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Disclosure Report Cover Sheet

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Please note that this cover sheet cannot be used to amend committee information such as the committee address; treasurer, assistant treasurer, or custodian of books information; or depository information. You must amend the Statement of Organization (CRO-2100) to make those kinds of committee changes.

1. Name of Committee or Fund				6. Date
COMMITTEE TO ELECT HOLBROO	K CLERK			4/29/02
				7.ID Number
2. Address				
1068 West Fourth Street		State In	710	8. Phone
3. City	4		Zip	
Winston-Salem		NC	27101	748-8887
9. Type of Report		. <u></u>	10. Period Covered Start 1/1	d 11. Amendment /02 - Yes
First Quarter Plus				0/02 X No
12. Type of Committee or Fund (Check one)	I foint	Fundraiser		ooster Fund"
Candidate Campaign Party PAC Referendum Other Fund:	hanna	Money Accou	=	ilding Fund
13. Treasurer Name				
Thomas L. Nesbit				
14. Assistant Treasurer Name(s)	<u> </u>			····
Marlene Johnson		<u> </u>		
15. Custodian of Books Name	······································		······································	
Thomas L. Nesbit				
16. Bank/Depository/Credit Account Informat	on b. Purpose		c. Code	d. Period Begin Balance
a. Name	o. rurpose			s 7,436.39
First Citizens Bank		<u></u>		*
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CERTIFICATION				•
I certify that the Committee is in compliance with	all provisions of Art	icle 22A, inclu	iding that no fund:	s are commingied with
funds for a federal or out-of-state PAC. I further	say that this report is	complete, true	anu contect.	
			4/2	9/02
Signature of Appointed Treasurer of	r Candidate			Date

Detailed Summary

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Detailed Summary	a. 10		3. ID Nu	mher
I. Name of Constructed of 2 data	2. Type of Re	port		
COMMITTEE TO ELECT HOLBROOK CLERK	_	Total this	Total this	For Office
Start of Election Cycle: January 1, 20			Election Cyc	· · · ·
4) Cash on Hand at Start of Election Cycle				
5) Cash on Hand at Start of Present Reporting Period		57,436.39		
RECEIPTS				
6) Contributions from Individuals	(CRO-1210)		5	
7) Contributions from Political Party Committees	(CRO-1220)		\$	
8) Contributions from Other Political Committees	(CRO-1230)		<u> </u>	
9) Loan Proceeds	(CRO-1410)		<u>s</u>	
10) Refunds & Reimbursements to Committee	(CRO-1240)		2	
11) Other Receipt Sources	(CRO-1250)			
11a) Interest on Bank Accounts	(CRO-1250)		<u>\$</u>	
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)		\$	
11c) Outside Sources of Income	(CRO-1250)	\$	\$	
12) TOTAL RECEIPTS (Add lines 6, 7, 8, 9, 10, 11a, 11b, and 11c)		\$ -0-	\$	
EXPENDITURES				
13) Disbursements	(CRO-1310)			
13a) Operating Expenditures	(CRO-1310)	s 2.00		
13b) Contributions to Candidates/Political Committees	(CRO-1310)	S	\$	
13c) Coordinated Party Expenditures	(CRO-1310)	S	\$	
14) Loan Repayments	(CRO-1420)		\$	
15) Refunds from Committee	(CRO-1320)		\$	
16) In-Kind Contributions	(CRO-1510)		\$	
17) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, and 16)		\$ 2.00	S	·
18) Cash on Hand at End of Reporting Period (For this Period, add lines 5 and 12 together, then subtract line 17) (For this Election Cycle, add lines 4 and 12 together, then subtract line 17)	7)	\$7,434.39	S	
Additional Information	.			
19) Non-Monetary Gifts Given to Committees	(CRO-1330)	\$		
20) Outstanding Loans (including ones from other campaign		·		
21) Debts and Obligations owed BY the Committee	(CRO-1610			
22) Debts and Obligations owed TO the Committee	(CRO-1620	·		
23) Parent Entity's Administrative Support	(CR0-1710) S		

