


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	
Routh for Board of Education Committee				12-31-02	
2. Address				7. ID Number	
P.O. Box 115					
3. City		4. State	5. Zip	8. Phone	
Pleasant Garden		NC	27313	676-8215 674-7083	
9. Type of Report			10. Period Covered		11. Amendment
4th Qtr & Final for 1-9-03			Start	10-20-02	<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"/> Soft Money Account	
<input type="checkbox"/> Other Fund: _____				<input type="checkbox"/> "Booster Fund"	
				<input type="checkbox"/> Building Fund	
13. Treasurer Name					
Alice R. Pyle					
14. Assistant Treasurer Name(s)					
15. Custodian of Books Name					
Nancy R. Routh					
16. Bank/Depository/Credit Account Information					
a. Name	b. Purpose	c. Code	d. Period Begin Balance		
First Citizens Bank	campaign account	-1851	\$ 5232.52		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
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				_____ 12-30-02 Date	

Detailed Summary

1. Name of Committee or Fund	2. Type of Report	3. ID Number	
Routh for Board of Ed. Comm	Disclosure Report		
Start of Election Cycle: January 1, 2022	Total this Period	Total this Election Cycle	
4) Cash on Hand at Start of Election Cycle		\$ - 0 -	
5) Cash on Hand at Start of Present Reporting Period	\$ 5232.52		
RECEIPTS			
6) Contributions from Individuals	(CRO-1210)	\$ 1075.00	\$ 19,705.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ 400.00	\$ 700.00
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$ 8500.00	\$ 23,500.00
10) Refunds and Reimbursements TO the Committee	(CRO-1240)	\$	\$ 50.00
11) Other Receipt Sources	(CRO-1250)		
11a) Interest on Bank Accounts	(CRO-1250)	\$ 1.41	\$ 9.49
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$ 210.00	\$ 760.00
12) "Goods and Services" Contributions	(CRO-1260)	\$	\$
13) Contributions based on Forgiven Loans	(CRO-1440)	\$	\$
14) 48-Hour Notice Reports Sum		\$ 2,000.00	\$ 2,000.00
15) TOTAL RECEIPTS (Add lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 12, 13, and 14)		\$ 12,186.41	\$ 46,724.49
EXPENDITURES			
16) Disbursements	(CRO-1310)		
16a) Operating Expenditures	(CRO-1310)	\$ 15,215.25	\$ 44,520.81
16b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$
16c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
17) Loan Repayments	(CRO-1420)	\$ 2,203.68	\$ 2,203.68
18) Forgiven Loans <i>see attached CRO-1440</i>	(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)		\$	\$
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)		\$ - 0 -	\$
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 INDIVIDUALS

1. Name of Committee or Fund				2. ID Number			
Routh for Board of Ed. Committee							
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Nancy S. Merritt 1916 Lafayette Ave Greensboro, N.C. 27408		ck	10/21/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 200 -
					<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			
	home maker	<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
	G.C. Smith 1212 Ritters Lake Dr. Greensboro, N.C. 27406		ck	10/21/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession	j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
	retired	<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$			
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
	Ron Taylor 205 Sunset Dr. Greensboro, N.C. 27408 275-0687		ck	10/25/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 150 -
					<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			
	Env. engineer	<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 1,150.00			
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
	Nancy Fuller 2105 Medford Ln. Greensboro N.C. 27408 275-2111		ck	10/25/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession	j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
	Librarian	<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 150 -			
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
	Gary Jobe 421 N. Edgeworth St Greensboro, N.C. - 27401 222-2772		ck	10/25/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 -
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession	j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
	Builder	<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$			
4. Total only this Page							\$ 600 -
5. Total of ALL CRO-1210 Pages (only show on last page)							\$
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

Contributions from INDIVIDUALS

1. Name of Committee or Fund				2. ID Number			
Routh for Board of Ed. Committee							
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Joan J. Humphill 7 St. Augustine Sq. Greensboro, N.C. 27405 282-6849		ck	10/29/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 150 -
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	home maker				<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
	Julius Fulmore 2006 Newcastle Rd. G'boro, N.C. 27406 273-7924		ck	10/29/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 125 -
	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: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Election Cycle Sum to Date			
				\$ 370 -			
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
	Ruth Oliver 2007 Brassfield Rd. Greensboro, N.C. 27410 286-9635		ck	10/29/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 -
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	realtor				<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
	Yvonne F. Maske 5117 Liberty Rd. Greensboro, N.C. 27406		ck	11/06/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 -
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	office man				<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"/>	\$
					<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							\$ 475 -
5. Total of ALL CRO-1210 Pages (only show on last page)							\$ 1075 -
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

