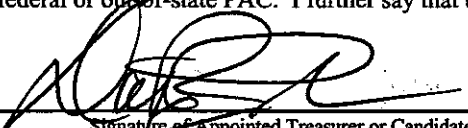


COPY

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 DAVE PEYLER CAMPAIGN COMMITTEE				6. Date 1-4-2003	
2. Address 211 HARMON LANE				7. ID Number	
3. City KERNERSVILLE		4. State NC	5. Zip 27284	8. Phone 336-993-4675	
9. Type of Report 2002 FOURTH QUARTER			10. Period Covered Start 10-20-2002 End 12-31-2002		11. Amendment <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
12. Type of Committee or Fund (Check one)					
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> "Booster Fund"					
<input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Soft Money Account <input type="checkbox"/> Building Fund					
<input type="checkbox"/> Other Fund: _____					
13. Treasurer Name RICHARD GRAVES					
14. Assistant Treasurer Name(s)					
15. Custodian of Books Name RICHARD GRAVES					
16. Bank/Depository/Credit Account Information					
a. Name		b. Purpose		c. Code	d. Period Begin Balance
LSB		PAY BILLS		A	\$ 3049.02
					\$
					\$
					\$
					\$
					\$
					\$
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.					
 Signature of Appointed Treasurer or Candidate				1-6-03 Date	

Detailed Summary

1. Name of Committee or Fund DAVE PLYLER CAMPAIGN COMMITTEE		2. Type of Report 2002 FOURTH QUARTER		3. ID Number	
Start of Election Cycle: January 1, 2002		Total this Period		Total this Election Cycle	
4) Cash on Hand at Start of Election Cycle				\$ 1769.16	
5) Cash on Hand at Start of Present Reporting Period		\$ 3049.02			
RECEIPTS					
6) Contributions from Individuals (CRO-1210)		\$ 1425.00		\$ 8510.00	
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 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) 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)		\$ 1425.00		\$ 8510.00	
EXPENDITURES					
16) Disbursements (CRO-1310)					
16a) Operating Expenditures (CRO-1310)		\$ 3337.92		\$ 9143.06	
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)		\$ 3337.92		\$ 9143.06	
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)		\$ 1136.10		\$ 1136.10	
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

Page 1 of 2

1. Name of Committee or Fund						2. ID Number		
DAVE PLYLER CAMPAIGN COMMITTEE								
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	
	FLOYD L. MOCK 1620 LEWISVILLE-VIEDNA RD PFAFFTOWN, NC 27040	A	CHECK	10/22/2002	<input type="checkbox"/>	<input type="checkbox"/>	\$ 250.00	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$	
	PRESIDENT				<input type="checkbox"/>	<input type="checkbox"/>	\$	
	c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
	453	<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$ 250.00			
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	
	ROBERT C. VANCE JR 2575 CLUB PARK RD. WINSTON-SALEM, NC 27104	A	CHECK	10/22/2002	<input type="checkbox"/>	<input type="checkbox"/>	\$ 150.00	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$	
	ATTY.				<input type="checkbox"/>	<input type="checkbox"/>	\$	
	c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
	341	<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$ 150.00			
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	
	RALPH H. WOMBLE 3920 CAMERILLE FARM RD. WINSTON-SALEM, NC 27106	A	CHECK	10/29/2002	<input type="checkbox"/>	<input type="checkbox"/>	\$ 200.00	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$	
	PRESIDENT				<input type="checkbox"/>	<input type="checkbox"/>	\$	
	c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
	314	<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$ 200.00			
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	
	STEPHEN R. STRAWSBURG 364 BUCKINGHAM RD. WINSTON-SALEM, NC 27104	A	CHECK	10/31/2002	<input type="checkbox"/>	<input type="checkbox"/>	\$ 250.00	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$	
	V. PRESIDENT				<input type="checkbox"/>	<input type="checkbox"/>	\$	
	c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
	312	<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$ 250.00			
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	
	DONALD E. FLOW 770 ROSLYN RD WINSTON-SALEM, NC 27104	A	CHECK	10/31/2002	<input type="checkbox"/>	<input type="checkbox"/>	\$ 250.00	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$	
	PRESIDENT				<input type="checkbox"/>	<input type="checkbox"/>	\$	
	c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
	441	<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$ 250.00			
4. Total only this Page							\$ 1100.00	
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)								

