

RECEIVED

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Disclosure Report Cover

GUILFORD COUNTY BOARD OF ELECTIONS

Amendment [ ] Yes [x] 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 T. DIANNE BELLAMY-SMALL FOR CITY COUNCIL c. ID Number MLV50A

b. Mailing Address (include City, State and Zip Code) 3211 DELMONTE DR. GREENSBORO, NC 27406 d. Date Filed 1/30/04 e. Phone Number 336-854-4172

2. Report Year 2003 3. Period Start Date (mm/dd/yyyy) 7/1/03 4. Period End Date (mm/dd/yyyy) 12/31/03 5. Treasurer Full Name JENNIFER BENTLEY

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

10. Account Information a. Financial Institution Full Name COMMUNITY SAVINGS BANK b. Purpose CAMPAIGN ACCOUNT c. Code 1 d. Period Begin Balance \$ -0 -

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. JENNIFER S. BENTLEY Printed Name of Signer Jennifer S. Bentley Signature of Appointed Treasurer 1/30/04 Date

FOR OFFICE USE ONLY Date Received: \_\_\_\_\_ Employee: \_\_\_\_\_ Delivery Method [ ] Normal Mail [ ] Registered Mail [ ] Hand Delivered [ ] Electronically Filed Date Postmarked: \_\_\_\_\_ Employee: \_\_\_\_\_ Date Scanned: \_\_\_\_\_ Employee: \_\_\_\_\_

# Detailed Summary

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. JD Number	
T. DIANNE BELLAMY-SMALL FOR CITY COUNCIL	2003 YEAR END GEN. ANNUAL	MLY50A	
Start of Election Cycle: January 1, _____		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ - 0 -	\$
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 2,754.00	\$
6) Contributions from Individuals (CRO-1210)		\$ 1,350.00	\$
7) Contributions from Political Party Committees (CRO-1220)		\$	\$
8) Contributions from Other Political Committees (CRO-1230)		\$ 650.00	\$
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)		\$ 4,754.00	\$
<b>EXPENDITURES</b>			
14) Disbursements (CRO-1310)			
14a) Operating Expenditures (CRO-1310)		\$ 4,076.34	\$
14b) Contributions to Candidates/Political Committees (CRO-1310)		\$	\$
14c) Coordinated Party Expenditures (CRO-1310)		\$ 100.00	\$
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)		\$ 4,176.34	\$
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)		\$ 577.66	\$
<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**

Amendment  
 Yes  No

<b>1. Committee Full Name (and Fund if applicable)</b> T. DIANNE BELLAMY-SMALL FOR CITY COUNCIL	<b>2. ID Number</b> MLY50A
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<b>3. Contributor Information</b>					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		10/13/03	\$ 10.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		10/13/03	\$ 100.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		10/14/03	\$ 30.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		10/17/03	\$ 25.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		10/19/03	\$ 50.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		10/24/03	\$ 15.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		10/24/03	\$ 20.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		10/24/03	\$ 50.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		10/24/03	\$ 50.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		10/27/03	\$ 25.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		10/28/03	\$ 95.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		10/28/03	\$ 50.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		10/28/03	\$ 99.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		10/28/03	\$ 99.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		10/28/03	\$ 95.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		10/29/03	\$ 99.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		10/29/03	\$ 99.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		10/29/03	\$ 99.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		10/29/03	\$ 99.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		11/1/03	\$ 50.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		7/26/03	\$ 20.00
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	/	CHECK		8/24/03	\$ 25.00

**4. Total only this Page** \$ 1,403.00

**5. Total of ALL CRO-1205 Pages** \$2,754.00  
 (This line must be on line 5 of Detailed Summary Page CRO-1100)

**Aggregated Contributions from Individuals**

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable)					2. ID Number	
T. DIANNE BELLAMY - SMALL FOR CITY COUNCIL					MLY50A	
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CASH		7/26/03	\$ 100.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CASH		8/24/03	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		9/11/03	\$ 100.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		9/5/03	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		9/11/03	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		9/17/03	\$ 100.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		9/25/03	\$ 45.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		9/28/03	\$ 99.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		9/29/03	\$ 15.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		9/30/03	\$ 99.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		9/30/03	\$ 99.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		10/1/03	\$ 99.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		10/3/03	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		10/7/03	\$ 20.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		10/8/03	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		10/8/03	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		10/8/03	\$ 100.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		10/8/03	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		10/9/03	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		10/10/03	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		10/11/03	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		10/12/03	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		10/13/03	\$ 50.00	
<b>4. Total only this Page</b>					\$ 1,351.00	
<b>5. Total of ALL CRO-1205 Pages</b>					\$ 2,754.00	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

