Disclosure Report Cover Sheet

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
John Palmer for Commissioner			6/28/02
2. Address			7.ID Number
c/o John Anthony, Treasurer 3630 Winding Creek Way; Winston-Salem 27106			
3. City	4. State	5. Zip	8. Phone
			765-3804

9. Type of Report	10. Period Covered		11. Amendment
2002 Second Quarter	Start	4/27/02	☐ Yes
	End	6/27/02	☑ No

12. Type of Committee or Fund *(Check one)*

- ☑ Candidate Campaign
- ☐ PAC
- ☐ Other Fund: _____
- ☐ Party
- ☐ Referendum
- ☐ Joint Fundraiser
- ☐ Soft Money Account
- ☐ "Booster Fund"
- ☐ Building Fund

13. Treasurer Name

John A. Anthony III

14. Assistant Treasurer Name(s)

15. Custodian of Books Name

16. Bank/Depository/Credit Account Information

a. Name	b. Purpose	c. Code	d. Period Begin Balance
Lexington State Bank	Checking		$
			$
			$
			$
			$
			$

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.

John A. Anthony III — Signature of Appointed Treasurer or Candidate

6/28/02 — Date

Detailed Summary

1. Name of Committee or Fund		2. Type of Report	3. ID Number
John Palmer for Commissioner		2002 Second Qtr	
Start of Election Cycle: January 1, 20____		**Total this Period**	**Total this Election Cycle**
4) Cash on Hand at Start of Election Cycle			$ 0
5) Cash on Hand at Start of Present Reporting Period		$ 975.39	
RECEIPTS			
6) Contributions from Individuals	(CRO-1210)	$ 1539	$ 3239
7) Contributions from Political Party Committees	(CRO-1220)	$	$
8) Contributions from Other Political Committees	(CRO-1230)	$	$
9) Loan Proceeds	(CRO-1410)	$	$
10) Refunds and Reimbursements TO theCommittee	(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) Contributions based on Forgiven Loans	(CRO-1440)	$	$
14) 48-Hour Notice Reports Sum		$	$
15) TOTAL RECEIPTS *(Add lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 12, 13, and 14)*		$ 1539	$ 3239
EXPENDITURES			
16) Disbursements	(CRO-1310)		
16a) Operating Expenditures	(CRO-1310)	$ 548.95	$ 1273.56
16b) Contributions to Candidates/Political Committees	(CRO-1310)	$	$
16c) Coordinated Party Expenditures	(CRO-1310)	$	$
17) Loan Repayments	(CRO-1420)	$	$
18) Forgiven Loans	(CRO-1440)	$	$
19) Refunds and Reimbursements FROM the Committee	(CRO-1320)	$	$
20) In-Kind Contributions	(CRO-1510)	$	$
21) TOTAL EXPENDITURES *(Add lines 16a, 16b, 16c, 17, 18, 19, and 20)*		$ 548.95	$ 1273.56
22) Cash on Hand at End of Reporting Period *(For this Period, add lines 5 and 15 together, then subtract line 21)* *(For this Election Cycle, add lines 4 and 15 together, then subtract line 21)*		$ 1965.44	$ 1965.44
Additional Information			
23) Non-Monetary Gifts Given to Committees	(CRO-1330)	$	
24) Outstanding Loans (including ones from other campaigns)	(CRO-1430)	$	
25) Debts and Obligations owed BY the Committee	(CRO-1610)	$	
26) Debts and Obligations owed TO the Committee	(CRO-1620)	$	
27) Parent Entity's Administrative Support	(CRO-1710)	$	
28) Account Transfers	(CRO-1720)	$	

Contributions from INDIVIDUALS

1. Name of Committee or Fund	2. ID Number
John Palmer for Commissioner	

3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	j. If Amendment, choose change type:	g. In-Kind	h. Prior Report	i. Amount	k. Election Cycle Sum to Date
1	Ronald L. Sigrist 4383 Creekridge Lane Kernersville, NC 27284	Wachovia Systems Analyst			check dtd 4/20/2002		☐ Add ☐ Delete	☐	☐	$ 25.00	$
2	Albert Oettinger, Jr. 844 Buttonwood Drive W-S 27104	Landscaping business			check dtd 4/26/2002		☐ Add ☐ Delete	☐	☐	$ 100.00	$
3	Dixie Sanspree 5178 Oxford Drive W-S 27104	Social Worker			check dtd 4/21/2002		☐ Add ☐ Delete	☐	☐	$ 25.00	$ .00
4	Leo C. McLeod 40 Morning Glory Ln Weaverville, NC 28787	Retired			check dtd 4/23/2002		☐ Add ☐ Delete	☐	☐	$ 15.00	$ .00
5	Philip S. Brown, Jr. 52 Greenhurst Rd West Hartford, CT 06107	Math Professor	Trinity College		check dtd 4/27/2002		☐ Add ☐ Delete	☐	☐	$ 50.00	$ .00

