

RECEIVED

JAN 10 2005

GUILFORD COUNTY BOARD of ELECTIONS

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: TRUDY Wade Campaign
c. ID Number: 562188620
b. Mailing Address: 201 W. Market St., Ste 401 Greensboro, N.C. 27401
d. Date Filed: 1-10-05
e. Phone Number:

2. Report Year: 2004
3. Period Start Date: 10-17-04
4. Period End Date: 12-31-04
5. Treasurer Full Name: David M. Wood

6. Type of Committee: Candidate Campaign
8. Type of Report: Municipal
9. Special Report Name:

10. Account Information: Branch Banking & Trust Co.
b. Purpose: For all campaign expenses
c. Code: 1342
d. Period Begin Balance: \$29,881.63

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.

David M. Wood
Printed Name of Signer

David M. Wood
Signature of Appointed Treasurer

1-10-05
Date

FOR OFFICE USE ONLY

Date Received: Employee: Delivery Method: Normal Mail, Registered Mail, Hand Delivered, Electronically Filed

Detailed Summary

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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
TRUDY Wade Campaign	Fourth Quarter	562188620	
Start of Election Cycle: January 1, <u>2004</u>	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 29,881.63	\$ 38,788.98	
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 745	\$ 745	
6) Contributions from Individuals (CRO-1210)	\$ 2215	\$ 57,975	
7) Contributions from Political Party Committees (CRO-1220)	\$	\$ 880	
8) Contributions from Other Political Committees (CRO-1230)	\$ 600	\$ 1900	
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)	\$ 33,441.63	\$ 100,288.98	
EXPENDITURES			
14) Disbursements (CRO-1310)			
14a) Operating Expenditures (CRO-1310)	\$ 31,890.59	\$ 60,167.16	
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)	\$ 1,551.04	\$ 40,121.82	
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

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) <i>TRUDY Wade Campaign</i>				2. ID Number <i>562188620</i>	
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	
<i>Greater Greensboro OB server 910 N. EIM St. Greensboro, NC 27401</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>\$ 1,300⁰⁰</i>	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	<i>A</i>	<i>advertising</i>	<i>10-18-04</i>	<i>\$ 1,300⁰⁰</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>WFMY TV 1615 Phillips Ave Greensboro</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>\$ 1,000⁰⁰</i>	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	<i>A</i>	<i>advertising</i>	<i>10-18-04</i>	<i>\$ 1000⁰⁰</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>Rhino Times 107 E. Market St. Greensboro, NC 27401</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>\$ 480⁰⁰</i>	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	<i>A</i>	<i>advertising</i>	<i>10-22-04</i>	<i>\$ 480⁰⁰</i>	
				\$	
5. Total only this Page				<i>\$ 2780⁰⁰</i>	
6. Total of ALL CRO-1310 Pages				<i>\$ 31890.59</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

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) <i>TRUDY Wade Campaign</i>	2. ID Number <i>562188620</i>
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3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*
 Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>FOX 8 TV Greensboro, NC</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>\$ 1301.25</i>

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
	<i>ch</i>	<i>advertising</i>	<i>10-22-04</i>	<i>\$ 1301.25</i>
				\$

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>US Postmaster Greensboro, NC</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>\$ 11,686.98</i>

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
	<i>ch</i>	<i>mailing-advertising</i>	<i>10-22-04</i>	<i>\$ 11,686.98</i>
				\$

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>The mailing Service 1 wendy Ct. Greensboro, NC</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>\$ 4014.70</i>

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
	<i>ch</i>	<i>advertising</i>	<i>10-22-04</i>	<i>\$ 4014.70</i>
				\$

5. Total only this Page *\$ 17,002.93*

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

Disbursements

1. Committee Full Name (and Fund if applicable) <i>TRUDY Wade Campaign</i>					2. ID Number <i>562188620</i>
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) <i>James town News 209 W. Main St. James town, NC 27282</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>\$ 1013.00</i>	
f. Account Code	g. Form of Payment <i>ck</i>	h. Purpose <i>advertising</i>	i. Date (mm/dd/yyyy) <i>10-25-04</i>	j. Amount <i>\$ 1013.00</i>	
				<i>\$</i>	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>High Point Enterprise 210 Church Ave. High Point, NC 27262</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>\$ 1304.10</i>	
f. Account Code	g. Form of Payment <i>ck</i>	h. Purpose <i>advertising</i>	i. Date (mm/dd/yyyy) <i>10-25-04</i>	j. Amount <i>\$ 1304.10</i>	
				<i>\$</i>	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Ranco Printing 1405 Clermont St Greensboro, NC 27407</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>\$ 132.35</i>	
f. Account Code	g. Form of Payment <i>ck</i>	h. Purpose <i>printing</i>	i. Date (mm/dd/yyyy) <i>12-6-04</i>	j. Amount <i>\$ 51.36</i>	
				<i>\$</i>	
5. Total only this Page				<i>\$ 2368.46</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>				<i>\$</i>	

