

Rec 4-26-04
fc

Disclosure Report Cover APR 26 2004

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	
Katherine Lee Payne Campaign Committee		14YIC4	
b. Mailing Address (include City, State and Zip Code)		d. Date Filed	
1903 Madison Ave Greensboro NC 27403		04/26/2004	
		e. Phone Number	
		336-275-8811	

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name
			Rene D Lawrence

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"/> Organizational	<input type="checkbox"/> State/County	<input type="checkbox"/> Referendum
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum		<input type="checkbox"/> Pre-primary	<input checked="" type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-election	<input type="checkbox"/> First Plus	<input type="checkbox"/> Final
<input type="checkbox"/> Soft Money Account		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Third Plus	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Political Party Financing Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Semi-annual	9. Special Report Name
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Final	<input type="checkbox"/> Mid Year	
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Special	<input type="checkbox"/> Year End	
<input type="checkbox"/> Other:			<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

10. Account Information		10. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
Branch Bank and Trust			
b. Purpose	c. Code	b. Purpose	c. Code
Checking - for receipts and expenses	KLP		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 188.51		\$

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.

Rene D Lawrence _____ 04/26/2004
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

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

Detailed Summary

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)		2. Type of Report	3. ID Number	
Katherine lee Payne Campaign Committee		Organizational		
Start of Election Cycle: January 1, 2004		Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start		\$ 188.51	\$	
RECEIPTS				
5) Aggregated Contributions from Individuals (CRO-1205)		\$	\$	
6) Contributions from Individuals (CRO-1210)		\$	\$	
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)		\$	\$	
EXPENDITURES				
14) Disbursements (CRO-1310)				
14a) Operating Expenditures (CRO-1310)		\$	\$	
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)		\$	\$	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)		\$ 188.51	\$	
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		\$	\$	

Disbursements

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Katheerine lee Payne Campaign Committee					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses		<input checked="" type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Rene Lawrence 1903 Madison Ave Greensboro, NC 27403					
			c. Level Registered (Specify) <input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" 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	
KLP				\$	
				\$	
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
			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	
				\$	
				\$	
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
			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	
				\$	
				\$	
5. Total only this Page				\$	
6. Total of ALL CRO-1310 Pages				\$ 0.00	
<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>					