

JUL 09 2004

Disclosure Report Cover

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	
ROGER COTTEN CAMPAIGN		644526	
b. Mailing Address (include City, State and Zip Code)		d. Date Filed	
1801 HOBBS ROAD GREENSBORO NC 27410			
		e. Phone Number	
		336 852 1955	

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name
2004	5/7/04	6/30/04	ROGER COTTEN

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 checked="" 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	9. Special Report Name
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
<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		10. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
CCB - SOLEM GROUP			
b. Purpose	c. Code	b. Purpose	c. Code
ALL CAMPAIGN	1		
EXPENSES			
	d. Period Begin Balance		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.

ROGER COTTEN Roger Cotten 7/9/04
 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	Total this Reporting Period	Total this Election Cycle
ROGER COTTEN CAMPAIGN	2004 2nd QUARTERLY Report	644526		
Start of Election Cycle: January 1, _____				
4) Cash on Hand at Start			\$ 0	\$ 0
RECEIPTS				
5) Aggregated Contributions from Individuals (CRO-1205)			\$ 4,985.00	\$ 4,985.00
6) Contributions from Individuals (CRO-1210)			\$ 7,500.00	\$ 7,660.52
7) Contributions from Political Party Committees (CRO-1220)			\$ 0	\$ 0
8) Contributions from Other Political Committees (CRO-1230)			\$ I	\$ I
9) Loan Proceeds (CRO-1410)			\$ I	\$ I
10) Refunds/Reimbursements To the Committee (CRO-1240)			\$ I	\$ I
11) Other Receipt Sources (CRO-1250)				
11a) Interest on Bank Accounts (CRO-1250)			\$ 0	\$ 0
11b) Contributions from Not-for-Profit Organizations (CRO-1250)			\$ I	\$ I
11c) Outside Sources of Income (CRO-1250)			\$ I	\$ I
12) "Goods and Services" Contributions (CRO-1260)			\$ I	\$ I
13) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)			\$ 12,485.00	\$ 12,645.52
EXPENDITURES				
14) Disbursements (CRO-1310)				
14a) Operating Expenditures (CRO-1310)			\$ 5,171.24	\$ 5,171.24
14b) Contributions to Candidates/Political Committees (CRO-1310)			\$ 0	\$ 0
14c) Coordinated Party Expenditures (CRO-1310)			\$ I	\$ I
15) Loan Repayments (CRO-1420)			\$ I	\$ I
16) Refunds/Reimbursements From the Committee (CRO-1320)			\$ I	\$ I
17) In-Kind Contributions (CRO-1510)			\$ I	\$ 160.52
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)			\$ 5,171.24	\$ 5,331.76
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)			\$ 7,313.76	\$ 7,313.76
ADDITIONAL INFORMATION				
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)			\$ 0	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)			\$ I	
22) Debts and Obligations owed By the Committee (CRO-1610)			\$ I	
23) Debts and Obligations owed To the Committee (CRO-1620)			\$ I	
24) Account Transfers Within the Committee (CRO-1720)			\$ I	
25) Administrative Support (CRO-1710)			\$ I	\$ 0
26) Forgiven Loans (CRO-1440)			\$ I	\$ I
27) 48-Hour Notice Reports Sum			\$ I	\$ I

Aggregated Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) ROGER COTTEN CAMPAIGN	2. ID Number 6YY52G
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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	CHECK		5/17/04	\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CASH			\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK		5/26/04	\$ 75.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CASH		6/1/04	\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CASH		6/11/04	\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1	CHECK			\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1				\$ 100.00

4. Total only this Page	\$ 2150.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>	\$ 4985.00

Aggregated Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
ROGER COTTEN CAMPAIGN	6Y452G

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	1	CHECK		6/11/04	\$ 100.00
<input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add	1				\$ 35.00
<input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add	1			6/21/04	\$ 100.00
<input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add	1				\$ 100.00
<input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add	1				\$ 50.00
<input type="checkbox"/> Remove	1				\$ 50.00
<input type="checkbox"/> Add	1				\$ 100.00
<input type="checkbox"/> Remove	1				\$ 50.00
<input type="checkbox"/> Add	1				\$ 50.00
<input type="checkbox"/> Remove	1				\$ 50.00
<input type="checkbox"/> Add	1				\$ 50.00
<input type="checkbox"/> Remove	1				\$ 50.00
<input type="checkbox"/> Add	1				\$ 100.00
<input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add	1	CHECK			\$ 100.00
<input type="checkbox"/> Remove	1				\$ 100.00
<input type="checkbox"/> Add	1	CASH			\$ 100.00
<input type="checkbox"/> Remove	1			6/25/04	\$ 100.00
<input type="checkbox"/> Add	1				\$ 100.00
<input type="checkbox"/> Remove	1				\$ 50.00
<input type="checkbox"/> Add	1				\$ 50.00
<input type="checkbox"/> Remove	1				\$ 50.00

