

Disclosure Report Cover Sheet

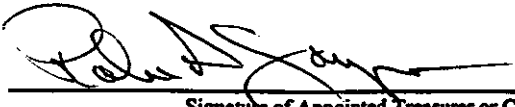
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Please note that this cover sheet cannot be used to amend committee information such as the committee address; treasurer, assistant treasurer, or custodian of books information; or depository information. You must amend the Statement of Organization (CRO-2100) to make those kinds of committee changes.

1. Name of Committee or Fund Row Barker for Sheriff				6. Date 4/20/02	
2. Address 212 Cokesbury Dr.				7. ID Number	
3. City KERNERSVILLE	4. State N.C.	5. Zip 27284	8. Phone 748-4100		
9. Type of Report 2002 First Quarter Plus			10. Period Covered Start 1/1/02 End 4/20/02		11. Amendment ☐ Yes ☒ No
12. Type of Committee or Fund (Check one)					
☒ Candidate Campaign ☐ Party ☐ Joint Fundraiser ☐ "Booster Fund" ☐ PAC ☐ Referendum ☐ Soft Money Account ☐ Building Fund ☐ Other Fund: _____					
13. Treasurer Name Robert A. Joyce 330 Fisher Rd W.S. 27127					
14. Assistant Treasurer Name(s) N/A					
15. Custodian of Books Name Robert A. Joyce P.O. Box 21089 W.S. 27120					
16. Bank/Depository/Credit Account Information					
a. Name	b. Purpose	c. Code	d. Period Begin Balance		
Wachovia / Wachovia	Checking Account		\$17,739.74		
			\$		
			\$		
			\$		
			\$		
			\$		

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

4/29/02

 Date

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Detailed Summary

1. Name of Committee or Fund		2. Type of Report		3. ID Number	
Ron Barker for Sheriff		2002 First Quarter Plus			
Start 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			\$17,739.74		
5) Cash on Hand at Start of Present Reporting Period		\$17,739.74			
RECEIPTS					
6) Contributions from Individuals	(CRO-1210)	\$36,670	\$54,409.74		
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0	\$ 0		
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0	\$ 0		
9) Loan Proceeds	(CRO-1410)	\$ 0	\$ 0		
10) Refunds & Reimbursements to Committee	(CRO-1240)	\$ 0	\$ 0		
11) Other Receipt Sources	(CRO-1250)				
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0	\$ 0		
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$ 0	\$ 0		
11c) Outside Sources of Income	(CRO-1250)	\$ 0	\$ 0		
12) TOTAL RECEIPTS		\$36,670	\$54,409.74		
(Add lines 6, 7, 8, 9, 10, 11a, 11b, and 11c)					
EXPENDITURES					
13) Disbursements	(CRO-1310)				
13a) Operating Expenditures	(CRO-1310)	\$13,404.31	\$13,404.31		
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ (250.00)	\$ (250.00)		
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0	\$ 0		
14) Loan Repayments	(CRO-1420)	\$ 0	\$ 0		
15) Refunds from Committee	(CRO-1320)	\$ 0	\$ 0		
16) In-Kind Contributions	(CRO-1510)	\$ 0	\$ 0		
17) TOTAL EXPENDITURES		\$13,404.31	\$13,404.31		
(Add lines 13a, 13b, 13c, 14, 15, and 16)					
18) Cash on Hand at End of Reporting Period		\$41,005.43	\$41,005.43		
(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)					
Additional Information					
19) Non-Monetary Gifts Given to Committees	(CRO-1330)	\$ 0			
20) Outstanding Loans (including ones from other campaigns)	(CRO-1430)	\$ 0			
21) Debts and Obligations owed BY the Committee	(CRO-1610)	\$ 0			
22) Debts and Obligations owed TO the Committee	(CRO-1620)	\$ 0			
23) Parent Entity's Administrative Support	(CRO-1710)	\$ 0			

Disbursements

Page 2 of 3

1. Name of Committee or Fund				2. ID Number			
Row Barker for Sheriff							
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			
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	
4. Payee Mitchell Research and Communications 5034 Champain Circle West Bloomfield, MI 48223		polling	XXXXXXXXXX	check	3/5/02	\$4500.00	
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date	
				☐ Add ☐ Delete		\$4500.00	
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	
4. Payee Pip Printing 235 Town Run Lane Winston-Salem, NC 27101		Event Tickets	XXXXXXXXXX	check	3/5/02	\$212.16	
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date	
				☐ Add ☐ Delete		\$212.16	
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	
4. Payee Associated Posters PO. Box 255 Winston-Salem, NC 27102		Artwork for billboards	XXXXXXXXXX	check	3/7/02	\$1031.43	
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date	
				☐ Add ☐ Delete		\$1031.43	
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	
4. Payee Marie Mingus 2523 Miller Rd. Circle Winston-Salem, NC 27103		Event Tape	XXXXXXXXXX	check	3/13/02	\$50.00	
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date	
				☐ Add ☐ Delete		\$65.00	
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	
4. Payee U.S. Postmaster 200 Town Run Ln. Winston-Salem, NC 27101		Stamps	XXXXXXXXXX	check	3/14/02	\$34.64	
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date	
				☐ Add ☐ Delete		\$170.00	
5. Total only this Page						\$6063.23	
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)							

Disbursements

Page 1 of 3

1. Name of Committee or Fund Row Barker for Sheriff				2. ID Number		
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)	d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Winston Salem Chronicle P.O. Box 1636 Winston-Salem, N.C. 27102	MLK Ad	XXXXXXXXXX	Check	1/23/02	\$ 153.00
		Black History Month Ad	XXXXXXXXXX	Check	3/5/02	\$ 153.00
						\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date
				☐ Add ☐ Delete		\$ 306.00
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)	h. Amount
	Board of Elections 680 W. 4th St. Winston-Salem, N.C. 27107	Filing Fee	XXXXXXXXXX	Check	2/18/02	\$ 658.94
						\$
						\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date
				☐ Add ☐ Delete		\$ 658.94
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
	Fairway Outdoor Advertising P.O. Box 60125 Charlotte, N.C. 28260	(5) Billboards	XXXXXXXXXX	Check	2/22/02	\$ 2950.00
						\$
						\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date
				☐ Add ☐ Delete		\$ 2950.00
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)	h. Amount
	Elizabeth Dole for Senate P.O. Box 2109 Salisbury, N.C. 28145	Donation	XXXXXXXXXX	Check	2/27/02	\$ 250.00
						\$
						\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date
				☐ Add ☐ Delete		\$ 250.00
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)	h. Amount
	Excalibur Enterprises Inc P.O. Box 7372 Winston-Salem, N.C. 27109	Computer List of Voters	XXXXXXXXXX	Check	2/29/02	\$ 688.03
						\$
						\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date
				☐ Add ☐ Delete		\$ 688.03
5. Total only this Page						\$4852.97
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)						

Disbursements

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1. Name of Committee or Fund Ken Barker for Sheriff						2. ID Number	
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)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	KEN RHOADES 123 C/OISTER OAKS Cir Winston-Salem, N.C. 27127		Piano for reception	XXXXXXXXXX	Check	3/19/02	\$ 175.00
	b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: ☐ Add ☐ Delete		
						j. Election Cycle Sum To Date \$ 175.00	
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)	h. Amount
	Richard B. PATER SR. 127 S. Cherry St Winston-Salem, N.C. 27101		Banquet and Room Rent	XXXXXXXXXX	Check	3/19/02	\$ 1600.00
	b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: ☐ Add ☐ Delete		
						j. Election Cycle Sum To Date \$ 1600.00	
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)	h. Amount
	PEE DEE Outdoor Advertising 2910 E. Hwy 76 Mullins, S.C. 29574		Billboard Setup	XXXXXXXXXX	Check	4/22/02	\$ 400.00
	b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: ☐ Add ☐ Delete		
						j. Election Cycle Sum To Date \$ 400.00	
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)	h. Amount
	Graphic Rewards P.O. Box 1166 Kings, N.C. 27021		Stationary	XXXXXXXXXX	Check	4/17/02	\$ 313.11
	b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: ☐ Add ☐ Delete		
						j. Election Cycle Sum To Date \$ 313.11	
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 Expense, list office:		i. If Amendment, choose change type: ☐ Add ☐ Delete		
						j. Election Cycle Sum To Date \$	
5. Total only this Page						\$2488.11	
6. Total of ALL CRO-1310 Related Pages (only show on last page)						\$13,404.31	
(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)							

