

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: **BJ Barnes for Sheriff** c. ID Number: _____

b. Mailing Address (include City, State and Zip Code): **P.O. Box 19707
Greensboro NC 27419** d. Date Filed: **7-11-2006**

e. Phone Number: _____

2. Report Year: **2006** 3. Period Start Date (mm/dd/yyyy): **4-16-2006** 4. Period End Date (mm/dd/yyyy): **6-30-2006** 5. Treasurer Full Name: **BJ Barnes**

6. Type of Committee (Check one)

Candidate Campaign Party
 Joint Fundraiser PAC
 Referendum

7. Type of Fund (if applicable, check one)

Soft Money Account
 "Booster Fund"
 Building Fund
 NC Political Party Financing Fund
 Presidential Election Year Candidates Fund
 NC Public Campaign Financing Fund
 Other:

8. Type of Report (check only one type of report from one category)

Municipal	State/County	Referendum
<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> 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 checked="" type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third Plus	<input type="checkbox"/> Annual
<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	9. Special Report Name
<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
<input type="checkbox"/> Special	<input type="checkbox"/> Final	
	<input type="checkbox"/> Special	

10. Account Information

a. Financial Institution Full Name: Branch Banking & Trust	a. Financial Institution Full Name: Branch Banking & Trust
b. Purpose: Campaign expenses	b. Purpose: campaign
c. Code: a	c. Code: b
d. Period Begin Balance: \$28,237.83	d. Period Begin Balance: \$53,919.52

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.

BJ Barnes Printed Name of Signer BJ Barnes Signature of Appointed Treasurer 7/11/06 Date

FOR OFFICE USE ONLY

Date Received: _____ Employee: _____
 Date Postmarked: _____ Employee: _____
 Date Scanned: _____ Employee: _____

RECEIVED

Delivery Method
 Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed

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	
BJ Barnes for Sheriff	2 nd Quarter		
Start of Election Cycle: January 1, 2006	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 88,157 ²⁵	\$ 60,553 ⁴⁶	
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 8,983 ⁰⁰	\$ 23,273 ⁰⁰	
6) Contributions from Individuals (CRO-1210)	\$ 11,200 ⁰⁰	\$ 33,650 ⁰⁰	
7) Contributions from Political Party Committees (CRO-1220)	\$ -0-	\$ -0-	
8) Contributions from Other Political Committees (CRO-1230)	\$ -0-	\$ -0-	
9) Loan Proceeds (CRO-1410)	\$ -0-	\$ -0-	
10) Refunds/Reimbursements To the Committee (CRO-1240)	\$ -0-	\$ 2 ⁸¹	
11) Other Receipt Sources (CRO-1250)			
11a) Interest on Bank Accounts (CRO-1250)	\$ 405 ⁰²	\$ 880 ¹⁹	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)	\$ -0-	\$ -0-	
11c) Outside Sources of Income (CRO-1250)	\$ -0-	\$ -0-	
12) "Goods and Services" Contributions (CRO-1260)	\$ -0-	\$ -0-	
13) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)	\$ 20,588 ⁰²	\$ 57,806 ⁰⁰	
EXPENDITURES			
14) Disbursements (CRO-1310)			
14a) Operating Expenditures (CRO-1310)	\$ 14,704 ¹³	\$ 24,318 ²²	
14b) Contributions to Candidates/Political Committees (CRO-1310)	\$ -0-	\$ -0-	
14c) Coordinated Party Expenditures (CRO-1310)	\$ -0-	\$ -0-	
15) Loan Repayments (CRO-1420)	\$ -0-	\$ -0-	
16) Refunds/Reimbursements From the Committee (CRO-1320)	\$ -0-	\$ -0-	
17) In-Kind Contributions (CRO-1510)	\$ 3,500 ⁰⁰	\$ 3,500 ⁰⁰	
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)	\$ 18,204 ¹³	\$ 27,818 ²²	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)	\$ 90,541 ²⁴	\$ 90,541 ²⁴	
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$ -0-		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ -0-		
22) Debts and Obligations owed By the Committee (CRO-1610)	\$ -0-		
23) Debts and Obligations owed To the Committee (CRO-1620)	\$ -0-		
24) Account Transfers Within the Committee (CRO-1720)	\$ -0-		
25) Administrative Support (CRO-1710)	\$ -0-	\$ -0-	
26) Forgiven Loans (CRO-1440)	\$ -0-	\$ -0-	
27) 48-Hour Notice Reports Sum	\$ 6,000 ⁰⁰	\$ 6,000 ⁰⁰	

