

**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: COMMITTEE TO ELECT BILL KNIGHT

c. ID Number: \_\_\_\_\_

b. Mailing Address (include City, State and Zip Code): P.O. Box 10705 GREENSBORO NC 27404-0705

d. Date Filed: May 16, 2007

e. Phone Number: 336 402 0701

2. Report Year: 2007

3. Period Start Date (mm/dd/yyyy): MAY 15, 2007

4. Period End Date (mm/dd/yyyy): MAY 25, 2007

5. Treasurer Full Name: BETH H. WALKER

**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**

Organizational  
 Thirty-five day  
 Pre-primary  
 Pre-election  
 Pre-runoff  
 Semi-annual  
 Mid Year  
 Year End  
 Final  
 Special

**State/County**

Organizational  
 Quarterly  
 First Plus  
 Second  
 Third Plus  
 Fourth  
 Semi-annual  
 Mid Year  
 Year End  
 Final  
 Special

**Referendum**

Organizational  
 Pre-referendum  
 Final  
 Supplemental Final  
 Annual  
 Special

9. Special Report Name: \_\_\_\_\_

**10. Account Information**

a. Financial Institution Full Name: JUN TRUST BANK

b. Purpose: CHECKING ACCOUNT FOR CAMPAIGN

c. Code: 402

d. Period Begin Balance: \$ 0

**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.

Beth Hemphill Walker Printed Name of Signer Beth Walker Signature of Appointed Treasurer 5.15.07 Date

**FOR OFFICE USE ONLY**

Date Received: \_\_\_\_\_ Employee: \_\_\_\_\_

Date Postmarked: \_\_\_\_\_ Employee: \_\_\_\_\_

Date Scanned: \_\_\_\_\_ Employee: \_\_\_\_\_

**Delivery Method**

Normal Mail  
 Registered Mail  
 Hand Delivered  
 Electronically Filed

CRO-1000 **RECEIVED** NC State Board of Elections March 2003  
 MAY 15 2007  
 GUILFORD COUNTY BOARD OF ELECTIONS

# Detailed Summary

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable)		2. Type of Report	2. ID Number	
Committee to Elect Bill Knight		ORGANIZATIONAL REPORT		
Start of Election Cycle: January 1, _____		Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start		\$ 0	\$ 0	
<b>RECEIPTS</b>				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$	
6) Contributions from Individuals	(CRO-1210)	\$ 100.00	\$ 100.00	
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$	
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$	
9) Loan Proceeds	(CRO-1410)	\$	\$	
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$	
11) Other Receipt Sources	(CRO-1250)			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$	
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$	\$	
11c) Outside Sources of Income	(CRO-1250)	\$	\$	
12) "Goods and Services" Contributions	(CRO-1260)	\$	\$	
13) TOTAL RECEIPTS <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)</i>		\$ 100.00	\$ 100.00	
<b>EXPENDITURES</b>				
14) Disbursements	(CRO-1310)			
14a) Operating Expenditures	(CRO-1310)	\$	\$	
14b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$	
14c) Coordinated Party Expenditures	(CRO-1310)	\$	\$	
15) Loan Repayments	(CRO-1420)	\$	\$	
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$	
17) In-Kind Contributions	(CRO-1510)	\$	\$	
18) TOTAL EXPENDITURES <i>(Add lines 14a, 14b, 14c, 15, 16, and 17)</i>		\$ 0	\$ 0	
19) Cash on Hand at End <i>(Add lines 4 and 13 together, then subtract line 18)</i>		\$ 100.00	\$ 100.00	
<b>ADDITIONAL INFORMATION</b>				
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$		
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$		
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$		
24) Account Transfers Within the Committee	(CRO-1720)	\$		
25) Administrative Support	(CRO-1710)	\$	\$	
26) Forgiven Loans	(CRO-1440)	\$	\$	
27) 48-Hour Notice Reports Sum		\$	\$	

**Contributions from Individuals**

Amendment

Pg \_\_\_\_ of \_\_\_\_

Yes  No

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
COMMITTEE TO ELECT BILL KNIGHT					
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>
WILLIAM H. KNIGHT P.O. Box 10705  GREENSBORO NC 27405					
			<b>c. Employer's Name/Specific Field</b>		<b>e. Election Cycle Sum to Date</b>
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	402	CASH		5-15-07	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>
			<b>c. Employer's Name/Specific Field</b>		<b>e. Election Cycle Sum to Date</b>
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>
			<b>c. Employer's Name/Specific Field</b>		<b>e. Election Cycle Sum to Date</b>
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>				\$ 100.00	
<b>5. Total of ALL CRO-1210 Pages</b> <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>				\$ 100.00	

