

**Disclosure Report Cover Sheet** 

			kinds of committee			6. Date	
Name of Committee or Fund							7/22/2002
Vinston-Salem Good Govern	nment PAC			في الح			
Address						7.ID Nu	mber
959 N. Peace Haven Road, #215							
City			4. State	5. Zip		8. Phone	e
			NC	2710	)4	(3	336) 714-2329
Winston-Salem				10. Perio	d Covere	d	11. Amendment
Type of Report				Start		/2002	Yes
2002 Mid-Year Semi Annual	Report			End	6/30	)/2002	x No
the or Committees of the	(Check one)		Joint Fundraiser	<del></del>	П"В	ooster F	und"
Candidate Campaign PAC	Party Referendum		Soft Money Acc		Bu	iilding F	fund
Other Fund:							
3. Treasurer Name							
Anne O. Armfield							<u> </u>
4. Assistant Treasurer Name(s)							
5. Custodian of Books Name							
5. Custodian of Books Name Anne O. Armfield							
Anne O. Armfield	Account Informa	ition					Table Polymon
	Account Informa	b. Purpose			Code		iod Begin Balance
Anne O. Armfield  16. Bank/Depository/Credit A	Account Informa	b. Purpose	n expenses nd donation		Code	d. Per	iod Begin Balance 3,324.7
Anne O. Armfield  16. Bank/Depository/Credit A	Account Informa	b. Purpose	n expenses nd donation		Code		
Anne O. Armfield  16. Bank/Depository/Credit A	Account Informa	b. Purpose	n expenses nd donation		Code	s s	
Anne O. Armfield  16. Bank/Depository/Credit A	Account Informa	b. Purpose	expenses nd donation		Code	s	
Anne O. Armfield  16. Bank/Depository/Credit A	Account Informa	b. Purpose	n expenses nd donation		Code	s s	
Anne O. Armfield  16. Bank/Depository/Credit A	Account Informa	b. Purpose	a expenses nd donation		Code	\$ \$ \$	
Anne O. Armfield  16. Bank/Depository/Credit A	Account Informa	b. Purpose	expenses nd donation		Code	\$ \$ \$ \$	
Anne O. Armfield  16. Bank/Depository/Credit A	Account Informa	b. Purpose	expenses nd donation		Code	\$ \$ \$ \$	
Anne O. Armfield  16. Bank/Depository/Credit A. Name  Southern Community	Account Informa	b. Purpose	n expenses nd donation		Code	\$ \$ \$ \$	
Anne O. Armfield  16. Bank/Depository/Credit And Name Southern Community  CERTIFICATION		all campaign		S		\$ \$ \$ \$ \$	3,324.7
Anne O. Armfield  16. Bank/Depository/Credit Anne Southern Community  CERTIFICATION	in compliance w	all campaign	ons of Article 22A, in	ncluding that	no func	\$ \$ \$ \$ \$	3,324.7
Anne O. Armfield  16. Bank/Depository/Credit Anne Southern Community  CERTIFICATION	in compliance w	all campaign	ons of Article 22A, in	ncluding that	no func	\$ \$ \$ \$ \$	3,324.7
Anne O. Armfield  16. Bank/Depository/Credit And Name Southern Community  CERTIFICATION	in compliance w	all campaign	ons of Article 22A, in	ncluding that	no func	\$ \$ \$ \$ \$	3,324.7
Anne O. Armfield  16. Bank/Depository/Credit Anne Southern Community  CERTIFICATION	in compliance wi	ith all provision or say that this	ons of Article 22A, in	ncluding that	no func	\$ \$ \$ \$ \$	3,324.70

