

Pre Election  
Amended

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.

1. Committee Information

a. Full Name	c. ID Number
Committee to Elect Haggard 4 Council	R945-3N
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
108 Cypress St. Greensboro NC 27405	10/29/03
	e. Phone Number
	336-273-2384

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name
2003	9/29/03	10/27/03	David E. Haggard

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 checked="" 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 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	9. Special Report Name
<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

a. Financial Institution Full Name		10. Account Information	
BBFT		a. Financial Institution Full Name	
b. Purpose	c. Code	b. Purpose	c. Code
Checking for receipts & expenditures	BBFT		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 1375.27		\$

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.

David E. Haggard  
 Printed Name of Signer

  
 Signature of Appointed Treasurer

10/28/03  
 Date

FOR OFFICE USE ONLY

Date Received:	Employee:
Date Postmarked:	Employee:
Date Scanned:	Employee:

Delivery Method

Normal Mail

Registered Mail

Hand Delivered

Electronically Filed

# Detailed Summary

Amendment

Yes  No

1. Committee Full Name (and Fund if applicable)		2. Type of Report	3. ID Number
Committee to Elect Hoggard/Kan /		Re Election	R9453N
Start of Election Cycle: January 1, 2003		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1375.27	\$
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 1230.00	\$ 5064.30
6) Contributions from Individuals	(CRO-1210)	\$ 450.00	\$ 2200.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ -	\$ -
8) Contributions from Other Political Committees	(CRO-1230)	\$ -	\$ -
9) Loan Proceeds	(CRO-1410)	\$ -	\$ 125.00
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)	\$ -	\$ 936.00
13) TOTAL RECEIPTS		\$ 1680.00	\$ 8325.30
<i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)</i>			
<b>EXPENDITURES</b>			
14) Disbursements	(CRO-1310)		
14a) Operating Expenditures	(CRO-1310)	\$ 2123.75	\$ 6457.78
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)	\$ -	\$ 936.00
18) TOTAL EXPENDITURES		\$ 2123.75	\$ 7393.78
<i>(Add lines 14a, 14b, 14c, 15, 16, and 17)</i>			
19) Cash on Hand at End		\$ 931.52	\$ 931.52
<i>(Add lines 4 and 13 together, then subtract line 18)</i>			
<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		\$	\$

**Aggregated Contributions from Individuals**

1. Committee Full Name (and Fund if applicable)				2. ID Number					
Committee to Elect Hopperd 4 Council				R9453N					
3. Contributor Information									
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount				
<input checked="" type="checkbox"/> Add	BB&T	check		10/2/03	\$ 100 <sup>00</sup>				
<input type="checkbox"/> Remove					\$ 25 <sup>00</sup>				
<input checked="" type="checkbox"/> Add					\$ 30 <sup>00</sup>				
<input type="checkbox"/> Remove					\$ 25 <sup>00</sup>				
<input checked="" type="checkbox"/> Add					\$ 25 <sup>00</sup>				
<input type="checkbox"/> Remove					\$ 50 <sup>00</sup>				
<input checked="" type="checkbox"/> Add					\$ 100 <sup>00</sup>				
<input type="checkbox"/> Remove									
<input checked="" type="checkbox"/> Add					BB&T	check		10/10/03	\$ 25 <sup>00</sup>
<input type="checkbox"/> Remove									\$ 100 <sup>00</sup>
<input checked="" type="checkbox"/> Add									\$ 100 <sup>00</sup>
<input type="checkbox"/> Remove									\$ 100 <sup>00</sup>
<input checked="" type="checkbox"/> Add									\$ 100 <sup>00</sup>
<input type="checkbox"/> Remove									\$ 100 <sup>00</sup>
<input checked="" type="checkbox"/> Add	BB&T	check		10/20/03	\$ 100 <sup>00</sup>				
<input type="checkbox"/> Remove					\$ 50 <sup>00</sup>				
<input checked="" type="checkbox"/> Add					\$ 100 <sup>00</sup>				
<input type="checkbox"/> Remove					\$ 100 <sup>50</sup>				
<input checked="" type="checkbox"/> Add					\$ 100 <sup>00</sup>				
<input type="checkbox"/> Remove					\$				
<input checked="" type="checkbox"/> Add					\$				
<input type="checkbox"/> Remove					\$				
<input checked="" type="checkbox"/> Add					\$				
<input type="checkbox"/> Remove					\$				
4. Total only this Page					\$ 630 <sup>00</sup>				
5. Total of ALL CRO-1205 Pages					\$ 1230 <sup>00</sup>				
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>									

