

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 T. DIANNE BELLAMY-SMALL FALCOUNE	c. ID Number MLY50A
b. Mailing Address (include City, State and Zip Code) 3211 DELMONTE DRIVE GREENSBORO, NC 27406	d. Date Filed 10/3/05
	e. Phone Number 336/855-1847

2. Report Year 2005	3. Period Start Date (mm/dd/yyyy) 9/1/05	4. Period End Date (mm/dd/yyyy) 9/26/05	5. Treasurer Full Name J. FOSTER
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6. Type of Committee (Check one)		8. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Organizational	<input type="checkbox"/> State/County	<input type="checkbox"/> Referendum
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum		<input checked="" type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Final
<input type="checkbox"/> Soft Money Account		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third Plus	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Special
<input type="checkbox"/> NC Political Party Financing Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	9. Special Report Name
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
<input type="checkbox"/> Other:			<input type="checkbox"/> Special	

10. Account Information		10. Account Information	
a. Financial Institution Full Name MUTUAL COMMUNITY SAVINGS BANK	a. Financial Institution Full Name	b. Purpose CAMPAIGN ACCOUNT	c. Code
b. Purpose	c. Code	d. Period Begin Balance	d. Period Begin Balance
	1	\$ 504.31	\$

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.

T. DIANNE BELLAMY-SMALL Printed Name of Signer
[Signature] Signature of Appointed Treasurer
10/03/05 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

CRO-1000

NC State Board of Elections

March 2003

RECEIVED
OCT 30 2005
GUILFORD COUNTY BOARD OF ELECTIONS
B.m. Wallace

RECEIVED
SEP 30 2005
GUILFORD COUNTY BOARD OF ELECTIONS

Detailed Summary

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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
T. DIANNE BELLAMY-SMADON ^{FOR} _{COUNCIL}	PRE PRIMARY	MLY 50A	
Start of Election Cycle: January 1, 2005	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 504.31	\$	
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$	
6) Contributions from Individuals (CRO-1210)	\$ 750.00	\$	
7) Contributions from Political Party Committees (CRO-1220)	\$	\$	
8) Contributions from Other Political Committees (CRO-1230)	\$	\$	
9) Loan Proceeds (CRO-1410)	\$	\$	
10) Refunds/Reimbursements To the Committee (CRO-1240)	\$	\$	
11) Other Receipt Sources (CRO-1250)			
11a) Interest on Bank Accounts (CRO-1250)	\$	\$	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)	\$	\$	
11c) Outside Sources of Income (CRO-1250)	\$	\$	
12) "Goods and Services" Contributions (CRO-1260)	\$	\$	
13) TOTAL RECEIPTS <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)</i>	\$ 750.00	\$	
EXPENDITURES			
14) Disbursements (CRO-1310)			
14a) Operating Expenditures (CRO-1310)	\$ 426.42	\$	
14b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$	
14c) Coordinated Party Expenditures (CRO-1310)	\$ 85.00	\$	
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>	\$ 511.42	\$	
19) Cash on Hand at End <i>(Add lines 4 and 13 together, then subtract line 18)</i>	\$ 742.89	\$	
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	\$	\$	

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) TID. ANNE BEWAMY-SMALL RM COUNCIL						2. ID Number MLY50A	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) W.S. MORRIS III P.O. BOX 936 AUGUSTA, GA 30903				b. Job Title/Profession BUSINESSMAN		d. Comments	
				c. Employer's Name/Specific Field RAILWAYS OUTDOOR ADVERTISEMENTS		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"/>					\$		
<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) FLORENCE FRASIER GATZ 3507 SMOKE TREE DR GREENSBORO, NC 27410				b. Job Title/Profession CONSULTANT		d. Comments	
				c. Employer's Name/Specific Field SELF-EMPLOYED		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"/>					\$		
<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					\$ 750.00		
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 750.00		

FLORENCE FRASER GATTEN
3507 SMOKETREE DR
GREENSBORO, NC 27410

CMA Cash Management Account* 1096

DATE 09-20-05

25-80/440

PAY TO THE ORDER OF

T. Dianne Bellamy-Small Campaign \$ 250.00

Two hundred fifty and no/100 DOLLARS

Merrill Lynch

BANK ONE. BANK ONE, COLUMBUS, NA
Columbus, Ohio 43271

MEMO

Florence Fraser Gatten

⑆044000804⑆ 040111319003⑆ 1096

W.S. MORRIS III
P.O. BOX 936
AUGUSTA, GA 30903

WACHOVIA BANK N.A.
AUGUSTA, GA
64-115/611

29080

8/15/2005

PAY TO THE ORDER OF

Campaign To Re-Elect Dianne Bellamy-Small

\$ **500.00

Five Hundred Only*****

DOLLARS

MEMO political contribution

W.S. Morris III

⑆029080⑆ ⑆061101155⑆ 1065300402863⑆

© 2003 INTUIT INC. # 728 1-800-433-8810

Disbursements

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
T. DIANNE BULLOCK Small Campaign Fund						MLY50A	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<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	
RIDGELY BANKS OUT PA BOX 2100-D PHILLIPS AVE GREENSBORO, NC 988-5554 27405							
				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:		\$	
f. Account Code		g. Form of Payment		h. Purpose		i. Date (mm/dd/yyyy)	j. Amount
		CHECK #118		CAMPAIGN TEE SHIRTS		09/21/2005	\$ 190.00
		CHECK #120		CAMPAIGN TEE SHIRTS		09/30/2005	\$ 120.42
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 POST MASTER FOUR SEASONS POST OFFICE GREENSBORO, NC 27427 800/275-8777							
				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:		\$	
f. Account Code		g. Form of Payment		h. Purpose		i. Date (mm/dd/yyyy)	j. Amount
		CHECK #119		POSTAGE		09/25/2005	\$ 116.00
							\$
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	
				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:		\$	
f. Account Code		g. Form of Payment		h. Purpose		i. Date (mm/dd/yyyy)	j. Amount
							\$
							\$
5. Total only this Page						\$ 426.42	
6. Total of ALL CRO-1310 Pages						\$ 511.42	
(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)							

