

# 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.

<b>1. Committee Information</b>	
a. Full Name	c. ID Number
FRIENDS TO ELECT ALBERT A CAMPBELL	R94M23
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
1726 - C N HAMILTON ST HIGH POINT NC 27262	10/22/03
	e. Phone Number
	336-882-5744

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name
2003	10/01/03	10/20/03	ALBERT A CAMPBELL

<b>6. Type of Committee (Check one)</b>		<b>8. Type of Report (check only one type of report from one category)</b>		
<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
<b>7. Type of Fund (if applicable, check one)</b>		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus	<input type="checkbox"/> Final
<input type="checkbox"/> Soft Money Account		<input checked="" 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 type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	<b>9. Special Report Name</b>
<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	

<b>10. Account Information</b>		<b>10. Account Information</b>	
a. Financial Institution Full Name		a. Financial Institution Full Name	
BRANCH BANK & TRUST			
b. Purpose	c. Code	b. Purpose	c. Code
CHECKING FOR RECEIPTS & DISBURSEMENTS	1571		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 2258.05		\$

**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.

Albert A. Campbell      *Albert A. Campbell*      10/27/03  
 Printed Name of Signer      Signature of Appointed Treasurer      Date

**FOR OFFICE USE ONLY**

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

# Detailed Summary

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
FRIENDS TO ELECT ALBERT A CAMPBELL	PRE-ELECTION	R94M23	
Start of Election Cycle: January 1, 2003	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 2258.05	\$	
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 1005.00	\$ 3125.00	
6) Contributions from Individuals (CRO-1210)	\$ 500.00	\$ 2300.00	
7) Contributions from Political Party Committees (CRO-1220)	\$	\$	
8) Contributions from Other Political Committees (CRO-1230)	\$	\$ 525.00	
9) Loan Proceeds (CRO-1410)	\$	\$	
10) Refunds/Reimbursements To the Committee (CRO-1240)	\$	\$	
11) Other Receipt Sources (CRO-1250)	\$	\$	
11a) Interest on Bank Accounts (CRO-1250)	\$	\$	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)	\$	\$	
11c) Outside Sources of Income (CRO-1250)	\$	\$	
12) "Goods and Services" Contributions (CRO-1260)	\$	\$	
13) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)	\$ 1505.00	\$ 595.00	
<b>EXPENDITURES</b>			
14) Disbursements (CRO-1310)	\$	\$	
14a) Operating Expenditures (CRO-1310)	\$ 625	\$ 2811.95	
14b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$	
14c) Coordinated Party Expenditures (CRO-1310)	\$	\$	
15) Loan Repayments (CRO-1420)	\$	\$	
16) Refunds/Reimbursements From the Committee (CRO-1320)	\$	\$	
17) In-Kind Contributions (CRO-1510)	\$	\$	
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)	\$ 625	\$ 2811.95	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)	\$ 3138.05	\$ 3138.05	
<b>ADDITIONAL INFORMATION</b>			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$	\$	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$	\$	
22) Debts and Obligations owed By the Committee (CRO-1610)	\$	\$	
23) Debts and Obligations owed To the Committee (CRO-1620)	\$	\$	
24) Account Transfers Within the Committee (CRO-1720)	\$	\$	
25) Administrative Support (CRO-1710)	\$	\$	
26) Forgiven Loans (CRO-1440)	\$	\$	
27) 48-Hour Notice Reports Sum	\$	\$	

**Contributions from INDIVIDUALS**

1. Name of Committee or Fund						2. ID Number		
FRIENDS TO ELECT ALBERT A CAMPBELL						R94M23		
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
	ROBERT & SALLIE BROWN 508 GREENSBORO RD HIGH POINT, NC 27261		1571	CK	10/07/03	<input type="checkbox"/>	<input type="checkbox"/>	\$ 500.00
	b. Job Title/Profession					<input type="checkbox"/>	<input type="checkbox"/>	\$
	BUSINESS MGR					<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			<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
	AGGREGATED INDIVIDUAL CONTRIBUTIONS		1571	CKS		<input type="checkbox"/>	<input type="checkbox"/>	\$ 1005
	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		\$			
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:		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"/>	\$
	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		\$			
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:		k. Election Cycle Sum to Date			
			<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$			
4. Total only this Page						\$ 1505.00		
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>								

Disbursements

1. Name of Committee or Fund <b>FRIENDS TO ELECT ALBERT A CAMPBELL</b>					2. ID Number <b>R94M2.3</b>	
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
	US POSTAL SERVICE	POSTAGE	1571	CASH	10/10/03	\$ 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			\$	
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	PRINTING	1571	CASH	10/11/03	\$ 117.00
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			\$	
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	1571	CASH	10/14/03	\$ 43.00
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			\$	
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
	WINN DIXIE	ENTERTAINMENT	1571	CASH	10/18/03	\$ 41.00
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			\$	
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
	ALACAM	SIGNS	1571	CASH	11/16/03	\$ 350.00
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			\$	
5. Total only this Page						\$ 625.00
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)						