

RECEIVED

SEP 29 2003

EMW

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.

I. Committee Information

a. Full Name: Robbia Perkins for City Council; c. ID Number: T4Y135; b. Mailing Address: 3009 Greenbrook Drive, Greensboro NC 27408; d. Date Filed: 9-29-03; e. Phone Number: 282-5728

2. Report Year: 2003; 3. Period Start Date: 1/1/03; 4. Period End Date: 9/22/03; 5. Treasurer Full Name: Michael Murray

6. Type of Committee: Candidate Campaign; 7. Type of Fund: Soft Money Account; 8. Type of Report: Pre-primary; 9. Special Report Name

10. Account Information: a. Financial Institution Full Name: Branch Bank and Trust; b. Purpose: CHECKING; c. Code: 1014; d. Period Begin Balance: \$ 194.03

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.

Robbia U. Perkins (Printed Name of Signer), [Signature] (Signature of Appointed Treasurer), 9-29-03 (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 checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |

| 1. Committee Full Name (and Fund if applicable) | 2. Type of Report | 3. ID Number | |
|---|-----------------------------|---------------------------|--|
| Robbe Pencus for City Council | Pre-Primary | T44135 | |
| Start of Election Cycle: January 1, _____ | Total this Reporting Period | Total this Election Cycle | |
| 4) Cash on Hand at Start | \$ 194 ⁰⁰ | \$ 194 ⁰⁰ | |
| RECEIPTS | | | |
| 5) Aggregated Contributions from Individuals (CRO-1205) | \$ 425 | \$ 425 | |
| 6) Contributions from Individuals (CRO-1210) | \$ 1400 | \$ 1400 | |
| 7) Contributions from Political Party Committees (CRO-1220) | \$ | \$ | |
| 8) Contributions from Other Political Committees (CRO-1230) | \$ | \$ | |
| 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) | \$ 1825 ⁰⁰ | \$ 1825 ⁰⁰ | |
| EXPENDITURES | | | |
| 14) Disbursements (CRO-1310) | | | |
| 14a) Operating Expenditures (CRO-1310) | \$ 1395 ²⁸ | \$ 1395 ²⁸ | |
| 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) | \$ 1395 ²⁸ | \$ 1395 ²⁸ | |
| 19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18) | \$ 623 ⁷⁵ | \$ 623 ⁷⁵ | |
| ADDITIONAL INFORMATION | | | |
| 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 | | | |
|---|--|--|--------------------|-------------------------------|--------------------------|--------------------------|-----------------------|
| Robbie Perkins for City Council | | | | T44135 | | | |
| 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 |
| | Joseph A. McKinney, Jr. Michael P. Winstead, Jr. P. Renee Dwyer 27408 100 MEADOWBROOK TERRACE, GREENSBORO | | PERSONAL CHECK | 9-19-03 | <input type="checkbox"/> | <input type="checkbox"/> | \$ 500 ⁰⁰ |
| | b. Job Title/Profession | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| | Real Estate Development | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| c. Employer's Name/Specific Field | | j. If Amendment, choose change type: | | k. Election Cycle Sum to Date | | | |
| MEGA Properties | | <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 |
| | FRANK AND MARY ANN AUMAN 303 St. Lauren DR. Greensboro, N.C. 27410 754-5528 | | | 9-19-03 | <input type="checkbox"/> | <input type="checkbox"/> | \$ 500 ⁰⁰ |
| | b. Job Title/Profession | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| | Real Estate Development | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| c. Employer's Name/Specific Field | | j. If Amendment, choose change type: | | k. Election Cycle Sum to Date | | | |
| Apartment Developer | | <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 |
| | C. Richard Roath Delanie T. Roath 6 Dunlin Square Greensboro, N.C. 27455 | | | 9-19-03 | <input type="checkbox"/> | <input type="checkbox"/> | \$ 200 ⁰⁰ |
| | 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: | | 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 |
| | James D. McNairy Jeanie J. McNairy 378-1541 8128 Witty Road Summerfield, N.C. 27358 | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ 200 ⁰⁰ |
| | b. Job Title/Profession | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| | Real Estate Appraiser | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| c. Employer's Name/Specific Field | | j. If Amendment, choose change type: | | k. Election Cycle Sum to Date | | | |
| McNairy + Associates | | <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 | | \$ | | | |
| 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 | | | | | | | \$ 1400 ⁰⁰ |
| 5. Total of ALL CRO-1210 Pages (only show on last page) | | | | | | | \$ 1400 ⁰⁰ |
| This line must be on line 6 of Detailed Summary Page CRO-1100 | | | | | | | |

Disbursements

| | | | | | | | | |
|---|--|--|--|-------------------|--|---------------------------|--------------------------------|--------------------------------------|
| 1. Name of Committee or Fund | | | | | | 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 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 |
| | Arrowhead Graphics 508 Houston Street, Greensboro, NC 27401 274-4767 | | | Signs | | | 9-19-03 | \$1395 ²⁸ |
| | 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 | | | | | | | \$ 1395 ²⁸ | |
| 6. Total of ALL CRO-1310 Related Pages <i>(only show on last page)</i> | | | | | | | \$ 1395 ²⁸ | |
| <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> | | | | | | | | |