

Disclosure Report Cover

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

Please note that this cover sheet cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.
 You must amend the Statement of Organization (CRO-2100A-E) to make those kinds of committee changes.
 Use the Addendum form (CRO-1010) if more entries are needed.

1. Committee Information	
a. Full Name	c. ID Number
Committee to Elect Kay Cashion Commissioners	QTE1YOR1
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
P.O. Box 10135 - 0135 Greensboro, NC 27404	10/30/06
	e. Phone Number
	336-2746272

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name
2006	7/1/06	10/21/06	Janie M. Wheeler

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

10. Account Information		10. Account Information	
a. Financial Institution Full Name	b. Purpose	a. Financial Institution Full Name	b. Purpose
BB & T	checking for receipts and expenses		
c. Code	c. Code	c. Code	c. Code
KC6			
d. Period Begin Balance	d. Period Begin Balance	d. Period Begin Balance	d. Period Begin Balance
\$ 2,427.00		\$	

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.

Janie M. Wheeler
Printed Name of Signer

Janie M. Wheeler
Signature of Appointed Treasurer

10-30-06
Date

FOR OFFICE USE ONLY		RECEIVED OCT 30 2006 GUILFORD COUNTY BOARD OF ELECTIONS	Delivery Method
Date Received:	_____		<input type="checkbox"/> Normal Mail
Date Postmarked:	_____		<input type="checkbox"/> Registered Mail
Date Scanned:	_____		<input type="checkbox"/> Hand Delivered
			<input type="checkbox"/> Electronically Filed

Contributions from Political Party Committees Pg ____ of ____

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Committee to Elect Kay Cashton Commissioner							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)						b. Comments	
NC Realtors PAC 4511 Weybridge Lane Greensboro NC 27407							
						c. Election Cycle Sum to Date	
						\$	
d. Account Code	e. Form of Payment	f. In-Kind Description			g. Date (mm/dd/yyyy)	h. Amount	
KC6	Check				9-23-06	\$ 100 ⁰⁰	
						\$	
						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)						b. Comments	
NC Realtors PAC 4511 Weybridge Lane Greensboro NC 27407							
						c. Election Cycle Sum to Date	
						\$	
d. Account Code	e. Form of Payment	f. In-Kind Description			g. Date (mm/dd/yyyy)	h. Amount	
KC6	Check				9-22-06	\$ 1,000 ⁰⁰	
						\$	
						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)						b. Comments	
NC Home Builders Assoc Build Political Action Committee PO Box 99090 Raleigh NC 27624							
						c. Election Cycle Sum to Date	
						\$	
d. Account Code	e. Form of Payment	f. In-Kind Description			g. Date (mm/dd/yyyy)	h. Amount	
KC6	Check				9-29-06	\$ 200 ⁰⁰	
						\$	
						\$	
4. Total only this Page						\$ 1,300 ⁰⁰	
5. Total of ALL CRO-1220 Pages						\$	
(This line must be on line 7 of Detailed Summary Page CRO-1100)							

Aggregated Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to Elect Kay Pashton Commissioner					GHYORI	
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input checked="" type="checkbox"/> Add	KCB	check	—	9-21-06	\$ 100.00	
<input type="checkbox"/> Remove	KCB	check	—	9/29/06	\$ 100.-	
<input type="checkbox"/> Add	KCB	check	—	9/27/06	\$ 100.-	
<input type="checkbox"/> Remove	KCB	check	—	9/29/06	\$ 100.-	
<input type="checkbox"/> Add	KCB	check	—	10/2/06	\$ 100.-	
<input type="checkbox"/> Remove	KCB	check	—	10/3/06	\$ 100.00	
<input type="checkbox"/> Add	KCB	check	—	9/30/06	\$ 100.-	
<input type="checkbox"/> Remove	KCB	check	—	10/1/06	\$ 100.-	
<input type="checkbox"/> Add	KCB	check	—	10/3/06	\$ 100.-	
<input type="checkbox"/> Remove	KCB	check	—	10/3/06	\$ 100.-	
<input type="checkbox"/> Add	KCB	check	—	10/3/06	\$ 100.00	
<input type="checkbox"/> Remove	KCB	check	—	9/30/06	\$ 100.-	
<input type="checkbox"/> Add	KCB	check	—	10/1/06	\$ 100.-	
<input type="checkbox"/> Remove	KCB	check	—	9/25/06	\$ 100.-	
<input type="checkbox"/> Add	KCB	check	—	10/2/06	\$ 100.-	
<input type="checkbox"/> Remove	KCB	check	—	10/4/06	\$ 100.-	
<input type="checkbox"/> Add	KCB	check	—	10/5/06	\$ 100.-	
<input type="checkbox"/> Remove	KCB	check	—	10/6/06	\$ 100.-	
<input type="checkbox"/> Add	KCB	check	—	10/4/06	\$ 100.-	
<input type="checkbox"/> Remove	KCB	check	—	10/1/06	\$ 100.-	
<input type="checkbox"/> Add	KCB	check	—	10/6/06	\$ 100.-	
<input type="checkbox"/> Remove	KCB	check	—	10/4/06	\$ 100.-	
<input type="checkbox"/> Add	KCB	check	—	10/10/06	\$ 100.-	
<input type="checkbox"/> Remove	KCB	check	—	10/10/06	\$ 100.-	
4. Total only this Page					\$ 2300	
5. Total of ALL CRO-1205 Pages					\$ 4970	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

