

# Disclosure Report Cover

SEP 01 2009

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

GUILFORD COUNTY

BOARD of ELECTIONS

|  |                                 |
|--|---------------------------------|
| <b>1. Committee Information</b>  |                                 |
| a. Full Name<br>MARY RAKESTRAW FOR CITY COUNCIL  | c. ID Number<br>08Y05Z          |
| b. Mailing Address (include City, State and Zip Code)<br>% PHYLLIS P. GIBBS<br>4311 BURNING TREE DR.<br>GREENSBORO, NC 27406 | d. Date Filed<br>9/1/09         |
|  | e. Phone Number<br>336-674-2438 |

|                        |  |  |  |
|------------------------|--|--|--|
| 2. Report Year<br>2009 | 3. Period Start Date (mm/dd/yy)<br>7/20/09 | 4. Period End Date (mm/dd/yy)<br>8/31/09 | 5. Treasurer Full Name<br>PHYLLIS P. GIBBS |
|------------------------|--|--|--|

|  |   |  |   |   |
|--|---|--|---|---|
| <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"/> PAC                           | <input type="checkbox"/> Referendum       | <input type="checkbox"/> Organizational                                    | <input type="checkbox"/> Organizational | <input type="checkbox"/> Organizational     |
| <input type="checkbox"/> Independent Expenditure       | <input type="checkbox"/> Joint Fundraiser | <input checked="" type="checkbox"/> Thirty-five day                        | <input type="checkbox"/> Quarterly      | <input type="checkbox"/> Pre-referendum     |
| <input type="checkbox"/> Legal Expense Fund            |   | <input type="checkbox"/> Pre-primary                                       | <input type="checkbox"/> First          | <input type="checkbox"/> Final              |
| <b>7. Type of Fund (if applicable, check one)</b>      |   | <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 type="checkbox"/> Third          | <input type="checkbox"/> Annual             |
| <input type="checkbox"/> Building Fund                 |   | <input type="checkbox"/> Semi-annual                                       | <input type="checkbox"/> Fourth         | <input type="checkbox"/> Special            |
| <input type="checkbox"/> Other:                        |   | <input type="checkbox"/> Mid Year  | <input type="checkbox"/> Semi-annual    |   |
|  |   | <input type="checkbox"/> Year End  | <input type="checkbox"/> Mid Year       | <b>10. Special Report Name</b>              |
|  |   | <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<br>BB&T |  | a. Financial Institution Full Name |                               |
| b. Purpose<br>ALL FUNDS                    | c. Account Code<br>01                  | b. Purpose                         | c. Account Code               |
|  | d. Period Begin Balance<br>\$ 1,331.01 |                                    | d. Period Begin Balance<br>\$ |

**CERTIFICATION**

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

PHYLLIS P. GIBBS  
Printed Name of Signer

*Phyllis P. Gibbs*  
Signature of Appointed Treasurer

9/1/09  
Date

**FOR OFFICE USE ONLY**

|                          |                 |   |
|--------------------------|-----------------|---|
| Date Received: _____     | Employee: _____ | <b>Delivery Method</b><br><input type="checkbox"/> Normal Mail<br><input type="checkbox"/> Registered Mail<br><input type="checkbox"/> Hand Delivered<br><input type="checkbox"/> Electronically Filed<br><input type="checkbox"/> Signer has not received mandatory training |
| Date Postmarked: _____   | Employee: _____ |   |
| Date Scanned: _____      | Employee: _____ |   |
| Date Data Entered: _____ | Employee: _____ |   |