4. Total only this Page		$ 215.00
5. Total of ALL CRO-1210 Pages *(only show on last page)*	*(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 215.00

Contributions from INDIVIDUALS

1. Name of Committee or Fund	2. ID Number

3. Contributor

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount	j. If Amendment, choose change type:	k. Election Cycle Sum to Date
Thomas E. Roberts 955 Watson Ave W-S 27103	professor	Wake Forest		check dtd 4/30/2002		☐	☐	$ 100.00	☐ Add ☐ Delete	$ [illegible].00
						☐	☐	$		
						☐	☐	$		
						☐	☐	$		

3. Contributor

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount	j. If Amendment, choose change type:	k. Election Cycle Sum to Date
William D. Hobbs 1244 Arbor Rd, No. 234 W-S 27104	Retired			check dtd 4/29/2002		☐	☐	$ 50.00	☐ Add ☐ Delete	$ [illegible].00
						☐	☐	$		
						☐	☐	$		
						☐	☐	$		

3. Contributor

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount	j. If Amendment, choose change type:	k. Election Cycle Sum to Date
Van R. Mitsinger 4070 Oak Grove Church Rd W-S 27107	Retired			check dtd 4/30/2002		☐	☐	$ 100.00	☐ Add ☐ Delete	$ [illegible].00
						☐	☐	$		
						☐	☐	$		
						☐	☐	$		

3. Contributor

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount	j. If Amendment, choose change type:	k. Election Cycle Sum to Date
Christy C. Spencer 4440 Greenbrier Farm Rd W-S 27106	Homemaker			check dtd 4/28/2002		☐	☐	$ 300.00	☐ Add ☐ Delete	$ [illegible].00
						☐	☐	$		
						☐	☐	$		
						☐	☐	$		

3. Contributor

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount	j. If Amendment, choose change type:	k. Election Cycle Sum to Date
Larry N. Ice 1549 Shore Rd Rural Hall, NC 27045	Teacher			check dtd 5/2/2002		☐	☐	$ 50.00	☐ Add ☐ Delete	$ [illegible]
						☐	☐	$		
						☐	☐	$		
						☐	☐	$		

4. Total only this Page	$ 600
5. Total of ALL CRO-1210 Pages *(only show on last page)* ***(This line must be on line 6 of Detailed Summary Page CRO-1100)***	$ 815

Contributions from INDIVIDUALS

1. Name of Committee or Fund	2. ID Number

3. Contributor

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
FLORA H. WINFREE 415 HORACE MANN AVE W-S 27104		check dtd 4/23		☐	☐	$ 25
				☐	☐	$
				☐	☐	$
				☐	☐	$
b. Job Title/Profession: Retired						
c. Employer's Name/Specific Field	j. If Amendment, choose change type: ☐ Add ☐ Delete			k. Election Cycle Sum to Date: $		

3. Contributor

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
Dr. Murray SENKAS 2516 Country Club Rd W-S 27104		check dtd 4/23		☐	☐	$ 100
				☐	☐	$
				☐	☐	$
				☐	☐	$
b. Job Title/Profession: Retired						
c. Employer's Name/Specific Field	j. If Amendment, choose change type: ☐ Add ☐ Delete			k. Election Cycle Sum to Date: $		

3. Contributor

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
JAMES E. LANDERS, JR 2832 Loch Dr W-S 27106		check dtd 4/24		☐	☐	$ 30
				☐	☐	$
				☐	☐	$
				☐	☐	$
b. Job Title/Profession: Retired						
c. Employer's Name/Specific Field	j. If Amendment, choose change type: ☐ Add ☐ Delete			k. Election Cycle Sum to Date: $		

3. Contributor

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
DAVID A NEWCOMB 808 NASSAU RD COCOA BEACH, FL 32931		check dtd 4/22		☐	☐	$ 50
				☐	☐	$
				☐	☐	$
				☐	☐	$
b. Job Title/Profession: Retired						
c. Employer's Name/Specific Field	j. If Amendment, choose change type: ☐ Add ☐ Delete			k. Election Cycle Sum to Date: $		

3. Contributor

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
George C. Rigby 1821 Runnymede Rd W-S 27104		check dtd 4/22		☐	☐	$ 25
				☐	☐	$
				☐	☐	$
				☐	☐	$
b. Job Title/Profession: Retired						
c. Employer's Name/Specific Field	j. If Amendment, choose change type: ☐ Add ☐ Delete			k. Election Cycle Sum to Date: $		

4. Total only this Page	$ 230
5. Total of ALL CRO-1210 Pages *(only show on last page)* ***(This line must be on line 6 of Detailed Summary Page CRO-1100)***	$ 1045