Loan Proceeds

Page 1 of 1

1. Name of Committee or Fund			2. ID Number			
3. Lender a. Full Name, Mailing Address & Phone (include city, state, and zip) N/A			b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	i. Account Number/Code
e. Job Title/Profession			f. Employer's Name/Specific Field			
g. Security Pledged			j. Form of Payment			
h. If Amendment, choose change type: ☐ Add ☐ Delete			k. Amount \$			
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 %	i. Account Number/Code
e. Job Title/Profession			f. Employer's Name/Specific Field			
g. Security Pledged			j. Form of Payment			
h. If Amendment, choose change type: ☐ Add ☐ Delete			k. Amount \$			
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 %	i. Account Number/Code
e. Job Title/Profession			f. Employer's Name/Specific Field			
g. Security Pledged			j. Form of Payment			
h. If Amendment, choose change type: ☐ Add ☐ Delete			k. Amount \$			
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 %	i. Account Number/Code
e. Job Title/Profession			f. Employer's Name/Specific Field			
g. Security Pledged			j. Form of Payment			
h. If Amendment, choose change type: ☐ Add ☐ Delete			k. Amount \$			
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 %	i. Account Number/Code
e. Job Title/Profession			f. Employer's Name/Specific Field			
g. Security Pledged			j. Form of Payment			
h. If Amendment, choose change type: ☐ Add ☐ Delete			k. Amount \$			
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 %	i. Account Number/Code
e. Job Title/Profession			f. Employer's Name/Specific Field			
g. Security Pledged			j. Form of Payment			
h. If Amendment, choose change type: ☐ Add ☐ Delete			k. Amount \$			
4. Total only this Page			\$			
5. Total of ALL CRO-1410 Pages (This line must be on line 9 of Detailed Summary Page CRO-1100)			\$			

Loan Repayments

Page 1 of 1

1. Name of Committee or Fund				2. ID Number	
Ron Barker for Sheriff					
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/yyyy)	g. Account Number/Code	
	N/A	d. Original Loan Amount	e. Remaining Balance of Loan	h. Form of Payment	
		\$	\$	i. Repayment Amount	
		f. If Amendment, choose change type:		\$	
		☐ Add ☐ Delete			
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/yyyy)	g. Account Number/Code	
		d. Original Loan Amount	e. Remaining Balance of Loan	h. Form of Payment	
		\$	\$	i. Repayment Amount	
		f. If Amendment, choose change type:		\$	
		☐ Add ☐ Delete			
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/yyyy)	g. Account Number/Code	
		d. Original Loan Amount	e. Remaining Balance of Loan	h. Form of Payment	
		\$	\$	i. Repayment Amount	
		f. If Amendment, choose change type:		\$	
		☐ Add ☐ Delete			
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/yyyy)	g. Account Number/Code	
		d. Original Loan Amount	e. Remaining Balance of Loan	h. Form of Payment	
		\$	\$	i. Repayment Amount	
		f. If Amendment, choose change type:		\$	
		☐ Add ☐ Delete			
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/yyyy)	g. Account Number/Code	
		d. Original Loan Amount	e. Remaining Balance of Loan	h. Form of Payment	
		\$	\$	i. Repayment Amount	
		f. If Amendment, choose change type:		\$	
		☐ Add ☐ Delete			
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/yyyy)	g. Account Number/Code	
		d. Original Loan Amount	e. Remaining Balance of Loan	h. Form of Payment	
		\$	\$	i. Repayment Amount	
		f. If Amendment, choose change type:		\$	
		☐ Add ☐ Delete			
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Original Loan Date (mm/dd/yyyy)	c. Repayment Date (mm/dd/yyyy)	g. Account Number/Code	
		d. Original Loan Amount	e. Remaining Balance of Loan	h. Form of Payment	
		\$	\$	i. Repayment Amount	
		f. If Amendment, choose change type:		\$	
		☐ Add ☐ Delete			
4. Total only this Page				\$	
5. Total of ALL CRO-1420 Pages (only show on last page)				\$	
(This line must be on line 14 of Detailed Summary Page CRO-1100)				\$ <u>0</u>	

Contributions from INDIVIDUALS

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1. Name of Committee or Fund				2. ID Number			
Row Barker for Sheriff							
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
	VAN C. LOUGHEWAL 8996 Stamford Club Rd Rural Hall, N.C. 27045	XXXXXXXXXX	Check	1/29/02	☐	☐	\$ 100.00
		XXXXXXXXXX	Check	3/18/02	☐	☐	\$ 50.00
					☐	☐	\$
b. Job Title/Profession		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
DEPUTY LAW ENFORCEMENT		☐ Add ☐ Delete		\$ 150.00			
c. Employer's Name/Specific Field				k. Election Cycle Sum to Date			
Row Barker / LAW ENFORCEMENT				\$ 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
	Arthur D. Gandy 6450 Riverton Rd. WALKERTOWN, N.C. 27051	XXXXXXXXXX	Check	12/28/01	☐	☐	\$ 100.00
					☐	☐	\$
					☐	☐	\$
b. Job Title/Profession		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
		☐ Add ☐ Delete		\$ 100.00			
c. Employer's Name/Specific Field				k. Election Cycle Sum to Date			
				\$ 100.00			
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
	STEVEN G. GARDEN 4274 WYNDHAM LANE WINSTON-SALEM, N.C. 27107	XXXXXXXXXX	Check	12/28/01	☐	☐	\$ 100.00
					☐	☐	\$
					☐	☐	\$
b. Job Title/Profession		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
		☐ Add ☐ Delete		\$ 100.00			
c. Employer's Name/Specific Field				k. Election Cycle Sum to Date			
				\$ 100.00			
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
	Alex J. Niforos 4447 Fireside Lane Winston-Salem, N.C. 27127	XXXXXXXXXX	Check	1/10/02	☐	☐	\$ 50.00
		XXXXXXXXXX	Check	3/14/02	☐	☐	\$ 50.00
					☐	☐	\$
b. Job Title/Profession		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
		☐ Add ☐ Delete		\$ 100.00			
c. Employer's Name/Specific Field				k. Election Cycle Sum to Date			
				\$ 100.00			
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
	John A. Polite 1983 Emorywood Rd Rural Hall, N.C. 27045	XXXXXXXXXX	Check	1/14/02	☐	☐	\$ 100.00
					☐	☐	\$
					☐	☐	\$
b. Job Title/Profession		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
		☐ Add ☐ Delete		\$ 100.00			
c. Employer's Name/Specific Field				k. Election Cycle Sum to Date			
				\$ 100.00			
4. Total only this Page							\$ 550.00
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

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1. Name of Committee or Fund				2. ID Number					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Sherri STENBERG 1078 VIENNA forest Dr RRAFTOWN, N.C. 27040				d. Account Number/Code 0000000000	e. Form of Payment Check	f. Date (mm/dd/yyyy) 1/16/02	g. In- Kind ☐	h. Prior Report ☐	i. Amount \$ 100.00
b. Job Title/Profession				j. If Amendment, choose change type:				k. Election Cycle Sum to Date	
c. Employer's Name/Specific Field				☐ Add ☐ Delete				\$ 100.00	
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Ricky LEE JOYCE 637 SUNSET Ridge LANE LEXINGTON, N.C. 27295				d. Account Number/Code 0000000000	e. Form of Payment Check	f. Date (mm/dd/yyyy) 12/28/01	g. In- Kind ☐	h. Prior Report ☐	i. Amount \$ 100.00
b. Job Title/Profession				j. If Amendment, choose change type:				k. Election Cycle Sum to Date	
c. Employer's Name/Specific Field				☐ Add ☐ Delete				\$ 100.00	
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Jack C. Reich 3355 Piedmont Memorial Dr Winston-Salem, N.C. 27107				d. Account Number/Code 0000000000	e. Form of Payment Check	f. Date (mm/dd/yyyy) 1/15/02	g. In- Kind ☐	h. Prior Report ☐	i. Amount \$ 100.00
b. Job Title/Profession				j. If Amendment, choose change type:				k. Election Cycle Sum to Date	
c. Employer's Name/Specific Field				☐ Add ☐ Delete				\$ 100.00	
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) John W. BURGESS III 380 Knollwood St Suite 610 Winston-Salem, N.C. 27103				d. Account Number/Code 0000000000	e. Form of Payment Check	f. Date (mm/dd/yyyy) 1/16/02	g. In- Kind ☐	h. Prior Report ☐	i. Amount \$ 200.00
b. Job Title/Profession				j. If Amendment, choose change type:				k. Election Cycle Sum to Date	
c. Employer's Name/Specific Field				☐ Add ☐ Delete				\$ 200.00	
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Timothy J. SENTER 945 Tuttle Rd Rural Hall, N.C. 27045				d. Account Number/Code 0000000000	e. Form of Payment Check	f. Date (mm/dd/yyyy) 1/17/02	g. In- Kind ☐	h. Prior Report ☐	i. Amount \$ 100.00
b. Job Title/Profession				j. If Amendment, choose change type:				k. Election Cycle Sum to Date	
c. Employer's Name/Specific Field				☐ Add ☐ Delete				\$ 100.00	

4. Total only this Page

\$ 600.00

5. Total of ALL CRO-1210 Pages

(only show on last page)

\$

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Contributions from INDIVIDUALS