Aggregated Contributions from Individuals

Amendment Yes No

1. Committee Full Name (and Fund if applicable) BJ Barnes for Sheriff	2. ID Number
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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	a	cash		4-18-06	\$ 100
<input type="checkbox"/> Add	a	cash			\$ 100
<input type="checkbox"/> Remove	a	cash			\$ 100
<input type="checkbox"/> Add	a	cash			\$ 100
<input type="checkbox"/> Remove	a	cash			\$ 100
<input type="checkbox"/> Add	a	cash			\$ 100
<input type="checkbox"/> Remove	a	cash			\$ 100
<input type="checkbox"/> Add	a	cash			\$ 100
<input type="checkbox"/> Remove	a	cash			\$ 100
<input type="checkbox"/> Add	a	cash			\$ 100
<input type="checkbox"/> Remove	a	cash			\$ 100
<input type="checkbox"/> Add	a	cash			\$ 100
<input type="checkbox"/> Remove	a	cash			\$ 100
<input type="checkbox"/> Add	a	cash			\$ 100
<input type="checkbox"/> Remove	a	cash			\$ 100
<input type="checkbox"/> Add	a	cash			\$ 100
<input type="checkbox"/> Remove	a	cash			\$ 100
<input type="checkbox"/> Add	a	ck		4-18-06	\$ 100
<input type="checkbox"/> Remove	a	ck		4-24-06	\$ 100
<input type="checkbox"/> Add	a	ck		4-26-06	\$ 50
<input type="checkbox"/> Remove	a	ck		4-26-06	\$ 100
<input type="checkbox"/> Add	a	ck		4-26-06	\$ 50
<input type="checkbox"/> Remove	a	ck		4-30-06	\$ 100
<input type="checkbox"/> Add	a	ck		5-1-06	\$ 100
<input type="checkbox"/> Remove	a	ck		5-15-06	\$ 25
<input type="checkbox"/> Add	a	ck		5-15-06	\$ 100
<input type="checkbox"/> Remove	a	ck		5-15-06	\$ 100
<input type="checkbox"/> Add	a	ck		6-2-06	\$ 100
<input type="checkbox"/> Remove	a	ck		6-5-06	\$ 10
<input type="checkbox"/> Add	a	ck		6-27-06	\$ 100
<input type="checkbox"/> Remove	a	ck		6-27-06	\$ 100

4. Total only this Page \$ 2035⁰⁰

5. Total of ALL CRO-1205 Pages \$

(This line must be on line 5 of Detailed Summary Page CRO-1100)

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Barnes for Sheriff							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Thomas R Powers 2517 W. Woodlyn Way Greensboro NC 27407				deputy			
				c. Employer's Name/Specific Field			
				Law enforcement		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"/>	a	ck		4-17-06	\$ 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	
Sandra W. Carter 4273 McIntyre Road Gibsonville NC 27249				Purchasing			
				c. Employer's Name/Specific Field			
				Federal Government		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"/>	a	ck		4-17-06	\$ 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	
KL Whitesell 3513 Friedens Wood Drive Gibsonville NC 27249				deputy			
				c. Employer's Name/Specific Field			
				Law enforcement		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"/>	a	ck		4-17-06	\$ 200 ⁰⁰		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 600 ⁰⁰	
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