4. Total only this Page	\$ 1835.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>	\$ 4985.00

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
ROGER COTTEN CAMPAIGN					6YY52G	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
F. NORBERT HELTOR JR. 11724 RAVEN RIDGE RD. RALEIGH, NC 27614 (919) 870-8535			PRESIDENT			
			c. Employer's Name/Specific Field			
			D.H. GRIFFIN CONSTRUCTION Co		e. Election Cycle Sum to Date	
				\$ 200.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	CHECK		5/17/04	\$ 200.00	
<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)			b. Job Title/Profession		d. Comments	
DENNIS R. BARRY 107 IRVING PARK CT. GREENSBORO, NC 27408 (336) 570-1164			CEO			
			c. Employer's Name/Specific Field			
			MOSES CONE HEALTH SYSTEMS		e. Election Cycle Sum to Date	
				\$ 200.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	CHECK		5/17/04	\$ 200.00	
<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)			b. Job Title/Profession		d. Comments	
HENRY H. ISAACSON PO Box 1888 GREENSBORO, NC 27402-1888 (336) 275-7626			ATTORNEY			
			c. Employer's Name/Specific Field			
			ISAACSON, ISAACSON & SHERIDAN LLP		e. Election Cycle Sum to Date	
				\$ 200.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	CHECK		5/17/04	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 600.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 7500.00	

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
ROGER COTTEN CAMPAIGN						6YY52G	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MARK L. ISAACSON 2308 PRINCESS ANN ST. GREENSBORO, NC 27408 (336) 275-7626				ATTORNEY			
				c. Employer's Name/Specific Field			
				ISAACSON, ISAACSON & SHERIDAN			
				e. Election Cycle Sum to Date		\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		5/17/04	\$ 200.00		
<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)				b. Job Title/Profession		d. Comments	
DENNIS GLASS 3 LOCH RIDGE COURT GREENSBORO, NC 27408 (336) 545-9400 (336) 691-3441				PRES./CEO			
				c. Employer's Name/Specific Field			
				JEFFERSON PILOT CORP			
				e. Election Cycle Sum to Date		\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		5/17/04	\$ 200.00		
<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)				b. Job Title/Profession		d. Comments	
ALAN D. RIKE 5611 WATERCREST DR. GREENSBORO, NC 27407 (336) 854-4411				PRESIDENT			
				c. Employer's Name/Specific Field			
				SOUTH TRUST BANK			
				e. Election Cycle Sum to Date		\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		5/17/04	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 600.00	
5. Total of ALL CRO-1210 Pages						\$ 7500.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) ROGER COTTEN CAMPAIGN						2. ID Number 64452G	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) WILLIAM J. ARMFIELD, IV 300 N. GREENE ST., SUITE 2190 GREENSBORO, NC 27401-2167				b. Job Title/Profession PRESIDENT		d. Comments	
				c. Employer's Name/Specific Field SPOTSWOOD CAPITAL		e. Election Cycle Sum to Date \$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		5/17/04	\$ 200.00		
<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) MARYLENE F. GRIFFIN 4700 HILLTOP ROAD GREENSBORO, NC 27407 (336) 855-7030				b. Job Title/Profession VICE PRESIDENT		d. Comments	
				c. Employer's Name/Specific Field D.H. GRIFFIN KRECKING Co.		e. Election Cycle Sum to Date \$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		5/26/04	\$ 1,000.00		
<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) MAURICE JENNINGS 900 BEACH ROAD APT. 383 YERO BEACH, FL 32963 (336) 229-6671				b. Job Title/Profession RETIRED CEO		d. Comments	
				c. Employer's Name/Specific Field BISCUITVILLE		e. Election Cycle Sum to Date \$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		5/26/04	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1400.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 7500.00	