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1. Name of Committee or Fund				2. ID Number					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Norma S. Everhart 109 BREUARD ST WINSTON-SALEM, N.C. 27101 b. Job Title/Profession c. Employer's Name/Specific Field				d. Account Number/Code XXXXXXXXXX	e. Form of Payment Check	f. Date (mm/dd/yyyy) 1/15/02	g. In-Kind ☐	h. Prior Report ☐	i. Amount \$ 100.00
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 100.00					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Larry L. Brady 2040 Union Cross Rd Winston-Salem, N.C. 27107 b. Job Title/Profession c. Employer's Name/Specific Field				d. Account Number/Code XXXXXXXXXX	e. Form of Payment Check	f. Date (mm/dd/yyyy) 12/31/01	g. In-Kind ☐	h. Prior Report ☐	i. Amount \$ 100.00
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 100.00					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Richard Childress PO. Box 195 Welcome, N.C. 27374 b. Job Title/Profession RACE CAR OWNER PRESIDENT c. Employer's Name/Specific Field SELF RACING				d. Account Number/Code XXXXXXXXXX	e. Form of Payment Check	f. Date (mm/dd/yyyy) 1/14/02	g. In-Kind ☐	h. Prior Report ☐	i. Amount \$ 2000.00
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 2000.00					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Konstantinos Kazakos 3600 Comerough Ct Clemmons, N.C. 27012 b. Job Title/Profession DEVELOPER/PRESIDENT MULTI-BUSINESS c. Employer's Name/Specific Field Shopping Center SEAFood - Manufacturing				d. Account Number/Code XXXXXXXXXX	e. Form of Payment Check	f. Date (mm/dd/yyyy) 1/22/02	g. In-Kind ☐	h. Prior Report ☐	i. Amount \$ 1000.00
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 1000.00					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Clifton J. Kilby Jr. PO. Box 778 WALKERTOWN, N.C. 27051 b. Job Title/Profession Deputy LAW ENFORCEMENT c. Employer's Name/Specific Field SHERIFF RON BARKER / LAW ENFORCEMENT				d. Account Number/Code XXXXXXXXXX	e. Form of Payment Check	f. Date (mm/dd/yyyy) 12/28/01	g. In-Kind ☐	h. Prior Report ☐	i. Amount \$ 300.00
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 300.00					
4. Total only this Page									\$3500.00
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

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1. Name of Committee or Fund				2. ID Number					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Linda Elliott 2250 Amanillo Ln. WALKERTOWN, NC. 27051 b. Job Title/Profession c. Employer's Name/Specific Field				d. Account Number/Code XXXXXXXXXX	e. Form of Payment Check	f. Date (mm/dd/yyyy) 2/13/02	g. In-Kind ☐	h. Prior Report ☐	i. Amount \$ 50.00
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 50.00					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Priscilla Trentham 3943 Welco St Winston-Salem, N.C. 27107 b. Job Title/Profession c. Employer's Name/Specific Field				d. Account Number/Code XXXXXXXXXX	e. Form of Payment Check	f. Date (mm/dd/yyyy) 2/6/02	g. In-Kind ☐	h. Prior Report ☐	i. Amount \$ 50.00
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 50.00					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Millard E. Shepherd 3408 Tanglebrook Tr PO Box 1748 CLEMMONS, N.C. 27012 b. Job Title/Profession DEPUTY LAW ENFORCEMENT c. Employer's Name/Specific Field SHERIFF RON BARKE / LAW ENFORCEMENT				d. Account Number/Code XXXXXXXXXX	e. Form of Payment Check	f. Date (mm/dd/yyyy) 2/7/02	g. In-Kind ☐	h. Prior Report ☐	i. Amount \$ 200.00
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 200.00					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Ned Skidmore 3800 WYNADOFF AVE Winston-Salem, N.C. 27127 b. Job Title/Profession DEVELOPER CONSTRUCTION c. Employer's Name/Specific Field GROVER SHERIFF / DEVELOPER				d. Account Number/Code XXXXXXXXXX	e. Form of Payment Check	f. Date (mm/dd/yyyy) 2/15/02	g. In-Kind ☐	h. Prior Report ☐	i. Amount \$ 300.00
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 300.00					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) JAMES E. LENTZ II 8109 SLANE CT CLEMMONS, N.C. 27012 b. Job Title/Profession PRESIDENT Moving & Storage c. Employer's Name/Specific Field SELF Moving & Storage				d. Account Number/Code XXXXXXXXXX	e. Form of Payment Check	f. Date (mm/dd/yyyy) 2/12/02	g. In-Kind ☐	h. Prior Report ☐	i. Amount \$ 250.00
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 250.00					
4. Total only this Page									\$ 850.00
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

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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
	JAMES D. Branch 224 Town-Run Lane Winston-Salem, NC 27101			XXXXXXXXXX	Check	2/15/02	☐	☐	\$ 250.00
	b. Job Title/Profession								
	Optom Doctor/EYES								
c. Employer's Name/Specific Field			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
EYES			☐ Add ☐ 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
	Michael HODOWANSKY 8077 GLENGARRIFF RD CLEMMONS, NC 27012			XXXXXXXXXX	Check	2/12/02	☐	☐	\$ 500.00
	b. Job Title/Profession								
	Computer Company								
c. Employer's Name/Specific Field			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Computers			☐ Add ☐ Delete			\$ 500.00			
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
	Ernest G. Golding 8092 GLENGARRIFF RD CLEMMONS, NC 27012			XXXXXXXXXX	Check	2/12/02	☐	☐	\$ 500.00
	b. Job Title/Profession								
	Food Packaging								
c. Employer's Name/Specific Field			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Food Packaging			☐ Add ☐ Delete			\$ 500.00			
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
	Larry Murphy 8725 Chipboard Rd Rural Hall, NC 27045			XXXXXXXXXX	Check	2/4/02	☐	☐	\$ 500.00
	b. Job Title/Profession								
	LAW ENFORCEMENT								
c. Employer's Name/Specific Field			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Row Barker/Law Enforcement			☐ Add ☐ Delete			\$ 500.00			
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
	Roger Page PO Box 15047 Winston-Salem, NC 27113			XXXXXXXXXX	Check	2/4/02	☐	☐	\$ 500.00
	b. Job Title/Profession								
	Developer/GAS-OIL								
c. Employer's Name/Specific Field			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Developer/GAS-OIL			☐ Add ☐ Delete			\$ 500.00			
4. Total only this Page									\$ 2,250.00
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

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1. Name of Committee or Fund				2. ID Number				
Ron Barker for Sheriff								
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 G Chrysson 1045 Burke St Winston-Salem, N.C. 27101	XXXXXXXXXX	Check	2/15/02	☐	☐	\$ 1000.00
		b. Job Title/Profession <u>PRESIDENT-OWNER</u>						
		c. Employer's Name/Specific Field <u>SELF</u>						
		<u>DEVELOPER</u>						
		j. If Amendment, choose change type:					k. Election Cycle Sum to Date	
		☐ Add ☐ Delete					\$ 1000.00	
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
		Gerald H. Long 7631 Lasater Rd. Clemmons, N.C. 27012	XXXXXXXXXX	Check	2/4/02	☐	☐	\$ 1000.00
		b. Job Title/Profession <u>PRESIDENT-OWNER</u>						
		<u>LAWN & GARDENING</u>						
		c. Employer's Name/Specific Field <u>SELF</u>						
		<u>LAWN & GARDENING</u>						
		j. If Amendment, choose change type:					k. Election Cycle Sum to Date	
		☐ Add ☐ Delete					\$ 1000.00	
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
		Mike Berry 217 Greenhewn Dr Kernersville, N.C. 27284	XXXXXXXXXX	Check	1/15/02	☐	☐	\$ 1000.00
		b. Job Title/Profession <u>MECHANIC</u>						
		<u>VEHICLE REPAIR</u>						
		c. Employer's Name/Specific Field <u>RS Reynolds</u>						
		<u>VEHICLE REPAIR</u>						
		j. If Amendment, choose change type:					k. Election Cycle Sum to Date	
		☐ Add ☐ Delete					\$ 1000.00	
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
		Kenneth O. Long 1575 Double Creek Dr Lewisville, N.C. 27023	XXXXXXXXXX	Check	2/1/02	☐	☐	\$ 1000.00
		b. Job Title/Profession <u>PRESIDENT/OWNER</u>						
		<u>LAWN & GARDENING</u>						
		c. Employer's Name/Specific Field <u>SELF</u>						
		<u>GERALD LONG / LAWN & GARDENING</u>						
		j. If Amendment, choose change type:					k. Election Cycle Sum to Date	
		☐ Add ☐ Delete					\$ 1000.00	
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
		Dewey B. Edwards Jr PO Box 422 4126 Arden St. Clemmons, N.C. 27012	XXXXXXXXXX	Check	2/12/02	☐	☐	\$ 1000.00
		b. Job Title/Profession <u>PRESIDENT/OWNER</u>						
		<u>PALETT SUPPLY</u>						
		c. Employer's Name/Specific Field <u>SELF</u>						
		<u>PALETT SUPPLY</u>						
		j. If Amendment, choose change type:					k. Election Cycle Sum to Date	
		☐ Add ☐ Delete					\$ 1000.00	
4. Total only this Page								\$ 5000.00
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

