
11) Other Receipt Sources	(CRO-1250)		
11a) Interest on Bank Accounts	(CRO-1250)	\$.00	\$.00
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$.00	\$.00
11c) Outside Sources of Income	(CRO-1250)	\$.00	\$.00
12) "Goods and Services" Contributions	(CRO-1260)	\$.00	\$.00
13) Contributions based on Forgiven Loans	(CRO-1440)	\$.00	\$.00
14) 48-Hour Notice Reports Sum		\$.00	\$.00
15) TOTAL RECEIPTS <i>(Add lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 12, 13, and 14)</i>		\$ 3,815.50	\$ 3,865.50
EXPENDITURES			
16) Disbursements	(CRO-1310)		
16a) Operating Expenditures	(CRO-1310)	\$ 57.25	\$ 82.25
16b) Contributions to Candidates/Political Committees	(CRO-1310)	\$.00	\$.00
16c) Coordinated Party Expenditures	(CRO-1310)	\$.00	\$.00
17) Loan Repayments	(CRO-1420)	\$.00	\$.00
18) Forgiven Loans	(CRO-1440)	\$.00	\$.00
19) Refunds and Reimbursements FROM the Committee	(CRO-1320)	\$.00	\$.00
20) In-Kind Contributions	(CRO-1510)	\$.00	\$.00
21) TOTAL EXPENDITURES <i>(Add lines 16a, 16b, 16c, 17, 18, 19, and 20)</i>		\$ 57.25	\$ 82.25
22) Cash on Hand at End of Reporting Period <i>(For this Period, add lines 5 and 12 together, then subtract line 17)</i> <i>(For this Election Cycle, add lines 4 and 12 together, then subtract line 17)</i>		\$ 4,300.86	\$ 4,300.86
Additional Information			
23) Non-Monetary Gifts Given to Committees	(CRO-1330)	\$.00	
24) Outstanding Loans (including ones from other campaigns)	(CRO-1430)	\$.00	
25) Debts and Obligations owed BY the Committee	(CRO-1610)	\$.00	
26) Debts and Obligations owed TO the Committee	(CRO-1620)	\$.00	
27) Parent Entity's Administrative Support	(CRO-1710)	\$.00	
28) Account Transfers	(CRO-1720)	\$.00	

Contributions from INDIVIDUALS

1. Name of Committee or Fund				2. ID Number			
Arnold J. Koonce, Jr. - Campaign For Mayor							
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
	Aggregated Individual Contribution	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
					<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)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Aggregated Individual Contribution	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.00
					<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)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Aggregated Individual Contribution	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
					<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)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Aggregated Individual Contribution	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.00
					<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)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Aggregated Individual Contribution	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.00
					<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		
					\$		
4. Total only this Page							\$ 350.00
5. Total of ALL CRO-1210 Pages (only show on last page)							\$
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

Contributions from INDIVIDUALS

1. Name of Committee or Fund				2. ID Number			
Arnold J. Koonce, Jr. - Campaign For Mayor							
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
	T. Carey Ilderton 424 Hillcrest Drive High Point, NC 27262	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 200.00
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession							\$
Retired							\$
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
	Aggregated Individual Contribution	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 75.00
					<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
	Aggregated Individual Contribution	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 25.00
					<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
	Robert J. Brown 1129 Pennywood Road High Point, NC 27265	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 250.00
		CODE 541			<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession							\$
Public Relations President							\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:			k. Election Cycle Sum to Date		
B & C ASSOCIATES, INC		<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
	Aggregated Individual Contribution	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
					<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							\$ 650.00
5. Total of ALL CRO-1210 Pages (only show on last page)							\$
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

Contributions from INDIVIDUALS

1. Name of Committee or Fund						2. ID Number	
Arnold J. Koonce, Jr. - Campaign For Mayor							
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
	Julia C. Haworth 915 Flicker Lane High Point, NC 27262	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 200.00
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession							\$
Retired							\$
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
	Aggregated Individual Contribution	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 25.00
					<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
	Mrs. J. T. Coggin 1032 Rockford Road High Point, NC 27262	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 200.00
		CODE 337			<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession							\$
Director							\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
Thayer Coggin, Inc.		<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
	Aggregated Individual Contribution	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
					<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
	Aggregated Individual Contribution	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 25.00
					<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						\$ 550.00	
5. Total of ALL CRO-1210 Pages						\$	
(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	
Arnold J. Koonce, Jr. - Campaign For Mayor							
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
	Aggregated Individual Contribution	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.00
					<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
	Aggregated Individual Contribution	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 25.00
					<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
	Aggregated Individual Contribution	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
					<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
	Aggregated Individual Contribution	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
					<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
	Aggregated Individual Contribution	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.50
					<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							\$ 325.50
5. Total of ALL CRO-1210 Pages <small>(only show on last page)</small>							\$
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							\$