**Contributions from Individuals**

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable) <i>T. DIANNE BELLAMY - SMALL FOR CITY COUNCIL</i>					2. ID Number	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>CHARLES ROBIN BRITT, SR. 600 N. FLAM AVE. GREENSBORO, NC 27408 336-288-8544</i>			b. Job Title/Profession <i>EXECUTIVE DIRECTOR</i>		d. Comments	
			c. Employer's Name/Specific Field <i>UNITED DAY CARE</i>		e. Election Cycle Sum to Date <i>\$ 200.00</i>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	<i>1</i>	<i>CHECK</i>		<i>11/1/03</i>	<i>\$ 200.00</i>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>BENJAMIN HAWKINS 502 N. MENDENHALL ST. GREENSBORO, NC 27401</i>			b. Job Title/Profession <i>SUPERVISOR</i>		d. Comments	
			c. Employer's Name/Specific Field <i>MILLER BREWERY</i>		e. Election Cycle Sum to Date <i>\$ 900.00</i>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	<i>1</i>	<i>CHECK</i>		<i>9/12/03</i>	<i>\$ 400.00</i>	
<input type="checkbox"/>	<i>1</i>	<i>CHECK</i>		<i>10/10/03</i>	<i>\$ 500.00</i>	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>GLADYS F. SHIPMAN 2820 DUNLAIRIE ROAD GREENSBORO, NC 27407</i>			b. Job Title/Profession <i>BUSINESS OWNER</i>		d. Comments	
			c. Employer's Name/Specific Field <i>SHIPMAN'S IN HOME CARE</i>		e. Election Cycle Sum to Date <i>\$ 250.00</i>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	<i>1</i>	<i>CHECK</i>		<i>10/30/03</i>	<i>\$ 250.00</i>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					<i>\$ 1,350.00</i>	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					<i>\$ 1,350.00</i>	

Contributions from Other Political Committees Pg 1 of 1

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable) <i>T. DIANNE BELLAMY-SMALL FOR CITY COUNCIL</i>				2. ID Number <i>MLY50A</i>	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>NC RPAC 4511 WEYBRIDGE LANE GREENSBORO, NC 27407</i>			b. Type of Committee <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum		d. Comments
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		
			e. Election Cycle Sum to Date <i>\$ 400.00</i>		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
<i>1</i>	<i>CHECK</i>		<i>10/29/03</i>	<i>\$ 400.00</i>	
				\$	
				\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>NC HOME BUILDERS ASSOC. BUILD PAC PO BOX 99090 RALEIGH, NC 27624</i>			b. Type of Committee <input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum		d. Comments
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		
			e. Election Cycle Sum to Date <i>\$ 250.00</i>		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
<i>1</i>	<i>CHECK</i>		<i>11/04/03</i>	<i>\$ 250.00</i>	
				\$	
				\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		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 <i>\$</i>		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
				\$	
4. Total only this Page				<i>\$ 650.00</i>	
5. Total of ALL CRO-1230 Pages <i>(This line must be on line 8 of Detailed Summary Page CRO-1100)</i>				<i>\$ 650.00</i>	