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1. Name of Committee or Fund							2. ID Number		
Row Barker for Sheriff									
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		
	NANCY N. YOUNG 1622 IVY SPRING DR SMYRNA GA. 30080	XXXXXXXXXX	CHECK	2/24/02	☐	☐	\$ 1000.00		
	b. Job Title/Profession				☐	☐	\$		
	Director Clothing Manu.				☐	☐	\$		
c. Employer's Name/Specific Field	JACK WARD Clothing Manufacturing	j. If Amendment, choose change type:			k. Election Cycle Sum to Date				
		☐ Add ☐ Delete			\$ 1000.00				
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 L. Sprinkle III 2001 GEORGIA AVE. WINSTON-SALEM, NC.	XXXXXXXXXX	CHECK	2/27/02	☐	☐	\$ 500.00		
	b. Job Title/Profession				☐	☐	\$		
	Podiatrist				☐	☐	\$		
c. Employer's Name/Specific Field	SELF Foot & ANKLE	j. If Amendment, choose change type:			k. Election Cycle Sum to Date				
		☒ Add ☐ Delete			\$ 500.00				
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		
	Louis P. Forrest 3301 Mayfield Ct WINSTON-SALEM, NC. 27104	XXXXXXXXXX	CHECK	2/26/02	☐	☐	\$ 500.00		
	b. Job Title/Profession				☐	☐	\$		
	PRESIDENT OWNER				☐	☐	\$		
c. Employer's Name/Specific Field	SELF Food Supply	j. If Amendment, choose change type:			k. Election Cycle Sum to Date				
		☐ Add ☐ Delete			\$ 500.00				
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		
	Ronald A. Joyce 4787 KINNAMON RD. WINSTON-SALEM, NC. 27103	XXXXXXXXXX	CHECK	2/22/02	☐	☐	\$ 500.00		
	b. Job Title/Profession				☐	☐	\$		
	PRESIDENT OWNER				☐	☐	\$		
c. Employer's Name/Specific Field	SELF Food Supply	j. If Amendment, choose change type:			k. Election Cycle Sum to Date				
		☐ Add ☐ Delete			\$ 500.00				
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		
	TEO F. COOK 338 PERRY LANE CLEMMONS, NC. 27012	XXXXXXXXXX	CHECK	9/6/02	☐	☐	\$ 500.00		
	b. Job Title/Profession				☐	☐	\$		
	RETIRED				☐	☐	\$		
c. Employer's Name/Specific Field	RETIRED	j. If Amendment, choose change type:			k. Election Cycle Sum to Date				
		☐ Add ☐ Delete			\$ 500.00				
4. Total only this Page							\$ 8000.00		
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

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1. Name of Committee or Fund							2. ID Number		
Row Barker for Sheriff									
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
	VERNICE U. Beroth Jr. 2447 Olivet Church Rd. WINSTON-SALEM, NC. 27106			XXXXXXXXXX	Check	3/6/02	☐	☐	\$ 500.00
	b. Job Title/Profession								
	4 Brothers / GAS & OIL Employer's Name/Specific Field SELF								
j. If Amendment, choose change type:							k. Election Cycle Sum to Date		
☐ Add ☐ Delete							\$ 500.00		
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
	Billy R. Sattenfield Sr. 675 Riverbend Dr. ADVANCE, NC. 27006			XXXXXXXXXX	Check	2/27/02	☐	☐	\$ 300.00
	b. Job Title/Profession								
	Retired Employer's Name/Specific Field Retired								
j. If Amendment, choose change type:							k. Election Cycle Sum to Date		
☐ Add ☐ Delete							\$ 300.00		
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
	Maurice K. White 149 Maitland Court CLEMMONS, NC. 27012			XXXXXXXXXX	Check	3/6/02	☐	☐	\$ 300.00
	b. Job Title/Profession								
	GAS Distributor Employer's Name/Specific Field SELF OIL AND GAS DISTRIBUTION								
j. If Amendment, choose change type:							k. Election Cycle Sum to Date		
☒ Add ☐ Delete							\$ 300.00		
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
	BEN F. JOYCE 3670 Old 66 Circle KERNERSVILLE, NC. 27284			XXXXXXXXXX	Check	2/19/02	☐	☐	\$ 250.00
	b. Job Title/Profession								
	OWNER / OPERATOR N.C. LICENSE PLATE AGENT Employer's Name/Specific Field OWNER LICENSE & TITLES								
j. If Amendment, choose change type:							k. Election Cycle Sum to Date		
☐ Add ☐ 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
	ELDRIDGE ALSTON 536 Buck Run Dr KERNERSVILLE, NC. 27284			XXXXXXXXXX	Check	2/28/02	☐	☐	\$ 200.00
	b. Job Title/Profession								
	Retired Employer's Name/Specific Field Retired								
j. If Amendment, choose change type:							k. Election Cycle Sum to Date		
☐ Add ☐ Delete							\$ 200.00		
4. Total only this Page									\$ 1550.00
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

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1. Name of Committee or Fund							2. ID Number		
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Tom Haymore PO Box 4115 Winston-Salem, NC. 27105 b. Job Title/Profession PRESIDENT / OWNER BUILDING SUPPLY c. Employer's Name/Specific Field BUILDING SUPPLY d. Account Number/Code XXXXXXXXXX e. Form of Payment Check f. Date (mm/dd/yyyy) 3/6/02 g. In-Kind ☐ h. Prior Report ☐ i. Amount \$ 200.00 j. If Amendment, choose change type: ☐ Add ☐ Delete k. Election Cycle Sum to Date \$ 200.00									
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Randa Pitts Sr. 2551 Alderney Lane Winston-Salem, NC. 27103 b. Job Title/Profession c. Employer's Name/Specific Field d. Account Number/Code XXXXXXXXXX e. Form of Payment Check f. Date (mm/dd/yyyy) 2/28/02 g. In-Kind ☐ h. Prior Report ☐ i. Amount \$ 100.00 j. If Amendment, choose change type: ☐ Add ☐ Delete k. Election Cycle Sum to Date \$ 100.00									
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Danny L. Carter 9188 Bethel Forest Dr Kernersville, NC. 27284 b. Job Title/Profession c. Employer's Name/Specific Field d. Account Number/Code XXXXXXXXXX e. Form of Payment Check f. Date (mm/dd/yyyy) 3/5/02 g. In-Kind ☐ h. Prior Report ☐ i. Amount \$ 75.00 j. If Amendment, choose change type: ☐ Add ☐ Delete k. Election Cycle Sum to Date \$ 75.00									
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) William Brown 2810 Maplewood Ave Winston-Salem, NC. 27103 b. Job Title/Profession Doctor NEUROSURGERY c. Employer's Name/Specific Field SELF NEUROSURGERY d. Account Number/Code XXXXXXXXXX e. Form of Payment Check f. Date (mm/dd/yyyy) 3/18/02 g. In-Kind ☐ h. Prior Report ☐ i. Amount \$ 500.00 j. If Amendment, choose change type: ☒ Add ☐ Delete k. Election Cycle Sum to Date \$ 500.00									
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Joe W. Collins 851 Junia Ave Winston-Salem, NC. 27107 b. Job Title/Profession Deputy LAW ENFORCEMENT c. Employer's Name/Specific Field SHERIFF RON BAKER LAW ENFORCEMENT d. Account Number/Code XXXXXXXXXX e. Form of Payment Check f. Date (mm/dd/yyyy) 3/15/02 g. In-Kind ☐ h. Prior Report ☐ i. Amount \$ 500.00 j. If Amendment, choose change type: ☐ Add ☐ Delete k. Election Cycle Sum to Date \$ 500.00									
4. Total only this Page							\$ 1375.00		
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)									

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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
	GROVER SHUGART JR 3015 MAPLEWOOD AVE SUITE 201 WINSTON-SALEM, NC 27103						XXXXXXXXXX	CHECK	2/15/02	☐	☐	\$1000.00
	b. Job Title/Profession PRESIDENT/OWNER									☐	☐	\$
	c. Employer's Name/Specific Field DEVELOPER									☐	☐	\$
j. If Amendment, choose change type:						k. Election Cycle Sum to Date						
						Add ☐ Delete ☐		\$1000.00				
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
	PAUL G. CHRYSSON 1045 BURKE ST WINSTON-SALEM, NC 27101						XXXXXXXXXX	CHECK	2/15/02	☐	☐	\$1000.00
	b. Job Title/Profession PRESIDENT/OWNER									☐	☐	\$
	c. Employer's Name/Specific Field DEVELOPER									☐	☐	\$
j. If Amendment, choose change type:						k. Election Cycle Sum to Date						
						Add ☐ Delete ☐		\$1000.00				
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
	BETTY G. PIKULA 3971 COPPERFIELD RIDGE CT WINSTON-SALEM, NC 27106						XXXXXXXXXX	CHECK	2/18/02	☐	☐	\$1000.00
	b. Job Title/Profession RETIRED									☐	☐	\$
	c. Employer's Name/Specific Field HOUSEWIFE									☐	☐	\$
j. If Amendment, choose change type:						k. Election Cycle Sum to Date						
						Add ☐ Delete ☐		\$1000.00				
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
	DENSON G. HAUSER, JR 653 LANTERN RIDGE DR WINSTON-SALEM, NC 27106						XXXXXXXXXX	CHECK	2/18/02	☐	☐	\$1000.00
	b. Job Title/Profession PRESIDENT									☐	☐	\$
	c. Employer's Name/Specific Field EQUIPMENT LEASING									☐	☐	\$
j. If Amendment, choose change type:						k. Election Cycle Sum to Date						
						Add ☒ Delete ☐		\$1000.00				
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
	MATTHEW GALLUS 1075 FIELDWOOD LANE WINSTON-SALEM, NC 27106						XXXXXXXXXX	CHECK	2/14/02	☐	☐	\$200.00
	b. Job Title/Profession PRESIDENT/OWNER									☐	☐	\$
	c. Employer's Name/Specific Field VENDING									☐	☐	\$
j. If Amendment, choose change type:						k. Election Cycle Sum to Date						
						Add ☐ Delete ☐		\$200.00				
4. Total only this Page											\$4200.00	
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

