COPY Rue 41. 29

Disclosure Report Cover Sheet

Detailed Summary

| Detailed Summary I. Name of Committee or Fund | 2. Type of R | eport | | 3. ID Numl | er | |
|---|--------------|-------------------------|------|------------------------|------|----------------|
| | | | | | | |
| Start of Election Cycle: January 1, 20 | | Total this Period | | Total this ction Cycle | | Office Only |
| 4) Cash on Hand at Start of Election Cycle | | | \$ | 260 | | |
| 5) Cash on Hand at Start of Present Reporting Period | | s 1,260 | | | | |
| RECEIPTS | | | | | 2. | |
| 6) Contributions from Individuals | (CRO-1210) | s 2,125 | S | | | |
| 7) Contributions from Political Party Committees | (CRO-1220) | s O | \$ | | | |
| 8) Contributions from Other Political Committees | (CRO-1239) | s O | S | | | |
| 9) Loan Proceeds | (CRO-1410) | s. D | \$ | | | |
| 10) Refunds & Reimbursements to Committee | (CRO-1240) | s () | \$ | | | |
| 11) Other Receipt Sources | (CRO-1250) | 10 July 1 7 1 5 1 2 1 1 | | | | |
| 11a) Interest on Bank Accounts | (CRO-1250) | s 10.44 | \$ | | | |
| 11b) Contributions from Not-for-Profit Organizations | (CRO-1250) | \$ 0 | S | | | |
| 11c) Outside Sources of Income | (CRO-1250) | \$ () | \$ | | | |
| 12) TOTAL RECEIPTS (Add lines 6, 7, 8, 9, 10, 11a, 11b, and 11c) | | s 2135.44 | \$ | | | |
| EXPENDITURES | | | | | | |
| 13) Disbursements | (CRO-1310) | | | | | |
| 13a) Operating Expenditures | (CRO-1310) | \$435.50 | S | | | |
| 13b) Contributions to Candidates/Political Committees | (CRO-1310) | s n | \$ | | | |
| 13c) Coordinated Party Expenditures | (CRO-1310) | s 0 | \$ | | | |
| 14) Loan Repayments | (CRO-1420) | s 0 | \$ | | | |
| 15) Refunds from Committee | (CRO-1320) | 2 0 | \$ 2 | *** | | • |
| 16) In-Kind Contributions | (CRO-1510) | 2 0 | \$ | | }=a | |
| 17) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, and 16) | | \$ 435.50 | s | Ç. | | |
| 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) | | s 2 9 59.44 | s | VED | 5 02 | |
| Additional Information | | | | | | |
| 19) Non-Monetary Gifts Given to Committees | (CRO-1330) | s O | | | | |
| 20) Outstanding Loans (including ones from other campaigns) | (CRO-1430) | s O | | | | |
| 21) Debts and Obligations owed BY the Committee | (CRO-1610) | s 0 | | | | |
| 22) Debts and Obligations owed TO the Committee | (CRO-1620) | s O | | | | |
| 23) Parent Entity's Administrative Support | (CRO-1710) | s O | | | | |

| <u> </u> | 1. Name of Committee or Fund | | | | | | | |
|-------------|--|----------------------|----------------|---|----------------|--------------------|----------------|--|
| _ | | | - | | | | | |
| | Walter Marshall Campaign | d. Account | e. Form of | f. Date | g. ln- | h. Prior | i. Amount | |
| | a. Full Name, Mailing Address & Phone (include city, state, & zip) | Number/Code | Payment | (mm/dd/yyyy) | Kind | Report | | |
| | | | | | | | s 15,00 | |
| ı, | James D. Branch | | | | | | | |
| Contributor | 224 Town Run Lane | | | | | <u></u> J | \$ | |
| i i | Winston-Salem, N. C. 27101 | | | | 4.7 | F 1 | s | |
| ပ္ပ | | | | | | L_J | | |
| | b. Job Title/Profession Physician | | | | | | S | |
| | · | j. If Amendment, cho | ose change typ | e: | k. Electi | on Cycle | Sum to Date | |
| | c. Employer's Name/Specific Field | Add | Delete | | \$ | | | |
| | F. C. Surgeon a. Full Name, Mailing Address & Phone | d. Account | e. Form of | f. Date | g. In- | h. Prior | i. Amount | |
| | (include city, state, & zip) | Number/Code | Payment | (mm/dd/yyyy) | Kind | Report | | |
| | Sandra Miller Jones | | | | | | s 50.00 | |
| يا | | | | | | 17 | s | |
| Contributor | 5840 Brookway Dr. | | | | L | ب | • | |
| Ę | Winston-Salem, N.C. 27105-1431 | | | | | | s | |
| | | | | | | | ¢. | |
| ų | b. Job Title/Profession Stockbroker | 4 | | | | <u></u> | 3 | |