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Barnes for Sheriff							
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	
James T. Sheppard 4613 Perquimans Rd E Greensboro NC 27407				deputy			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				Law enforcement		\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	a	ck		4-17-06	\$ 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	
Anthony Caliendo 8017 Bartonshire Drive Oak Ridge, NC 27310				deputy			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				Law enforcement		\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	a	ck		4-17-06	\$ 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	
Dinah M. Disher 5834 Pepper Road Oak Ridge NC 27310				business owner			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				transportation		\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	a	ck		4-17-06	\$ 1,000 ⁰⁰		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1,700 ⁰⁰	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$	

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) 2. ID Number
 Barnes for Sheriff

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Christie A. Richardson 2122 Huffine Mill Road McLeansville, NC 27301	b. Job Title/Profession office manager c. Employer's Name/Specific Field building industry	d. Comments e. Election Cycle Sum to Date \$ 400
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f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	a	ck		4-17-06	\$ 300
<input type="checkbox"/>	a	ck		4-18-06	\$ 100
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Bobby Green 2120 Churchill Drive Greensboro NC 27410	b. Job Title/Profession retired c. Employer's Name/Specific Field	d. Comments e. Election Cycle Sum to Date \$ 300
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f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	a	ck		4-18-06	\$ 100
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Larry Proctor 5111 Mackey Road Jamestown NC 27282	b. Job Title/Profession sales c. Employer's Name/Specific Field Landscaping	d. Comments e. Election Cycle Sum to Date \$ 200 ⁰⁰
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f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	a	cash		4-18-06	\$ 100 ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page \$ 600⁰⁰

5. Total of ALL CRO-1210 Pages \$
 (This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) Barnes for Sheriff	2. ID Number
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3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Jacqueline R. Manzi 1046 Pineburr Road Greensboro, NC 27455	b. Job Title/Profession Sales	d. Comments
	c. Employer's Name/Specific Field insurance	
		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"/>	a	ch		4-18-06	\$ 200 ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Tara M Burgio 2906 Ellington Ct Jamestown, NC 27882	b. Job Title/Profession business owner	d. Comments
	c. Employer's Name/Specific Field manufacturing	
		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"/>	a	ch		4-18-06	\$ 400 ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Edward B. Krusch P.O. Box 1195 Greensboro, NC 27402	b. Job Title/Profession Sales	d. Comments
	c. Employer's Name/Specific Field real estate	
		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"/>	a	ch		4-18-06	\$ 500 ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page \$ 1,100⁰⁰

5. Total of ALL CRO-1210 Pages \$
 (This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
BU Barnes for Sheriff							
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	
George Rider 7215 Chapsworth Road Trinity NC 27370				business owner			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				Riders in the Country		\$ 3,100 ⁰⁰	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	a	in-kind	meal	4-18-06	\$ 3,000 ⁰⁰		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Nancy Howard 1520 Burnettes Chapel Road Greensboro NC 27407				retired			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
						\$ 600 ⁰⁰	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	a	in-kind	entertainment	4-18-06	\$ 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	
William E. Hall, Jr. 1912 Lafayette Avenue Greensboro NC 27408				Sales			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				Insurance		\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	a	ck		4-26-06	\$ 250 ⁰⁰		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 3,750 ⁰⁰	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$	

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) Barnes for Sheriff	2. ID Number
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3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) DH Griffin 4700 Hilltop Road Greensboro NC 27407	b. Job Title/Profession CEO	d. Comments
	c. Employer's Name/Specific Field DH Griffin Wrecking Company	
		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"/>	a	ck		4-28-06	\$ 500
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Roger Cotten 1801 Hobbs Road Greensboro NC 27410	b. Job Title/Profession Marketing Research	d. Comments
	c. Employer's Name/Specific Field DH Griffin Wrecking Company	
		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"/>	a	ck		4-28-06	\$ 250
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Shirley H. Smith 509 Patters Lake Road Greensboro NC 27406	b. Job Title/Profession homemaker	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"/>	a	ck		5-15-06	\$ 200
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page \$ 950⁰⁰

