


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	
JEFF L. THOMPEN CAMPAIGN			10/28/2002	
2. Address			7. ID Number	
2111 Maywood Street				
3. City	4. State	5. Zip	8. Phone	
Greensboro NC	NC	27403		
9. Type of Report		10. Period Covered		11. Amendment
		Start 8/24/02		<input type="checkbox"/> Yes
		End 10/19/02		<input 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 PENNY 509 Wicker St. Greensboro 27403				
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	
First Union	CAMPAIGN CHECKING	0001	\$ 3487.96	
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
<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>				
 _____ Signature of Appointed Treasurer or Candidate			10/28/02 _____ Date	

Detailed Summary

1. Name of Committee or Fund	2. Type of Report	3. ID Number	
JEFF LTHISPER CAMPAIGN	3rd Quarter Plus		
Start of Election Cycle: January 1, 20____	Total this Period	Total this Election Cycle	
4) Cash on Hand at Start of Election Cycle		\$ 1060.98	
5) Cash on Hand at Start of Present Reporting Period	\$ 1060.98		
RECEIPTS			
6) Contributions from Individuals (3 pages)	(CRO-1210)	\$ 7645.00	\$ 11770.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0	\$ 0
8) Contributions from Other Political Committees (1 Page)	(CRO-1230)	\$ 150.00	\$ 150.00
9) Loan Proceeds	(CRO-1410)	\$ 0	\$ 147.00
10) Refunds and Reimbursements TO the 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) "Goods and Services" Contributions	(CRO-1260)	\$ 0	\$ 0
13) Contributions based on Forgiven Loans	(CRO-1440)	\$ 0	\$ 0
14) 48-Hour Notice Reports Sum		\$ 0	\$ 0
15) TOTAL RECEIPTS (Add lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 12, 13, and 14)		\$ 7795.00	\$ 12,067.00
EXPENDITURES			
16) Disbursements	(CRO-1310)		
16a) Operating Expenditures (4 pages)	(CRO-1310)	\$ 3105.58	\$ 6316.60
16b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0	\$ 0
16c) Coordinated Party Expenditures	(CRO-1310)	\$ 0	\$ 0
17) Loan Repayments	(CRO-1420)	\$ 0	\$ 147.00
18) Forgiven Loans	(CRO-1440)	\$ 0	\$ 0
19) Refunds and Reimbursements FROM the Committee	(CRO-1320)	\$ 0	\$ 0
20) In-Kind Contributions	(CRO-1510)	\$ 0	\$ 0
21) TOTAL EXPENDITURES (Add lines 16a, 16b, 16c, 17, 18, 19, and 20)		\$ 3105.58	\$ 6463.60
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)		\$ 4689.42	\$ 5607.40
Additional Information			
23) Non-Monetary Gifts Given to Committees	(CRO-1330)	\$ 0	
24) Outstanding Loans (including ones from other campaigns)	(CRO-1430)	\$ 0	
25) Debts and Obligations owed BY the Committee	(CRO-1610)	\$ 0	
26) Debts and Obligations owed TO the Committee	(CRO-1620)	\$ 0	
27) Parent Entity's Administrative Support	(CRO-1710)	\$ 0	
28) Account Transfers	(CRO-1720)	\$ 0	

Contributions from OTHER POLITICAL COMMITTEES

1. Name of Committee or Fund <i>Jeff Magnen Campaign</i>						2. ID Number	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)		b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. In-Kind	f. Amount
	<i>Mel Watt for Congress</i> <i>P.O. Box 36831</i> <i>Charlotte NC 28236</i>		<i>0001</i>	<i>check</i>	<i>9/25/02</i>	<input type="checkbox"/>	<i>\$ 150.00</i>
g. Type of Committee <input checked="" type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> County:		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		i. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)		b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. In-Kind	f. Amount
						<input type="checkbox"/>	\$
g. Type of Committee <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> County:		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		i. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)		b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. In-Kind	f. Amount
						<input type="checkbox"/>	\$
g. Type of Committee <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> County:		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		i. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)		b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. In-Kind	f. Amount
						<input type="checkbox"/>	\$
g. Type of Committee <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> County:		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		i. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)		b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. In-Kind	f. Amount
						<input type="checkbox"/>	\$
g. Type of Committee <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> County:		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		i. Election Cycle Sum to Date \$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)		b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. In-Kind	f. Amount
						<input type="checkbox"/>	\$
g. Type of Committee <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> County:		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		i. Election Cycle Sum to Date \$			
4. Total only this Page						\$	
5. Total of ALL CRO-1230 Pages <i>(This line must be on line 8 of Detailed Summary Page CRO-1100)</i>						<i>(only show on last page)</i> \$ <i>150.00</i>	

