

RECEIVED

JUL 16 2003 /ema ✓ ✓

GUILFORD COUNTY BOARD of ELECTIONS

Amendment Yes No

Disclosure Report Cover

Please note that this cover sheet cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make those kinds of committee changes. Use the Addendum form (CRO-1010) if more entries are needed.

1. Committee Information

a. Full Name: BJ Barnes for Sheriff; c. ID Number; b. Mailing Address: P.O. Box 19707 Greensboro NC 27419; d. Date Filed: 7-16-2003; e. Phone Number: 641-3694

2. Report Year: 2003; 3. Period Start Date: 01-01-2003; 4. Period End Date: 06-30-2003; 5. Treasurer Full Name: BJ Barnes

6. Type of Committee: Candidate Campaign; 7. Type of Fund: Soft Money Account; 8. Type of Report: Municipal Mid Year; 9. Special Report Name

10. Account Information: Branch Banking and Trust; b. Purpose: Campaign expenses; c. Code: a; d. Period Begin Balance: \$61,780.63

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.

BJ Barnes (Printed Name of Signer), BJ Barnes (Signature of Appointed Treasurer), 7-16-03 (Date)

FOR OFFICE USE ONLY

Date Received, Date Postmarked, Date Scanned; Employee; Delivery Method: Normal Mail, Registered Mail, Hand Delivered, Electronically Filed

Detailed Summary

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
BJ Barnes for Sheriff	Semi-Annual Mid Year		
Start of Election Cycle: January 1, 2003	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 61,780 ⁶²	\$ 61,780 ⁶²	
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ - 0 -	\$ - 0 -	
6) Contributions from Individuals (CRO-1210)	\$ - 0 -	\$ - 0 -	
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 -	\$ - 0 -	
10) Refunds/Reimbursements To the Committee (CRO-1240)	\$ - 0 -	\$ - 0 -	
11) Other Receipt Sources (CRO-1250)			
11a) Interest on Bank Accounts (CRO-1250)	\$ 105 ⁰⁰	\$ 105 ⁰⁰	
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) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)	\$ 61,885 ⁶²	\$ 61,885 ⁶²	
EXPENDITURES			
14) Disbursements (CRO-1310)			
14a) Operating Expenditures (CRO-1310)	\$ 486 ¹²	\$ 486 ¹²	
14b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 500 ⁰⁰	\$ 500 ⁰⁰	
14c) Coordinated Party Expenditures (CRO-1310)	\$ - 0 -	\$ - 0 -	
15) Loan Repayments (CRO-1420)	\$ - 0 -	\$ - 0 -	
16) Refunds/Reimbursements From the Committee (CRO-1320)	\$ - 0 -	\$ - 0 -	
17) In-Kind Contributions (CRO-1510)	\$ - 0 -	\$ - 0 -	
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)	\$ 986 ¹²	\$ 986 ¹²	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)	\$ 60,899 ⁵⁰	\$ 60,899 ⁵⁰	
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$ - 0 -		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ - 0 -		
22) Debts and Obligations owed By the Committee (CRO-1610)	\$ - 0 -		
23) Debts and Obligations owed To the Committee (CRO-1620)	\$ - 0 -		
24) Account Transfers Within the Committee (CRO-1720)	\$ - 0 -		
25) Administrative Support (CRO-1710)	\$ - 0 -	\$ - 0 -	
26) Forgiven Loans (CRO-1440)	\$ - 0 -	\$ - 0 -	
27) 48-Hour Notice Reports Sum	\$ - 0 -	\$ - 0 -	