Aggregated Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to Elect Kay Pashton Commissioner					GHYORI	
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	KCB	check	—	10/12/06	\$ 100.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	KCB	check	—	10/7/06	\$ 100.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	KCB	check	—	10/9/06	\$ 100.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	KCB	check	—	10/4/06	\$ 100.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	KCB	check	—	10/7/06	\$ 100.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	KCB	check	—	10/11/06	\$ 100.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	KCB	check	—	10/13/06	\$ 100.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	KCB	check	—	10/10/06	\$ 100.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	KCB	check	—	10/12/06	\$ 100.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	KCB	check	—	10/10/06	\$ 100.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	KCB	check	—	10/12/06	\$ 100.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	KCB	check	—	10/12/06	\$ 100.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	KCB	check	—	10/12/06	\$ 100.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	KCB	check	—	10/12/06	\$ 100.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	KCB	check	—	10/11/06	\$ 100.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	KCB	check	—	10/13/06	\$ 100.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	KCB	check	—	9/30/06	\$ 100.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	KCB	check	—	10/19/06	\$ 100.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	KCB	check	—		\$	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	KCB				\$	
<input type="checkbox"/> Remove						
4. Total only this Page					\$ 2100	
5. Total of ALL CRO-1205 Pages					\$ 4970	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

Aggregated Contributions from Individuals

Amendment Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number
Committee to Elect Kay Paschall Commissioner						9HYOR1
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	KC6	check	---	9/5/06	\$ 25.00	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove	KC6	check	---	9/17/06	\$ 25.00	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove	KC6	check	---	9/26/06	\$ 25.00	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove	KC6	check		10/4/06	\$ 50.00	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove	KC6	check		10/4/06	\$ 25.00	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove	KC6	check		10/3/06	\$ 50.00	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove	KC6	check		10/9/06	\$ 50.00	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove	KC6	check		10/10/06	\$ 50.00	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove	KC6	check		10/10/06	\$ 25.00	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove	KC6	check		10/10/06	\$ 20.00	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove	KC6	check		10/9/06	\$ 25.00	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove	KC6	check		10/12/06	\$ 25.00	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove	KC6	check		10/12/06	\$ 25.00	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove	KC6	check		10/12/06	\$ 25.00	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove	KC6	check		10/10/06	\$ 50.00	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove	KC6	check		10/5/06	\$ 50.00	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove					\$	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove					\$	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove					\$	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove					\$	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove					\$	
<input type="checkbox"/> Add						
<input type="checkbox"/> Remove					\$	
4. Total only this Page					\$ 570.00	
5. Total of ALL CRO-1205 Pages					\$ 4970	
(This line must be on line 5 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

Page 1 of 14

Amendment
 Yes No

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

Committee to Elect Kay Mashion Commissioner G HORI

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Joyce Vaughn Lewis 215 Westover Terrace Greensboro, NC 27403	b. Job Title/Profession Retired	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"/>	KC6	check	—	10/13/06	\$ 150.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) John + Geraldine McComb 1011 Country Club Dr Greensboro, NC 27403	b. Job Title/Profession Housewife	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"/>	KC6	check	—	10/13/06	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Sandra Kaye 6002 Quail Ridge Rd Greensboro, NC 27455	b. Job Title/Profession Inv. Sales	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"/>	KC6	check	—	10/12/06	\$ 150.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page \$ 550