Contributions from INDIVIDUALS

Page ²~~3~~ of ²~~2~~

1. Name of Committee or Fund				2. ID Number			
DAVE PLYLER CAMPAIGN COMMITTEE							
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
	VMC-NC PAC 4401 N PATTERSON AVE. WINSTON-SALEM, NC 27105	A	CHECK	10/30/2002	<input type="checkbox"/>	<input type="checkbox"/>	\$ 200.00
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	PAC				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date		
		<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$ 200.00		
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
	TOTAL OF 2 CONTRIBUTIONS NONE OF WHICH EXCEED \$100.00				<input type="checkbox"/>	<input type="checkbox"/>	\$ 125.00
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date		
		<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$ 1960.00		
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
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date		
		<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$		
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
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date		
		<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$		
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
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date		
		<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$		
4. Total only this Page							\$ 325.00
5. Total of ALL CRO-1210 Pages (only show on last page)							\$ 1425.00
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

Disbursements

Page 1 of 2

1. Name of Committee or Fund					2. ID Number	
DAVE PLYLER CAMPAIGN COMMITTEE						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursements.)						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)
	STAPLES 210 HARMON CREEK RD KERNERSVILLE, NC 27284		SUPPLIES	A	CHECK	10/22/2002
b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type:		h. Amount
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 52.28
						j. Election Cycle Sum To Date
						\$ 82.07
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)
	A-QUALITY PRINTERS 321 S. LIBERTY ST WINSTON-SALEM, NC 27101		SIGNS	A	CHECK	10/22/2002
b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type:		h. Amount
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 65.00
						j. Election Cycle Sum To Date
						\$ 65.00
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)
	TIME WARNER CABLE 1410 TRADEMARK BLVD WINSTON-SALEM, NC 27127		TV ADV.	A	CHECK	10/23/2002
b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type:		h. Amount
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 1000.00
						j. Election Cycle Sum To Date
						\$ 2000.00
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)
	WSTS 875 W. 5TH ST. WINSTON-SALEM, NC 27101		RADIO ADV.	A	CHECK	10/23/2002
b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type:		h. Amount
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 500.00
						j. Election Cycle Sum To Date
						\$ 1000.00
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)
	WPOL 4405 PROVIDENCE LN. WINSTON-SALEM, NC 27106		RADIO ADV.	A	CHECK	10/23/2002
b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type:		h. Amount
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 500.00
						j. Election Cycle Sum To Date
						\$ 500.00
5. Total only this Page						\$ 2117.28
6. Total of ALL CRO-1310 Related Pages (only show on last page)						
(This line goes in line 16a of Detailed Summary Page CRO-1100 if Operating Expenses)						\$
(This line goes in line 16b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)						
(This line goes in line 16c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						

Disbursements

Page 2 of 2

1. Name of Committee or Fund DAVE PLYLER CAMPAIGN COMMITTEE						2. ID Number	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursements.)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	ROBERT P. SARTIN ADV PO BOX 5108, ARDMORE STA. WINSTON-SALEM, NC 27113		SIGNS	A	CHECK	10/29/2002	\$ 537.69
							\$
							\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 1621.02	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	WINSTON SALEM JOURNAL PO BOX 3159 WINSTON-SALEM, NC 27102		ADV.	A	CHECK	11/6/2002	\$ 682.95
							\$
							\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 2226.77	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
							\$
							\$
							\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
							\$
							\$
							\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
							\$
							\$
							\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$	
5. Total only this Page						\$1220.64	
6. Total of ALL CRO-1310 Related Pages (only show on last page)							
(This line goes in line 16a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(This line goes in line 16b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)							
(This line goes in line 16c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						\$3337.92	

CRO-1310

NC State Board of Elections

June 2002