5. Total of ALL CRO-1210 Pages \$

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

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) <u>Barnes for Sheriff</u>	2. ID Number
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3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Michael R. Dehaan Sr.</u> <u>7767 Pearman Quarry Road</u> <u>Kernersville NC 27284</u>	b. Job Title/Profession <u>Engineer</u>	d. Comments
	c. Employer's Name/Specific Field <u>RF Micro</u>	
		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"/>	<u>a</u>	<u>ck</u>		<u>5-15-06</u>	<u>\$ 500⁰⁰</u>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>William L Corn</u> <u>2707 Sweetbriar Road</u> <u>Sophia NC 27350</u>	b. Job Title/Profession <u>retired</u>	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"/>	<u>a</u>	<u>ch</u>		<u>5-19-06</u>	<u>\$ 200⁰⁰</u>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Joe C. Glover</u> <u>3826 OBriant Place</u> <u>Greensboro NC 27410</u>	b. Job Title/Profession <u>Executive</u>	d. Comments
	c. Employer's Name/Specific Field <u>National Drug Search</u>	
		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"/>	<u>a</u>	<u>ck</u>		<u>6-3-06</u>	<u>\$ 200⁰⁰</u>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page \$ 900⁰⁰

5. Total of ALL CRO-1210 Pages \$
(This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) Barnes for Sheriff	2. ID Number
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3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) John S. McKee, IV 3805 Madison Avenue Greensboro NC 27403	b. Job Title/Profession Finance	d. Comments
	c. Employer's Name/Specific Field Investments	
		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"/>	a	ck		6-3-06	\$ 200 ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Angie Matthews 4522 Abbott Loop Road Jamestown NC 27282	b. Job Title/Profession Sales	d. Comments
	c. Employer's Name/Specific Field amusement	
		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"/>	a	ck		6-5-06	\$ 250 ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Keith M. Loflin 218 Howell Drive Denton NC 27239	b. Job Title/Profession Sales	d. Comments
	c. Employer's Name/Specific Field amusement	
		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"/>	a	ck		6-5-06	\$ 200 ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page \$ 650⁰⁰

5. Total of ALL CRO-1210 Pages \$

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

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) **Barnes for Sheriff** 2. ID Number

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
**Christine H. Matthews
 1711 W. Lexington Avenue
 High Point NC 27262**

b. Job Title/Profession
Sales

c. Employer's Name/Specific Field
Vending

d. Comments

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"/>	a	ck		6-5-06	\$ 200 ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
**Stephen Lee Henderson
 391 Lake Hill Drive
 Thomasville NC 27360**

b. Job Title/Profession
CEO

c. Employer's Name/Specific Field
**Operators
 Distributing**

d. Comments

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"/>	a	ck		6-5-06	\$ 300 ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
**Eric M. Buchanan
 P.O. Box 2111
 Jamestown NC 27282**

b. Job Title/Profession
Sales

c. Employer's Name/Specific Field
Amusement

d. Comments

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"/>	a	ck		6-27-06	\$ 200 ⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page \$ 700⁰⁰

5. Total of ALL CRO-1210 Pages \$

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

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) Barnes for Sheriff						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	
Major Herbert W. Donahue 5787 Starboard Drive Greensboro NC 27410			retired			
			c. Employer's Name/Specific Field USMC			
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"/>	a	ck		6-28-06	\$ 250 ⁰⁰	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			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"/>					\$	
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"/>					\$	
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					\$ 250 ⁰⁰	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 11,200 ⁰⁰	

