

Disclosure Report Cover

Final / Semi

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	
Elect Mike Barber			
b. Mailing Address (include City, State and Zip Code)		d. Date Filed	
1201 Battleground Avenue Greensboro, NC 27408		01/11/2005	
		e. Phone Number	
		336-275-9886	

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name
2004	10/17/2004	12/31/2004	Arthur M. Winstead, Jr.

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"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum		<table border="1"> <tr> <th>Municipal</th> <th>State/County</th> <th>Referendum</th> </tr> <tr> <td><input type="checkbox"/> Organizational</td> <td><input type="checkbox"/> Organizational</td> <td><input type="checkbox"/> Organizational</td> </tr> <tr> <td><input type="checkbox"/> Thirty-five day</td> <td>Quarterly</td> <td><input type="checkbox"/> Pre-referendum</td> </tr> <tr> <td><input type="checkbox"/> Pre-primary</td> <td><input type="checkbox"/> First Plus</td> <td><input type="checkbox"/> Final</td> </tr> <tr> <td><input type="checkbox"/> Pre-election</td> <td><input type="checkbox"/> Second</td> <td><input type="checkbox"/> Supplemental Final</td> </tr> <tr> <td><input type="checkbox"/> Pre-runoff</td> <td><input type="checkbox"/> Third Plus</td> <td><input type="checkbox"/> Annual</td> </tr> <tr> <td>Semi-annual</td> <td><input checked="" type="checkbox"/> Fourth</td> <td><input type="checkbox"/> Special</td> </tr> <tr> <td><input type="checkbox"/> Mid Year</td> <td>Semi-annual</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Year End</td> <td><input type="checkbox"/> Mid Year</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Final</td> <td><input type="checkbox"/> Year End</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Special</td> <td><input checked="" type="checkbox"/> Final</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>			Municipal	State/County	Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Thirty-five day	Quarterly	<input type="checkbox"/> Pre-referendum	<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus	<input type="checkbox"/> Final	<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final	<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third Plus	<input type="checkbox"/> Annual	Semi-annual	<input checked="" type="checkbox"/> Fourth	<input type="checkbox"/> Special	<input type="checkbox"/> Mid Year	Semi-annual		<input checked="" type="checkbox"/> Year End	<input type="checkbox"/> Mid Year		<input type="checkbox"/> Final	<input type="checkbox"/> Year End		<input type="checkbox"/> Special	<input checked="" type="checkbox"/> Final			<input type="checkbox"/> Special	
Municipal	State/County	Referendum																																						
<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational																																						
<input type="checkbox"/> Thirty-five day	Quarterly	<input type="checkbox"/> Pre-referendum																																						
<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus	<input type="checkbox"/> Final																																						
<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final																																						
<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third Plus	<input type="checkbox"/> Annual																																						
Semi-annual	<input checked="" type="checkbox"/> Fourth	<input type="checkbox"/> Special																																						
<input type="checkbox"/> Mid Year	Semi-annual																																							
<input checked="" type="checkbox"/> Year End	<input type="checkbox"/> Mid Year																																							
<input type="checkbox"/> Final	<input type="checkbox"/> Year End																																							
<input type="checkbox"/> Special	<input checked="" type="checkbox"/> Final																																							
	<input type="checkbox"/> Special																																							
7. Type of Fund (if applicable, check one)		9. Special Report Name																																						
<input type="checkbox"/> Soft Money Account <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> NC Political Party Financing Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:																																								

10. Account Information		10. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
Carolina Bank			
b. Purpose	c. Code	b. Purpose	c. Code
Candidate Committee Deposits and expenses	2006464		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 15,598.03		\$

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.

Arthur M. Winstead, Jr. *Arthur M. Winstead* 8-12-05
 Printed Name of Signer Signature of Appointed Treasurer 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: _____	

Detailed Summary

Amendment

Yes No

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
Elect Mike Barber		Fourth Quarter			
Start of Election Cycle: January 1, _____		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 15,598.03		\$ 0.00	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$ 10,735.00	
6) Contributions from Individuals (CRO-1210)		\$		\$ 13,850.00	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$ 1,950.00	
9) Loan Proceeds (CRO-1410)		\$ 3,388.14		\$ 5,408.14	
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 <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)</i>		\$ 3,388.14		\$ 31,943.14	
EXPENDITURES					
14) Disbursements (CRO-1310)					
14a) Operating Expenditures (CRO-1310)		\$ 18,986.17		\$ 31,943.14	
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 <i>(Add lines 14a, 14b, 14c, 15, 16, and 17)</i>		\$ 18,986.17		\$ 31,943.14	
19) Cash on Hand at End <i>(Add lines 4 and 13 together, then subtract line 18)</i>		\$ 0.00		\$ 0.00	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0.00			
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)		\$ 5,408.14		\$ 5,408.14	
27) 48-Hour Notice Reports Sum		\$		\$	

Disbursements

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Elect Mike Barber					
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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Fox 8 High Point, NC					
			c. Level Registered (Specify)		
			<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date
					\$ 840.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
2006464	check	TV ads	10/18/2004	\$ 840.00	
				\$	
4. Payee Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Time Warner Cable Greensboro, NC					
			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
					\$ 5,049.46
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
2006464	check	TV ads	10/18/2004	\$ 5,049.46	
				\$	
4. Payee Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Andy Durham Greensboro, NC					
			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
					\$ 200.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
2006464	check	Radio ads	10/18/2004	\$ 200.00	
				\$	
5. Total only this Page				\$ 6,089.46	
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

