

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						
Forsyth County Democra + MENS Club 2. Address	9/10/02 7.ID Number						
224 TOWN RUN LANE	725.5202						
3. City 4. State 5. Zip	8. Phone						
Winston-Salen, N.C. 27101	ed 11. Amendment						
5. type of Report 9/20	0/02 Yes						
12. Type of Committee or Fund (Check one)							
Candidate Campaign Party Joint Fundraiser "	Booster Fund* uilding Fund						
13. Treasurer Name							
Dr. David Branch 224 Town Run LAME 14. Assistant Treasurer Name(s)	WS 27/0/						
Robert F. Joyce P.O. Box 21089 W.	S. 27/0/						
15. Custodian of Books Name 15. Custodian of Books Name 15. Custodian of Books Name 224 Town Run LAN	E W.S. 27/0/						
16. Bank/Depository/Credit Account Information							
a. Name b. Purpose c. Code	d. Period Begin Balance						
First Citizens BANK Assist Party Expense MINE	\$ 7397.82						
	\$						
	s						
	s						
	S						
	\$						
CERTIFICATION I certify that the Committee is in compliance with all provisions of Article 22A, including that no fun funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct. Signature of Appointed Dessure or Candidate	ds are commingled with						

CRO-1000

NC State Board of Elections

February 2002

Detailed Summary

etailed Summary Name of Committee or Fund	2. Type of Re	port	3. ID Numi	er
OCS 4th County Domocrat				WWW.
tart of Election Cycle: January 1, 2002		Total this Period	Total this Election Cycle	For Office Use Only
4) Cash on Hand at Start of Election Cycle			s	
5) Cash on Hand at Start of Present Reporting Period		s 1397.82		
RECEIPTS				
6) Contributions from Individuals	(CRO-1210)	\$ 800.00	s 12 350.00	
7) Contributions from Political Party Committees	(CRO-1220)	s 0	s'O	
8) Contributions from Other Political Committees	(CRO-1230)	s 0	s O	
9) Loan Proceeds	(CRO-1410)	\$ ()	s C	<u> </u>
10) Refunds & Reimbursements to Committee	(CRO-1240)	s 🔿	s O	
11) Other Receipt Sources	(CRO-1250)			
11a) Interest on Bank Accounts	(CRO-1250)	s ()	s C	
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	s O	s 0	
11c) Outside Sources of Income	(CRO-1250)	2	s 0	
12) TOTAL RECEIPTS (Add lines 6, 7, 8, 9, 10, 11a, 11b, and 11c)		s 800.00	\$1,2330.00	
<u>EXPENDITURES</u>	· and an analysis of the second			
13) Disbursements				
13a) Operating Expenditures	(CRO-1310)	\$ 1485.00	\$5637,18	1
13b) Contributions to Candidates/Political Committees	(CRO-1310)	S 0	s 0	
13c) Coordinated Party Expenditures	(CRO-1310)	s <i>O</i>	S 0	
14) Loan Repayments	(CRO-1420)	s O	s O	
15) Refunds from Committee	(CRO-1320)) s · O	\$ 0	_
16) In-Kind Contributions	(CRO-1510		<u> </u>	
17) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, and 16)		\$ 1485.00	s O	<u>.</u>
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)	567128	2 \$ 6712.8	۷
Additional Information				
19) Non-Monetary Gifts Given to Committees	(CRO-133	o s		
20) Outstanding Loans (including ones from other campaign	is) (CRO-143	o) S O		
21) Debts and Obligations owed BY the Committee	(CRO-161	0) S. O		
22) Debts and Obligations owed TO the Committee	(CRO-162	o) S 🕜		
23) Parent Entity's Administrative Support	(CRO-171	o s ()		