| | c. Employer's Name/Specific Field | i. If Amendment, cho | ose change ty | pe: | | ion Cycle | Sum to Date | |
| | CMA Management | Add | Delete | | \$ | G 5 5 | | |
| - - | a. Full Name, Mailing Address & Phone | d. Account | e. Form of | f. Date | g. lu- Kind | h. Prior Report | i. Amount | |
| | (include city, state, & zip) | Number/Code | Payment | (mm/dd/yyyy) | Kille | Report | 63500 | |
| | Pouton T Hoiseton | ì | | | نا | | s 25,00 | |
| ě | Peyton T. Hairston 425 Bacon St | | | 1 | | | \$ | |
| Contributor | Winston-Salem, N.C. 27105 | | | 1 | | | _ | |
| ŧ | Winston-Dalem, N.L. & 1105 | | | | | | \$ | |
| ပိ | | | | Consideration of the contract | | | \$ | |
| " | b. Job Title/Profession | ╡ | | | <u>, L.i</u> | | | |
| 1 | Retired School Principal c. Employer's Name/Specific Field | j. If Amendment, ch | | pe: | k. Elec | tion Cycle | Sum to Date | |
| | W-S/F-C School System | Add | Delete | f Date | g. in- | h. Prior | i. Amount | |
| - | a. Full Name, Mailing Address & Phone | d. Account | e. Form of | f. Date (mm/dd/yyyy) | | Report | | |
| ı | (include city, state, & zip) | Number/Code | Payment | 1 (mmada)3333) | 1 | | \$25.00 | |
| ı | Franklin R. Bennett | | | | L. | u | 323.00 | |
| į | 3623 San Carlos Rd | 1 | | | | | S | |
| Putor | Winston-Salem, N.C. 27105 | e e = | | - | | | | |
| į | WINDSON- Datem, N.C. & 1100 | | | | | Ш | . . | |
| 0 | b. Job Title/Profession | | en system en e | | | | S | |
| | Retired Proportion Officer | | 1 | | lk Ele | ction Cycl | e Sum to Date | |
| | c. Employer's Name/Specific Field | j. If Amendment, cl | Delete | | \$ | <u>,</u> | | |
| | State of North Caroline | d. Account | e. Form of | | g. In | h. Prio | r i. Amount | |
| Г | a. Full Name, Mailing Address & Phone | Number/Code | Payment | (mm/dd/yyyy | | 1 _ | | |
| | (include city, state, & zip) | | Check | 1/10/0 | 2 | | \$ 200,00 | |
| I. | Gerald H. Long, | | Circo | | . — | _ | _ | |
| | 7631 Lasater Rd | | | | | | \$ | |
| | Clemmons, N.C. 27102 | | | | <u> </u> | | S | |
| | | | : | | | لــا | | |
| - ; | b. Job Title/Profession | | | | , 🗆 | | :S | |
| l | Refired Vice-President | j. If Amendment, C | hoose change | type: | k. Ele | ction Cyc | le Sum to Date | |
| - | E PIand Namely cocific kield | Il. Tr Wittenamend | | | S | | | |
| | | Add | Delete | · | 4 | | | |
| Ļ | RuReynolds | Add | Delete | | 19 | | \$315.00 | |
| | RJ Reynolds I. Total only this Page | | | | 14 | | | |
| 17 | RuReynolds | (only show on last j | | | | | \$315.00 \$ | |

| 1. N | ame of Committee or Fund 2. | | | | | | 2. ID Number | | |
|----------------|---|--------------------------------------|-----------------------|---|-----------------|-------------------------------|------------------|--|--|
| _ | Valter Marshall Campaian | | | | | | | | |
| | a. Full Name, Mailing Address & Phone | d. Account | e. Form of | f. Date | g. In- | h. Prior | i. Amount | | |
| | (include city, state, & zip) | Number/Code | Payment | (mm/dd/yyyy) | Kind | Report | | | |
| | Charles Hardison | - | | | | | \$50.00 | | |
| 5 | LAG Mostial ather King Dr | • | | | l | 11 | s | | |
| 3. Contributor | 108 Mortin Luther King Dr. Winston-Salem, N.C. 27101 | | | | | | <i>"</i> | | |
| ıţı | Winston-Salem, N.C. C. 101 | | | | 13 | ËΙ | \$ | | |
| បី | | | | | , | | | | |
| | b. Job Title/Profession | | | | | | \$ | | |
| | Self-Employed c. Employer's Name/Specific Field | j. If Amendment, cho | ose change typ | e: | | ion Cycle | Sum to Date | | |
| il | Forsyth Seafood | Add | Delete | 6.50 | S g. In- | h. Prior | i. Amount | | |
| | a. Full Name, Mailing Address & Phone | d. Account | e. Form of Payment | f. Date (mm/dd/yyyy) | g. III- Kind | Report | i. Amount | | |