5. Total of ALL CRO-1210 Pages \$ 14,800

(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	
Committee to Elect Kay Chastion Commissioner						G H D R I	
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	
David H. Slaughter 108 Morning Side Dr Clarksville, Tenn. 37042				Retired			
				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"/>	KCB	Check		10-2-06	\$ 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	
Henry Isaacson PO Box 1888 Greensboro NC 27402				att'y			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				Isaacson, Isaacson, etc		\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	KCB	Check		10-3-06	\$ 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	
Alice Isaacson PO Box 1888 Greensboro NC 27402				Housewife			
				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"/>	KCB	Check		10-3-06	\$ 200 ⁰⁰		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 600	
5. Total of ALL CRO-1210 Pages						\$ 14,800	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Committee to Elect Kay Cashion Commissioner						G H/D R I	
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	
Mary I Jarrell 1010 Wickliff Ave High Point, NC 27262				Retired			
				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"/>	KC6	check	—————	9/25/06	\$ 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	
Leigh W. Seager 70 Park Village Lane Greensboro, NC 27455				Housewife			
				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"/>	KC6	check	—————	10/11/08	\$ 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	
Nancy Perkins 5973 Bethel Church Rd McLeansville, NC 27301				Housewife			
				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"/>	KC6	check	—————	10/12/06	\$ 150.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 600	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 14,800	

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) Committee to Elect Kay Cashion Commissioner						2. ID Number Q H/D R I	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Carl D. ESSA 2309 Brandt Trace Farm Rd Greensboro, NC 27455				b. Job Title/Profession Real Estate		d. Comments	
				c. Employer's Name/Specific Field Easa Commercial 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"/>	KC6	Check		10-2-06	\$ 300⁰⁰		
<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) David C. Hayes 6392 Burnt Poplar Rd Greensboro NC 27409				b. Job Title/Profession CEO		d. Comments	
				c. Employer's Name/Specific Field Western Carolina Furniture Inc.		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"/>	KC6	Check		10-2-06	\$ 1,000⁰⁰		
<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					\$ 1300		
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 14,800		

Contributions from Individuals

Pg 5 of 14

Amendment Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Committee to Elect Kay Chastain Commissioner						G H O R I	
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 Alexander 5505 Durapin Ct Browns Summit NC 27214							
				c. Employer's Name/Specific Field			
				McChildren's Home Society		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"/>	KC6	check		10-2-06	\$ 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	
Mark Reynolds 4 Lake Bluff Ct Greensboro NC 27410							
				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"/>	KC6	check		10-11-06	\$ 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	
Marc H. Isaacson 2308 Princess Ann St Greensboro NC 27408				Attorney			
				c. Employer's Name/Specific Field			
				Isaacson, Isaacson, etc		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"/>	KC6	check		10-10-06	\$ 200 ⁰⁰		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 900 ⁰⁰	
5. Total of ALL CRO-1210 Pages						\$ 14,800	
<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) Committee to Elect Kay Cassion Commissioner						2. ID Number G HORI	
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 F. Black 3000 Round Hill Rd Greensboro NC 27408				Retired			
				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"/>	KC6	Check		9-29-06	\$ 150 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	
Todd P. Robinson 2307 Princess Ann St Greensboro NC 27408							
				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"/>	KC6	Check		10-7-06	\$ 1,000 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	
Stanley K. Anger PO Box 10889 Greensboro NC 27404				Manager			
				c. Employer's Name/Specific Field			
				Stanley K. Anger & Co Public Choice			
						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"/>	KC-6	Check		10-9-06	\$ 250 ⁰⁰		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1300	
5. Total of ALL CRO-1210 Pages						\$ 14,800	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) <i>Committee to Elect Kay Chastain Commissioner</i>						2. ID Number <i>3 H/D/R1</i>
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Betty H. Nichols 4 Elm Grove Ct Greensboro NC 27405</i>			b. Job Title/Profession <i>retired</i>		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"/>	<i>KC 6</i>	<i>Check</i>		<i>9-27-06</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>Rebecca Schlosser 908 Sunset Dr Greensboro NC 27408</i>			b. Job Title/Profession <i>Housewife</i>		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"/>	<i>KC 6</i>	<i>Check</i>		<i>9-30-06</i>	\$ <i>250⁰⁰</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>Nancy HAM 527 Cormorant Crde Naples FL 34113</i>			b. Job Title/Profession <i>Management</i>		d. Comments	
			c. Employer's Name/Specific Field <i>Robert H. Ham & Co Supplies</i>		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"/>	<i>KC 6</i>	<i>Check</i>		<i>10-7-06</i>	\$ <i>250⁰⁰</i>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ <i>1200</i>	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ <i>14,800</i>	