Contributions from INDIVIDUALS

1. Name of Committee or Fund				2. ID Number			
JEFF L. THISPEN 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
	4 @ \$100.00 1 @ \$50.00 1 @ \$25.00	0001	checks	9/3/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 475.00
	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
	7 @ \$50 2 @ \$15 6 @ \$25 2 @ \$10	0001	checks	9/3/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 550.00
	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
	4 @ \$100 1 @ 35 6 @ \$50	0001	checks	10/4/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 735.00
	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
	2 @ \$100 1 @ \$100 (cash) 3 @ \$50 4 @ \$25	0001 0001	checks cash	10/8/02 10/8/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 450.00 \$ 100.00
	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
	Helen Allegro 925 New Garden # 721 Greensboro 27410		check check	10/16/02 10/16/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 25.00 \$ 250.00
	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		\$ 275.00			
4. Total only this Page							\$ 2585.00
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			
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
	Florence Kruses Gatten 3507 Smoketree Drive Greensboro NC 27410	0001	check	10/16/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	consultant				<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Gatten Enterprises	<input type="checkbox"/> Add	<input type="checkbox"/> Delete	\$ 200.00				
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
	Wayes Clement 8 Sturbridge Lane Greensboro 27408	0001	check	10/16/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	Retired				<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Accountant	<input type="checkbox"/> Add	<input type="checkbox"/> Delete	\$ 150.00				
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
	Judy Bailey 914 Spring Garden Greensboro 27403	0001	check	10/16/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 200.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	Administration				<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Gulford College	<input type="checkbox"/> Add	<input type="checkbox"/> Delete	\$ 200.00				
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
	Nancy Warren 500 S. Mendenhall St Greensboro 27403	0001	check	10/16/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 200.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	graphic artist				<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
self employed	<input type="checkbox"/> Add	<input type="checkbox"/> Delete	\$ 200.00				
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
	Theresa Miller 904 Willowbrook Drive Greensboro 27403	0001	check	10/16/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	unable to obtain				<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							\$ 700
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
	Thomas Ross 605 Wellington Rd Winston-Salem 27106	0001	check	10/16/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	Executive Director				<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Z SMITH REYNOLDS	<input type="checkbox"/> Add	<input type="checkbox"/> Delete	\$ 200.00				
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
	Timothy Burnett 810 Country Club Greensboro 27408	0001	check	10/16/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 500.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	Management				<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Bessemer Development	<input type="checkbox"/> Add	<input type="checkbox"/> Delete	\$ 600.00				
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
	W.L. Hemphill 7 St. Augustine Rd ^{Square} Greensboro NC 27408	0001	check	10/16/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 250.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	retired				<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	\$ 350.00				
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
	William Knox 3432 Edgetield Rd Greensboro 27409	0001	check	10/16/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 250.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	retired teacher				<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
DNCC	<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
	1 @ \$5. 1 @ \$20 1 @ \$35 4 @ \$10 15 @ \$25 1 @ \$40 1 @ \$15 1 @ \$30 19 @ \$50 2 @ \$75 16 @ \$100				<input type="checkbox"/>	<input type="checkbox"/>	\$ 3260.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
					<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							\$ 4360.00
5. Total of ALL CRO-1210 Pages (only show on last page)							\$ 7645.00
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

Disbursements

1. Name of Committee or Fund JEFF L. THIGPEN CAMPAIGN						2. ID Number	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursements.)							
<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
	Lindley Park Neighborhood Association		advertising	0001	check	9/25/02	\$ 25.00
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		\$ 125.00	
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
	Lowe's Home Improvement		supplies	0001	check	9/26/02	\$ 40.20
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		\$ 86.42	
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
	Lowe's Home Improvement		supplies	0001	check	10/10/02	\$ 20.76
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		\$ 105.49	
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
	Office Depot		supplies	0001	check	9/23/02	\$ 3.73
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		\$ 258.55	
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
	Quality Mart 4650 W. Market St. Greensboro		gas	0001	check	9/26/02	\$ 4.21
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		\$ 4.21	
5. Total only this Page							\$ 000.00 138.43
6. Total of ALL CRO-1310 Related Pages (only show on last page)							\$ 000.00
(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)							

Disbursements

1. Name of Committee or Fund						2. ID Number	
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
	Quick Shop 4007 Burlington Rd Greensboro NC		gas	0001	check	9/23/02	\$ 10.20
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date \$ 10.20	
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
	Staples		supplies	0001	check	9/3/02	\$ 51.10
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date \$ 51.10	
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
	Steakout Friendly Ave Greensboro		food	0001	check	9/25/02	\$ 9.05
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date \$ 9.05	
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
	The Mailing Service 1 Wendy Court St. F Greensboro NC		printing	0001	check	9/11/02	\$ 343.20
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date \$ 343.20	
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
	U.S Post Master		postage	0001	check	8/30/02	\$ 75.00
			"	001	check	9/11/02	\$ 59.20
			"	001	check	9/16/02	\$ 22.20
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date \$ 156.40	
5. Total only this Page							\$ 569.95
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>							\$

Disbursements

1. Name of Committee or Fund						2. ID Number	
3. Type of Disbursement (Please use separate CRO-1330 forms for each type of Disbursements.)							
<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
	U.S. Postmaster		postage	0001	check	10/1/02	\$ 7.40
			"	0001	check	10/7/02	\$ 953.36
			"	0001	check	10/15/02	\$ 74.00
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		\$ 1034.76	
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
	U.S. Postmaster		postage	0001	check	10/17/02	\$ 100.00
							\$
							\$
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		\$ 1134.76	
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
	Womens Organization 4909 Tower Road Greensboro NC 27410		attend forum	0001	check	10/1/02 10/11/02	\$ 15.00
							\$
							\$
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		\$ 15.00	
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		\$	
5. Total only this Page						\$ 1149.76	
6. Total of ALL CRO-1310 Related Pages (only show on last page)						\$ 3105.58	
(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)							