| | (include city, state, & zip) | Number/Code | rayment | (11111111111111111111111111111111111111 | | | s 20. 0 0 | | |
| | Keith Wilkes | | | , | | ij | 3 20.00 | | |
| utor | Lead (1.4. D) = π. C | | | | П | | \$ | | |
| į | Rural Hall, N.C. 27045 | | | · · · · · | _ | | _ | | |
| Contributor | Holmines | | | | L | | 3 | | |
| | b. Job Title/Profession | j " | | | | | s | | |
| | Football Coach | | | | k. Flact | ion Cycle | Sum to Date | | |
| | c. Employer's Name/Specific Field | j. If Amendment, cho | Delete | ре | \$ | | | | |
| | WS/FC School System | d. Account | e. Form of | f. Date | g. In- | h. Prior | i. Amount | | |
| | a. Full Name, Mailing Address & Phone (include city, state, & zip) | Number/Code | Payment | (mm/dd/yyyy) | Kind | Report | | | |
| | | | · | | | | s 25.00 | | |
| ř | Warren Oldham | | | | | | ** | | |
| Contributor | P.O. Box 4415 | | : | · : | | | ·\$ | | |
| | Winston-Solem, N.C.7105 | | | | | | s | | |
| | | | | - | . ليا إ | | | | |
| ω. | b. Job Title/Profession | - | | | | | \$ | | |
| | State Representative c. Employer's Name/Specific Field | j. If Amendment, choose change type: | | | | k. Election Cycle Sum to Date | | | |
| | State of North Carolina | Add | Delete | | S | | | | |
| ┢ | a. Full Name, Mailing Address & Phone | d. Account | e. Form of | f. Date | g. In- Kind | h. Prior Report | i. Amount | | |
| ı | (include city, state, & zip) | Number/Code | Payment | (mm/dd/yyyy) | | Keport | .025.00 | | |
| Į | Vernon E. Cloud | | | | L | | \$25.00 | | |
| Ę | I SKU Nakla St | | | | | П | ` \$ | | |
| ributor | Winston-Salem, N.C. 27105 | | | | L | · · · · · · | | | |
| Cont | THE TOP SOLUTION . | | | | | | S | | |
| 3. | b. Job Title/Profession | | | | . 🗀 | | \$ | | |
| 1 | School Teacher | j. If Amendment, ch | ence charge to | | k. Elec | tion Cycle | Sum to Date | | |
| | c. Employer's Name/Specific Field | j. If Amendment, ch | Delete | pv | S | | | | |
| | a. Full Name, Mailing Address & Phone | d. Account | e. Form of | f. Date | g. In- | h. Prior | i. Amount | | |
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| | | | | | . 🗀 | | \$50.06 | | |
| 5 | C.G. Watson | | • | | | | c | | |
| Contributor | 3309 N. Liberty St Winston-Salem, N.C | | | | 1. | <u> </u> | \$ | | |
| Į | Winston-Salem, N.L | | | | | П | \$ | | |
| | | | | | _ | | i., | | |
| ۳ | b. Job Title/Profession CPA | | | · | <u>; []</u> | | ·\$ | | |
| | c. Employer's Name/Specific Field | j. If Amendment, cl | | уре: | k. Ele | tion Cycl | e Sum to Date | | |
| | C.G. Watson & Associates | □ Add | Delete | | 12 | | | | |
| 4 | . Total only this Page | . <u></u> | | | | | \$170.00 | | |
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| 1. P | Name of Committee or Fund Z. 1D Number | | | | | | | | |
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| | Walter Marshall Campaian | | | | | | | | |
| | a. Full Name, Mailing Address & Phone | d. Account | e. Form of | f. Date | g. In- | h. Prior | i. Amount | | |
| | (include city, state, & zip) | Number/Code | Payment | (mm/dd/yyyy) | Kind | Report | | | |
| | N . al D Alatan | | | | | | \$50.00 | | |
| 'n | and a make Landing Do | | | | | | _ | | |
| but | 244 Brooks Landing 27106 | | | | | | \$ | | |
| ntri | Niger D. Alstoll 249 Brooks Landing Dr. Winston Salem, N.C. 27106 | | | | 1.7 | 77 | s | | |
| 3. Contributor | | | | | اا | | | | |
| ٦. | b. Job Title/Profession | | | | | | \$ | | |
| | Vice President c. Employer's Name/Specific Field | j. If Amendment, cho | ose change typ | oe: | k. Elect | ion Cycle | Sum to Date | | |
| | GMAC. | Add | Delete | | \$ | | | | |
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| . 1 | (include city, state, & zip) | Number/Code | Payment | (mm/dd/yyyy) | Kind | Report | | | |
| | M - 1 1 1 1-1-222 1- | | | | | | \$25.00 | | |