Contributions from INDIVIDUALS

1. Name of Committee or Fund	2. ID Number
John Palmer for Commissioner	

3. Contributor

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount	j. If Amendment, choose change type:	k. Election Cycle Sum to Date
William U. Thompson 1050 Dalton Rd Lewisville, NC 27023	Retired			check dtd 5/14		☐	☐	$ 100	☐ Add ☐ Delete	$
						☐	☐	$		
						☐	☐	$		
						☐	☐	$		
William A. Burke 360 Gatewood Dr W-S 27104	Retired			check dtd 5/7		☐	☐	$ 25	☐ Add ☐ Delete	$
						☐	☐	$		
						☐	☐	$		
						☐	☐	$		
Brenda E. Humphrey 1150 Barclay Terrace W-S 27106	~~Homemaker~~ Self employed			check dtd 5/6		☐	☐	$ 20	☐ Add ☐ Delete	$
						☐	☐	$		
						☐	☐	$		
						☐	☐	$		
Geraldine Kartanson 441 Chadbourne Ct. W-S 27104	Retired			check dtd 3/8		☐	☐	$ 50	☐ Add ☐ Delete	$
						☐	☐	$		
						☐	☐	$		
						☐	☐	$		
Eleanor F. Collins 5711 Enfield Rd Bethania, NC 27010	~~Homemaker~~ Homemaker			check dtd 5/1		☐	☐	$ 99	☐ Add ☐ Delete	$
						☐	☐	$		
						☐	☐	$		
						☐	☐	$		

4. Total only this Page	$ 294
5. Total of ALL CRO-1210 Pages *(only show on last page)*	$ 1339
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

Contributions from INDIVIDUALS

1. Name of Committee or Fund	2. ID Number
John Palmer for Commissioner	

3. Contributor

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
Sidney H. Greer 354 Tamarind PL. Vero Beach, Fl. 32962		check dtd 5/21		☐	☐	$ 100
				☐	☐	$
				☐	☐	$
				☐	☐	$
b. Job Title/Profession: Retired						
c. Employer's Name/Specific Field	j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date	$

3. Contributor

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
William J. Hartley 4285 Shattalon Dr W-S 27106		check dtd 5/20		☐	☐	$ 25
				☐	☐	$
				☐	☐	$
				☐	☐	$
b. Job Title/Profession: Retired						
c. Employer's Name/Specific Field	j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date	$

3. Contributor

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
Patsy Jent Calhoun 2278 Olivet Church Rd W-S 27106		check dtd 5/28		☐	☐	$ 50
				☐	☐	$
				☐	☐	$
				☐	☐	$
b. Job Title/Profession: Retired						
c. Employer's Name/Specific Field	j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date	$

3. Contributor

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
Peggy Hairston 2013 Dacian St W-S 27107		check dtd 6/17		☐	☐	$ 25
				☐	☐	$
				☐	☐	$
				☐	☐	$
b. Job Title/Profession: Retired						
c. Employer's Name/Specific Field	j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date	$

3. Contributor

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
				☐	☐	$
				☐	☐	$
				☐	☐	$
				☐	☐	$
b. Job Title/Profession						
c. Employer's Name/Specific Field	j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date	$

4. Total only this Page	$ 200
5. Total of ALL CRO-1210 Pages *(only show on last page)* *(This line must be on line 6 of Detailed Summary Page CRO-1160)*	$ 1539

Disbursements

1. Name of Committee or Fund	2. ID Number
John Palmer for Commissioner	

3. Type of Disbursement (Please use separate CRO-1330 forms for each type of Disbursements.)
☐ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee: a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. If Contribution to County Committee, specify:	c. If Coordinated Party Expense, list office:	d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount	i. If Amendment, choose change type: ☐ Add ☐ Delete	j. Election Cycle Sum To Date
W.C. Phoenix 545 N. Trade St, Ste 1-E W-S 27101			Newspaper Ad		check dtd 4/27		$ 325 $ $		$ 325
Forsyth Co. Bd. of Elections 680 W. Fourth St W-S 27101			Voter disc		check dtd 5/20		$ 26.50 $ $		$ 351.50
Office Depot 1235 S. Las Creek Pkwy W-S 27127			Supplies for Survey		check dtd 6/4		$ 42.25 $ $		$ 393.75
U.S. Postmaster Hanes Mall Postal 3320 Silas Creek Pky WS 27103			postage for Voter Survey		check dtd 6/4		$ 129.20 $ $		$ 522.95
Does Institute 519 Beacon Blvd WS 27105			Voter Survey paper & printing cost for survey		check dtd 6/22		$ 26 $ $		$ ~~548.95~~

5. Total only this Page	$ 548.95
6. Total of ALL CRO-1310 Related Pages (only show on last page) *(This line goes in line 13a of Detailed Summary Page CRO-1100 If Operating Expenses)* *(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 548.95