	re Report Cover Sheet Informati	
If there is not enough roo	m on the Disclosure Report Cover Sheet form (C is use this form to include any additions and attac	the it to the Cover Sheet form.
lame of Committee or Fund		2. ID Number
	LECT HOLBROOK CLERK	
Assistant Treasurer Name(s)		
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3. Contributor					•	. L	• - • •
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_	First Citizens	Bank	service cho			3/29/02	s
Š	2000 West Firs	st Street				, 3 / 2 / 3 / 3 /	2
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a	This line goes in line 136 of Del This line goes in line 13c of Del	alled Summary Page CR	D-1100 if Coordinated F	Party Expenditures)			

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Loan Proceeds 2. ID Number 1. Name of Committee or Fund COMMITTEE TO ELECT HOLBROOK CLERK b. Start Date (mm/dd/yyyy) c. End Date (mm/dd/yyyy) d. Interest i. Account a. Full Name, Mailing Address & Phone Number/Code Rate (include city, state, and zip) % f. Employer's Name/Specific Field e. Job Title/Profession j. Form of Payment 3. Lender g. Security Pledged k. Amount h. If Amendment, choose change type: S Delete _ Add b. Start Date (mm/dd/yyyy) c. End Date (mm/dd/yyyy) d. Interest i. Account a. Full Name, Mailing Address & Phone Number/Code Rate (include city, state, and zip) ∿, f. Employer's Name/Specific Field e. Job Title/Profession j. Form of Payment Lender g. Security Pledged k. Amount h. If Amendment, choose change type: S _ Delete _ Add b. Start Date (mm/dd/yyyy) c. End Date (mm/dd/yyyy) i. Account d. Interest a. Full Name, Mailing Address & Phone Number/Code Rate (include city, state, and zip) f. Employer's Name/Specific Field e. Job Title/Profession . Form of Payment Lender g. Security Pledged k. Amount h. If Amendment, choose change type: \$ Add i. Account c. End Date (mm/dd/yyyy) d. Interest b. Start Date (mm/dd/yyyy) a. Full Name, Mailing Address & Phone Number/Code Rate (include city, state, and zip) f. Employer's Name/Specific Field e, Job Title/Profession . Form of Payment 3. Lender g. Security Pledged k. Amount h. If Amendment, choose change type: S Delete Add i. Account c. End Date (mm/dd/yyyy) d. Interest a. Full Name, Mailing Address & Phone b. Start Date (mm/dd/yyyy) Number/Code Rate (include city, state, and zip) % f. Employer's Name/Specific Field e. Job Title/Profession j. Form of Payment Lender g. Security Pledged ei, k. Amount h. If Amendment, choose change type: Delete i. Account d. Interest b. Start Date (mm/dd/yyyy) c. End Date (mm/dd/yyyy) a. Full Name, Mailing Address & Phone Number/Code Rate (include city, state, and zip) % f. Employer's Name/Specific Field e. Job Title/Profession . Form of Payment Lender g. Security Pledged en, k. Amount h. If Amendment, choose change type: \$ Delete Add S -0-4. Total only this Page (only show on last page) \$ 5. Total of ALL CRO-1410 Pages (This line must be on line 9 of Detailed Summary Page CRO-1100)

	an Repayments ame of Committee or Fund			2. ID N	umber
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	tstanding Loans lame of Committee or Fund			2. ID Numb	er		
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		b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest	h. Original Loan		
	a. Full Name, Mailing Address & Phone (include city, state, and zlp)	D. Start Date (minute) 337		Rate	Amount		
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In	-Kind Contributions		Page	01
_	Name of Committee or Fund		2. ID Numb	er
	COMMITTEE TO ELECT HOLBROOM	CLERK		
	a. Full Name, Mailing Address & Phone	c. Description	d. Date (mm/dd/yyyy)	e. Fair Market Amount
	(include city, state, and zip)			
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	b. Type of Contributor Individual Party Committee	f. If Amendment, choose change type:	g. Election C	ycle Sum to Date
	Other Political Committee Other Receipt Source	Add Delete	<u> \$</u>	
4	. Total only this Page		S	-0-
5		ow on last page)	\$	
α	his line must be on line 16 of Detailed Summary Page CRO-11	00)	•	

