

Disclosure Report Cover

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
Childs for School Board	M2Y7FM
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
1742 Stonybrook Ct. High Point, NC-27264	11/11/04
	e. Phone Number
	336-889-6420

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name
2004	5.4.04	11/15/04	Jessie Gilmore Henderson

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

10. Account Information		10. Account Information	
a. Financial Institution Full Name	b. Purpose	a. Financial Institution Full Name	b. Purpose
Wachovia B & T	Candidate Committee		
	Deposit and Expenses		
c. Code	d. Period Begin Balance	c. Code	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.

Jessie Gilmore Henderson
 Printed Name of Signer

Jessie Gilmore Henderson
 Signature of Appointed Treasurer

12/22/04
 Date

FOR OFFICE USE ONLY

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

Disclosure Report Cover

Amendment	
<input type="checkbox"/> Yes	<input 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
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
e. Phone Number	

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name
	05/03/2004	01/10/2005	Jessie Gilmore Henderson

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	Municipal	State/County	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	Quarterly	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus	<input type="checkbox"/> Final
<input type="checkbox"/> Soft Money Account		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third Plus	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Political Party Financing Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	9. Special Report Name
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Final	<input 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	
b. Purpose	c. Code	b. Purpose	c. Code
	d. Period Begin Balance		d. Period Begin Balance
	\$		\$

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.

Jessie Gilmore Henderson Jessie Gilmore Henderson 01/10/05
 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
Chilids for School Board			May 7 FM
Start of Election Cycle: January 1, _____		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$	\$
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$ 2640. ⁰⁰
6) Contributions from Individuals	(CRO-1210)	\$	\$ 2150. ⁰⁰
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$ 0
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)	\$	\$
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0	
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
<input type="checkbox"/> Yes <input type="checkbox"/> No

1. Committee Full Name (and Fund if applicable)					2. ID Number
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	19831792	Check		7/13/04	\$ 50
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		7/13/04	\$ 50
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		7/13/04	\$ 50
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		7/13/04	\$ 100
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		7/13/04	\$ 100
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		7/13/04	\$ 100
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		7/13/04	\$ 100
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		7/24/04	\$ 100
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		7/13	\$ 100
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		7/17	\$ 50
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		7/17	\$ 25
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		7/17/04	\$ 5
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		7/17/04	\$ 25
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		7/25/04	\$ 50
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		7/25/04	\$ 50
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		7/25/04	\$ 100
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		7/25/04	\$ 30
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		7/25/04	\$ 20
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		8/1/04	\$ 50
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		8/1/04	\$ 100
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		8/1/04	\$ 75
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		8/1/04	\$ 25
<input type="checkbox"/> Add					
<input type="checkbox"/> Remove	19831792	Check		8/1/04	\$ 25
4. Total only this Page					\$ 1305.00
5. Total of ALL CRO-1205 Pages					\$
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					

Aggregated Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
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	19831792	Check		8/1/04	\$ 100	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		8/2/04	\$ 60	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		8/3/04	\$ 15	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		8/3/04	\$ 50	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		8/11/04	\$ 50	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		8/11/04	\$ 25	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		8/23/04	\$ 25	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		8/23/04	\$ 50	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		8/23/04	\$ 50	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		8/23/04	\$ 100	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		8/24	\$ 20	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		8/24	\$ 50	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		10/9	\$ 25	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		10/9	\$ 50	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		10/9	\$ 100	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		10/9	\$ 30	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		10/9	\$ 75	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		10/9	\$ 25	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		10/9	\$ 10	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		10/9	\$ 50	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		10/9	\$ 50	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		10/9	\$ 100	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	19831792	Check		10/10	\$ 50	
4. Total only this Page					\$ 1160.00	
5. Total of ALL CRO-1205 Pages					\$	
<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>Childs for School Bd</i>	2. ID Number
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3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Benjamin Williams 1300 Windchime Dr. Calroy 27235</i>	b. Job Title/Profession <i>Dentist</i>	d. Comments
	c. Employer's Name/Specific Field <i>Ben Williams Dentist</i>	
		e. Election Cycle Sum to Date \$ <i>500.00</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>19831792</i>	<i>Check</i>		<i>7/13/04</i>	\$ <i>500.00</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>William Price P.O. Box 5881 High Point, NC 27262</i>	b. Job Title/Profession <i>Realtor</i>	d. Comments
	c. Employer's Name/Specific Field <i>Price Realtor</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>19831792</i>	<i>Check</i>		<i>7-13-04</i>	\$ <i>200.00</i>
<input type="checkbox"/>					\$ <i>150.00</i>
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Jerri Price P.O. Box 5881 High Point, NC 27262</i>	b. Job Title/Profession <i>Teacher</i>	d. Comments
	c. Employer's Name/Specific Field <i>Gulford County Schools</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>19831792</i>	<i>Check</i>		<i>7/13/04</i>	\$ <i>200.00</i>
<input type="checkbox"/>		<i>Check</i>			\$ <i>150.00</i>
<input type="checkbox"/>					\$