**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

Yes  No

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

|  |  |                          |  |                                    |  |
|--|--|--------------------------|--|------------------------------------|--|
| <b>1. Committee Full Name (and Fund if applicable)</b>                                     |  | <b>2. Type of Report</b> |  | <b>3. ID Number</b>                |  |
| MARY RAKESTRAW FOR CITY COUNCIL  |  | 35-DAY                   |  | 08Y05Z                             |  |
| <b>Start of Election Cycle:</b>  |  | <b>January 1, 2009</b>   |  | <b>Total this Reporting Period</b> |  |
| <b>4) Cash on Hand at Start</b>  |  | \$ 1,331.01              |  | \$                                 |  |
| <b>RECEIPTS</b>  |  |                          |  |                                    |  |
| <b>5) Aggregated Contributions from Individuals</b>  |  | <i>(CRO-1205)</i>        |  | \$ 465.00                          |  |
| <b>6) Contributions from Individuals</b>   |  | <i>(CRO-1210)</i>        |  | \$ 1,200.00                        |  |
| <b>7) Contributions from Political Party Committees</b>                                    |  | <i>(CRO-1220)</i>        |  | \$                                 |  |
| <b>8) Contributions from Other Political Committees</b>                                    |  | <i>(CRO-1230)</i>        |  | \$                                 |  |
| <b>9) Loan Proceeds</b>  |  | <i>(CRO-1410)</i>        |  | \$                                 |  |
| <b>10) Refunds/Reimbursements To the Committee</b>   |  | <i>(CRO-1240)</i>        |  | \$                                 |  |
| <b>11) Other Receipt Sources</b>   |  |                          |  |                                    |  |
| <b>11a) Interest on Bank Accounts</b>  |  | <i>(CRO-1250)</i>        |  | \$                                 |  |
| <b>11b) Contributions from Not-for-Profit Organizations</b>                                |  | <i>(CRO-1250)</i>        |  | \$                                 |  |
| <b>11c) Outside Sources of Income</b>  |  | <i>(CRO-1250)</i>        |  | \$                                 |  |
| <b>11d) Legal Expense Fund – Other Sources</b>   |  | <i>(CRO-1270)</i>        |  | \$                                 |  |
| <b>11 e) Exempt Purchase Price Sales</b>   |  | <i>(CRO-1265)</i>        |  | \$                                 |  |
| <b>12) TOTAL RECEIPTS</b> <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)</i> |  |                          |  | \$ 1,665.00                        |  |
| <b>EXPENDITURES</b>  |  |                          |  |                                    |  |
| <b>13) Disbursements</b>   |  |                          |  |                                    |  |
| <b>13a) Operating Expenditures</b>   |  | <i>(CRO-1310)</i>        |  | \$                                 |  |
| <b>13b) Contributions to Candidates/Political Committees</b>                               |  | <i>(CRO-1310)</i>        |  | \$                                 |  |
| <b>13c) Coordinated Party Expenditures</b>   |  | <i>(CRO-1310)</i>        |  | \$                                 |  |
| <b>14) Aggregated Non-Media Expenditures</b>   |  | <i>(CRO-1315)</i>        |  | \$                                 |  |
| <b>15) Loan Repayments</b>   |  | <i>(CRO-1420)</i>        |  | \$                                 |  |
| <b>16) Refunds/Reimbursements From the Committee</b>                                       |  | <i>(CRO-1320)</i>        |  | \$                                 |  |
| <b>17) In-Kind Contributions</b>   |  | <i>(CRO-1510)</i>        |  | \$                                 |  |
| <b>18) TOTAL EXPENDITURES</b> <i>(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</i>          |  |                          |  | \$                                 |  |
| <b>19) Cash on Hand at End</b> <i>(Add lines 4 and 12 together, then subtract line 18)</i> |  |                          |  | \$ 2,996.01                        |  |
| <b>ADDITIONAL INFORMATION</b>  |  |                          |  |                                    |  |
| <b>20) Non-Monetary Gifts Given to Other Committees</b>                                    |  | <i>(CRO-1330)</i>        |  | \$                                 |  |
| <b>21) Outstanding Loans (incl. ones from other campaigns)</b>                             |  | <i>(CRO-1430)</i>        |  | \$                                 |  |
| <b>22) Debts and Obligations owed By the Committee</b>                                     |  | <i>(CRO-1610)</i>        |  | \$                                 |  |
| <b>23) Debts and Obligations owed To the Committee</b>                                     |  | <i>(CRO-1620)</i>        |  | \$                                 |  |
| <b>24) Account Transfers Within the Committee</b>  |  | <i>(CRO-1720)</i>        |  | \$                                 |  |
| <b>25) Administrative Support</b>  |  | <i>(CRO-1710)</i>        |  | \$                                 |  |
| <b>26) Forgiven Loans</b>  |  | <i>(CRO-1440)</i>        |  | \$                                 |  |
| <b>27) 48-Hour Notice Reports Sum</b>  |  | <i>(CRO-2200)</i>        |  | \$                                 |  |
| <b>28) Contributions to be Refunded</b>  |  | <i>(CRO-1215)</i>        |  | \$                                 |  |