| 5 | 3304 New Walkertown Rd Winston-Salem, N.C. 27105 | | | | _ | | | | |
| Contributor | Strangalem N.C. 27105 | | | | L. | البا | \$ | | |
| ntri | Minalous | | | | | | s | | |
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| 3, | b. Job Title/Profession | | | | | | ·\$ | | |
| | Self-Employed c. Employer's Name/Specific Field | j. If Amendment, cho | ose change typ | oe: | | ion Cycle | Sum to Date | | |
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| | Demand W English | | | | | | \$100.00 | | |
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| . Contributor | 648243 3111111 11 27105 | | - | : | | Ш | • | | |
| | 628242 St NW Winston-Salem, N.C. 27105 | | | | П | | \$ | | |
| | | | į . <u></u> | | | | | | |
| 6 | b. Job Title/Profession Housewife | - | • | | | | `\$ | | |
| | c. Employer's Name/Specific Field j. If Amendment, choose change type: | | | pe: | k. Election Cycle Sum to Date | | | | |
| | C. Dilipio, or G. Carrier | Add | Delete | | \$ | | | | |
| _ | a. Full Name, Mailing Address & Phone | d. Account | e. Form of | f. Date | g. In- | h. Prior | i. Amount | | |
| l | (include city, state, & zip) | Number/Code | Payment | (mm/dd/yyyy) | Kind | Report | L | | |
| | Bobby Lee Ray 1212 NE 24th St Winston-Salem, N.C. 27105 | | | | | | 2100.00 | | |
| 章 | 1212 NF 2416 St | , | | | | | s | | |
| ntributor | Waster-Solem NC 27105 | | | | L l | السا . | J | | |
| Ę | WINSTON SUICING THE SUICE SEE | | | | | | \$ | | |
| 3. Ç | b. Job Title/Profession Self - Employed | | | Appendix to the contract of th | | | \$ | | |
| `` | b. Job Haerrolesson Self - Employed | | | | | | | | |
| | C. Emproyer a Ivame/Specific Field | j. If Amendment, ch | | pe: | | tion Cycle | Sum to Date | | |
| L | Ray's Trucking | Add | Delete_ | C Det- | \$ 10- | h. Prior | i. Amount | | |
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| 1 | (include city, state, & zip) | Number/Code | 1 ayment | 1 (mm 2013)33) | | 1 222 | \$ 100,00 | | |
| | Krista Marshall | | 6 . | ., | : L | | | | |
| Contributor | 956 Carnegie Ave Plainfield, N.Y. 07060 | | • | • | [| | \$ | | |
| Ę | Plainfield. N.Y. 07060 | | | | L | | • | | |
| Ę | 1 19(1), 1 - 9) | | | | | | 2 | | |
| ~ | b. Job Title/Profession Chemist | | | | | | : S | | |
| 1 | | <u> </u> | | | , Lad | tion Cucl | Sum to Date | | |
| ı | c. Employer's Name/Specific Field | j. If Amendment, ch | | pe: | \$ | ava Cyck | - comment out homes | | |
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| | Total only this Page | | | | | | \$375.00 | | |
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| 1. N | lame of Committee or Fund | | | | 2. ID Number | | | |
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| - | Walter Marshall Campaian | | | | | | | |
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| | David L Spens | | | | | | \$25.0D | |
| 후 | 220 Springview Dr | . •. | | | | [1 | s | |
| ip | 320 Springview Dr. Winston-Salem, N.C. 27105 | | | | ئــا | Ш | ~ | |
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| | b. Job Title/Profession Parole Offices | | | | 1-5 | . | s | |
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| | David A Pianett | *** | | | | Ė | \$100.00 | |
| ا ۾ | Daniel A. Piagott 3855 Northampton Dr. Winston-Salem, N.C 27105 | w | | | _ | , | • | |
| Contributor | Waster Solam N.C. 27105 | | | | LJ. | <u>Ļ</u> | \$ | |
| ĮĮ. | WINSTON-DURING THE ATTENDED | | | | | | S | |
| ŭ | A TEMPORAL CONTRACTOR | | | | _ | | • | |
| 3. | b. Job Title/Profession | | | | <u> </u> | اليا ا | G | |
| | School Principal c. Employer's Name/Specific Field | j. If Amendment, cho | | pe: | k. Elect | ion Cycle | Sum to Date | |
| | W-S/FC School System | Add | Delete | f, Date | g. In- | h. Prior | i. Amount | |