4. Total only this Page \$ *900.00*

5. Total of ALL CRO-1210 Pages \$

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

1. Committee Full Name (and Fund if applicable)					2. ID Number
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	
<i>David Horney P.O. Box 2243 High Point, NC 27261</i>			c. Employer's Name/Specific Field	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>Check</i>		<i>7/13/04</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)			b. Job Title/Profession	d. Comments	
<i>William Horney 1009 Chickliff High Point, NC 27265</i>			c. Employer's Name/Specific Field	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>Check</i>		<i>7/13/04</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)			b. Job Title/Profession	d. Comments	
<i>Dorothy Childs 174 Stonybrook Ct. High Point, N.C. 27269</i>			c. Employer's Name/Specific Field	e. Election Cycle Sum to Date \$ <i>200.00</i>	
			<i>Housewife</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>Check</i>		<i>7/13</i>	\$ <i>200.00</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ <i>600.00</i>
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$

Contributions from Individuals

1. Committee Full Name (and Fund if applicable)						2. ID Number
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	
<i>Clinton O'Keefe Kellian 6908 Ridgeland Dr. Oakland, Cal 94611</i>			<i>Lawyer</i>			
			c. Employer's Name/Specific Field			
			<i>Kellian Law Office</i>		e. Election Cycle Sum to Date	
					\$ 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"/>		<i>Check</i>		<i>8/30/04</i>	\$ 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	
<i>Barney Jackson 908</i>			<i>Doctor</i>			
			c. Employer's Name/Specific Field			
					e. Election Cycle Sum to Date	
					\$ 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"/>					\$	
<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					\$ <i>650.00</i>	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ <i>2150.00</i>	

Disbursements

1. Committee Full Name (and Fund if applicable) <i>Elect Walter Childs</i>				2. ID Number	
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 <i>(include city, state, & zip)</i> <i>Guilford Cty Board of Elections</i>			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 \$ <i>450.00</i>
f. Account Code	g. Form of Payment <i>check</i>	h. Purpose <i>walking list</i>	i. Date (mm/dd/yyyy) <i>5/04/2004</i>	j. Amount \$ <i>60.00</i>	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> <i>The Marshall Group</i>			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 \$ <i>1765.00</i>
f. Account Code	g. Form of Payment <i>check</i>	h. Purpose <i>printing</i>	i. Date (mm/dd/yyyy) <i>06/23/2004</i>	j. Amount \$ <i>500.00</i>	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> <i>US Postal Service</i>			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 \$ <i>1590.00</i>
f. Account Code	g. Form of Payment <i>check</i>	h. Purpose <i>stamps</i>	i. Date (mm/dd/yyyy) <i>07/06/2004</i>	j. Amount \$ <i>37.00</i>	
				\$	
5. Total only this Page				\$ <i>597.00</i>	
6. Total of ALL CRO-1310 Pages				\$	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>					
<i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>					
<i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

Disbursements

1. Committee Full Name (and Fund if applicable) <i>Elect Walter Childs</i>				2. ID Number	
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 <i>(include city, state, & zip)</i> <i>Central Carolina Printing</i>			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 \$ <i>1928.00</i>
f. Account Code	g. Form of Payment <i>check</i>	h. Purpose <i>printing</i>	i. Date (mm/dd/yyyy) <i>07/28/2004</i>	j. Amount \$ <i>208.65</i>	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> <i>US Postal Service</i>			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 \$ <i>1719.35</i>
f. Account Code	g. Form of Payment <i>check</i>	h. Purpose <i>stamps</i>	i. Date (mm/dd/yyyy) <i>08/03/2004</i>	j. Amount \$ <i>37.00</i>	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> <i>Guilford Cty Board of Elections</i>			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 \$ <i>1682.35</i>
f. Account Code	g. Form of Payment <i>check</i>	h. Purpose	i. Date (mm/dd/yyyy) <i>8/09/2004</i>	j. Amount \$ <i>63.00</i>	
				\$	
5. Total only this Page				\$ <i>308.65</i>	
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>				\$	

Disbursements

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Elect Walter Childs					
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)			b. Coordinated Committee Name		d. Comments
office Depot			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 \$ 1619.35
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	check	supplies	08/11/2004	\$ 53.41	
				\$	
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
Leslie Graham			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 \$ 3060.94
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
		stamps	08/31/2004	\$ 74.00	
				\$	
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
The Marshall Group			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 \$ 2986.94
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	check	printing	8/31/2004	\$ 500.00	
				\$	
5. Total only this Page				\$ 627.41	
6. Total of ALL CRO-1310 Pages				\$	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>					
<i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>					
<i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