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
ROGER COTTEN CAMPAIGN						6YY52G	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (Include city, state, & zip)				b. Job Title/Profession		d. Comments	
TIMOTHY B. BURNETT 810 COUNTRY CLUB DR. GREENSBORO, NC 27408 (336) 272-8179				PRESIDENT			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				BESSEMER IMPROVEMENT CO.		\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		6/1/04	\$ 200.00		
<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)				b. Job Title/Profession		d. Comments	
DAVID HUGHES GRIFFIN JR. 4213 BRAMBLETYE DR. GREENSBORO, NC 27407 (336) 855-9371				VICE PRESIDENT			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				DH GRIFFIN WRECKING CO.		\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		6/1/04	\$ 300.00		
<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)				b. Job Title/Profession		d. Comments	
CHARLES E. MELVIN, JR 902 FOREST HILL DR. GREENSBORO, NC 27410 (336) 299-0435				ATTORNEY			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				SMITH, HELMS LLP		\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		6/1/04	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 700.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 7500.00	

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
ROGER COTTEN CAMPAIGN						6YY52G	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
W.L. HEMPHILL 7 SAINT AUGUSTINE SQUARE GREENSBORO, NC 27408 (336) 282-0849				RETIRED CEO			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				UNITED GUARANTY CORP		\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		6/7/04	\$ 250.00		
<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)				b. Job Title/Profession		d. Comments	
THOMAS L. WHITE 603 SUNSET DR. GREENSBORO, NC 27408 (336) 275-8586				PRESIDENT			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				ALLIANCE MGMT INC.		\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		6/7/04	\$ 150.00		
<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)				b. Job Title/Profession		d. Comments	
JEFFREY A TODD 3 GLEN EAGLE CT. GREENSBORO, NC 27408 (336) 288-4743				PHYSICIAN			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				LEBAUER HEALTH CARE BRASSFIELD		\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		6/11/04	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 650.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 7500.00	

Contributions from Individuals

1. Committee Full Name (and Fund if applicable)						2. ID Number	
ROGER COTTEN CAMPAIGN						6YY52G	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MICHAEL W. HALEY 902 COUNTRY CLUB DR. GREENSBORO, NC 27408 (336) 273-4101				CHAIRMAN/CEO			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				TRITON MGMT COMPANY		\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		6/11/04	\$ 500.00		
<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)				b. Job Title/Profession		d. Comments	
RICHARD JENNINGS PO BOX 13091 GREENSBORO, NC 27415 (336) 272-4987				REAL ESTATE			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				COUNTRY CLUB APTS.		\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		6/11/04	\$ 150.00		
<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)				b. Job Title/Profession		d. Comments	
G.R. BUCHANAN 701 ROLLINGWOOD DR. GREENSBORO, NC 27410-4521 (336) 299-7222				PHARMACIST/OWNER			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				GATE CITY PHARMACY		\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		6/11/04	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 900.00	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>						\$ 7500.00	

Contributions from Individuals

Pg 7 of 10

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
ROGER COTTEN CAMPAIGN						6YY52G	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ES MELVIN 106 WILLOUGHBY BLYD. GREENSBORO, NC 27408 (336) 691-9803				PRESIDENT			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				JOSEPH BRYAN FOUNDATION		\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		6/11/04	\$ 250.00		
<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)				b. Job Title/Profession		d. Comments	
JEFF MOTT 4604 HICKORY WOODS DR. GREENSBORO, NC 27410 (336) 855-6062				CFO			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				DH GRIFFIN WRECKING Co.		\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		6/11/04	\$ 200.00		
<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)				b. Job Title/Profession		d. Comments	
JERONE D. PEARSON 3402 WYNNWOOD DR. GREENSBORO, NC 27408 (336) 288-5670				PRES./CEO			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				JERONE PEARSON INC.		\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		6/21/04	\$ 300.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page					\$ 750.00		
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 7500.00		

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
ROGER COTTEN CAMPAIGN						6YY52G	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
WILEY A. SYKES, JR. 820 LARKWOOD DR. GREENSBORO, NC 27410 (336) 299-3611				WA PRES.			
				c. Employer's Name/Specific Field			
				WA SYKES REAL ESTATE		e. Election Cycle Sum to Date	
						\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		6/21/04	\$ 250.00		
<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)				b. Job Title/Profession		d. Comments	
COY O. WILLIARD, JR. 449 WRENN ST. HIGH POINT, NC 27260 (336) 882-2500.				PRES.			
				c. Employer's Name/Specific Field			
				WILLIARD STEWART INC.		e. Election Cycle Sum to Date	
						\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		6/21/04	\$ 250.00		
<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)				b. Job Title/Profession		d. Comments	
WILLIAM B. RHODES 5920 DAVIS MILL RD. GREENSBORO, NC 27406 (336) 854-1020				RETIRED			
				c. Employer's Name/Specific Field			
						e. Election Cycle Sum to Date	
						\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		6/21/04	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 750.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 7500.00	