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) Committee to Elect Kay Chastain Commissioner						2. ID Number GNDRI	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Joan E. Beik 6830 Dulverton Dr. Charlotte, NC 28226				b. Job Title/Profession Retired		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"/>	KC6	Check		9-30-06	\$ 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) Judy Frederick 5403 Eastern Shores Dr. Greensboro, NC 27455				b. Job Title/Profession Student		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"/>	KC6	Check		10-1-06	\$ 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) Debby R. Kern 5500 Old Brandt Trace Greensboro NC 27455				b. Job Title/Profession Real Estate		d. Comments	
				c. Employer's Name/Specific Field Trace Holdings LLC		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"/>	KC6	Check		10-4-06	\$ 1,000 ⁰⁰		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1750	
5. Total of ALL CRO-1210 Pages						\$ 14,800	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

Contributions from Individuals

Page 9 of 14

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Committee to Elect Kay Cashion Commissioner						G HORI	
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	
Kim L. Ketchum 1305 North Holden Rd Greensboro NC 27410				management			
				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"/>	KC6	Check		9-28-06	\$ 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	
Janie Wheeler 300 No. Holden Rd Greensboro NC 27410				Retired			
				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"/>	KC6	Check		9-30-06	\$ 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	
Linda A. Carlisle 5411 Rambling Road Greensboro NC 27409				Retired			
				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"/>	KC6	Check		10-1-06	\$ 250 ⁰⁰		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 750	
5. Total of ALL CRO-1210 Pages						\$ 14,800	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Committee to Elect Kay Cashion Commissioner						G H/DRI	
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	
David L. Slaughter 108 Morningside Dr. Clarksville, Tennessee 37042				retired			
				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"/>	KC-6	Check		9-24-06	\$ 300 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	
Tom Gilmore Julian NC 27283				Management			
				c. Employer's Name/Specific Field			
				Nursery - Plants, etc			
						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"/>	KC6	Check		9-26-06	\$ 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	
Zaki Uddin Khalifa 600 ^S Main St High Point NC 27260				Retail			
				c. Employer's Name/Specific Field			
				Carpent			
						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"/>	KC6	Check		9-27-06	\$ 250 ⁰⁰		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 800	
5. Total of ALL CRO-1210 Pages						\$ 14,900	
(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	
Committee to Elect Kay Cashton Commissioner						GHYDR1	
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	
Stanley K. Tanager P.O. 16889 Greensboro NC 27404				Management			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				Stanley K. Tanager Outlet Center		\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	KC6	check		7-26-06	\$ 2,000 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	
Robert Page 1089 Mohr RD Greensboro NC 27420				Management			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				Replacements, KTR		\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	KC6	check		9-12-06	\$ 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	
W. T. Slaughter 3211 Doherty RD Greensboro, NC 27407				Retired			
				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"/>	KC6	check		10-3-06	\$ 200 ⁰⁰		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 2700	
5. Total of ALL CRO-1210 Pages						\$ 14,800	
(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	
Committee to Elect Kay Cashion Commissioner						GHYORI	
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	
Lynne D. Ghandstone 112 W. Bessemer Ave Greensboro NC 27401				retired			
				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"/>	KC6	check		9-18-06	\$ 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	
Joanne W. Schaghtnauer 4004 HAZEL Lane Greensboro, NC 27408				retired			
				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"/>	KC6	check		9-19-06	\$ 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	
William L. Hemphill 7 Saint Augustine Sq Greensboro NC 27408				retired			
				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"/>	KC6	check		9-20-06	\$ 500 ⁰⁰		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1000	
5. Total of ALL CRO-1210 Pages						\$ 14,800	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Committee to Elect Kay Cashion Commissioner						GHYORI	
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	
Donald R. Hughes 3 New Bern Sq. Greensboro NC 27408				Retired			
				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"/>	KC6	Check		9-21-06	\$ 150 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	
F. Clyde Collins 1846 Banking St Greensboro NC 27408				Retired			
				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"/>	KC6	Check		9-20-06	\$ 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	
Carolyn Turner 505 Willoughby Blvd Greensboro NC 27408				Professor			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				AYT University		\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	KC6	Check		9-22-06	\$ 200 ⁰⁰		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 850	
5. Total of ALL CRO-1210 Pages						\$ 14,500	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Committee to Elect Kay Cashton Commissioner						GHY0R1	
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	
Shirley P. Spears 508 W. Houghs Bluff Greensboro NC 27408				Retired			
				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"/>	KC6	Check		9-25-06	\$ 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	
William R. Allen 1614 St Francis St. Greensboro NC 27408				Retired			
				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"/>	KC6	Check		9-25-06	\$ 125 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	
Margaret P. Allen 1614 St. Francis St Greensboro NC 27408				Retired			
				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"/>	KC6	Check		9-25-06	\$ 125 ⁰⁰		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 500	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 14,800	