Contributions from POLITICAL PARTY COMMITTEES

1. Name of Committee or Fund					2. ID Number	
Routh for Board of Education Committee						
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. In-Kind	f. Amount
	N.C. Realtors PAC 421 Fayetteville Street Mail Ste. 1109 Raleigh, NC 27601		CHECK	11/16/2002	<input type="checkbox"/>	\$ 400.00
					<input type="checkbox"/>	\$
					<input type="checkbox"/>	\$
g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				h. Election Cycle Sum to Date \$ 400.00		
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"/>	\$
					<input type="checkbox"/>	\$
					<input type="checkbox"/>	\$
g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				h. 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"/>	\$
					<input type="checkbox"/>	\$
					<input type="checkbox"/>	\$
g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				h. 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"/>	\$
					<input type="checkbox"/>	\$
					<input type="checkbox"/>	\$
g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				h. 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"/>	\$
					<input type="checkbox"/>	\$
					<input type="checkbox"/>	\$
g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				h. 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"/>	\$
					<input type="checkbox"/>	\$
					<input type="checkbox"/>	\$
g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				h. Election Cycle Sum to Date \$		
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1220 Pages (only show on last page)					\$ 400.00	
(This line must be on line 7 of Detailed Summary Page CRO-1100)						

Other Receipt Sources

1. Name of Committee or Fund				2. ID Number	
Routh for Board of Education Committee					
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>					
<input type="checkbox"/> Interest		<input type="checkbox"/> Contributions from Not-for-Profit Organizations		<input checked="" type="checkbox"/> Outside Sources of Income	
4. 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. Amount
	Cash contributions	Political Contributions	Cash	various	\$ 210.00
					\$
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		h. If Not-for-Profit, list Fed ID #:	
4. 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. Amount
					\$
					\$
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		h. If Not-for-Profit, list Fed ID #:	
4. 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. Amount
					\$
					\$
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		h. If Not-for-Profit, list Fed ID #:	
4. 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. Amount
					\$
					\$
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		h. If Not-for-Profit, list Fed ID #:	
4. 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. Amount
					\$
					\$
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		h. If Not-for-Profit, list Fed ID #:	
5. Total only this Page					\$ 210.00
6. Total of ALL CRO-1250 Related Pages <i>(only show on last page)</i>					\$
<i>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</i>					
<i>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</i>					\$ 210.00
<i>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</i>					

Disbursements

1. Name of Committee or Fund <i>Routh for Board of Education Committee</i>						2. ID Number		
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>Carolina Peacemaker 400 Summit Avenue Greensboro, NC 27405 (336) 273-5103</i>			<i>advertising</i>	<i>advertising</i>	<i>check</i>	<i>10/21/2002</i>	<i>\$ 240.00</i>
	<i>advertising</i>			<i>advertising</i>	<i>check</i>	<i>11/08/2002</i>	<i>\$ 120.00</i>	<i>\$</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		<i>\$ 360.00</i>		
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>Greensboro Times 21 Loney Circle Greensboro, NC 27406 (336) 273-0840</i>			<i>advertising</i>	<i>advertising</i>	<i>check</i>	<i>10/21/2002</i>	<i>\$ 700.00</i>
	<i>\$</i>							<i>\$</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		<i>\$ 700.00</i>		
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>Blackwelder Communications 1700 Elkhart Drive Greensboro, NC 27408 (336) 288-6235</i>			<i>mailing</i>	<i>campaign expense</i>	<i>check</i>	<i>10/23/2002</i>	<i>\$ 4800.00</i>
	<i>mailing & advertising</i>			<i>advertising</i>	<i>check</i>	<i>10/29/2002</i>	<i>\$ 7950.00</i>	<i>\$</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		<i>\$ 12,750.00</i>		
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>Rhinoceros Times P.O. Box 9421 Greensboro, NC 27429 (336) 273-0885</i>			<i>advertising</i>	<i>advertising</i>	<i>check</i>	<i>10/25/2002</i>	<i>\$ 425.00</i>
	<i>advertising</i>			<i>advertising</i>	<i>check</i>	<i>11/07/2002</i>	<i>\$ 250.00</i>	<i>\$</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		<i>\$ 675.00</i>		
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>Mitzi Carpenter 8505 Cedar Hollow Road Greensboro, NC 27455 (336) 644-9890</i>			<i>graphics</i>	<i>campaign expense</i>	<i>check</i>	<i>1/04/2002</i>	<i>\$ 730.25</i>
	<i>\$</i>							<i>\$</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		<i>\$ 730.25</i>		
5. Total only this Page							<i>\$15,215.25</i>	
6. Total of ALL CRO-1310 Related Pages <i>(only show on last page)</i>							<i>\$</i>	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>							<i>\$</i>	
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>							<i>\$</i>	
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							<i>15,215.25</i>	