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Page	 of	

48-Hour Notice									Page	of
To	be l	Jsed by (Committee	s to R	eport C	ontributions	of over	\$1,000		
Committee Name								7.1	Date	
	το		RDUUK	CT.F	RK			.]		
COMMITTEE TO EL	EC	1 HOI							ID Numi	har
Committee Address				·			<u> </u>	0,	ID Ruini	
			4. State	5. Zip	<u></u>	6. P	hone	9.	Amendr	nent
, City			T. Otate	<u></u>					Yes	
] No	
0. Treasurer Name										
							7.1	· ·		
1. Contributions Received (Su	bm	it multipl	e forms if	additic	onal spe	ace is require	ed.)		·	c. If Not-for-
. Full Name, Mailing Address & Phone	2		b. Specify T			utor: Political Party		Other Political Con	mmittee	Profit, list Fe
(include city, state, and zip)			Individ	dual er-Profit		Other Source:		Omer i ondern Con		ID #:
·			L If Other	Commi		cify Type of Co			-	
			Feder		State					
			e, If Ind, lis					, list Employer's Na	ame/Spe	cific Field:
		-	II Inu, II					<u></u>	R	······································
The days Churche Surger to Data		ı. In-Kind	i. Account	Namber	/Code	j. Form of Pay	ment	k. Date (mm/dd/yy	уу), <u>I</u>	Amount
. Election Cycle Sum to Date	-+		L Account						5	\$
\$ a. Full Name, Mailing Address & Phone	<u></u>	<u></u>	b. Specify '	Type of	Contrib	utor:		. •	-	c. If Not-for-
(include city, state, and zip)	•		Indivi			Political Party		Other Political Co	mmittee	
(menute city, start, and tap)		**		or-Profi		Other Source:			<u></u>	
			d. If Other	Comm	ittee, spe	cify Type of Co	ommitte	e:		
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			e, If Ind, li	st Job 7	Title/Pro	fession:	f. If Ind	l, list Employer's N	ame/Spe	cific Field:
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g. Election Cycle Sum to Date		h. In-Kind	i. Account	Numbe	r/Code	j. Form et ray	ment	K. Date (mmuul)	555	
S				m	Contrib					c. If Not-for-
a. Full Name, Mailing Address & Phon	e		b. Specify Indivi	_		Political Party	, 11	Other Political Co	mmittee	
(include city, state, and zip)		<u> </u>		or-Prof	. H	Other Source	_			ID #:
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12. Total Contributions ALL P	age	S	\$		13. To	al Contribu	tions T	HIS Page		\$ − 0·
(if multi-page, only list on page 1)			<u> </u>		(sum a	ll the 111 entrie	s on this	page)		<u> </u>
				•						
CERTIFICATION										
		11		minia	ne of A	rticle 22 A in	chiding	that no funds a	re com	ningled with
I certify that the Committee is in	COL	npliance	with all pr	UVISIO		ia complete d	trine 'ao	rrect and the co	ntributi	ons were
funds for a federal or out-of-state	PA	C. I fur	ther say th	at this		is compicie, i	raceivo	d not over \$1.00		be reported o
received no more than 48 hours j	prio	r fo this I	notice bein	ig filed	I. All C	onmoutions	icceive		7 0 , mm	
the next scheduled filing report.		/ \								

4/29/02 Date Signature of Appointed Treasurer or Candidate (if multi-page, only sign on page 1)

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