Disbursements

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Committee to Elect Kay Cashton Commissioner						QH40R1	
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	
Cooper Advertising Salisbury N.C.							
				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
KCB		Check		yard signs		9-15-06	\$ 1,104.78
							\$
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	
Kinko's Battleground Ave Greensboro NC 27408							
				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
KCB		Check		Campaign hand-outs		9-22-06	\$ 241.21
							\$
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	
Postmaster - Greensboro							
				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
KCB		Check		postage		9-27-06	\$ 117 ⁰⁰
							\$
5. Total only this Page						\$ 1462.99	
6. Total of ALL CRO-1310 Pages						\$ 5084.72	
(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)				2. ID Number	
Committee to Elect Kay Cashion Commissioner				Q14Y0R1	
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	
Office Depot Ballenger Ave Greensboro NC 27408					
		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	
KC6	Check	envelopes	9-27-06	\$ 3744	
				\$	
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	
Staples Office Supplies Windsor Ave. Greensboro, NC					
		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	
KC6	Check	invitation supplies	9-27-06	\$ 2447	
				\$	
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 times Greensboro, NC					
		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	
KC6	Check	advertising	10-3-06	\$ 275 ⁰⁰	
				\$	
5. Total only this Page				\$ 336.9	
6. Total of ALL CRO-1310 Pages				\$ 5084.72	
(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
 Yes No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee to Elect Kay, Cashier Commission				QH 40R1	
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
Hamburger Square post muffins Greensboro NC 27408					
			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	
KC6	Check	advertising	10-4-06	\$ 275 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
Brent Lawrence, LLC 404 Thornwood Rd Jonestown, NC 27282					
			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	
KC6	Check	web site setup	10-6-06	\$ 200 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
Brent Lawrence, LLC 404 Thornwood Rd Jonestown NC 27282					
			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	
KC6	Check	printing invitation	10-6-06	\$ 157 ⁰⁶ / ₂	
				\$	
5. Total only this Page				\$ 632.06	
6. Total of ALL CRO-1310 Pages				\$ 5084.72	
<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

Pg 4 of 5

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable) <i>Committee to Elect Kay Casheen Commission</i>				2. ID Number	
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>Marisa's Catering Battleground Ave Greensboro, NC 27408</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:		\$	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
<i>KC-6</i>	<i>Check</i>	<i>Fund Raiser</i>	<i>10-6-06</i>	<i>\$ 722.25</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>Daniel Essa South Wendenhall St Greensboro NC 27403</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:		\$	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
<i>KC6</i>	<i>Check</i>	<i>Fund Raiser</i>	<i>10-6-06</i>	<i>\$ 192.55</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>Greensboro Times Greensboro, NC</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:		\$	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
<i>KC6</i>	<i>Check</i>	<i>Advertising</i>	<i>10-20-06</i>	<i>\$ 275.00</i>	
				\$	
5. Total only this Page				\$ <i>1189.90</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>5084.90</i>	

Disbursements

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee to Elect Kay Cashton Commissioner					
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
Piedmont Herit Mail 1648 Sullivan Street Greensboro NC 27405					
			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	
KC6	Check	Advertising	10-20-06	\$ 1261.80	
				\$	
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
Camel poster production P.O. Box 2409 King, N.C. 27021					
			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	
KC6	Check	Advertising	10-21-06	\$ 201. ¹⁶	
				\$	
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				\$ 1462.96	
6. Total of ALL CRO-1310 Pages				\$ 5,084.72	
<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>					