Loan Proceeds

1. Name of Committee or Fund			2. ID Number		
Routh for Board of Education Committee					
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	i. Account Number/Code
	Nancy R. Routh (candidate) P.O. Box 428 564 Pleasant Garden, NC 27313 (336) 674-7083	10/30/12			
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			check
		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Amount \$ 8500.00
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	i. Account Number/Code
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			
		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Amount \$
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	i. Account Number/Code
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			
		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Amount \$
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	i. Account Number/Code
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			
		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Amount \$
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	i. Account Number/Code
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			
		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Amount \$
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	i. Account Number/Code
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			
		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			k. Amount \$
4. Total only this Page				\$ 8500.00	
5. Total of ALL CRO-1410 Pages (only show on last page)				\$ 8500.00	
(This line must be on line 9 of Detailed Summary Page CRO-1100)					

Loan Repayments

1. Name of Committee or Fund			2. ID Number	
Routh for Board of Educ. Comm.				
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
	Nancy R. Routh (candidate) P.O. Box 564 Pleasant Garden, N.C. 27313 (336) 674-7083	1/29/02		-1851
		d. Original Loan Amount	e. Remaining Balance of Loan	h. Form of Payment
		\$ 5,000.00	\$ 2796.32	ck.
		f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		i. Repayment Amount
				\$ 2203.68
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
				\$
4. Total only this Page				\$
5. Total of ALL CRO-1420 Pages (only show on last page)				\$
(This line must be on line 14 of Detailed Summary Page CRO-1100)				\$

Forgiven Loans

A statement (CRO-6200) for each forgiven loan MUST be included with the report.

1. Name of Committee or Fund 2. ID Number

Routh for Board of Educ. Comm.

3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Forgiven Date (mm/dd/yyyy)	d. Election Cycle Sum to Date
	<i>Nancy R. Routh (candidate)</i>	<i>1/29/02</i>	<i>12/31/02</i>	\$
	<i>P.O. Box 564</i>	e. Original Loan Amount	f. Remaining Balance of Loan	g. Forgiven Amount
	<i>Pleasant Garden, N.C.</i>	\$ <i>5,000.00</i>	\$ <i>2,796.32</i>	\$ <i>2,796.32</i>
	<i>(336) 674-7083 27313</i>	h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		

3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Forgiven Date (mm/dd/yyyy)	d. Election Cycle Sum to Date
	<i>Nancy R. Routh Candidate</i>	<i>7/02/02</i>	<i>12/31/02</i>	\$
	<i>(same)</i>	e. Original Loan Amount	f. Remaining Balance of Loan	g. Forgiven Amount
		\$ <i>10,000.00</i>	\$ <i>10,000.00</i>	\$ <i>10,000.00</i>
		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		

3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Forgiven Date (mm/dd/yyyy)	d. Election Cycle Sum to Date
	<i>Nancy R. Routh</i>	<i>10/30/02</i>	<i>12/31/02</i>	\$
	<i>(same)</i>	e. Original Loan Amount	f. Remaining Balance of Loan	g. Forgiven Amount
		\$ <i>8,500.00</i>	\$ <i>8,500.00</i>	\$ <i>8,500.00</i>
		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		

3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Forgiven Date (mm/dd/yyyy)	d. Election Cycle Sum to Date
				\$
		e. Original Loan Amount	f. Remaining Balance of Loan	g. Forgiven Amount
		\$	\$	\$
		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		

3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Forgiven Date (mm/dd/yyyy)	d. Election Cycle Sum to Date
				\$
		e. Original Loan Amount	f. Remaining Balance of Loan	g. Forgiven Amount
		\$	\$	\$
		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		

