

Disclosure Report Cover

Amendment
 Yes No

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.

I. Committee Information

a. Full Name	c. ID Number
BURROUGHS-WHITE CAMPAIGN	E 24626
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
P.O. Box 1983 GREENSBORO, NC 27402	7/21/03
	e. Phone Number
	336-379-0050

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name
2003	1/1/2003	6/30/2003	STAHLER B. VINCENT

6. Type of Committee (Check one)		8. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Municipal	<input type="checkbox"/> State/County	<input type="checkbox"/> Referendum
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum		<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus	<input type="checkbox"/> Final
<input type="checkbox"/> Soft Money Account		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third Plus	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Political Party Financing Fund		<input checked="" type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	9. Special Report Name
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
<input type="checkbox"/> Other:		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

10. Account Information		10. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
MUTUAL COMMUNITY SAVINGS BANK.			
b. Purpose	c. Code	b. Purpose	c. Code
ALL CAMPAIGN EXPENSES	A		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 831.19		\$

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.

Stahler B. Vincent Stahler B. Vincent 7-21-03
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: _____	Employee: _____	Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed
Date Postmarked: _____	Employee: _____	
Date Scanned: _____	Employee: _____	

Detailed Summary

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

1. Committee Full Name (and Fund If applicable)	2. Type of Report	3. ID Number	
BOROUGHES-WHITE CAMPAIGN	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	\$ 831. ¹⁰	\$ 822. ⁴¹	
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 0	\$	
6) Contributions from Individuals (CRO-1210)	\$ 200. ⁰⁰	\$ 200. 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	\$ 0	
10) Refunds/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) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)	\$ 200. ⁰⁰	\$ 200. ⁰⁰	
EXPENDITURES			
14) Disbursements (CRO-1310)			
14a) Operating Expenditures (CRO-1310)	\$ 637. ⁰⁰	\$ 637. ⁰⁰	
14b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 0	\$ 0	
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)	\$ 637. ⁰⁰	\$ 637. ⁰⁰	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)	\$ 394. ¹⁰	\$ 385. ⁴¹	
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	

Contributions from INDIVIDUALS

1. Name of Committee or Fund				2. ID Number			
BURROUGHS - WHITE 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
	CHUCK FORRESTER 3406 DOGWOOD DR. GREENSBORO, NC 27403 336-852-7725	A	CHK	4/24/03	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 ⁰⁰
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	MAGGIE FORRESTER 3406 DOGWOOD DR GREENSBORO, NC 27403	A	CHK	4/24/03	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100 ⁰⁰
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$			
4. Total only this Page							\$ 200 ⁰⁰
5. Total of ALL CRO-1210 Pages (only show on last page)							\$ 200 ⁰⁰
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

Disbursements

1. Name of Committee or Fund BURROUGHS - WHITE CAMPAIGN						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) BUSINESS JOURNAL 100 S. ELM ST-SUITE 400 GREENSBORO, NC 336-271-6535		d. Purpose SUBSCRIPTION	e. Account Number/Code A	f. Form of Payment CHK	g. Date (mm/dd/yyyy) 1/31/03	h. Amount \$ 67.⁰⁰
	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 \$ 67.⁰⁰
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip) ALPHA KAPPA ALPHA P.O. Box 27313 GREENSBORO, NC 27420		d. Purpose	e. Account Number/Code A	f. Form of Payment CHK	g. Date (mm/dd/yyyy) 2/10/03	h. Amount \$ 50.⁰⁰
	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 \$ 50.⁰⁰
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip) KAPPA ALPHA Psi P.O. Box 21403 GREENSBORO, NC 27420		d. Purpose ADVERTISEMENT	e. Account Number/Code A	f. Form of Payment CHK	g. Date (mm/dd/yyyy) 2/10/03	h. Amount \$ 20.⁰⁰
	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 \$ 20.⁰⁰
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip) BENNETT COLLEGE 900 E. WASHINGTON ST. GREENSBORO, NC 27401 336-517-2272		d. Purpose ADVERTISEMENT/TICKET	e. Account Number/Code A	f. Form of Payment CHK	g. Date (mm/dd/yyyy) 2/10/03	h. Amount \$ 150.⁰⁰
	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 \$ 150.⁰⁰
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip) DELTA SIGMA THETA, INC P.O. Box 20284 GREENSBORO, NC 27420		d. Purpose SCHOLARSHIP	e. Account Number/Code A	f. Form of Payment CHK	g. Date (mm/dd/yyyy) 2/10/03	h. Amount \$ 50.⁰⁰
	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 \$ 50.⁰⁰
5. Total only this Page							\$ 337.⁰⁰
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 BURROUGHS - WHITE CAMPAIGN						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
	DEMOCRATIC WOMEN OF GUILFORD CO. P.O. BOX 10726 GREENSBORO, NC 27404			DOES	A	CHK	2/18/03	\$ 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
	ZETA PHI BETA, INC P.O. BOX 20512 GREENSBORO, NC 27420				A	CHK	2/18/03	\$ 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		\$ 25 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
	U.S. POSTAL SERVICE 251 N. MURROW BLVD GREENSBORO, NC 27401 336-370-1180			POSTOFFICE MAIL BOX	A	CHK	2/18/03	\$ 40 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		\$ 40 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
	NAACP - GREENSBORO BR. P.O. Box 20765 GREENSBORO, NC 27420 336-273-1222			ADVERTISEMENT	A	CHK	4/14/03	\$ 100 ⁰⁰
				BANQUET	A	CHK	6/23/03	\$ 35 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		\$ 135 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
	JAMES B. DUDLEY ALUMNI ASSOCIATION 700 E. FLORIDA ST. GREENSBORO, NC 27406			SPONSORSHIP	A	CHK	5/16/03	\$ 85 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		\$ 85 ⁰⁰		
5. Total only this Page								\$ 300 ⁰⁰
6. Total of ALL CRO-1310 Related Pages (only show on last page)								\$ 637 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)								