Contributions from INDIVIDUALS

1. Name of Committee or Fund						2. ID Number	
Committee to Elect Haggard 4 Council						B9453N	
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
	Donald Moore Jr 5300 Broadmore Place Greensboro, NC 27410	BB&T	Check	10/8/03	<input type="checkbox"/>	<input type="checkbox"/>	\$ 250 <sup>00</sup>
					<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	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 250 <sup>00</sup>	
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
	Sarah F. Jones 7-B Fountain Manor Dr. Greensboro, NC 27405	BB&T	check	10/13/03	<input type="checkbox"/>	<input type="checkbox"/>	\$ 200 <sup>00</sup>
		BB&T	check	9/4/03	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 100 <sup>00</sup>
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 300 <sup>00</sup>	
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				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				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				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				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							\$ 450 <sup>00</sup>
5. Total of ALL CRO-1210 Pages (only show on last page)							\$ 450 <sup>00</sup>
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

Disbursements

1. Name of Committee or Fund <b>Hargrove of Council</b>						2. ID Number <b>129453N</b>	
3. Type of Disbursement (Please use separate CRO-1330 forms for each type of Disbursement.)							
Operating Expenses		Contributions to Candidates/Political Committees			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
	b. If Contribution to County Committee, specify: Expense, list office:		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
	b. If Contribution to County Committee, specify: Expense, list office:		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
	b. If Contribution to County Committee, specify: Expense, list office:		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
	b. If Contribution to County Committee, specify: Expense, list office:		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
	b. If Contribution to County Committee, specify: Expense, list office:		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
	b. If Contribution to County Committee, specify: Expense, list office:		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						1818.08 \$	
6. Total of ALL CRO-1310 Related Pages (only show on last page)						1793.40 \$	
(This line goes in line 13a of Detailed Summary Page CRO-1109 if Operating Expenses)							
(This line goes in line 13b of Detailed Summary Page CRO-1109 if Contrib to Candidates/Political Comm)							
(This line goes in line 13c of Detailed Summary Page CRO-1109 if Coordinated Party Expenditures)							

Disbursements

1. Name of Committee or Fund <b>Committee to Elect Howard &amp; Gump</b>						2. ID Number <b>R9453.N</b>	
3. Type of Disbursement (Please use separate CRO-1330 forms for each type of Disbursement.)							
<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
	Contract for Greensboro Time February One Place Greensboro, NC 27401		advertising	BB&T	check	10/23/03	\$175 <sup>00</sup>
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 checked="" type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 350.00	
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
	Arrowhead Graphics 508 Houston St. Greensboro, NC 27401		printing	BB&T	check	10/20/03	\$74 <sup>90</sup>
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 checked="" type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 358.45	
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
	Papa John's Pizza Summit Ave Greensboro, NC 27405		meeting food	BB&T	check	10/15/03	\$23 <sup>00</sup>
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 checked="" type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 23.00	
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
	Staples Office Supply 1428 Golden Gate S/C Greensboro, NC 27405		printing	BB&T	check	10/13/03	\$32 <sup>??</sup>
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 checked="" type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 385.46	
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						\$305.67	
6. Total of ALL CRO-1310 Related Pages (only show on last page)						\$2123 <sup>75</sup>	
(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)							