

RECEIVED

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Disclosure Report Cover

GUILFORD COUNTY
BOARD of ELECTIONS

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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
BJ Barnes for Sheriff	
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
P.O. Box 11707 Greensboro NC 27419.	01-30-2004
	e. Phone Number
	641-3694

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name
2003	07-01-2003	12-31-2003	BJ Barnes

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 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 checked="" 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	b. Purpose	a. Financial Institution Full Name	b. Purpose
Branch Banking and Trust	campaign expenses	Branch Banking and Trust	campaign CD
c. Code	d. Period Begin Balance	c. Code	d. Period Begin Balance
a	\$10,794.50	b	\$50,105.00

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 1-30-04 Date

FOR OFFICE USE ONLY

Date Received: _____	Employee: _____	<u>Delivery Method</u>
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	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
<u>BJ Barnes for Sheriff</u>	<u>2003</u> <u>Semi Annual Year End</u>		
Start of Election Cycle: <u>January 1, 2003</u>	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ <u>60,899⁵⁰</u>	\$ <u>61,780⁶²</u>	
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)	\$ <u>624³²</u>	\$ <u>729³²</u>	
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)	\$ <u>624³²</u>	\$ <u>729³²</u>	
EXPENDITURES			
14) Disbursements (CRO-1310)			
14a) Operating Expenditures (CRO-1310)	\$ <u>2,862⁸⁰</u>	\$ <u>3,348⁹²</u>	
14b) Contributions to Candidates/Political Committees (CRO-1310)	\$ - 0 -	\$ <u>500⁰⁰</u>	
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)	\$ <u>2,862⁸⁰</u>	\$ <u>3,848⁹²</u>	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)	\$ <u>58,661⁰²</u>	\$ <u>58,661⁰²</u>	
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 -	

Disbursements

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) BJ Barnes for Sheriff	2. ID Number
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3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)
 Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Time Warner Cable 200 Centre Port Drive Suite 200 Greensboro NC 27409	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
	e. Election Cycle Sum to Date \$	

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
a	check	website-internet	07-23-2003	\$ 44 ⁹⁵
a	check	website-internet	08-20-2003	\$ 44 ⁹⁵

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) ↓	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
	e. Election Cycle Sum to Date \$	

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
a	check	website-internet	09-16-2003	\$ 44 ⁹⁵
a	check	website-internet	10-23-2003	\$ 44 ⁹⁵

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) ↓	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
	e. Election Cycle Sum to Date \$ 519 ⁹²	

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
a	check	website-internet	11-21-2003	\$ 44 ⁹⁵
a	check	website-internet	12-21-2003	\$ 44 ⁹⁵

5. Total only this Page \$ 269⁷⁰

6. Total of ALL CRO-1310 Pages
 (This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)
 (This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)
 (This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)
 \$

Disbursements

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) BJ Barnes For Sheriff				2. ID Number	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Arch Wireless P.O. Box 411000 Charlotte NC 28241			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 107 ⁴⁶
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
a	check	pager	09-06-2003	\$ 27 ⁰⁸	
a	check	service	12-02-2003	\$ 27 ⁰⁸	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Hostway Corporation P.O. Box 7044 Romeoville IL 60446			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
a	check	website-hosting	10-14-2003	\$ 167 ⁴⁰	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
BigLots 1421-E Cone Boulevard Greensboro NC 27405			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
a	check	supplies	12-02-2003	\$ 23 ⁵⁰	
				\$	
5. Total only this Page				\$ 245 ⁰⁶	
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>				\$	

Disbursements

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
BJ Barnes for Sheriff					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Postmaster Guilford Station Greensboro NC 27419					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 142 ⁰⁰
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
a	check	stamps	12-03-2003	\$ 74 ⁰⁰	
a	check	post office box	12-29-2003	\$ 68 ⁰⁰	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Green's Supper Club 4735 N US Highway 29 Greensboro NC 27405					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
a	check	dinner meeting	12-27-2003	\$ 620 ²³	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Harley Davidson of Greensboro 538 Farragut Street Greensboro NC 27406					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
a	check	graphics/advertising	12-29-2003	\$ 1,585 ⁸¹	
				\$	
5. Total only this Page				\$ 2,348 ⁰⁴	
6. Total of ALL CRO-1310 Pages				\$ 2,862 ⁸⁰	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>					
<i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>					
<i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

Other Receipt Sources

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)					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 Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #		d. Comments	
Branch Banking and Trust 1300 Battleground Avenue Greensboro NC 27408						
					e. Election Cycle Sum to Date	
					\$	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount		
b	credit		07-20-2003	\$ 101 ⁸²		
b	credit		08-20-2003	\$ 105 ⁴³		
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #		d. Comments	
↓						
					e. Election Cycle Sum to Date	
					\$	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount		
b	credit		09-20-2003	\$ 105 ⁶⁵		
b	credit		10-20-2003	\$ 102 ⁴⁶		
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #		d. Comments	
↓						
					e. Election Cycle Sum to Date	
					\$ 729 ³²	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount		
b	credit		11-20-2003	\$ 106 ⁰⁹		
b	credit		12-20-2003	\$ 102 ⁸⁷		
5. Total only this Page					\$ 624 ³²	
6. Total of ALL CRO-1250 Pages					\$ 624 ³²	
<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>						