# Contributions from Individuals

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

|  |                        |                           |  |                             |                     |  |
|--|------------------------|---------------------------|--|-----------------------------|---------------------|--|
| <b>1. Committee Full Name (and Fund if applicable)</b>   |                        |                           |  |                             | <b>2. ID Number</b> |  |
| MARY RAKESTRAW FOR CITY COUNCIL  |                        |                           |  |                             | 08705Z              |  |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove |                        |                           |  |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)               |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>  |  |
| ANNE D. HUMMEL<br>1907 ROSECREST DR.<br>GREENSBORO, NC 27408                                   |                        |                           | NONE                                     |                             |                     |  |
|  |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                     |  |
|  |                        |                           |  |                             |                     |  |
|  |                        |                           | <b>e. Election Sum to Date</b>           |                             |                     |  |
|  |                        |                           |  |                             | \$ 100.00           |  |
| <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"/>   | 01                     | CHECK                     |  | 7/26/09                     | \$ 100.00           |  |
| <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><br>(include city, state, & zip)               |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>  |  |
| MARK SNYDER<br>4002 BEECHMONT CT.<br>GREENSBORO, NC 27410                                      |                        |                           | CPA                                      |                             |                     |  |
|  |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                     |  |
|  |                        |                           | MCGLADRY & PULLEN, LLP                   |                             |                     |  |
|  |                        |                           | <b>e. Election Sum to Date</b>           |                             |                     |  |
|  |                        |                           |  |                             | \$ 100.00           |  |
| <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"/>   | 01                     | CHECK                     |  | 7/18/09                     | \$ 100.00           |  |
| <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><br>(include city, state, & zip)               |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>  |  |
| LORETTA CALHOUN<br>3812 MADISON AVE.<br>GREENSBORO, NC 27403                                   |                        |                           | RETIRED                                  |                             |                     |  |
|  |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                     |  |
|  |                        |                           |  |                             |                     |  |
|  |                        |                           | <b>e. Election Sum to Date</b>           |                             |                     |  |
|  |                        |                           |  |                             | \$ 100.00           |  |
| <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"/>   | 01                     | CHECK                     |  | 8/3/09                      | \$ 100.00           |  |
| <input type="checkbox"/>   |                        |                           |  |                             | \$                  |  |
| <input type="checkbox"/>   |                        |                           |  |                             | \$                  |  |
| <b>4. Total only this Page</b>   |                        |                           |  |                             | \$ 300.00           |  |
| <b>5. Total of ALL CRO-1210 Pages</b>  |                        |                           |  |                             | \$ 1,200.00         |  |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>                         |                        |                           |  |                             |                     |  |

# Contributions from Individuals

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

|  |                     |
|--|---------------------|
| <b>1. Committee Full Name (and Fund if applicable)</b> | <b>2. ID Number</b> |
| MARY RAKESTRAW FOR CITY COUNCIL                        | 08705Z              |

**3. Contributor Information**  Add  Remove

|  |  |                                |
|--|--|--------------------------------|
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip) | <b>b. Job Title/Profession</b>           | <b>d. Comments</b>             |
| MARVIN E. BAUGH<br>1006 ELDERWOOD PL<br>GREENSBORO, NC 27410                     | RETIRED                                  |                                |
|  | <b>c. Employer's Name/Specific Field</b> |                                |
|  |  |                                |
|  |  | <b>e. Election Sum to Date</b> |
|  |  | \$ 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"/> | 01              | CHECK              |                        | 7/30/09              | \$ 100.00 |
| <input type="checkbox"/> |                 |                    |                        |                      | \$        |
| <input type="checkbox"/> |                 |                    |                        |                      | \$        |

**3. Contributor Information**  Add  Remove

|  |  |                                |
|--|--|--------------------------------|
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip) | <b>b. Job Title/Profession</b>           | <b>d. Comments</b>             |
| KATHRYN M. CLINE<br>5108 SOUTHWIND DR.<br>GREENSBORO, NC 27455                   | VOLUNTEER                                |                                |
|  | <b>c. Employer's Name/Specific Field</b> |                                |
|  | GREENSBORO HISTORICAL MUSEUM             |                                |
|  |  | <b>e. Election Sum to Date</b> |
|  |  | \$ 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"/> | 01              | CHECK              |                        | 7/20/09              | \$ 100.00 |
| <input type="checkbox"/> |                 |                    |                        |                      | \$        |
| <input type="checkbox"/> |                 |                    |                        |                      | \$        |

**3. Contributor Information**  Add  Remove

|  |  |                                |
|--|--|--------------------------------|
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip) | <b>b. Job Title/Profession</b>           | <b>d. Comments</b>             |
| ERNEST B. WHICHARD, JR.<br>611 WOODLAND AVE.<br>GREENSBORO, NC 27408             | OWNER                                    |                                |
|  | <b>c. Employer's Name/Specific Field</b> |                                |
|  | WHICHARD INSURANCE AGENCY                |                                |
|  |  | <b>e. Election Sum to Date</b> |
|  |  | \$ 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"/> | 01              | CHECK              |                        | 7/18/09              | \$ 100.00 |
| <input type="checkbox"/> |                 |                    |                        |                      | \$        |
| <input type="checkbox"/> |                 |                    |                        |                      | \$        |