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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
	JAMES B. PIKULA 707 QUARTERSTAFF RD. WINSTON-SALEM, NC. 27104			XXXXXXXXXX	CHECK	3/13/02	☐	☐	\$ 200.00
	b. Job Title/Profession								
	DEPUTY LAW ENFORCEMENT								
c. Employer's Name/Specific Field			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Row Barker Law Enforcement			☐ Add ☐ 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
	SARA M Furr 3805 13 Smokey Quanta Court GREENSBORO, N.C. 27409			XXXXXXXXXX	CHECK	3/8/02	☐	☐	\$ 200.00
	b. Job Title/Profession								
	Doctor HEALTH CARE								
c. Employer's Name/Specific Field			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Jail Health Care			☐ Add ☐ Delete			\$ 400.00			
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
	STUART F. VAUGHN P.O. Box 21449 GREENSBORO, N.C. 27420			XXXXXXXXXX	CHECK	3/11/02	☐	☐	\$ 200.00
	b. Job Title/Profession								
	Stock Broker STOCKS								
c. Employer's Name/Specific Field			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
STOCKS & BUSINESS PLANNING			☐ Add ☐ 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
	NANCY Eldridge 2648 OAK GROVE circle WINSTON-SALEM, N.C. 27106			XXXXXXXXXX	CHECK	3/15/02	☐	☐	\$ 150.00
	b. Job Title/Profession								
	DEPUTY LAW ENFORCEMENT								
c. Employer's Name/Specific Field			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Row Barker Law Enforcement			☐ Add ☐ 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
	Betty Dowd 4623 WALDEN DRIVE WINSTON-SALEM, NC 27106			XXXXXXXXXX	CHECK	3/17/02	☐	☐	\$ 100.00
	b. Job Title/Profession								
c. Employer's Name/Specific Field			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
			☐ Add ☐ Delete			\$ 100.00			
4. Total only this Page									\$ 7050.00
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

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1. Name of Committee or Fund				2. ID Number			
Row Barker for Sheriff							
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
	Mary Swain NEEDHAM P.O. Box 433 WALKERTOWN, NC. 27051	XXXXXXXXXX	CHECK	3/15/02	☐	☐	\$ 100.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
j. If Amendment, choose change type:				k. Election Cycle Sum to Date			
☐ Add ☐ Delete				\$ 100.00			
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
	DANIEL L. TUTTLE 240 PENNER ST WINSTON-SALEM, NC. 27105	XXXXXXXXXX	CHECK	3/18/02	☐	☐	\$ 100.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
j. If Amendment, choose change type:				k. Election Cycle Sum to Date			
☐ Add ☐ Delete				\$ 100.00			
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
	RONALD WAYNE REEVES 1008 RENEE DR. KERNERSVILLE, NC. 27284	XXXXXXXXXX	CHECK	3/15/02	☐	☐	\$ 100.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
j. If Amendment, choose change type:				k. Election Cycle Sum to Date			
☐ Add ☐ Delete				\$ 100.00			
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
	JERRY BOLES 119 OAKLAND AVE KERNERSVILLE, NC. 27284	XXXXXXXXXX	CHECK	3/15/02	☐	☐	\$ 100.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
j. If Amendment, choose change type:				k. Election Cycle Sum to Date			
☐ Add ☐ Delete				\$ 100.00			
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
	Charles Banham 153 Tullyries Ln. Lewisville, NC. 27023	XXXXXXXXXX	CHECK	3/15/02	☐	☐	\$ 100.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
j. If Amendment, choose change type:				k. Election Cycle Sum to Date			
☐ Add ☐ Delete				\$ 100.00			
4. Total only this Page							\$ 500.00
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

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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
	H.E. WARREN Jr 4146 GREENMEAD RD. WINSTON-SALEM, NC. 27106		XXXXXXXXXX	CHECK	3/12/02	☐	☐	\$ 100.00
	b. Job Title/Profession					☐	☐	\$
	c. Employer's Name/Specific Field					☐	☐	\$
j. If Amendment, choose change type:						k. Election Cycle Sum to Date		
☐ Add ☐ Delete						\$ 100.00		
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
	Amy SNIDER 226 LEA MEADOW RD. LEXINGTON, NC. 27295		XXXXXXXXXX	CHECK	3/12/02	☐	☐	\$ 100.00
	b. Job Title/Profession					☐	☐	\$
	c. Employer's Name/Specific Field					☐	☐	\$
j. If Amendment, choose change type:						k. Election Cycle Sum to Date		
☐ Add ☐ Delete						\$ 100.00		
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
	Sandra Grindstaff 6627 WOODMERE DR WALKERTOWN, NC. 27051		XXXXXXXXXX	CHECK	3/13/02	☐	☐	\$ 100.00
	b. Job Title/Profession					☐	☐	\$
	c. Employer's Name/Specific Field					☐	☐	\$
j. If Amendment, choose change type:						k. Election Cycle Sum to Date		
☐ Add ☐ Delete						\$ 100.00		
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
	John T. Shelton 2896 Hwy 65W GERMANTON, NC.		XXXXXXXXXX	CHECK	3/13/02	☐	☐	\$ 100.00
	b. Job Title/Profession					☐	☐	\$
	c. Employer's Name/Specific Field					☐	☐	\$
j. If Amendment, choose change type:						k. Election Cycle Sum to Date		
☐ Add ☐ Delete						\$ 100.00		
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
	Thomas N. Hicks 1385 Dora Dr KERNERSVILLE, NC. 27284		XXXXXXXXXX	CHECK	3/14/02	☐	☐	\$ 100.00
	b. Job Title/Profession					☐	☐	\$
	c. Employer's Name/Specific Field					☐	☐	\$
j. If Amendment, choose change type:						k. Election Cycle Sum to Date		
☐ Add ☐ Delete						\$ 100.00		
4. Total only this Page								\$ 500.00
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

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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
	Barrow G. Church 1592 Fork Bixby Rd. Advance, NC. 27006			XXXXXXXXXX	Check	3/13/02	☐	☐	\$ 100.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
				☐ Add ☐ Delete		\$ 100.00			
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 C. Tuttle 8100 Easley Rd. Walnut Cove, NC. 27052			XXXXXXXXXX	Check	3/12/02	☐	☐	\$ 100.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
				☐ Add ☐ Delete		\$ 100.00			
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
	Peter Greene 6040 Parnell Rd Winston-Salem, NC. 27107			XXXXXXXXXX	Check	3/18/02	☐	☐	\$ 100.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
				☐ Add ☐ Delete		\$ 100.00			
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
	Zachary Yule PO. Box 15671 Winston-Salem, NC. 27113			XXXXXXXXXX	Check	3/18/02	☐	☐	\$ 100.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
				☐ Add ☐ Delete		\$ 100.00			
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
	Joe G. Williams 4230 James St Winston-Salem, NC. 27106			XXXXXXXXXX	Check	3/18/02	☐	☐	\$ 100.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
				☐ Add ☐ Delete		\$ 100.00			
4. Total only this Page									\$ 500.00
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

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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
	Albert E. Dillon, Jr. 940 Walkertown Boathouse Winston-Salem, NC. 27101			XXXXXXXXXX	Check	3/18/02	☐	☐	\$ 100.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
j. If Amendment, choose change type:						k. Election Cycle Sum to Date			
☐ Add ☐ Delete						\$ 100.00			
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
	Joe D. Garner 4056 Patsy Dr Winston-Salem, N.C. 27107			XXXXXXXXXX	Check	3/14/02	☐	☐	\$ 100.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
j. If Amendment, choose change type:						k. Election Cycle Sum to Date			
☐ Add ☐ Delete						\$ 100.00			
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
	Douglas Griffith 120 Chriswood Ave Thomasville, NC. 27360			XXXXXXXXXX	Check	3/18/02	☐	☐	\$ 100.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
j. If Amendment, choose change type:						k. Election Cycle Sum to Date			
☐ Add ☐ Delete						\$ 100.00			
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
	Dennis W. Henderson 130 Millers Crossing Ct Winston-Salem, NC. 27103			XXXXXXXXXX	Check	3/18/02	☐	☐	\$ 100.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
j. If Amendment, choose change type:						k. Election Cycle Sum to Date			
☐ Add ☐ Delete						\$ 100.00			
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
	Raymond V. Goff 8843 Homewood Dr Clemmons, NC. 27012			XXXXXXXXXX	Check	3/18/02	☐	☐	\$ 100.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
j. If Amendment, choose change type:						k. Election Cycle Sum to Date			
☐ Add ☐ Delete						\$ 100.00			
4. Total only this Page									\$ 500.00
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