JAN 30 2004

Disbursements

GUILFORD COUNTY  
BOARD of ELECTIONS

Pg 1 of 16

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
T. DIANNE BELLAMY - SMALL FOR CITY COUNCIL				MLY50A	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)					
<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
HATES - TAYLOR YMCA 1101 E. MARKET ST. GREENSBORO, NC 27401 336-272-2131					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	CHECK	BUILD RENTAL (BOOTH)	10/22/03	\$ 50.00	
				\$	
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
VIKING OFFICE PRODUCTS <del>3277 DEARBORN DR</del> 1-800-248-6111 950 W. 190TH ST. TORRANCE, CA 90502					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	CREDIT CARD	OFFICE SUPPLIES	10/20/03	\$ 121.69	
				\$	
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
MAILING ONLINE 800-344-7779					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	CREDIT CARD	MAILING	9/29/03	\$ 219.23	
				\$	
5. Total only this Page				\$ 390.92	
6. Total of ALL CRO-1310 Pages				\$ 4,076.34	
(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)				2. ID Number	
T. DIANNE BELLAMY - SMALL FOR CITY COUNCIL				MLY50A	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)					
<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
IMANI GRILLMASTERS 1000 BEAUMONT DR. GREENSBORO, NC 27406 336-274-4714					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	CASH	FOOD	10/24/03	\$ 200.00	
				\$	
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
US POSTAL SERVICE GREENSBORO, NC					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
		POSTAGE	10/29/03	\$ 1,078.56	
				\$	
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
U.S. POSTAL SERVICE GREENSBORO, NC					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 1,922.18
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
		POSTAGE	11/28/03	\$ 426.24	
		POSTAGE	11/26/03	\$ 417.38	
5. Total only this Page				\$ 2,122.18	
6. Total of ALL CRO-1310 Pages				\$ 4,076.34	
(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)				2. ID Number	
T. DIANNE BELLAMY - SMALL FOR CITY COUNCIL				MLY50A	
3. Type of Disbursement (Please use separate CRO-1310 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 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
BELL SOUTH GREENSBORO, NC 888-764-2500					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
		PHONE	11/6/03	\$ 51.50	
				\$	
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
SEEN USA POSTAL SERVICE GREENSBORO, NC					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	CHECK	MAILING	9/18/03	\$ 200.00	
				\$	
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
CAROLINA PEAKEMAKER 400 SUMMIT AVE. GREENSBORO, NC 27405 336-274-6210					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	CHECK	AD	10/16/03	\$ 50.00	
				\$	
5. Total only this Page				\$ 301.50	
6. Total of ALL CRO-1310 Pages				\$ 4,076.34	
(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)				2. ID Number	
T. DIANNE BELLAMY-SMALL FOR CITY COUNCIL				MLY50A	
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
AGGREGATED NON-MEDIA EXPENDITURE (AN-ME)					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
		REGISTRATION FILING	7/28/03	\$ 25	
				\$	
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
AN-ME					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 50.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
		FILING	8/27/03	\$ 25.00	
				\$	
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
AN-ME					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
		OFFICE SUPPLIES	10/22/03	\$ 4.54	
				\$	
5. Total only this Page				\$ 54.54	
6. Total of ALL CRO-1310 Pages				\$ 4,076.34	
<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**

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
T. DIANNE BELLAMY - SMALL FOR CITY COUNCIL				MLY50A	
<b>3. Type of Disbursement</b> <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					
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
AN-ME					
			<b>c. Level Registered (Specify)</b>		<b>e. Election Cycle Sum to Date</b>
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
		FOOD	10/25/03	\$ 8.23	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
AN-ME					
			<b>c. Level Registered (Specify)</b>		<b>e. Election Cycle Sum to Date</b>
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		
					\$ 1,936.48
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
		POSTAGE	9/15/03	\$ 14.30	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
AN-ME					
			<b>c. Level Registered (Specify)</b>		<b>e. Election Cycle Sum to Date</b>
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
		OFFICE SUPPLIES		\$ 23.52	
				\$	
<b>5. Total only this Page</b>				\$ 46.05	
<b>6. Total of ALL CRO-1310 Pages</b>				\$ 4,076.34	
<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**

1. Committee Full Name (and Fund if applicable)				2. ID Number	
T. DIANNE BELLAMY - SMALL FDP CITY COUNCIL				MLV50A	
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
A N - M E					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
				\$ 24.07	
				\$	
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
A N - M E					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
			10/24/03	\$ 22.32	
			10/24/03	\$ 28.65	
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
A N - M E					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
		AD		\$ 14.70	
				\$	
5. Total only this Page				\$ 89.74	
6. Total of ALL CRO-1310 Pages				\$ 4,076.34	
<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**

1. Committee Full Name (and Fund if applicable)				2. ID Number	
T. DIANNE BELVAMY - SMALL FOR CITY COUNCIL				MLY50A	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)					
<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	
A N - M E					
		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
		PHOTOS	9/14/03	\$ 27.00	
				\$	
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	
A N - M E					
		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	
		EMBROIDERED HAT & T-SHIRT	11/8/03	\$ 48.15	
				\$	
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	
A N - M E <i>Haley-Jayson</i>					
		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
		BANQUET TICKET	11/2/03	\$ 15.00	
				\$	
5. Total only this Page				\$ 90.15	
6. Total of ALL CRO-1310 Pages				\$ 4,076.34	
(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**

1. Committee Full Name (and Fund if applicable) <b>T. DIANNE BELLAMY - SMALL FOR CITY COUNCIL</b>				2. ID Number <b>MLY50A</b>	
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 <i>(include city, state, &amp; zip)</i>		b. Coordinated Committee Name		d. Comments	
<b>A N-M E</b>		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		e. Election Cycle Sum to Date <b>\$ 1,969.48</b>	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
		<b>POSTAGE</b>	<b>11/8/03</b>	<b>\$ 33.00</b>	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>		b. Coordinated Committee Name		d. Comments	
<b>A N-M E</b>		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		e. Election Cycle Sum to Date <b>\$</b>	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
		<b>OFFICE SUPPLIES</b>	<b>11/29/03</b>	<b>\$ 25.95</b>	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>		b. Coordinated Committee Name		d. Comments	
<b>A N-M E</b> <i>Dem W. G County</i>		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		e. Election Cycle Sum to Date <b>\$</b>	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
		<b>MISC.</b>	<b>12/5/03</b>	<b>\$ 15.00</b>	
				\$	
5. Total only this Page				<b>\$ 73.95</b>	
6. Total of ALL CRO-1310 Pages				<b>\$ 4,076.34</b>	
<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  
 Yes  No