1.	1. Name of Committee or Fund					Number	
	Horsyth County Demo	ociat MEN	s Clu	6		SECTION A	D- ADOROD
7	Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of	f. Date	g. In-	h. Prior	i. Amount
I.	Richard Williams	Mamber/Code	Payment	(mm/dd/yyyy)	Kind	Report	\$ 100 00
butor	Richard Williams 1678 Quailmark Rd W-S. 27127	(A) AND	(heck	5/18/02			\$
Contributor	W-S. 2717						\$
5	b. Job Title/Profession						\$
	c. Employer's Name/Specific Field	j. If Amendment, cho	ose change tvi	ne:	k Flori	ion Cycle	Sum to Date
		Add	Delete		\$	don Cycle	Sum to Date
	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
Ļ	WESTON P. Hatfield	Quidentana	Check	5/15/02			\$ 10000
Ę	Weslow P. Hatfield 2649 Club Park RU. W.S. 27104						s s
3. Contributor	W-S. 27/04		·				\$
6	b. Job Title/Profession						s
l	c. Employer's Name/Specific Field	j. If Amendment, cho	ose change typ	oe:	k. Elect	ion Cycle	Sum to Date
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outor	WAU Sinal 768 Austin LN.	CHO DESCRIPTION	Check	5/10/02			\$ 10000
Ā	W.S. 27/08						\$
3.9	211-0						S
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	(include city, state, & zip)	Number/Code	Payment	(mm/dd/yyyy)	Kind	Report	
Ħor.	JOSEPH Coltrane, Jr. COOI Knightsbridge Ct Kernersuille, N.C. 27284	SOCIETIES OF THE PROPERTY OF T	Check	5/11/02			\$ 100.00
Contributor	KET NETSUTTE, N.C.						\$
ų Q	b. Job Title/Profession						\$
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Contributions from INDIVIDUALS Page 2 of 2 Name of Committee or Fund 2. ID Number BISUL N EMORVAY Full Name, Mailing Address & Phone d. Account e. Form of £ Date g. Inh. Prior (include city, state, & zip) (mm/dd/yyyy) Number/Code Payment Kind Report FEOME (\$ 10000 Contributor b. Job Title/Profession c. Employer's Name/Specific Field . If Amendment, choose change type: k. Election Cycle Sum to Date Delete a. Full Name, Mailing Address & Phone d. Account e. Form of f. Date h. Prior i. Amount (include city, state, & zip) Number/Code Payment (mm/dd/yyyy) Kind Report 4D1D80808080 100.00 \$ П b. Job Title/Profession c. Employer's Name/Specific Field . If Amendment, choose change type: k. Election Cycle Sum to Date Add Delete a. Fuli Name, Mailing Address & Phone d. Account e. Form of f. Date g. Inh. Prior i. Amount (include city, state, & zip) Number/Code Payment (mm/dd/yyyy) Kind Report Spens AVETNE \$ 100.00 Germanton Rd. 27045 b. Job Title/Profession c. Employer's Name/Specific Field j. If Amendment, choose change type: k. Election Cycle Sum to Date Add Delete a. Full Name, Mailing Address & Phone d. Account e. Form of f. Date g. Inh. Prior i. Amount (include city, state, & zip) Number/Code (mm/dd/yyyy) Payment Kind Report \$ \$ b. Job Title/Profession c. Employer's Name/Specific Field j. If Amendment, choose change type: k. Election Cycle Sum to Date Add Delete 2. Full Name, Mailing Address & Phone d. Account e. Form of f. Date h. Prior g. Ini. Amount (include city, state, & zip) Number/Code Payment (mm/dd/yyyy) Kind Report \$ b. Job Title/Profession c. Employer's Name/Specific Field j. If Amendment, choose change type: k. Election Cycle Sum to Date Add __ Delete

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	ype of Disbursement (CRO-1330 forms for each		ents.) Coordinated I	Party Expenditures					
	Operating Expenses	`~~''	Candidates/Political Comm								
	 Full Name, Mailing Addres (include city, state, and zip) 		d. Purpose	e. Account Number/Code	f. Form of Payment	(mm/dd/yyyy)	h. Amount				
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In-Kind Contributions

1. N	. Name of Committee or Fund 2. ID Number					
	+015LITA	() when () en	nocrat 1	llens Club	GATOR P.C.	WALLER COOD,
1	L. Full Name, Mailing Address &	Phone /	c.I	Description	d. Date	e. Fair Market
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	b. Type of Contributor Individual	Party Committee	C IC A mand mant	, choose change type:	a Flection	Cycle Sum to Date
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Outstanding Loans

1. N	1. Name of Committee or Fund 2. ID Number					
	tareyth Courty	Emocrat MEUS	طه ()			
	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate	h, Original Loan Amount	
ğ		e. Job Title/Profession	f. Employer's Name/Specific	% Field .	i. Loan Balance	
3. Lender	NA	g. Security Pledged				
					\$	
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H	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate	h. Original Loan	
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	(means well ame app	e. Job Title/Profession	f. Employer's Name/Specifi	%	\$	
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ler		e. Job Title/Profession	f. Employer's Name/Specifi	ic Field	S i. Loan Balance	
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Loan Repayments

1. N	iame of Committee or Fund		2. ID N	umber
	tarsyth (nowtr.			H00000000000
	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/vyyy)	g. Account Number/Code
	(metude eny, state, mid zip)	(mm/00/yvyy)		
힐		d. Original Loan Amount	e. Remaining Balance of	h. Form of Payment
3. Lender	. 14		Loan S	
جي ا	N (•)	<u> </u>		i. Repayment Amount
		f. If Amendment, choose cha	Delete	s
Н	a. Full Name, Mailing Address & Phone	b. Original Loan Date	c. Repayment Date	g. Account Number/Code
	(include city, state, and zip)	(mm/dd/yyyy)	(mm/dd/yyyy)	
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후		d. Original Loan Amount	e. Remaining Balance of	h. Form of Payment
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ri.		\$	i. Repayment Amount	
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<u>5</u>		d. Original Loan Amount	e. Remaining Balance of	h. Form of Payment
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1.1	Name of Committee or Fund 2. ID Number						
Ī	FOREYTH COUNTY DEM	ocrat Mens			CC 400000		
	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	Rate	i. Account Number/Code		
叓	.1 ~	e. Job Title/Profession	f. Employer's Name/Specif	% ic Field			
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	(include city, state, and 216)		6 Paralla de Nove (Cara)	Rate %	Number/Code		
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