3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Forgiven Date (mm/dd/yyyy)	d. Election Cycle Sum to Date
				\$
		e. Original Loan Amount	f. Remaining Balance of Loan	g. Forgiven Amount
		\$	\$	\$
		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		

4. Total only this Page \$ *21,296.32*

5. Total of ALL CRO-1440 Pages (only show on last page) \$ *21,296.32*
(all from candidate)
 (This line must be on lines 13 and 18 of Detailed Summary Page CRO-1100)

COPY

48-Hour Notice

To be Used by Committees to Report Contributions of over \$1,000

1. Committee Name <i>Routh for Board of Education Comm</i>						7. Date <i>Nov. 3, 2002</i>	
2. Committee Address <i>P.O. Box 115</i>						8. ID Number	
3. City <i>Pleasant Garden, N.C.</i>		4. State <i>27313</i>		5. Zip <i>(336) 676-8275 or 674-7083</i>		6. Phone	
10. Treasurer Name <i>Alice R. Pyle</i>						9. Amendment <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

11. Contributions Received (Submit multiple forms if additional space is required.)

a. Full Name, Mailing Address & Phone (include city, state, and zip) <i>NC Realtors PAC 421 Fayetteville St. Mall Ste. 1109 Raleigh, N.C. 27601</i>		b. Specify Type of Contributor: <input type="checkbox"/> Individual <input type="checkbox"/> Political Party <input checked="" type="checkbox"/> Other Political Committee <input type="checkbox"/> Not-for-Profit <input type="checkbox"/> Other Source: _____			c. If Not-for-Profit, list Fed ID #:		
g. Election Cycle Sum to Date \$		h. In-Kind <input type="checkbox"/>		i. Account Number/Code <i>First Citizens Bank check #2437</i>		j. Form of Payment <i>Nov. 2 '02</i>	
k. Date (mm/dd/yyyy)		l. Amount <i>\$2,000</i>		d. If Other Committee, specify Type of Committee: <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> County: _____		e. If Ind, list Job Title/Profession:	
f. If Ind, list Employer's Name/Specific Field:		e. If Ind, list Job Title/Profession:		f. If Ind, list Employer's Name/Specific Field:		g. Election Cycle Sum to Date \$	

a. Full Name, Mailing Address & Phone (include city, state, and zip)		b. Specify Type of Contributor: <input type="checkbox"/> Individual <input type="checkbox"/> Political Party <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Not-for-Profit <input type="checkbox"/> Other Source: _____			c. If Not-for-Profit, list Fed ID #:		
g. Election Cycle Sum to Date \$		h. In-Kind <input type="checkbox"/>		i. Account Number/Code		j. Form of Payment	
k. Date (mm/dd/yyyy)		l. Amount \$		d. If Other Committee, specify Type of Committee: <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> County: _____		e. If Ind, list Job Title/Profession:	
f. If Ind, list Employer's Name/Specific Field:		e. If Ind, list Job Title/Profession:		f. If Ind, list Employer's Name/Specific Field:		g. Election Cycle Sum to Date \$	

a. Full Name, Mailing Address & Phone (include city, state, and zip)		b. Specify Type of Contributor: <input type="checkbox"/> Individual <input type="checkbox"/> Political Party <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Not-for-Profit <input type="checkbox"/> Other Source: _____			c. If Not-for-Profit, list Fed ID #:		
g. Election Cycle Sum to Date \$		h. In-Kind <input type="checkbox"/>		i. Account Number/Code		j. Form of Payment	
k. Date (mm/dd/yyyy)		l. Amount \$		d. If Other Committee, specify Type of Committee: <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> County: _____		e. If Ind, list Job Title/Profession:	
f. If Ind, list Employer's Name/Specific Field:		e. If Ind, list Job Title/Profession:		f. If Ind, list Employer's Name/Specific Field:		g. Election Cycle Sum to Date \$	

12. Total Contributions ALL Pages (if multi-page, only list on page 1)		\$		13. Total Contributions THIS Page (sum all the 111 entries on this page)		\$2,000	
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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, correct, and the contributions were received no more than 48 hours prior to this notice being filed. All contributions received, not over \$1,000, will be reported on the next scheduled filing report.

Alice R. Pyle

Signature of Appointed Treasurer or Candidate
(if multi-page, only sign on page 1)

Nov. 3, 2002

Date