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
T. DIANNE BELLAMY-SMALL FOR CITY COUNCIL				MLY50A	
<b>3. Type of Disbursement</b> <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					
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
A N-ME					
			<b>c. Level Registered (Specify)</b>		<b>e. Election Cycle Sum to Date</b>
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 2,005.64
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
		POSTAGE	12/22/03	\$ 36.16	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
A N-ME					
			<b>c. Level Registered (Specify)</b>		<b>e. Election Cycle Sum to Date</b>
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
		ICE	10/24/03	\$ 10.00	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
A N-ME					
			<b>c. Level Registered (Specify)</b>		<b>e. Election Cycle Sum to Date</b>
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
		FOOD	10/24/03	\$ 6.60	
				\$	
<b>5. Total only this Page</b>				\$ 52.76	
<b>6. Total of ALL CRO-1310 Pages</b>				\$ 4,076.34	
<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**

1. Committee Full Name (and Fund if applicable) <u>T. DIANNE BELLAMY - SMALL FOR CITY COUNCIL</u>				2. ID Number <u>MLY50A</u>	
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)  <u>A N-M E</u>			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" 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	
		<u>FOOD</u>	<u>10/8/03</u>	\$ <u>3.38</u>	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)  <u>A N-M E</u>			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" 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	
		<u>FOOD</u>	<u>11/2/03</u>	\$ <u>30.89</u>	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)  <u>A N-M E</u>			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" 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	
		<u>FOOD + CASS. RECORDER</u>	<u>10/26/03</u>	\$ <u>25.94</u>	
				\$	
5. Total only this Page				\$ <u>60.21</u>	
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>				\$ <u>4,076.34</u>	

**Disbursements**

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable) <i>T. DIANNE BELLAMY-SMALL FOR CITY COUNCIL</i>				2. ID Number <i>MLY50A</i>	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input 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)  <i>A N-M E</i>			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" 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	
		<i>MISC.</i>	<i>11/2/03</i>	\$ <i>6.73</i>	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)  <i>A N-M E</i>			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" 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	
		<i>FOOD</i>	<i>10/24/03</i>	\$ <i>18.23</i>	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)  <i>A N-M E</i>			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" 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	
		<i>FOOD</i>	<i>10/24/03</i>	\$ <i>48.89</i>	
				\$	
5. Total only this Page				\$ <i>73.85</i>	
6. Total of ALL CRO-1310 Pages				\$ <i>4076.34</i>	
<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**

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
T. DIANNE BELLAMY - SMALL FOR CITY COUNCIL				MLY50A	
<b>3. Type of Disbursement</b> <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					
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
A N - M E			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b>
					\$ 2,007.06
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
		POSTAGE	10/26/03	\$ 1.42	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
A N - M E			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b>
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
		FOOD	10/24/03	\$ 28.65	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
A N - M E			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		
			10/24/03		<b>e. Election Cycle Sum to Date</b>
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
		FOOD		\$ 2.63	
				\$	
<b>5. Total only this Page</b>				\$ 32.70	
<b>6. Total of ALL CRO-1310 Pages</b>				\$ 4,076.34	
<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**

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
T. DIANNE BELLA MY - SMALL FOR CITY COUNCIL				MLY50A	
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
A N - M E					
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		<b>e. Election Cycle Sum to Date</b>
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
		FOOD	11/5/03	\$ 6.58	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
BAKERY THRIFT STORE 4265 RANDLEMAN RD. GREENSBORO, NC 336-271-4763					
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		<b>e. Election Cycle Sum to Date</b>
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
		FOOD	10/24/03	\$ 57.69	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
A N - M E					
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		<b>e. Election Cycle Sum to Date</b>
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
			10/10/03	\$ 14.69	
				\$	
<b>5. Total only this Page</b>				\$ 78.96	
<b>6. Total of ALL CRO-1310 Pages</b>				\$ 4,076.34	
<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  
 Yes  No

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
T. DIANNE BELLAMY - SMALL FOR CITY COUNCIL				MLY50A	
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input checked="" type="checkbox"/> Coordinated Party Expenditures	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
GUILFORD COUNTY DEMOCRATIC PARTY			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b>
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	CHECK	SPONSOR		\$ 100.00	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b>
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
				\$	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b>
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
				\$	
				\$	
<b>5. Total only this Page</b>					\$
<b>6. Total of ALL CRO-1310 Pages</b>					\$
<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>					