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
ROGER COTTEN CAMPAIGN						6YY52G	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
BETTY B. PETTY 2132 BISHOP RD. GREENSBORO, NC 27406 (336) 292-1276				RETIRED			
				c. Employer's Name/Specific Field			
						e. Election Cycle Sum to Date	
						\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		6/21/04	\$ 250.00		
<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)				b. Job Title/Profession		d. Comments	
WILLIAM S. JONES 1808 ST. ANDREWS RD GREENSBORO, NC 27408 (336) 275-1117				RETIRED			
				c. Employer's Name/Specific Field			
						e. Election Cycle Sum to Date	
						\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		6/21/04	\$ 250.00		
<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)				b. Job Title/Profession		d. Comments	
MARTHA S. BERRIER 710 STAUNTON DR. GREENSBORO, NC 27410-6005 (336) 852-8467				HOUSEWIFE			
				c. Employer's Name/Specific Field			
						e. Election Cycle Sum to Date	
						\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		6/21/04	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 700.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 7500.00	

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
ROGER COTTEN CAMPAIGN						6YX52G	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
PAMELA D. DUNCAN 3103 ST. REGIS RD. GREENSBORO, NC 27408-4408 (336) 545-3048				HOUSEWIFE			
				c. Employer's Name/Specific Field			
						e. Election Cycle Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		6/21/04	\$ 250.00		
<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)				b. Job Title/Profession		d. Comments	
BJ BARNES 2709 PLEASANT RIDGE RD. SUMMERFIELD, NC 27358 (336) 643-5972				SHERIFF			
				c. Employer's Name/Specific Field			
				GUILFORD COUNTY		e. Election Cycle Sum to Date	
						\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		6/25/04	\$ 200.00		
<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)				b. Job Title/Profession		d. Comments	
				c. Employer's Name/Specific Field			
						e. Election Cycle Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 450.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 7500.00	

Disbursements

Pg 1 of 3

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) ROGER COTTEN CAMPAIGN				2. ID Number 6YV52G	
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) PIP PRINTING - GREENSBORO 11603-B WESTOVER TERRACE GREENSBORO NC 27408 336-282-6096		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 \$ 968.08	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	CHECK	CONTRIBUTION CARDS	05/27/2004	\$ 968.08	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) WOOTEN GRAPHICS INC. 172 HINKLE LANE P.O. Box 819 WELCOME NC 27374 336-731-4650		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 \$ 2996.00	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	CHECK	SIGALS	05/28/2004	\$ 2996.00	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) US POSTMASTER HILLTOP STATION GREENSBORO NC 27417-9998 336-323-1562		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 \$ 74.00	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	CHECK	POSTAGE	05/29/2004	\$ 74.00	
				\$	
5. Total only this Page				\$ 4038.08	
6. Total of ALL CRO-1310 Pages <i>(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)</i>				\$ 5171.24	

Disbursements

1. Committee Full Name (and Fund if applicable) ROGER COTTEN CAMPAIGN				2. ID Number 6YY52G	
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, & zip)</i> CAVIN + STOVALL PHOTOGRAPHY 2806 ALDERMAN COURT GREENSBORO NC 27408 336-292-2701			b. Coordinated Committee Name		d. Comments
			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:		\$ 159.16
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	CHECK	PHOTOGRAPH	06/02/2004	\$ 159.16	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(Include city, state, & zip)</i> US POSTMASTER FRIENDLY STATION GREENSBORO NC 27408-7608 800-275-8777			b. Coordinated Committee Name		d. Comments
			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:		\$ 74.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	CHECK	POSTAGE	06/04/2004	\$ 74.00	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(Include city, state, & zip)</i> CATTEN ENTERPRISES 301 N. ELM ST., SUITE 227 GREENSBORO NC 27401 336-273-4700			b. Coordinated Committee Name		d. Comments
			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:		\$ 250.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	CHECK	WORKSHOP	06/25/2004	\$ 250.00	
				\$	
5. Total only this Page				\$ 483.16	
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>				\$ 5171.24	