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1. Name of Committee or Fund						2. ID Number		
Ron Barker for Sheriff								
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	
	Carl Mark Holt 5016 Roberson Farm Rd. KERNERSVILLE, N.C. 27284	XXXXXXXXXX	Check	3/16/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
				j. If Amendment, choose change type: ☐ Add ☐ Delete		k. Election Cycle Sum to Date \$ 50.00		
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	
	John M. Tingen 4585 Rock Lane Dr WALKERTOWN, N.C. 27051	XXXXXXXXXX	Check	3/18/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
				j. If Amendment, choose change type: ☐ Add ☐ Delete		k. Election Cycle Sum to Date \$ 50.00		
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	
	LEON R. DAMIELS Jr. 813 Woodcrest Dr Winston-Salem, N.C. 27104	XXXXXXXXXX	Check	3/18/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
				j. If Amendment, choose change type: ☐ Add ☐ Delete		k. Election Cycle Sum to Date \$ 50.00		
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	
	Brenda L. Manley 4655 Hildebrand Dr Winston-Salem, N.C. 27106	XXXXXXXXXX	Check	3/15/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
				j. If Amendment, choose change type: ☐ Add ☐ Delete		k. Election Cycle Sum to Date \$ 50.00		
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	
	KEVIN TYSINGER 4368 Bridle Path Winston-Salem, N.C. 27103	XXXXXXXXXX	Check	3/18/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
				j. If Amendment, choose change type: ☐ Add ☐ Delete		k. Election Cycle Sum to Date \$ 50.00		
4. Total only this Page						\$ 250.00		
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

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1. Name of Committee or Fund				2. ID Number			
Ron Barker for Sheriff							
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
	Mickey W. Southern 5012 Carbine Court Winston-Salem, N.C. 27101	XXXXXXXXXX	Check	3/19/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 50.00	
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
	Bregory E. Joyce 6201 Holder Rd. Clemmons, N.C. 27012	XXXXXXXXXX	Check	3/18/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 50.00	
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
	Terry W Bottoms 3058 Mountain View Rd. Bermanton, N.C. 27019	XXXXXXXXXX	Check	3/17/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 50.00	
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
	Linwood L. Pegues P.O. Box 1685 Kernersville, N.C. 27285	XXXXXXXXXX	Check	3/15/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 50.00	
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
	LONNIE C. LEMONS 1210 Ames Ridge Rd. Sandy Ridge, N.C. 27086	XXXXXXXXXX	Check	3/15/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 50.00	
4. Total only this Page							\$ 250.00
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

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1. Name of Committee or Fund				2. ID Number			
Row Barker for Sheriff							
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
	Clayborn T. Harper 6620 El Rancho Dr Rural Hall, NC. 27045	00000000	Check	3/16/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
j. If Amendment, choose change type:				k. Election Cycle Sum to Date			
☐ Add ☐ Delete				\$ 50.00			
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 F. Slater 641 Dalton Rd. Lewisville, NC. 27023	00000000	Check	3/16/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
j. If Amendment, choose change type:				k. Election Cycle Sum to Date			
☐ Add ☐ Delete				\$ 50.00			
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
	Marty Wayne Parsons 5056 Dalton Manor Ct Winston-Salem, NC 27104	00000000	Check	3/14/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
j. If Amendment, choose change type:				k. Election Cycle Sum to Date			
☐ Add ☐ Delete				\$ 50.00			
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
	John Eric Stewart 215 Academy St Rural Hall, NC. 27045	00000000	Check	3/17/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
j. If Amendment, choose change type:				k. Election Cycle Sum to Date			
☐ Add ☐ Delete				\$ 50.00			
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
	Linda Lacy 1463 Turfwood Dr Rafftown, NC 27040	00000000	Check	3/17/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
j. If Amendment, choose change type:				k. Election Cycle Sum to Date			
☐ Add ☐ Delete				\$ 50.00			
4. Total only this Page							\$ 250.00
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

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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
	KAREN HOPPENBAUER 135 BROOKGREEN COURT KERNERSVILLE, N.C. 27284			XXXXXXXXXX	Check	3/16/02	☐	☐	\$ 50.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
j. If Amendment, choose change type:						k. Election Cycle Sum to Date			
☐ Add ☐ Delete						\$ 50.00			
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
	GLENN G. DAVIS 3495 DIXIANA LANE PFAFFTOWN, N.C. 27040			XXXXXXXXXX	Check	3/17/02	☐	☐	\$ 50.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
j. If Amendment, choose change type:						k. Election Cycle Sum to Date			
☐ Add ☐ Delete						\$ 50.00			
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
	ROCKY LANE JOYNER 6230 SALEM CHAPEL RD WALNUT COVE, N.C. 27052			XXXXXXXXXX	Check	3/14/02	☐	☐	\$ 50.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
j. If Amendment, choose change type:						k. Election Cycle Sum to Date			
☐ Add ☐ Delete						\$ 50.00			
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
	CHRISTOPHER T. MARSHALL 1753 CARRIAGE COVE LN WINSTON-SALEM, N.C. 27127			XXXXXXXXXX	Money Order	3/11/02	☐	☐	\$ 50.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
j. If Amendment, choose change type:						k. Election Cycle Sum to Date			
☐ Add ☐ Delete						\$ 50.00			
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
	DANIEL W. HOTTAR 689 JOE LAYNE MILL RD ELKIN, N.C. 28621			XXXXXXXXXX	Check	3/7/02	☐	☐	\$ 50.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
j. If Amendment, choose change type:						k. Election Cycle Sum to Date			
☐ Add ☐ Delete						\$ 50.00			
4. Total only this Page									\$ 250.00
5. Total of ALL CRO-1210 Pages (only show on last page)									\$
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February 2002

Contributions from INDIVIDUALS

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1. Name of Committee or Fund				2. ID Number			
Row Barker for Sheriff							
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
	Lori Crater Wood 2899 Sheppard Mill Rd. Danbury, NC. 27016	XXXXXXXXXX	Check	3/7/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 50.00			
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
	Shannon E Bostic 9701 Baux Mountain Rd. Germanton, NC. 27019	XXXXXXXXXX	Check	3/18/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 50.00			
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
	Brian R. Gieger 8735 Chipboard Rd. Rural Hall, NC. 27045	XXXXXXXXXX	Check	3/7/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 50.00			
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
	Phyllis Hantgrove 5571 Club Knoll Rd Winston-Salem, NC. 27105	XXXXXXXXXX	Check	3/15/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 50.00			
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
	Rommie G. Knight, Sr 1613 Sanford Dr Winston-Salem, NC 27105	XXXXXXXXXX	Check	3/13/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 50.00			
4. Total only this Page							\$ 250.00
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

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1. Name of Committee or Fund						2. ID Number		
Row Barker for Sheriff								
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	
	Robin E. Carpenter 225 Nondwin Dr Winston-Salem, NC 27104	00000000	Check	3/14/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
j. If Amendment, choose change type:				k. Election Cycle Sum to Date				
☐ Add ☐ Delete				\$ 50.00				
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	
	Stacy Z. Shepherd 3408 Tanglebrook Tr. P.O. Box 1948 Clemmons, NC 27012	00000000	Check	3/18/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
j. If Amendment, choose change type:				k. Election Cycle Sum to Date				
☐ Add ☐ Delete				\$ 50.00				
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	
	John A. Redding Sr. 4894 Styers Ferry Rd Lewisville, NC 27023	00000000	Check	3/18/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
j. If Amendment, choose change type:				k. Election Cycle Sum to Date				
☐ Add ☐ Delete				\$ 50.00				
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	
	Mark Mitchell 4112 High Point Rd. Winston-Salem, NC 27107	00000000	Check	3/18/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
j. If Amendment, choose change type:				k. Election Cycle Sum to Date				
☐ Add ☐ Delete				\$ 50.00				
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	
	Marty Luffman 436 Springbrook Dr. Ap. B Kernersville, NC 27284	00000000	Check	3/14/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
j. If Amendment, choose change type:				k. Election Cycle Sum to Date				
☐ Add ☐ Delete				\$ 50.00				
4. Total only this Page						\$ 250.00		
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 23 of 37

