

RECEIVED

JUL 10 2002

GUILFORD COUNTY

BOARD OF ELECTIONS

Disclosure Report Cover Sheet

Please note that this cover sheet cannot be used to amend committee information such as 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 <b>Jeff L. Thigpen Campaign</b>			6. Date <b>7/9/2002</b>	
2. Address <b>2111 Maywood Street</b>			7. ID Number	
3. City <b>Greensboro</b>	4. State <b>NC</b>	5. Zip <b>27403</b>	8. Phone	
9. Type of Report <b>2<sup>nd</sup> Quarter</b>			10. Period Covered Start <b>4/21/02</b> End <b>6/30/02</b>	11. Amendment <input type="checkbox"/> Yes <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

**James Peavy      509 Wicker Street      Greensboro      NC      27403**

14. Assistant Treasurer Name(s)

15. Custodian of Books Name

**James Peavy      509 Wicker Street      Greensboro      NC      27403**

16. Bank/Depository/Credit Account Information

a. Name	b. Purpose	c. Code	d. Period Begin Balance
<b>FIRST UNION</b>	<b>CAMPAIGN CHECKING</b>	<b>0001</b>	<b>\$ 1444.35</b>
			\$
			\$
			\$
			\$
			\$

**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

**7/9/2002**  
\_\_\_\_\_  
Date

## Detailed Summary

1. Name of Committee or Fund	2. Type of Report		3. ID Number	
Jeff L. Thigpen Campaign	2 <sup>nd</sup> Quarter			
Start of Election Cycle: January 1, 20____	Total this Period	Total this Election Cycle	For Office Use Only	
4) Cash on Hand at Start of Election Cycle		\$ 1444.35		
5) Cash on Hand at Start of Present Reporting Period	\$ 1444.35			
<b>RECEIPTS</b>				
6) Contributions from Individuals (2 pages) (CRO-1210)	\$ 2490.00	\$ 4125.00		
7) Contributions from Political Party Committees (CRO-1220)	\$ 0	\$ 0		
8) Contributions from Other Political Committees (CRO-1230)	\$ 0	\$ 0		
9) Loan Proceeds (CRO-1410)	\$ 0	\$ 147.00		
10) Refunds & Reimbursements to Committee (CRO-1240)	\$ 0	\$ 0		
11) Other Receipt Sources (CRO-1250)				
11a) Interest on Bank Accounts (CRO-1250)	\$ 0	\$ 0		
11b) Contributions from Not-for-Profit Organizations (CRO-1250)	\$ 0	\$ 0		
11c) Outside Sources of Income (CRO-1250)	\$ 0	\$ 0		
12) TOTAL RECEIPTS (Add lines 6, 7, 8, 9, 10, 11a, 11b, and 11c)	\$ 2490.00	\$ 4272.00		
<b>EXPENDITURES</b>				
13) Disbursements (CRO-1310)				
13a) Operating Expenditures (1 page) (CRO-1310)	\$ 299.39	\$ 637.04		
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 0	\$ 0		
13c) Coordinated Party Expenditures (CRO-1310)	\$ 0	\$ 0		
14) Loan Repayments (1 page) (CRO-1420)	\$ 147.00	\$ 147.00		
15) Refunds from Committee (CRO-1320)	\$ 0	\$ 0		
16) In-Kind Contributions (CRO-1510)	\$ 0	\$ 0		
17) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, and 16)	\$ 446.39	\$		
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)	\$ 3487.96	\$ 3487.96		
<b>Additional Information</b>				
19) Non-Monetary Gifts Given to Committees (CRO-1330)	\$ 0			
20) Outstanding Loans (including ones from other campaigns) (CRO-1430)	\$ 0			
21) Debts and Obligations owed BY the Committee (CRO-1610)	\$ 0			
22) Debts and Obligations owed TO the Committee (CRO-1620)	\$ 0			
23) Parent Entity's Administrative Support (CRO-1710)	\$ 0			