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Elect Mike Barber					
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 checked="" type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
News 2 Greensboro, NC					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 3,740.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
2006464	check	Ads	10/25/2004	\$ 3,740.00	
				\$	
4. Payee Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
News & Record Greensboro, NC					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 4,890.59
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
2006464	check	Advertising	10/19/2004	\$ 1,361.72	
				\$	
4. Payee Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Fox 8 High Point, NC					
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 2,520.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
2006464	check	TV ads	10/22/2004	\$ 2,520.00	
				\$	
5. Total only this Page				\$ 7,621.72	
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

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Elect Mike Barber					
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
Tammy Shoemaker Summerfield, NC					
			c. Level Registered (Specify)		
			<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date
					\$ 2,000.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
2006464	check	Advertising	11/03/2004	\$ 2,000.00	
				\$	
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
Angela Breen Greensboro, NC					
			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
					\$ 192.50
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
2006464	check	Design and mailing work	11/18/2004	\$ 192.50	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Arrowhead Graphics Greensboro, NC					
			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
					\$ 8,573.39
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
2006464	check	Advertising literature	11/18/2004	\$ 3,082.49	
				\$	
5. Total only this Page				\$ 5,274.99	
6. Total of ALL CRO-1310 Pages				\$ 18,986.17	
<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>					

Loan Proceeds

Pg 1 of 1

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Elect Mike Barber					
3. Lender Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Michael L. Barber 807 Greenwood Dr. Greensboro, NC		Attorney			
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)	
		Same		11/18/2004	
				f. End Date (mm/dd/yyyy)	
				Unknown	
g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment	k. Amount	
-0- %	None	2006464	Transfer from personal funds	\$ 3,388.14	
l. Full Name of Lending Institution				m. Loan Number	
Same				None	
4. Endorsers/Makers <i>(The people who guarantee the loan.)</i>					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
				% \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
				% \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
				% \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
				% \$	
5. Total of ALL CRO-1410 Pages				\$ 3,388.14	
<i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i>					

Outstanding Loans

Amendment Yes No

1. Committee Full Name (and Fund if applicable)			2. ID Number	
Elect Mike Barber				
3. Lender Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments
Michael L. Barber 807 Greenwood Dr. Greensboro, NC 27410		Attorney		Two loans
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)
		Same		04/26/2004
				f. End Date (mm/dd/yyyy)
				12/31/2004
g. Rate	h. Security Pledged	i. Original Loan Amount		j. Remaining Loan Balance
0 %	None	\$ 5,408.14		\$ 0.00
k. Full Name of Lending Institution				l. Loan Number
Same				
3. Lender Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments
				e. Start Date (mm/dd/yyyy)
		c. Employer's Name/Specific Field		f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount		j. Remaining Loan Balance
%		\$		\$
k. Full Name of Lending Institution				l. Loan Number
3. Lender Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments
				e. Start Date (mm/dd/yyyy)
		c. Employer's Name/Specific Field		f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount		j. Remaining Loan Balance
%		\$		\$
k. Full Name of Lending Institution				l. Loan Number
4. Total only this Page				\$
5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>				\$ 0.00

Forgiven Loans

Amendment

Yes No

This form should be completed for each loan NOT being repaid by the committee. A Forgiven Loan Statement (CRO-6200) should accompany each forgiven loan.

The lender information should contain the same information as supplied under the original loan proceed. The people who satisfied the loan should be listed under loan payers, and should include their occupational information, as well as the amount they paid and their sum to date total as a contributor for the election cycle covered by the report.

1. Committee Full Name (and Fund if applicable)	2. ID Number
Elect Mike Barber	

3. Lender Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Comments	
Michael L. Barber 807 Greenwood Dr. Greensboro, NC 27410	Loan forgiven by lender (candidate)	
	c. Original Loan Date (mm/dd/yyyy)	f. Election Cycle Sum to Date
	04/26/2004	\$ 5,408.14
	d. Original Loan Amount	g. Date (mm/dd/yyyy)
	\$ 5,408.14	04/26/2004
e. Remaining Loan Balance	h. Forgiven Amount	
\$ 0.00	\$ 5,408.14	

4. Loan Payers (These are the people who satisfied the loan, and the amount they paid, if it wasn't completely satisfied by the lender.)

a. Full Name, Mailing Address & Phone (include city, state, & zip)	a. Full Name, Mailing Address & Phone (include city, state, & zip)
N/A - all satisfied by lender	

b. Job Title/Profession	d. Forgiven Amount	b. Job Title/Profession	d. Forgiven Amount
	\$		\$
c. Employer's Name/Specific Field	e. Elect Cycle Sum to Date	c. Employer's Name/Specific Field	e. Elect Cycle Sum to Date
	\$		\$

a. Full Name, Mailing Address & Phone (include city, state, & zip)	a. Full Name, Mailing Address & Phone (include city, state, & zip)

b. Job Title/Profession	d. Forgiven Amount	b. Job Title/Profession	d. Forgiven Amount
	\$		\$
c. Employer's Name/Specific Field	e. Elect Cycle Sum to Date	c. Employer's Name/Specific Field	e. Elect Cycle Sum to Date
	\$		\$

5. Total only this Page	\$ 5,408.14
--------------------------------	-------------

6. Total of ALL CRO-1440 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)	\$ 5,408.14
---	-------------