1. Name of Committee or Fund				2. ID Number					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Michael T. Blakely 1316 Woodlyn St. KERNERSVILLE, N.C. 27284 b. Job Title/Profession c. Employer's Name/Specific Field				d. Account Number/Code XXXXXXXXXX	e. Form of Payment Check	f. Date (mm/dd/yyyy) 3/13/02	g. In-Kind ☐	h. Prior Report ☐	i. Amount \$ 50.00
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 50.00					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Wendy H. Longworth 7370 Brook Valley Rd. Rural Hall, NC 27045 b. Job Title/Profession c. Employer's Name/Specific Field				d. Account Number/Code XXXXXXXXXX	e. Form of Payment check	f. Date (mm/dd/yyyy) 3/15/02	g. In-Kind ☐	h. Prior Report ☐	i. Amount \$ 50.00
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 50.00					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Deborah J. Mills 2217 Cherokee Lane Winston-Salem, N.C. 27103 b. Job Title/Profession c. Employer's Name/Specific Field				d. Account Number/Code XXXXXXXXXX	e. Form of Payment Check	f. Date (mm/dd/yyyy) 3/15/02	g. In-Kind ☐	h. Prior Report ☐	i. Amount \$ 50.00
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 50.00					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Steven H. Tysinger 216 Valley Dr Walnut Cove, N.C. 27052 b. Job Title/Profession c. Employer's Name/Specific Field				d. Account Number/Code XXXXXXXXXX	e. Form of Payment Check	f. Date (mm/dd/yyyy) 3/15/02	g. In-Kind ☐	h. Prior Report ☐	i. Amount \$ 50.00
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 50.00					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Leroy D. Moore Jr. 9011 Foxlair Dr. KERNERSVILLE, N.C. 27284 b. Job Title/Profession c. Employer's Name/Specific Field				d. Account Number/Code XXXXXXXXXX	e. Form of Payment Check	f. Date (mm/dd/yyyy) 3/15/02	g. In-Kind ☐	h. Prior Report ☐	i. Amount \$ 50.00
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 50.00					
4. Total only this Page									\$ 250.00
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Contributions from INDIVIDUALS

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1. Name of Committee or Fund				2. ID Number			
Row Banker for Sheriff							
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
	Charles S. Robertson 153 Forest Dr KERNERSVILLE, N.C. 27284	00000000	Check	3/8/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 50.00	
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
	TARA Robbins 4770 Cooper Rd. Clemmons, NC. 27012	00000000	Check	3/13/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 50.00	
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
	DWAYNE U. HEDGEcock 6010 Hickory Creek Rd. Winston-Salem, NC. 27107	00000000	Check	3/10/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 50.00	
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
	Larry W. Hawdy 2850 Neushore Dr Winston-Salem, NC. 27127	00000000	Check	3/11/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 50.00	
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
	Scott Miller PO. Box 313 LEWISVILLE, NC. 27023	00000000	Check	3/11/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 50.00	
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Contributions from INDIVIDUALS

Page 25 of 39

1. Name of Committee or Fund						2. ID Number		
Row Barker for Sheriff								
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	
	PETER A. GREEN 172 BETHANIA OAK Circle Pfalltown, N.C. 27040	XXXXXXXXXX	Check	3/7/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
j. If Amendment, choose change type:						k. Election Cycle Sum to Date		
☐ Add ☐ Delete						\$ 50.00		
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	
	JAMES L. McCum, Jr 2619 BUENA Vista Rd. Winston-Salem, N.C. 27104	XXXXXXXXXX	Check	3/13/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
j. If Amendment, choose change type:						k. Election Cycle Sum to Date		
☐ Add ☐ Delete						\$ 50.00		
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	
	Downa Miller 4120 New Walkertown Rd. Winston-Salem, N.C. 27105	XXXXXXXXXX	Check	3/11/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
j. If Amendment, choose change type:						k. Election Cycle Sum to Date		
☐ Add ☐ Delete						\$ 50.00		
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	
	Terry Gray 2981 Sell Rd. Winston-Salem, N.C. 27105	XXXXXXXXXX	Check	3/14/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
j. If Amendment, choose change type:						k. Election Cycle Sum to Date		
☐ Add ☐ Delete						\$ 50.00		
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	
	Tommy Burgess Jr. 1231 Glenn Hollow Rd. KERNERSVILLE, N.C. 27284	XXXXXXXXXX	Check	3/14/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
j. If Amendment, choose change type:						k. Election Cycle Sum to Date		
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Contributions from INDIVIDUALS

Page 26 of 38

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
	Patrick Huey 5949 Styers Ferry Rd. Clemmons, N.C. 27012			00000000	Check	3/13/02	☐	☐	\$ 50.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
				☐ Add ☐ Delete		\$ 50.00			
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
	Jeremy Rowley 7701 Vance Rd. Kernersville, N.C. 27284			00000000	Check	3/13/02	☐	☐	\$ 50.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
				☐ Add ☐ Delete		\$ 50.00			
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
	Allen Clark			00000000	None Order	3/13/04	☐	☐	\$ 50.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
				☐ Add ☐ Delete		\$ 50.00			
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
	Deborah Mathis 1082 Cresthaven Rd. Lewisville, N.C. 27023			00000000	Check	3/15/02	☐	☐	\$ 50.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
				☐ Add ☐ Delete		\$ 50.00			
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
	Steven R. Bottoms 110 Cedar Lake Trail Winston-Salem, N.C. 27104			00000000	Check	3/14/02	☐	☐	\$ 50.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
				☐ Add ☐ Delete		\$ 50.00			
4. Total only this Page									\$ 250.00
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 27 of 38

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
	Joseph M. Sells 8329 Whippoorwill Lane Rural Hall, NC 27045			XXXXXXXXXX	Check	3/14/02	☐	☐	\$ 50.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
				☐ Add ☐ Delete		\$ 50.00			
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
	Beatrice Jones 568 Leston Gilbert Dr. Kernersville, NC 27284			XXXXXXXXXX	Check	3/14/02	☐	☐	\$ 50.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
				☐ Add ☐ Delete		\$ 50.00			
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
	Jonathan Jones 6004 Holder Rd. Clemmons, NC 27012			XXXXXXXXXX	Check	3/13/02	☐	☐	\$ 50.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
				☐ Add ☐ Delete		\$ 50.00			
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
	Samuel Clinard 5842 Moravia Rd. Winston-Salem, NC 27127			XXXXXXXXXX	Check	3/13/02	☐	☐	\$ 50.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
				☐ Add ☐ Delete		\$ 50.00			
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
	John S. Crantall 2753 Martin St Walkertown, NC 27051			XXXXXXXXXX	Check	3/11/02	☐	☐	\$ 50.00
	b. Job Title/Profession						☐	☐	\$
	c. Employer's Name/Specific Field						☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
				☐ Add ☐ Delete		\$ 50.00			
4. Total only this Page									\$ 250.00
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

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1. Name of Committee or Fund				2. ID Number			
Row Barker for Sheriff							
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
	DEAN F. BROWN 6295 Lochinvar Dr Rural Hall, NC. 27404	XXXXXXXXXX	Check	3/15/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 50.00	
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
	JOEY D. Redmon 5580 Old Valley Sch. Rd. KERNERSVILLE, NC. 27284	XXXXXXXXXX	Check	3/11/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 50.00	
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
	Darin Whitaker 2056 Rougemont Ln KERNERSVILLE, NC. 27284	XXXXXXXXXX	Check	3/15/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 50.00	
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
	Floyd Boldo 370 JANET AVE. WINSTON-SALEM, N.C. 27104	XXXXXXXXXX	Check	3/14/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 50.00	
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
	LINWOOD E. JONES 1994 Darwick Rd. WINSTON-SALEM, NC. 27127	XXXXXXXXXX	Check	3/14/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 50.00	
4. Total only this Page							\$ 250.00
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

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1. Name of Committee or Fund				2. ID Number			
Row Barker for Sheriff							
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
	Jeffrey Allen 1401 King Charles Dr. Clemmons, N.C. 27012	XXXXXXXXXX	Check	3/15/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 50.00	
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
	Joseph C. Grogan Jr. 3700 Will Scarlett Rd. Winston-Salem, N.C. 27104	XXXXXXXXXX	Check	3/15/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 50.00	
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
	James B. Davis Jr. 8051 Rollinggreen Dr Winston-Salem, N.C. 27103	XXXXXXXXXX	Check	3/12/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 50.00	
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
	Tony Anderson 3815 Vienna Dozier Rd. RFAA Town, N.C. 27040	XXXXXXXXXX	Check	3/15/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 50.00	
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
	Carol J. Weaver P.O. Box 651 Welcome, N.C. 27374	XXXXXXXXXX	Check	3/14/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 50.00	
4. Total only this Page							\$ 250.00
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

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1. Name of Committee or Fund				2. ID Number			
Ron Barker for Sheriff							
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
	Perry G. Borelson 2115 PEACE HAVEN RD. WINSTON-SALEM, NC 27106	XXXXXXXXXX	Check	3/18/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 50.00			
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
	Elizabeth Colbreth 5440 Styers Ferry Rd. CLEMMONS, N.C. 27012	XXXXXXXXXX	Check	3/15/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 50.00			
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
	Frank Martinez 5092 Hutchins St Winston-Salem, N.C. 27106	XXXXXXXXXX	Check	3/19/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 50.00			
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
	Jordan S. Dowd 4623 WALDEN Dr. WINSTON-SALEM, N.C. 27106	XXXXXXXXXX	Check	3/17/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 50.00			
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
	Stuart F. Vaughn Jr. 147 LAWNDALE Dr WINSTON-SALEM, N.C. 27104	XXXXXXXXXX	Check	3/19/02	☐	☐	\$ 50.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
j. If Amendment, choose change type: ☐ Add ☐ Delete				k. Election Cycle Sum to Date \$ 50.00			
4. Total only this Page							\$ 250.00
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