**Disbursements**

<b>1. Name of Committee or Fund</b>						<b>2. ID Number</b>		
Jeff L. Thiipen Campaign								
<b>3. Type of Disbursement</b> <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	<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>
	Jeff Thiipen (candidate)			vc pay ban	0001	check	4/29/02	\$ 147.00
								\$
								\$
<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>			<b>j. Election Cycle Sum To Date</b>	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$	
4. Payee	<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>
	Arrowhead Graphics 508 Houston Street Greensboro NC 27401-2332			Postage <sup>return</sup> printing	0001	check	4/29/02	\$ 111.83
								\$
								\$
<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>			<b>j. Election Cycle Sum To Date</b>	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$ 111.83	
4. Payee	<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>
	OFFICE DEPOT HIGH POINT ROAD Greensboro, NC			Supplies	0001	check	4/29/02	\$ 14.89
				Supplies	0001	check	5/19/02	\$ 13.42
				Supplies	0001	check	5/28/02	\$ 12.25
<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>			<b>j. Election Cycle Sum To Date</b>	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$ 40.56	
4. Payee	<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>			<b>j. Election Cycle Sum To Date</b>	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$	
4. Payee	<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>			<b>j. Election Cycle Sum To Date</b>	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$	
<b>5. Total only this Page</b>							\$ 299.39	
<b>6. Total of ALL CRO-1310 Related Pages</b> <i>(only show on last page)</i>							\$ 299.39	
<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>								

**Contributions from INDIVIDUALS**

1. Name of Committee or Fund				2. ID Number			
Jeff L. Thigpen Campaign							
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
	unitemized 2 - \$100 11 contributors 7 - \$50 2 - \$25	0001	checks	4/24/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 595.00
					<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
	unitemized 2 - \$50	0001	checks	4/30/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
					<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
	unitemized 4 - \$100 1 - \$20 5 - \$50 1 - \$15 4 - \$25 1 - \$10	0001	checks	5/1/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 795.00
					<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
	Mr. Reid Phillips 802 Blanton Place Greensboro NC 27408	0001	check	5/8/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 250.00
					<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			
Brooks, Pierce		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 250.00			
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
	unitemized 2 - \$50 2 - \$25	0001	checks	5/8/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 150.00
					<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		\$			
<b>4. Total only this Page</b>							<b>\$ 1,890.00</b>
<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			
Jeff L. Thigpen Campaign							
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
	Mr. William Knox 3432 EDGEFIELD ROAD GREENSBORO NC 27409	0001	check	5/12/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 250.00
	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			\$ 250.00
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
	unitemized 3- \$100 5 contributors 2- \$25	0001	check	5/19/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 350
	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
					<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
					<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
					<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
					<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			\$
<b>4. Total only this Page</b>							\$ 600.00
<b>5. Total of ALL CRO-1210 Pages</b> (only show on last page)							\$ 2490.00
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

# Loan Repayments

1. Name of Committee or Fund			2. ID Number		
Jeff L. Thiqpen Campaign					
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/yyyy)	g. Account Number/Code	
	Jeff Thiqpen (Candidate)		4/29/02	0001	
		d. Original Loan Amount	e. Remaining Balance of Loan		h. Form of Payment
		\$ 147.00	\$ 0		check
		f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			i. Repayment Amount
			\$ 147.00		
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/yyyy)	g. Account Number/Code	
	d. Original Loan Amount	e. Remaining Balance of Loan		h. Form of Payment	
	\$	\$			
	f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			i. Repayment Amount	
			\$		
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/yyyy)	g. Account Number/Code	
	d. Original Loan Amount	e. Remaining Balance of Loan		h. Form of Payment	
	\$	\$			
	f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			i. Repayment Amount	
			\$		
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/yyyy)	g. Account Number/Code	
	d. Original Loan Amount	e. Remaining Balance of Loan		h. Form of Payment	
	\$	\$			
	f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			i. Repayment Amount	
			\$		
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/yyyy)	g. Account Number/Code	
	d. Original Loan Amount	e. Remaining Balance of Loan		h. Form of Payment	
	\$	\$			
	f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			i. Repayment Amount	
			\$		
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/yyyy)	g. Account Number/Code	
	d. Original Loan Amount	e. Remaining Balance of Loan		h. Form of Payment	
	\$	\$			
	f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			i. Repayment Amount	
			\$		
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/yyyy)	g. Account Number/Code	
	d. Original Loan Amount	e. Remaining Balance of Loan		h. Form of Payment	
	\$	\$			
	f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			i. Repayment Amount	
			\$		
<b>4. Total only this Page</b>				\$ 147.00	
<b>5. Total of ALL CRO-1420 Pages</b> (only show on last page)				\$ 147.00	
<i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					