etailed Summary	6 m en-	-07		I ID	Number	
Name of Committee or Fund	2. Type of Re 2002 Mid-Year			/ AB/ 1		
Winston-Salem Good Government PAC	2002 Mid-Year		his Period	Total this Election Cycle		
tart of Election Cycle: January 1, 20_02_		Totali	ms I criod			
4) Cash on Hand at Start of Election Cycle				\$	3,324.70	
5) Cash on Hand at Start of Present Reporting Period			3,324.70			
RECEIPTS						
6) Contributions from Individuals	(CRO-1210)	\$	0.00	\$	0.00	
7) Contributions from Political Party Committees	(CRO-1220)	\$	0.00	\$	0.00	
8) Contributions from Other Political Committees	(CRO-1230)	\$	0.00	<u>\$</u>	0.00	
9) Loan Proceeds	(CRO-1410)	\$	0.00	\$	0.00	
10) Refunds and Reimbursements TO theCommittee	(CRO-1240)	\$	0.00	\$	0.00	
11) Other Receipt Sources	(CRO-1250)					
11a) Interest on Bank Accounts	(CRO-1250)	\$	2.36	\$	2.36	
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$	0.00	\$	0.00	
11c) Outside Sources of Income	(CRO-1250)	\$	0.00	\$	0.00	
12) "Goods and Services" Contributions	(CRO-1260)	\$	0.00	\$	0.0	
13) Contributions based on Forgiven Loans	(CRO-1440)	\$	0.00	\$	0.0	
14) 48-Hour Notice Reports Sum		\$	0.00	\$	0.0	
15) TOTAL RECEIPTS		\$	2.36	\$	2.3	
(Add lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 12, 13, and 14)				<u> </u>		
EXPENDITURES						
16) Disbursements	(CRO-1310)				00.0	
16a) Operating Expenditures	(CRO-1310)		88.03	\$	88.0	
16b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	0.00	\$	0.0	
16c) Coordinated Party Expenditures	(CRO-1310)	<u> \$</u>	0.00	\$	0.0	
17) Loan Repayments	(CRO-1420)	·	0.00	\$	0.0	
18) Forgiven Loans	(CRO-1440)	\$	0.00	+	0.0	
19) Refunds and Reimbursements FROM the Committee	(CRO-1320)	\$	0.00	\$	0.0	
20) In-Kind Contributions	(CRO-1510)	\$	0.00	\$	0.0	
21) TOTAL EXPENDITURES (Add lines 16a, 16b, 16c, 17, 18, 19, and 20)		s	88.03	\$	88.0	
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)	)	\$	3,239.03	\$	3,239.	
Additional Information						
23) Non-Monetary Gifts Given to Committees	(CRO-1330)	\$	0.00			
24) Outstanding Loans (including ones from other campaign	s) (CRO-1430	\$	0.00			
25) Debts and Obligations owed BY the Committee	(CRO-1610	) <b>\$</b>	0.00			
26) Debts and Obligations owed TO the Committee	(CRO-1620	) <b>\$</b>	0.00			
27) Parent Entity's Administrative Support	(CRO-1710	) <b>S</b>	0.00	)		
28) Account Transfers	(CRO-1720	y <b>\$</b>	0.0	)		

## Disbursements

	Dursements					. ID Number			
	ame of Committee or F								
W	inston-Salem Good Go	vernment PAC		CD: L.	ente l				
. Ty	pe of Disbursement	(Please use separate C	RO-1310 forms for eac andidates/Political Con	mittees	Coordinated P	arty Expenditures			
X (	Operating Expenses			e. Account	f. Form of	g. Date	h. Amount		
1	. Full Name, Mailing Addre	ss & Phone	d. Purpose	Number/Code	Payment	(mm/dd/yyyy)			
-	(include city, state, and zip)		telephone services		Check	3/28/2002	\$ 75.00		
	Teledata Services								
ě	4000 Brown sboro Rd. Winstm-Salem NC 27106					2			
4. Payee	Wiuston-Salem	MC - 1106			Charate		s l		
4	b. If Contribution to	c. If Coordinated Party			Check		To Data		
	County Committee, specify:		i. If Amendment, cho			j. Election Cycle S S	um To Date		
	County Committees, -p-		L Aud	Delete		g. Date	h. Amount		
	a. Full Name, Mailing Addre	ess & Phone	d. Purpose	e. Account Number/Code	f. Form of Payment	(mm/dd/yyyy)_			
-	(include city, state, and zip	)	<del></del>	Mamper/Code		4/2/2002	<b>\$</b> 13.03		
	Southern Community		check order		Check	4/2/2002			
8	PUBIX 26134				Check	\$			
4. Payee	Winster-Salum	1614-6134		•					
4	768-8500				Check		2		
ŀ	h If Contribution to	c. If Coordinated Party	i. If Amendment, cho	ose change type:		j. Election Cycle	Sum To Date		
	County Committee, specify:	Exp, list Cand Comm.	Add	Delete		\$			
	a. Full Name, Mailing Addr	ess & Phone	d. Purpose	e. Account	f. Form of	g. Date	k. Amount		
	(include city, state, and zi	p)		Number/Code	Payment	(mm/dd/yyyy)			
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بو				er	\$				
Payee					Check	<del></del>			
4			·		Check	\$			
	b. If Contribution to   c. If Coordinated Party		]	shares type:		j. Election Cycle Sum To Date			
ŀ	County Committee, specify	Exp, list Cand/Comm:	i. If Amendment, ch	Delete		S			
L			Add d. Purpose	e. Account	f. Form of	g, Date	h. Amount		
Г	a. Full Name, Mailing Add	ress & Phone	u, rat pose	Number/Code	Payment	(mm/dd/yyyy)	<u> </u>		
ı	(include city, state, and z	<u>w</u> )			Check	•	<b>S</b>		
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Pavee			Chec			•	2		
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4	b. If Contribution to	c. If Coordinated Party	=		Check	j. Election Cycle Sum To Date			
ı	County Committee, specify	Exp. list Cand/Comm:	i. If Amendment, cl	oose change type:		j. Election Cyck	Sum 10 Date		
1	•		Add	Delete	f. Form o	ந் g. Date	h. Amount		
1	a. Fuli Name, Mailing Add	iress & Phone	d. Purpose	e. Account Number/Code		1	1		
1	(include city, state, and	zip)		Trumber/ Com			<b>\$</b>		
ı			ļ	1	Check				
9	4, rayee				<b>\$</b>				
į	<b>£</b>			4 4	12 (1 ) (1 ) (1 ) (1 ) (1 ) (1 ) (1 ) (1		æ		
1		c. If Coordinated Part	=	:	Check		\$		
	b. If Contribution to County Committee, specif	c. II Coordinated Part	i. If Amendment, c	hoose change type:	j. Election Cycle Sum To Date				
	County Committee, specii	y. Eap, use Canto Comm.	Add	Delete		\$	180		
ŀ	Total pulse this Do	<u> </u>					\$ 88.030.00		
É	5. Total only this Pa	O 1210 Poletod D	2000	(only show on last p	page)		1		
	5. Total of ALL CR This line goes in line 16a of L			(vnenses)			\$		
					Comm)		9		
1	This line goes in line 16b of I This line goes in line 16c of I	etailed Summary Page Cl	O-1100 if Coordinates	l Party Expenditures	)		June 20		