Disbursements

1. Committee Full Name (and Fund If applicable)				2. ID Number	
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)			b. Coordinated Committee Name		d. Comments
<i>Sir Speedy</i>			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:		
					\$ <i>3286.94</i>
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	<i>check</i>	<i>Supplies</i>	<i>9/23/04</i>	\$ <i>292.00</i>	
				\$	
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
<i>Sir Speedy</i>			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:		
					\$ <i>2994.83</i>
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	<i>check</i>	<i>Supplies</i>	<i>10/04/04</i>	\$ <i>192.82</i>	
				\$	
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
<i>Office Depot</i>			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:		
					\$ <i>2802.01</i>
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	<i>check</i>	<i>Supplies</i>	<i>10/20/04</i>	\$ <i>38.50</i>	
				\$	
5. Total only this Page				\$ <i>523.43</i>	
6. Total of ALL CRO-1310 Pages				\$	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>					
<i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>					
<i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

Disbursements

1. Committee Full Name (and Fund if applicable)				2. ID Number	
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)		b. Coordinated Committee Name		d. Comments	
<i>Jamestown News</i>		c. Level Registered (Specify)		e. Election Cycle Sum to Date \$ <i>2763.51</i>	
		<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	
	<i>check</i>	<i>advertisement</i>	<i>10/22/04</i>	<i>\$ 123.30</i>	
				\$	
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	
<i>Van's Advertisement</i>		c. Level Registered (Specify)		e. Election Cycle Sum to Date \$ <i>2640.21</i>	
		<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	
	<i>check</i>	<i>advertisement</i>	<i>10/8/04</i>	<i>\$ 673.14</i>	
				\$	
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	
<i>High Point Enterprise</i>		c. Level Registered (Specify)		e. Election Cycle Sum to Date \$ <i>1967.07</i>	
		<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	
	<i>check</i>	<i>Advertisement</i>	<i>10/22/04</i>	<i>\$ 248.40</i>	
				\$	
5. Total only this Page				\$ <i>1044.84</i>	
6. Total of ALL CRO-1310 Pages				\$	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

Disbursements

1. Committee Full Name (and Fund if applicable)				2. ID Number	
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)			b. Coordinated Committee Name		d. Comments
NEWS and RECORD			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:		
					\$ 1718 ⁶⁷
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	check	advertisement	10/25/04	\$ 138.36	
				\$	
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
Ed Price & Assoc			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:		
					\$ 1580.31
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	check	postage	10/23/2004	\$ 650 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
Office Depot			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:		
					\$ 1820.31
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	check	paper	10/28/2004	\$ 42.80	
				\$	
5. Total only this Page				\$ 831.16	
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>					

Disbursements

1. Committee Full Name (and Fund if applicable)				2. ID Number	
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)			b. Coordinated Committee Name		d. Comments
Office Depot			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:		
					\$ 1917.51
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	check	supplies	11/01/2004	\$ 106.83	
				\$	
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
Raymond McAllister			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:		
					\$ 1860.68
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	check	food for poll workers	11/08/2004	\$ 170.00	
				\$	
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			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:		
					\$ 1690.68
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	check	stamps	11/09/2004	\$ 37.00	
				\$	
5. Total only this Page				\$ 313.83	
6. Total of ALL CRO-1310 Pages				\$	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>					
<i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>					
<i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

Disbursements

1. Committee Full Name (and Fund if applicable)				2. ID Number	
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)			b. Coordinated Committee Name		d. Comments
Canteberry Restaurant			c. Level Registered (Specify)		e. Election Cycle Sum to Date \$ 1653.68
			<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	
	check		11/18/2004	\$ 533.28	
				\$	
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			c. Level Registered (Specify)		e. Election Cycle Sum to Date \$ 1120.40
			<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	
	check	Stamps	01/04/2005	\$ 37.00	
				\$	
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
Cash -			c. Level Registered (Specify)		e. Election Cycle Sum to Date \$ 1083.40
			<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	
	Counter check		01/04/2005	\$ 283.00	
				\$	
5. Total only this Page				\$ 853.28	
6. Total of ALL CRO-1310 Pages				\$	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>					
<i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>					
<i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

Disbursements

1. Committee Full Name (and Fund if applicable)				2. ID Number	
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)			b. Coordinated Committee Name		d. Comments
Wachovia			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	
	check	to purpose official check	01/10/2005	\$ 775.40	
		to Marshall Group		\$ 0	
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					\$
<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>					