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| L | Howard L. Ward | | , gran tooks 14 | | ني | ب | | |
| Į | 859 Crawford St | | | - | | | ·\$ | |
| Contributor | Winston-Salem, N.C. 27101 | | | | | [| S | |
| ວົ້ | | | | | . لا : | | | |
| ઌ | b. Job Title/Profession | 4 | : | | | | \$ | |
| | Retired School Teacher c. Employer's Name/Specific Field | j. If Amendment, choose change type: | | | | ion Cycle | Sum to Date | |
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| | Annie E. Lassiter | | | | | Ļ | \$20.00 | |
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| Ē | Kernersville, N.C. 27284 | | | | Pari 4 | | e | |
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| 4 | b. Job Title/Profession Secretary |] | | _ | : [] | | \$ | |
| I | The second of th | i. If Amendment, ch | oose change tv | pe: | k. Elec | tion Cycle | Sum to Date | |
| | c. Employer's Name/Specific Field R. J. Reynolds | Add | Delete | • | \$ | | | |
| - | a. Full Name, Mailing Address & Phone | d. Account | e. Form of | f. Date | g. ln- | h. Prior | | |
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| I | Samuel G. Puryear | 1 | | | | | \$25.00 | |
| ţ | 3742 Danube Dr. Winston-Salem, N.C. 27105 | | • | • | | | \$ | |
| Ę | Winston-Salem, N.C. 27105 | | | | k | ·J | _ | |
| Contributor | Milioton amend | | | | | | S | |
| ~ | | <u> </u> | | | | | : s | |
| I | Retired School Principal | j. If Amendment, cl | , | /ne: | ik, Elec | tion Cyck | e Sum to Date | |
| | c. Employer's Name/Specific Field | j. If Amendment, ci | Delete | , pc. | \$ | | | |
| - | WS/FC School System | I | عاماء در نے | | | | \$185.00 | |
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| 1. Name of Committee or Fund 2. ID Number | | | | | | | |
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| | Walter Marshall Compaign | | - | C Date | _ 1 | 1 5 :- | |
| | a. Full Name, Mailing Address & Phone (include city, state, & zip) | d. Account Number/Code | e. Form of Payment | f. Date (mm/dd/yyyy) | g. In- Kind | h. Prior Report | i. Amount |
| ١. | Jack D. Marion | | | | | | \$ 25.00 |
| utor | 13 Freeman St | | | | (***-1 | II | s |
| Contributor | Dobson, N.C. 27050 | | | | L i | اـــا | • |
| Š | | | | | | | S |
| | b. Job Title/Profession | - | | | f | Lj | s |
| l | Retired A.L.E. Supervisor | j. If Amendment, cho | ose change tyr | 1#° | k. Elect | ion Cycle | Sum to Date |
| | c. Employer's Name/Specific Field State of North Caroling | Add | Delete | ж. | \$ | ion ejen | oun to out |
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| ١ | William Curtis Brown | | | | | | \$50.00 |
| Contributor | 3371 Big Woods Rd Winston-Salem, N.C. 27105 | | | | [] | | s |
| Ē | Winston-Salem, N.C. 27105 | | | · • · · · • | | اسبا | |
| 3 | | | | | | | \$ |
| ų | b. Job Title/Profession | • | | | | | s |
| | c. Employer's Name/Specific Field | j. If Amendment, cho | ose change typ | e: | k. Elect | ion Cycle | Sum to Date |
| İ | RJ. Reynolds | Add | Delete | | \$ | | |
| _ | a. Full Name, Mailing Address & Phone | d. Account | e. Form of | f. Date | g. ln- | h. Prior | i. Amount |
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Page 11 of 12

Outstanding Loans

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Page 13 of 13 Additional Disclosure Report Cover Sheet Information If there is not enough room on the Disclosure Report Cover Sheet form (CRO-1000) to include all assistant treasurers or accounts use this form to include any additions and attach it to the Cover Sheet form. I. Name of Committee or Fund 2. ID Number Walter Marshall Campaign
3. Assistant Treasurer Name(s) 4. Bank/Depository/Credit Account Information a. Name b. Purpose c. Code d. Period Begin Balance \$,

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