Other Receipt Sources

1. Name of Committee or Fund				2. ID Number	
BJ Barnes For Sheriff					
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>					
<input checked="" type="checkbox"/> Interest	<input type="checkbox"/> Contributions from Not-for-Profit Organizations		<input type="checkbox"/> Outside Sources of Income		
4. Contributor	a. Full Name, Mailing Address & Phone <i>(Include city, state, and zip)</i>	b. Account Number/Code	c. Form of Payment	d. Date <i>(mm/dd/yyyy)</i>	e. Amount
	Branch Banking + Trust 1300 Battleground Avenue Greensboro NC 27408	b	credit	6-20-03	\$ 105 ⁰⁰
					\$
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type:		h. If Not-for-Profit, list Fed ID #:	
		<input type="checkbox"/> Add <input type="checkbox"/> Delete			
4. Contributor	a. Full Name, Mailing Address & Phone <i>(Include city, state, and zip)</i>	b. Account Number/Code	c. Form of Payment	d. Date <i>(mm/dd/yyyy)</i>	e. Amount
					\$
					\$
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type:		h. If Not-for-Profit, list Fed ID #:	
		<input type="checkbox"/> Add <input type="checkbox"/> Delete			
4. Contributor	a. Full Name, Mailing Address & Phone <i>(Include city, state, and zip)</i>	b. Account Number/Code	c. Form of Payment	d. Date <i>(mm/dd/yyyy)</i>	e. Amount
					\$
					\$
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type:		h. If Not-for-Profit, list Fed ID #:	
		<input type="checkbox"/> Add <input type="checkbox"/> Delete			
4. Contributor	a. Full Name, Mailing Address & Phone <i>(Include city, state, and zip)</i>	b. Account Number/Code	c. Form of Payment	d. Date <i>(mm/dd/yyyy)</i>	e. Amount
					\$
					\$
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type:		h. If Not-for-Profit, list Fed ID #:	
		<input type="checkbox"/> Add <input type="checkbox"/> Delete			
4. Contributor	a. Full Name, Mailing Address & Phone <i>(Include city, state, and zip)</i>	b. Account Number/Code	c. Form of Payment	d. Date <i>(mm/dd/yyyy)</i>	e. Amount
					\$
					\$
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type:		h. If Not-for-Profit, list Fed ID #:	
		<input type="checkbox"/> Add <input type="checkbox"/> Delete			
5. Total only this Page				\$ 105 ⁰⁰	
6. Total of ALL CRO-1250 Related Pages <i>(only show on last page)</i>				\$ 105 ⁰⁰	
<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>					
<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 BJ Barnes for Sheriff					2. ID Number		
3. Type of Disbursement (Please use separate CRO-1330 forms for each type of Disbursements.)							
<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
	Time Warner Cable 200 Centre Port Drive Suite 200 Greensboro NC 27409		website	a	check	1-23-03	\$ 25 ⁴⁷
	b. If Contribution to County Committee, specify: Expense, list office:		↓	a	check	2-21-03	\$ 44 ⁹⁵
				a	check	3-17-03	\$ 44 ⁹⁵
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 \$		
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
	↓		↓	a	check	4-22-03	\$ 44 ⁹⁵
	b. If Contribution to County Committee, specify: Expense, list office:		↓	a	check	5-27-03	\$ 44 ⁹⁵
				a	check	6-17-03	\$ 44 ⁹⁵
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 \$ 250 ²²		
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
	Arch Wireless P.O. Box 411000 Charlotte NC 28241		pager service	a	check	2-23-03	\$ 26 ²²
	b. If Contribution to County Committee, specify: Expense, list office:			a	check	6-2-03	\$ 27 ⁰⁸
				i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date \$ 53 ³²	
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 \$		
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
	Oak Ridge Community Center P.O. Box 483 Oak Ridge NC 27310		ad in program	a	check	4-3-03	\$ 30 ⁰⁰
	b. If Contribution to County Committee, specify: Expense, list office:					j. Election Cycle Sum To Date \$	
				i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date \$	
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 \$		
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
	News + Record P.O. Box 21966 Greensboro NC 27420		news paper subscription	a	check	4-3-03	\$ 132 ⁶⁰
	b. If Contribution to County Committee, specify: Expense, list office:					j. Election Cycle Sum To Date \$	
				i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date \$	
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 \$		
5. Total only this Page						\$ 446 ¹²	
6. Total of ALL CRO-1310 Related Pages (only show on last page)						\$	
(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		
BJ Barnes for Sheriff							
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
	Guilford College Civitan Club P.O. Box 8695 Greensboro NC 27419		class sponsor horseshow	a	check	4-14-03	\$ 2000
	b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date
					<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
							\$
	b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date
					<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
							\$
	b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date
					<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
							\$
	b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date
					<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
							\$
	b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date
					<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$
5. Total only this Page							\$ 2000
6. Total of ALL CRO-1310 Related Pages <i>(only show on last page)</i>							\$ 48612
<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 BJ Barnes for Sheriff					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 checked="" 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
	Guilford County GOP P.O. Box 29136 Greensboro NC 27429		Lincoln Days Dinner	a	check	2-24-2008	\$ 500 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	
Guilford County				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 500 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						\$ 500 ⁰⁰	
6. Total of ALL CRO-1310 Related Pages <i>(only show on last page)</i>						\$ 500 ⁰⁰	
<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>							