Other Receipt Sources

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
BJ Barnes for Sheriff							
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>							
<input checked="" type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input type="checkbox"/> Outside Sources of Income							
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Not-for-Profit Federal ID #		d. Comments	
Branch Banking & Trust 1300 Battleground Avenue Greensboro NC 27408							
				c. Outside Source Explanation			
						e. Election Cycle Sum to Date	
						\$ 666 ⁴¹	
f. Account Code		g. Form of Payment		h. In-Kind Description		i. Date (mm/dd/yyyy)	j. Amount
b		Credit				4-20-06	\$ 164 ⁶⁴
b		credit				4-25-06	\$ 26 ⁶⁰
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Not-for-Profit Federal ID #		d. Comments	
↓							
				c. Outside Source Explanation			
						e. Election Cycle Sum to Date	
						\$ 880 ¹⁹	
f. Account Code		g. Form of Payment		h. In-Kind Description		i. Date (mm/dd/yyyy)	j. Amount
b		credit				5-20-06	\$ 95 ³⁴
b		credit				6-20-06	\$ 118 ⁴⁴
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Not-for-Profit Federal ID #		d. Comments	
				c. Outside Source Explanation			
						e. Election Cycle Sum to Date	
						\$	
f. Account Code		g. Form of Payment		h. In-Kind Description		i. Date (mm/dd/yyyy)	j. Amount
							\$
							\$
5. Total only this Page						\$	
6. Total of ALL CRO-1250 Pages						\$ 405 ⁰²	
<i>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</i>							
<i>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</i>							
<i>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</i>							

Disbursements

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
BT Barnes for Sheiff					
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
Rhinoceorous Times P.O. Box 9421 Greensboro NC 27429					
			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	
a	ck	advertisement	4-20-06	\$ 1,245 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
Wooten Graphics Drawer 819 Welcome, NC 27374					
			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
					\$ 8,703 ⁷⁸
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
a	ck	frames bumperstrips signs	4-18-06	\$ 1,024 ⁵³	
a	ck	Frames signs	5-16-06	\$ 5,459 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)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date
					\$ 8,949 ⁸⁸
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
a	ck	bumperstrips	5-27-06	\$ 246 ¹⁰	
				\$	
5. Total only this Page				\$ 7,974 ⁶³	
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

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
BJ Barnes for Sheriff					
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	
John AKerr 3813 West Friendly Avenue Greensboro NC 27410					
		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	
a	ck	Prize at Fundraiser	4-18-06	\$ 1,000 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	
Milton E. Harris 3103 Rolling Brook Road Greensboro, NC 27406					
		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	
a	ck	Prize at Fundraiser	4-18-06	\$ 5,000 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	
Best Buy 1701 South 40 Drive Greensboro NC 27407					
		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	
a	ck	office supplies	5-17-06	\$ 594 ⁶⁵	
				\$	
5. Total only this Page				\$ 6,594 ⁶⁵	
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	
BJ Barnes for Sheriff						
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	
Time Warner Cable 200 Centreport Drive Suite 200 Greensboro NC 27409						
			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:		\$ 22475	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount		
a	ck	website-internet	4-25-06	\$ 4495		
a	ck	website-internet	5-27-06	\$ 4495		
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:		\$ 26970	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount		
a	ck	website-internet	6-22-06	\$ 4495		
				\$		
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					\$ -13485	
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>					\$ 14,704 ¹³	

In-Kind Contributions

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

1. Committee Full Name (and Fund if applicable)		2. ID Number	
BJ Barnes for Sheriff			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (Include city, state, & zip)		b. Type of Contributor	c. Comments
George Rider 7215 Chappsworth Road Trinity NC 27370		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Cycle Sum to Date
			\$ 3,100
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
meal for fundraiser		4-18-06	\$ 3,000
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (Include city, state, & zip)		b. Type of Contributor	c. Comments
Nancy Howard 1520 Burnettes Chapel Rd Greensboro NC 27407		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Cycle Sum to Date
			\$ 600 ⁰⁰
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
entertainment for fundraiser		4-18-06	\$ 500 ⁰⁰
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (Include city, state, & zip)		b. Type of Contributor	c. Comments
		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Cycle Sum to Date
			\$
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
4. Total only this Page			\$
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>			\$ 3,500 ⁰⁰