Contributions from INDIVIDUALS

1. Name of Committee or Fund				2. ID Number			
Arnold J. Koonce, Jr. - Campaign For Mayor							
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
	Carter D. Ingram 1128 Kensington Drive High Point, NC 27262	004	Check	5/6/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 200.00
					<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							
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
	H. B. Leonard, Jr. 1321 Greenway High Point, NC 27262	004	Check	5/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 250.00
					<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							
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
	Coy O. Williard, Jr. 449 West Wrenn Street High Point, NC 27260	004	Check	5/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 125.00
		CODE 236			<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				
President	<input type="checkbox"/> Add	<input type="checkbox"/> Delete	\$				
c. Employer's Name/Specific Field	Contractor						
	Williard-Stewart, Inc.						
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
	Nido R. Qubein P. O. Box 6008 High Point, NC 27262	004	check	5/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 300.00
		CODE 541			<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				
President	<input type="checkbox"/> Add	<input type="checkbox"/> Delete	\$				
c. Employer's Name/Specific Field	Consultant						
	Creative Services, Inc.						
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
	Aggregated Individual Contribution	004	Check	5/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
					<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				
	<input type="checkbox"/> Add	<input type="checkbox"/> Delete	\$				
c. Employer's Name/Specific Field							
4. Total only this Page							\$ 975.00
5. Total of ALL CRO-1210 Pages (only show on last page)							\$
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

Contributions from INDIVIDUALS

1. Name of Committee or Fund						2. ID Number	
Arnold J. Koonce, Jr. - Campaign For Mayor							
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
	Aggregated Individual Contribution	004	Check	5/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
					<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
	Aggregated Individual Contribution	004	Check	5/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
					<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
	Aggregated Individual Contribution	004	Check	5/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
					<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
	Aggregated Individual Contribution	004	Check	5/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 75.00
					<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
	Aggregated Individual Contribution	004	Check	5/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.00
					<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							\$ 425.00
5. Total of ALL CRO-1210 Pages (only show on last page)							\$
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

Contributions from INDIVIDUALS

1. Name of Committee or Fund				2. ID Number			
Arnold J. Koonce, Jr. - Campaign For Mayor							
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
	Aggregated Individual Contribution	004	Check	5/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 15.00
					<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
	Aggregated Individual Contribution	004	Check	5/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 25.00
					<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
	Aggregated Individual Contribution	004	Check	5/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.00
					<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
	Aggregated Individual Contribution	004	Check	5/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.00
					<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
	J. Henry Dowdy 102 Bay Drive Morehead City, NC 28557	004	Check	5/20/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 150.00
					<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							\$ 290.00
5. Total of ALL CRO-1210 Pages (only show on last page)							\$
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

Contributions from INDIVIDUALS

1. Name of Committee or Fund						2. ID Number	
Arnold J. Koonce, Jr. - Campaign For Mayor							
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
	Aggregated Individual Contribution	004	Check	6/17/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.00
					<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
	Aggregated Individual Contribution	004	Check	6/17/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
					<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
	Aggregated Individual Contribution	004	Check	6/28/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
					<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						\$ 250.00	
5. Total of ALL CRO-1210 Pages (only show on last page)						\$ 3,815.50	
<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		
Arnold J. Koonce, Jr. - Campaign For Mayor								
3. Type of Disbursement <i>(Please use separate CRO-1330 forms for each type of Disbursements.)</i>								
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees			<input type="checkbox"/> Coordinated Party Expenditures			
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Wachovia - Withdrawal Check Printing Fee			Printing	004	Bank	5/22/02	\$ 23.25
						Fee		\$
								\$
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			\$ 23.25	
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
	Arnold J. Koonce, Jr. 1002 Nuthatch Court High Point, NC 27262			Postage	004	Check	6/25/02	\$ 34.00
								\$
								\$
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			\$ 59.00	
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							\$ 57.25	
6. Total of ALL CRO-1310 Related Pages <i>(only show on last page)</i>							\$ 57.25	
<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>								