# Disclosure Report Cover

Amendment

Yes

No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms

Do not use this form to update information

<b>1. Committee Information</b>	
a. Full Name Committee to Elect Bill Knight	c. ID Number
b. Mailing Address (include City, State and Zip Code) P.O. Box 10705 Greensboro, NC 27404-0705	d. Date Filed 10/01/2007
	e. Phone Number 336-373-8514

2. Report Year 2007	3. Period Start Date (mm/dd/yy) 09/05/2007	4. Period End Date (mm/dd/yy) 10/01/2007	5. Treasurer Full Name Beth H. Walker
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<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Municipal	<input type="checkbox"/> State/County	<input type="checkbox"/> 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	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<b>7. Type of Fund (if applicable check one)</b>		<input checked="" type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus	<input type="checkbox"/> Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third Plus	<input type="checkbox"/> Annual
<input type="checkbox"/> NC Political Party Financing Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	<b>10. Special Report Name</b>
<input type="checkbox"/> Other:		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
<b>8. Number of Fundraisers this Report</b>		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
0			<input type="checkbox"/> Special	

<b>11. Account Information</b>		<b>11. Account Information</b>	
a. Financial Institution Full Name SunTrust Bank	b. Purpose For all campaign contribution and expenses	a. Financial Institution Full Name	b. Purpose
c. Account Code 402	d. Period Begin Balance \$ 2,387.83	c. Account Code	d. Period Begin Balance \$

### 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 and that I have been trained by the NC State Board of Elections according to Article 163.278.9(k).

Beth H. Walker

Printed Name of Signer

*Beth H. Walker*

Signature of Appointed Treasurer

10/01/2007

Date

### FOR OFFICE USE ONLY

Date Received: 10-1-07	Employee: BMW
Date Postmarked: OCT 01 2007	Employee:
Date Scanned: GUILFORD COUNTY BOARD of ELECTIONS	Employee:
Date Data Entered:	Employee:

**Delivery Method**

Normal Mail

Registered Mail

Hand Delivered

Electronically Filed

Signer has not received mandatory training

**Please Note:** This form 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 committee changes.

# Detailed Summary

Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment

Yes  No

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
Committee to Elect Bill Knight		Pre-Primary Report			
<b>Start of Election Cycle:</b> <b>January 1,</b> <b>2007</b>		<b>Total this Reporting Period</b>		<b>Total this Election Cycle</b>	
<b>4) Cash on Hand at Start</b>		\$ 2,387.83		\$ 0	
<b>5) Aggregated Contributions from Individuals</b> (CRO-1205)		\$ 219		\$ 319	
<b>6) Contributions from Individuals</b> (CRO-1210)		\$ 750		\$ 3,200	
<b>7) Contributions from Political Party Committees</b> (CRO-1220)		\$ 0		\$ 0	
<b>8) Contributions from Other Political Committees</b> (CRO-1230)		\$ 0		\$ 0	
<b>9) Loan Proceeds</b> (CRO-1410)		\$ 0		\$ 0	
<b>10) Refunds/Reimbursements To the Committee</b> (CRO-1240)		\$ 0		\$ 0	
<b>11) Other Receipt Sources</b>					
<b>11a) Interest on Bank Accounts</b> (CRO-1250)		\$ 0		\$ 0	
<b>11b) Contributions from Not-for-Profit Organizations</b> (CRO-1250)		\$ 0		\$ 0	
<b>11c) Outside Sources of Income</b> (CRO-1250)		\$ 0		\$ 0	
<b>12) TOTAL RECEIPTS</b> <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, and 11c)</i>		\$ 969		\$ 3,519	
<b>13) Disbursements</b>					
<b>13a) Operating Expenditures</b> (CRO-1310)		\$ 1,821.13		\$ 1,983.30	
<b>13b) Contributions to Candidates/Political Committees</b> (CRO-1310)		\$ 0		\$ 0	
<b>13c) Coordinated Party Expenditures</b> (CRO-1310)		\$ 0		\$ 0	
<b>14) Loan Repayments</b> (CRO-1420)		\$ 0		\$ 0	
<b>15) Refunds/Reimbursements From the Committee</b> (CRO-1320)		\$ 0		\$ 0	
<b>16) In-Kind Contributions</b> (CRO-1510)		\$ 0		\$ 0	
<b>17) TOTAL EXPENDITURES</b> <i>(Add lines 13a, 13b, 13c, 14, 15, and 16)</i>		\$ 1,821.13		\$ 1,983.30	
<b>18) Cash on Hand at End</b> <i>(Add lines 4 and 12 together, then subtract line 17)</i>		\$ 1,535.70		\$ 1,535.70	
<b>19) Non-Monetary Gifts Given to Other Committees</b> (CRO-1330)		\$ 0			
<b>20) Outstanding Loans (incl. ones from other campaigns)</b> (CRO-1430)		\$ 0			
<b>21) Debts and Obligations owed By the Committee</b> (CRO-1610)		\$ 0			
<b>22) Debts and Obligations owed To the Committee</b> (CRO-1620)		\$ 0			
<b>23) Account Transfers Within the Committee</b> (CRO-1720)		\$ 0			
<b>24) Administrative Support</b> (CRO-1710)		\$ 0		\$ 0	
<b>25) Forgiven Loans</b> (CRO-1440)		\$ 0		\$ 0	
<b>26) 48-Hour Notice Reports Sum</b>		\$ 0		\$ 0	



# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee to Elect Bill Knight					
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	
Howard Williams P.O. Box 26000 Renaissance Plaza Greensboro, NC 27420		Attorney			
		c. Employer's Name/Specific Field Brooks, Pierce, Humphrey & Leonard			
				e. Election Sum to Date	
				\$ 200	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	402	Check		09/05/07	\$ 200
<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	
Donald Overman, Jr. P.O. Box 3366 301 Battleground Avenue Greensboro, NC 27402		Accountant			
		c. Employer's Name/Specific Field Public Accounting Firm			
				e. Election Sum to Date	
				\$ 100	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	402	Check		09/10/2007	\$ 100
<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	
Sidney Campbell 2702 Asbury Terrace Greensboro, NC 27408		Accountant			
		c. Employer's Name/Specific Field Self Employed			
				e. Election Sum to Date	
				\$ 150	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	402	Check		09/17/2007	\$ 150
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page				\$ 450	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)				\$ 750	

# Contributions from Individuals

Amendment

Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Committee to Elect Bill Knight							
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	
G. Donald Payne 6313 Frieden Church Road Gibsonville, NC 27249				Director of Security			
				c. Employer's Name/Specific Field			
				Jewelry Repair Shop			
						e. Election Sum to Date	
						\$ 100	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	402	Check		09/21/2007	\$ 100		
<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	
Evette Neese 1911 Colonial Avenue Greensboro, NC 27408				Small Business Owner			
				c. Employer's Name/Specific Field			
				Printing Company			
						e. Election Sum to Date	
						\$ 100	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	402	Check		09/25/2007	\$ 100		
<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	
Gene Carter 4819 Gaines Drive Greensboro, NC 27410				Retired			
				c. Employer's Name/Specific Field			
				Retired			
						e. Election Sum to Date	
						\$ 100	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	402	Cash		09/14/2007	\$ 50		
<input type="checkbox"/>	402	Cash		09/27/2007	\$ 50		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 300	
5. Total of ALL CRO 1210 Pages (This line must be up line 6 of Detailed Summary Page CRO-1100)						\$ 750	

# Disbursements

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable) Committee to Elect Bill Knight					2. ID Number
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) WOMAN P.O. Box 10465 Greensboro, NC 27404 336-254-5889		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify)		e. Election Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 20	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
402	Check	O	09/15/2007	\$20	Registration Fee
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Van's Advertising Items & Premiums 3264 Van Drive Burlington, NC 27215 336-226-7400		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify)		e. Election Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 1,196.13	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
402	Check	B	09/15/2007	\$1,196.13	Signs
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Alt Media 101 Greensboro, NC 336-288-2245		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify)		e. Election Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 605	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
402	Check	A	09/28/2007	\$605	Blog site design
				\$	
5. Total only this Page					\$ 1,821.13
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)					\$ 1,821.13
7. Purpose Codes (List detailed expenditure code in (k) above)					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
				D - To Another Candidate	
				H* - Holding Public Office Expenses	
				O* - Other	
* Codes require detailed explanation in required remarks field (k)					