**OUT DA
BOX**
Printing & Design Co.



OUT DA BOX

"No one is perfect, but we strive for perfection"

2100-D Phillips Ave
Greensboro, NC 27405
Phone: 336-988-5554
E-mail: lilridge@msn.com

DATE: Sept 29, 2005
 NYDN: 8290502
 FOR: City Council Race 05
 BILL TO: Dianne Bellamy Small
 Greensboro, NC
 373-2286
 cell 255-0853

DESCRIPTION	size	pc price	num	AMOUNT
white tees	s	\$ 6.00	0	\$ -
1 color front	m	\$ 6.00	0	\$ -
1 color back	l	\$ 6.00	4	\$ 24.00
	xl	\$ 6.00	8	\$ 48.00
	2xl	\$ 7.00	6	\$ 42.00
	3xl	\$ 7.00	6	\$ 42.00
	4xl	\$ 7.00	0	\$ -
	5xl	\$ 7.00	0	\$ -
	6xl	\$ 7.00	0	\$ -
			0	\$ -
screen charges		\$ 25.00	2	\$ 50.00
				\$ -
				\$ -
				\$ -
				\$ -

SUBTOTAL \$ 206.00
 TAX RATE 7.00%
 SALES TAX 14.42
 *deposit (100.00)
TOTAL \$ 120.42

Make all checks payable to **Ridgely Banks**. If you have any questions concerning this invoice, Ridgely Banks 336-988-5554

THANK YOU FOR YOUR BUSINESS!

PAID IN FULL 9-29-05
Dianne Bellamy

OUT DA BOX
Printing & Design Co.



OUT DA BOX

"No one is perfect, but we strive for perfection"

2100-D Phillips Ave
Greensboro, NC 27405
Phone: 336-988-5554
E-mail: lilridge@msn.com

DATE: September 21, 2005
INVOICE number: 92105
FOR: T. Dianne Bellamy Small
BILL TO: City Council
Greensboro, NC
373-2286

DESCRIPTION	size	pc price	num	AMOUNT
white tees	child's s	\$ -	0	\$ -
1 color	m	\$ -	0	\$ -
royal blue ink	l	\$ -	0	\$ -
2 sided silk screen	xl	\$ -	0	\$ -
	adult s	\$ 6.00	0	\$ -
	m	\$ 6.00	0	\$ -
	l	\$ 6.00	4	\$ 24.00
	xl	\$ 6.00	8	\$ 48.00
	2x	\$ 7.00	6	\$ 42.00
	3x	\$ 7.00	6	\$ 42.00
	4x	\$ 7.00	0	\$ -
	5x	\$ 7.00	0	\$ -
	6x	\$ 7.00	0	\$ -
screens		\$ 20.00	2	\$ 40.00
				\$ -
SUBTOTAL				\$ 196.00
TAX RATE				7.00%
SALES TAX				13.72
OTHER				-100.00
TOTAL				\$ 209.72

Make all checks payable to **Ridgely Banks**. If you have any questions concerning this invoice, Ridgely Banks 336-988-5554

THANK YOU FOR YOUR BUSINESS!

Ridgely S.
Deposit 9-21-05
109.72

FOUR SEASONS POST OFFICE
GREENSBORO, North Carolina
274279998

09/25/2005 3631970426-0095 02:46:56 PM
(800)275-8777

Product Description	Sales Receipt		Final Price
	Sale Qty	Unit Price	
37c MP Union Full-Pn FDC & SS	1	\$9.90	\$9.90
37c Marian Anderson PSA	40	\$0.37	\$14.80
37c A Ashe PSA	20	\$0.37	\$7.40
37c More Perf Union SS/10	20	\$3.70	\$74.00
37c MP Union Full-Pn FDC & SS	1	\$9.90	\$9.90
Total:			\$116.00

Paid by:
Personal Check \$116.00

Order stamps at USPS.com/shop or call
1-800-Stamp24. Go to
USPS.com/clicknship to print shipping
labels with postage. For other
information call 1-800-ASK-USPS.
Bill#: 1000502402943
Clerk: 04

— All sales final on stamps and postage. —
Refunds for guaranteed services only.
Thank you for your business.
Customer Copy

Disbursements

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
J. DIANNE BELLAMY SMALL CAMPAIGN FUND						MLY50A	
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	
KIDS VOTING - GUILFORD CO 338 N. ELM ST GREENSBORO, NC 27405 373-8773							
				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:		\$	
f. Account Code	g. Form of Payment	h. Purpose		i. Date (mm/dd/yyyy)	j. Amount		
	CHECK # 117	DONATION		09/18/2005	\$ 25.00		
					\$		
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	
GREENSBORO LOC							
				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:		\$	
f. Account Code	g. Form of Payment	h. Purpose		i. Date (mm/dd/yyyy)	j. Amount		
	CHECK # 121	DONATION		10/01/2005	\$ 60.00		
					\$		
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	
				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:		\$	
f. Account Code	g. Form of Payment	h. Purpose		i. Date (mm/dd/yyyy)	j. Amount		
					\$		
					\$		
5. Total only this Page						\$ 85.00	
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>							