**4. Total only this Page** \$ 300.00

**5. Total of ALL CRO-1210 Pages** \$ 1,200.00

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

# Contributions from Individuals

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

|  |                        |                           |  |                             |                     |  |
|--|------------------------|---------------------------|--|-----------------------------|---------------------|--|
| <b>1. Committee Full Name (and Fund if applicable)</b>   |                        |                           |  |                             | <b>2. ID Number</b> |  |
| MARY RAKESTRAW FOR CITY COUNCIL  |                        |                           |  |                             | 08705Z              |  |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove |                        |                           |  |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)               |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>  |  |
| W. MENTE BENJAMIN<br>(NO ADDRESS SUPPLIED)   |                        |                           | SELF-EMPLOYED                            |                             |                     |  |
|  |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                     |  |
|  |                        |                           | <b>e. Election Sum to Date</b>           |                             |                     |  |
|  |                        |                           |  |                             | \$ 100.00           |  |
| <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"/>   | 01                     | CHECK                     |  | 7/18/09                     | \$ 100.00           |  |
| <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><br>(include city, state, & zip)               |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>  |  |
| FRANK W. FREEMAN<br>712 LEAWOOD DR.<br>GREENSBORO, NC 27410                                    |                        |                           | RETIRED                                  |                             |                     |  |
|  |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                     |  |
|  |                        |                           | <b>e. Election Sum to Date</b>           |                             |                     |  |
|  |                        |                           |  |                             | \$ 100.00           |  |
| <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"/>   | 01                     | CHECK                     |  | 7/20/09                     | \$ 100.00           |  |
| <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><br>(include city, state, & zip)               |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>  |  |
| WILLIAM F. BLACK<br>3000 ROUND HILL RD.<br>GREENSBORO, NC 27408                                |                        |                           | RETIRED                                  |                             |                     |  |
|  |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                     |  |
|  |                        |                           | <b>e. Election Sum to Date</b>           |                             |                     |  |
|  |                        |                           |  |                             | \$ 100.00           |  |
| <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"/>   | 01                     | CHECK                     |  | 8/3/09                      | \$ 100.00           |  |
| <input type="checkbox"/>   |                        |                           |  |                             | \$                  |  |
| <input type="checkbox"/>   |                        |                           |  |                             | \$                  |  |
| <b>4. Total only this Page</b>   |                        |                           |  |                             | \$ 300.00           |  |
| <b>5. Total of ALL CRO-1210 Pages</b>  |                        |                           |  |                             | \$ 1,200.00         |  |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>                         |                        |                           |  |                             |                     |  |

# Contributions from Individuals

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

|  |                     |
|--|---------------------|
| <b>1. Committee Full Name (and Fund if applicable)</b> | <b>2. ID Number</b> |
| MARY RAKESTRAW FOR CITY COUNCIL                        | 08705Z              |

**3. Contributor Information**  Add  Remove

|  |  |                    |
|--|--|--------------------|
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip) | <b>b. Job Title/Profession</b>           | <b>d. Comments</b> |
| LEONARD J. GUYES<br>3200 ST. REGIS RD.<br>GREENSBORO, NC 27408                   | RETIRED                                  |                    |
|  | <b>c. Employer's Name/Specific Field</b> |                    |
|  | <b>e. Election Sum to Date</b>           |                    |
|  |  | \$ 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"/> | 01              | CHECK              |                        | 8/1/09               | \$ 100.00 |
| <input type="checkbox"/> |                 |                    |                        |                      | \$        |
| <input type="checkbox"/> |                 |                    |                        |                      | \$        |

**3. Contributor Information**  Add  Remove

|  |  |                    |
|--|--|--------------------|
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip) | <b>b. Job Title/Profession</b>           | <b>d. Comments</b> |
| C. W. IRVIN, JR.<br>2102 W. MARKET ST.<br>GREENSBORO, NC 27403                   | RETIRED                                  |                    |
|  | <b>c. Employer's Name/Specific Field</b> |                    |
|  | <b>e. Election Sum to Date</b>           |                    |
|  |  | \$ 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"/> | 01              | CHECK              |                        | 7/27/09              | \$ 100.00 |
| <input type="checkbox"/> |                 |                    |                        |                      | \$        |
| <input type="checkbox"/> |                 |                    |                        |                      | \$        |

**3. Contributor Information**  Add  Remove

|  |  |                    |
|--|--|--------------------|
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip) | <b>b. Job Title/Profession</b>           | <b>d. Comments</b> |
| JACQUELINE R. MANZI<br>104 PINEBURR RD.<br>GREENSBORO, NC 274055                 | RETIRED                                  |                    |
|  | <b>c. Employer's Name/Specific Field</b> |                    |
|  | <b>e. Election Sum to Date</b>           |                    |
|  |  | \$ 200.00          |

| f. Prior                 | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount |
|--------------------------|-----------------|--------------------|------------------------|----------------------|-----------|
| <input type="checkbox"/> | 01              | CHECK              |                        | 6/11/09              | \$ 100.00 |
| <input type="checkbox"/> |                 |                    |                        |                      | \$        |
| <input type="checkbox"/> |                 |                    |                        |                      | \$        |

**4. Total only this Page** \$ 300.00

**5. Total of ALL CRO-1210 Pages** \$ 1,200.00

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