Disbursements

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) <i>TRUDY WADE Campaign</i>				2. ID Number <i>562188620</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>TRUDY Wade for reimbursement + <u>Wooten</u> graphics Drawer 819 Wetcom, NC 27374</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>\$ 6280.90</i>	
f. Account Code	g. Form of Payment <i>ck</i>	h. Purpose <i>Reimbursement</i>	i. Date (mm/dd/yyyy) <i>10-26-04</i>	j. Amount <i>\$ 2739.20</i>	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Hunter, Higgins, Miles Elam + Benjamin 101 W. Friendly Ave. Greensboro, NC 27401</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>\$ 7,000</i>	
f. Account Code	g. Form of Payment <i>ck</i>	h. Purpose <i>legal fees</i>	i. Date (mm/dd/yyyy) <i>11-8-04</i>	j. Amount <i>\$ 2,000</i>	
	<i>ck</i>	<i>legal fees</i>	<i>11-26-04</i>	<i>\$ 5,000</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	
		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				<i>\$ 9739.20</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>				\$	

Aggregated Contributions from Individuals

Page 1 of 1

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) <i>TRUDY Wade Campaign</i>	2. ID Number <i>562188620</i>
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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		<i>ch</i>		<i>10-15-04</i>	<i>\$ 100</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>ch</i>		<i>10-14-04</i>	<i>\$ 100</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>ch</i>		<i>10-14-04</i>	<i>\$ 60</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>ch</i>		<i>10-15-04</i>	<i>\$ 50</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>ch</i>		<i>10-18-04</i>	<i>\$ 10</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>ch</i>		<i>11-22-04</i>	<i>\$ 25</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>ch</i>		<i>11-26-04</i>	<i>\$ 50</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>ch</i>		<i>11-23-04</i>	<i>\$ 25</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>ch</i>		<i>11-29-04</i>	<i>\$ 50</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>ch</i>		<i>11-29-04</i>	<i>\$ 50</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>ch</i>		<i>11-29-04</i>	<i>\$ 25</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>ch</i>		<i>10-18-04</i>	<i>\$ 100</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>ch</i>		<i>10-18-04</i>	<i>\$ 50</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<i>ch</i>		<i>10-18-04</i>	<i>\$ 50</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove					<i>\$</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove					<i>\$</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove					<i>\$</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove					<i>\$</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove					<i>\$</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove					<i>\$</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove					<i>\$</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove					<i>\$</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove					<i>\$</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove					<i>\$</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove					<i>\$</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove					<i>\$</i>
<input type="checkbox"/> Add <input type="checkbox"/> Remove					<i>\$</i>

4. Total only this Page	<i>\$ 745⁰⁰</i>
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5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>	<i>\$ 745⁰⁰</i>
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Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
TRUDY Wade Campaign						562188620	
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	
Nicole Arnold 1610 Bridges Dr. High Point, NC 27262							
				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"/>			ck	10-25-04	\$ 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	
William E Price, Jr. P.O. Box 5881 High Point, NC 27262							
				c. Employer's Name/Specific Field			
						e. Election Cycle Sum to Date	
						\$ 800 ⁰⁰	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>			ck	10-18-04	\$ 100 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	
Tim Sessions 6704 Fegan Rd. Summerfield, NC 27358							
				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"/>		ck	ck	10-18-04	\$ 200 ⁰⁰		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 500 ⁰⁰	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 2215.00	

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) <i>TRUDY Wade Campaign</i>						2. ID Number <i>56 2188620</i>
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>R. Odell Payne P. O. Box 6 M S Leansville, NC 27301</i>			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field		e. Election Cycle Sum to Date \$ <i>500⁰⁰</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>ck</i>	<i>10-18-04</i>	\$ <i>500⁰⁰</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>Phil Berger Committee Campaign acct. P. O. Box 1309 Eden, NC 27289</i>			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field		e. Election Cycle Sum to Date \$ <i>215⁰⁰</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>ck</i>	<i>10-18-04</i>	\$ <i>150.00</i>	
<input type="checkbox"/>			<i>ck</i>	<i>10-18-04</i>	\$ <i>65.00</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>W. Eugene Johnston 1610 Granville Rd. Greensboro, NC 27408</i>			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field		e. Election Cycle Sum to Date \$ <i>1000⁰⁰</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>ck</i>	<i>10-18-04</i>	\$ <i>1000⁰⁰</i>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ <i>1715.00</i>	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					\$ <i>2,215.00</i>	

Contributions from Other Political Committees Pg 1 of 1

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) <i>TRUDY Wade Campaign</i>	2. ID Number <i>562188620</i>
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3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Build Political Action Committee NC Home Builders Association P.O. 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 checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Cycle Sum to Date \$ <i>600⁰⁰</i>		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
		<i>ck</i>	<i>10-19-04</i>	\$ <i>100⁰⁰</i>
		<i>ck</i>	<i>10-18-04</i>	\$ <i>500⁰⁰</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 \$		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
				\$
				\$
				\$

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 \$		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
				\$
				\$
				\$

4. Total only this Page	\$ <i>600⁰⁰</i>
5. Total of ALL CRO-1230 Pages <i>(This line must be on line 8 of Detailed Summary Page CRO-1100)</i>	\$ <i>600⁰⁰</i>