	er Receipt Sources				2. ID Number		
	ame of Committee or Fund						
Vii	nston-Salem Good Government PAC		_	*_ 4 \$7===== \			
	Please use separate CRO-1250 f	orms for each type of K	ece	ipt Source.)	Outside Sources of	Incor	ne
Īı	nterest Contributions from Not-for-P	rofit Organizations	_	c. Form of	d. Date	_	e. Amount
á	Full Name, Mailing Address & Phone	b. Account	1	Payment	(mm/dd/yyyy)		
L	(include city, state, and zip)	Number/Code	L			\$	1.24
Γ	Southern Community	Name of the last o		Check	4/30/2002	Φ	,
l	00 Box 26134			Check	6/28/2002	\$	1.12
١	Saleus INC	l		J.2011	<del>-,</del>		
١	PO Box 26134 Winston-Salem, nc 27114-6134			Check		\$	
ı.	16x-8500	g. If Amendment, cho	050	change type.	h. If Not-for-Profit, li	st Fe	1 ID #:
ħ	. If Outside Source of Income, explain:		086	Delete	4. 11.100		
t		Add	닉	c. Form of	d. Date		e. Amount
ţ	a. Full Name, Mailing Address & Phone	b. Account Number/Code		Payment	(mm/dd/yyyy)		
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		g. If Amendment, ch	<b>.</b>	change type	h. If Not-for-Profit, l	ist Fe	d ID #:
l	f. If Outside Source of Income, explain:	+		Delete			
_]		Add b. Account		c. Form of	d. Date	Т	e. Amount
٦	a. Full Name, Mailing Address & Phone	Number/Code		Payment	(mm/dd/yyyy)	<u> </u>	
	(include city, state, and zip)	THERESETTORE		Check		S	
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COME IN MESON				Check		\$	
ŕ		g. If Amendment, choose change type:			h. If Not-for-Profit, list Fed ID #:		
	f. If Outside Source of Income, explain:	Add	Ť	Delete			
	2 Pt	b. Account		c. Form of	d. Date	T	e. Amount
	a. Full Name, Mailing Address & Phone	Number/Code		Payment	(mm/dd/yyyy)	ᆚ_	
	(include city, state, and zip)			Check		\$	
ē						4	
3				Check		\$	
Contributor						ø	
S				Check	·	\$	
ţ	Tanana andala	g. If Amendment, c	1009	e change type:	h. If Not-for-Profit,	list F	ed ID #:
	f. If Outside Source of Income, explain:	Add		Delete			
	a. Full Name, Mailing Address & Phone	b. Account		c. Form of	d. Date		e. Amount
	a. Full Name, Maning Address & I none (include city, state, and zip)	Number/Code		Payment	(mm/dd/yyyy)		
				Check		\$	
4. Contributor							
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ont				Ch-al-		.\$	
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4	f. If Outside Source of Income, explain:	g. If Amendment, c	hoo	se change type:	h. If Not-for-Profit	, list l	rea II) #:
	L AL CHANGE DOMEST V. ADVINCE, V. P.	□ Add	<u>     L</u>	Delete	<u> </u>	<del></del>	
_	Tetal and this Page					\$	2
3	. Total only this Page	(only show on l	ast 1	page)			
6	. Total of ALL CRO-1250 Related Pages	, -	<u>j</u>			s	
(1	This line goes in line 11a of Detailed Summary Page CRO-1100	y interesty if Nat_for_Profit Contr	ibu	tion)		۳	
	this line goes in line 11a of Detailed Summary Page CRO-1100 This line goes in line 11b of Detailed Summary Page CRO-1100 This line goes in line 11c of Detailed Summary Page CRO-1100		псо	me)			
7	This line goes in line 11c of Detallea Summary rage CRO-1190	-,	_				Trans

CRO-1250

NC State Board of Elections