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1. Name of Committee or Fund						2. ID Number		
Row Barker for Sheriff								
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	
	Ronald H. Windsor 3441 Gladstone St Winston-Salem, N.C. 27104	XXXXXXXXXX	Check	3/21/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date		
				☐ Add ☐ Delete		\$ 50.00		
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	
	Alfred K. Thompson 2112 E Fiddlers Court Winston-Salem, N.C. 27103	XXXXXXXXXX	Check	3/19/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date		
				☐ Add ☐ Delete		\$ 50.00		
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	
	Joseph Cookman 4881 Westray Ln WALKERTOWN, N.C. 27051	XXXXXXXXXX	Check	3/18/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date		
				☐ Add ☐ Delete		\$ 50.00		
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	
	J. M. Johnson 1501 Brookford Rd. KERNERSVILLE, N.C. 27284	XXXXXXXXXX	Check	3/18/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date		
				☐ Add ☐ Delete		\$ 50.00		
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	
	CLARKE LEAKE 331 GLENDALE COURT APT. N WINSTON-SALEM, N.C. 27104	XXXXXXXXXX	Check	3/18/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date		
				☐ Add ☐ Delete		\$ 50.00		
4. Total only this Page							\$ 250.00	
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 32 of 37

1. Name of Committee or Fund						2. ID Number		
Ron Barker for Sheriff								
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	
	Doris Friday 1613 Thurmond St Winston-Salem, NC 27106	XXXXXXXXXX	Check	3/15/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
				j. If Amendment, choose change type: ☐ Add ☐ Delete		k. Election Cycle Sum to Date \$ 50.00		
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	
	Jimmy Poitchadd	XXXXXXXXXX	Check	3/18/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
				j. If Amendment, choose change type: ☐ Add ☐ Delete		k. Election Cycle Sum to Date \$ 50.00		
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	
	Charles Crosby 221 Cathi Ln Kernersville, NC 27284	XXXXXXXXXX	Check	3/14/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
				j. If Amendment, choose change type: ☐ Add ☐ Delete		k. Election Cycle Sum to Date \$ 50.00		
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	
	Don Barker 8645 Shallowford Rd. Lewisville, NC 27023	XXXXXXXXXX	Check	3/8/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
				j. If Amendment, choose change type: ☐ Add ☐ Delete		k. Election Cycle Sum to Date \$ 50.00		
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	
	Sharon Reid 512 B Springbrook Dr. Kernersville, NC 27284	XXXXXXXXXX	Check	3/11/02	☐	☐	\$ 25.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
				j. If Amendment, choose change type: ☐ Add ☐ Delete		k. Election Cycle Sum to Date \$ 50.00		
4. Total only this Page							\$ 250.00	
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

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1. Name of Committee or Fund							2. ID Number		
Ron Barker for Sheriff									
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 G. HORN P.O. Box 4303 Winston-Salem, NC 27105	XXXXXXXXXX	Check	4/10/02	☐	☐	\$ 500.00		
	b. Job Title/Profession								
	OWNER / WRECKER / STORAGE								
c. Employer's Name/Specific Field	SELF						j. If Amendment, choose change type:	k. Election Cycle Sum to Date	
	WRECKER / STORAGE	☐ Add ☐ Delete						\$ 500.00	
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 M. Sauls P.O. Box 24662 Winston-Salem, NC 27114	XXXXXXXXXX	Check	4/10/02	☐	☐	\$ 500.00		
	b. Job Title/Profession								
	RETIRED								
c. Employer's Name/Specific Field	RETIRED						j. If Amendment, choose change type:	k. Election Cycle Sum to Date	
		☐ Add ☐ Delete						\$ 500.00	
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		
	EV. Ferrell, Jr. 4500 Chinaberry Lane Winston-Salem, NC 27106	XXXXXXXXXX	Check	3/22/02	☐	☐	\$ 500.00		
	b. Job Title/Profession								
	PRESIDENT / OWNER / REAL ESTATE								
c. Employer's Name/Specific Field	SELF						j. If Amendment, choose change type:	k. Election Cycle Sum to Date	
	REAL ESTATE	☐ Add ☐ Delete						\$ 500.00	
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		
	PAUL PERILLO 3943-B Robinhood Rd. Winston-Salem, NC 27106	XXXXXXXXXX	Check	3/21/02	☐	☐	\$ 200.00		
	b. Job Title/Profession								
	OWNER / ITALIAN RESTAURANT								
c. Employer's Name/Specific Field	SELF						j. If Amendment, choose change type:	k. Election Cycle Sum to Date	
	RESTAURANT / FOOD	☐ Add ☐ 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		
	JESSE T. OWENS 9651 BANK Mountain Rd. GERMANTON, NC 27019	XXXXXXXXXX	Check	3/21/02	☐	☐	\$ 200.00		
	b. Job Title/Profession								
	DEPUTY SHERIFF / LAW ENFORCEMENT								
c. Employer's Name/Specific Field	Ron Barker						j. If Amendment, choose change type:	k. Election Cycle Sum to Date	
	SHERIFF / LAW ENFORCEMENT	☒ Add ☐ Delete						\$ 200.00	
4. Total only this Page							\$ 1900.00		
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

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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	
	George Veach 1570 Bridgeton Rd. Winston-Salem, NC. 27127	XXXXXXXXXX	Check	4/15/02	☐	☐	\$ 200.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
j. If Amendment, choose change type:		k. Election Cycle Sum to Date						
☐ Add ☐ 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	
	Vaugh Feinster 166 Commerce Blvd Statesville, NC. 28625	XXXXXXXXXX	Check	4/15/02	☐	☐	\$ 100.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
j. If Amendment, choose change type:		k. Election Cycle Sum to Date						
☐ Add ☐ Delete		\$ 100.00						
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	
	Gregg Eller 125 Windrush Rd. Winston-Salem, NC. 27105	XXXXXXXXXX	Check	3/25/02	☐	☐	\$ 100.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
j. If Amendment, choose change type:		k. Election Cycle Sum to Date						
☐ Add ☐ Delete		\$ 100.00						
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	
	Lewis Hubbard 285 S. Stratford Rd. Winston-Salem, NC. 27103	XXXXXXXXXX	Check	4/15/02	☐	☐	\$ 100.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
j. If Amendment, choose change type:		k. Election Cycle Sum to Date						
☐ Add ☐ Delete		\$ 100.00						
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	
	Timothy Senter 945 Tuttle Rd. Rural Hall, NC. 27045	XXXXXXXXXX	Check	3/18/02	☐	☐	\$ 50.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
j. If Amendment, choose change type:		k. Election Cycle Sum to Date						
☐ Add ☐ Delete		\$ 50.00						
4. Total only this Page							\$ 550.00	
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

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1. Name of Committee or Fund							2. ID Number					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Thomas Pulliam 321 Barbary Rd. Winston-Salem, N.C. 27104 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
							XXXXXXXXXX	Check	4/14/02	☐	☐	\$ 50.00
										☐	☐	\$
										☐	☐	\$
										☐	☐	\$
j. If Amendment, choose change type:							k. Election Cycle Sum to Date					
☐ Add ☐ Delete							\$ 50.00					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Patrick Riazzi 4108 GREENVALE CT WINSTON-SALEM, N.C. 27104 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
							XXXXXXXXXX	Check	3/27/02	☐	☐	\$ 25.00
										☐	☐	\$
										☐	☐	\$
										☐	☐	\$
j. If Amendment, choose change type:							k. Election Cycle Sum to Date					
☐ Add ☐ Delete							\$ 25.00					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Martha Wishon 4110 Williams Rd LEWISVILLE, N.C. 27023 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
							XXXXXXXXXX	Check	4/14/02	☐	☐	\$ 20.00
										☐	☐	\$
										☐	☐	\$
										☐	☐	\$
j. If Amendment, choose change type:							k. Election Cycle Sum to Date					
☐ Add ☐ Delete							\$ 20.00					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Aposolos Skordas 2154 NEW CASTLE DR. WINSTON-SALEM, NC 27103 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
							XXXXXXXXXX	Check	4/19/02	☐	☐	\$ 100.00
										☐	☐	\$
										☐	☐	\$
										☐	☐	\$
j. If Amendment, choose change type:							k. Election Cycle Sum to Date					
☐ Add ☐ Delete							\$ 100.00					
3. Contributor a. Full Name, Mailing Address & Phone (include city, state, & zip) Terry Bumgarner P.O. Box 217 Wilkesboro, N.C. 28697 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
							XXXXXXXXXX	Check	4/14/02	☐	☐	\$ 100.00
										☐	☐	\$
										☐	☐	\$
										☐	☐	\$
j. If Amendment, choose change type:							k. Election Cycle Sum to Date					
☐ Add ☐ Delete							\$ 100.00					
4. Total only this Page									\$ 295.00			
5. Total of ALL CRO-1210 Pages									\$			
(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		
Row Barker for Sheriff								
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	
	Coy Willard Jr 1605 Springfield Way Dr Clemmons, NC 27012	XXXXXXXXXX	Check	4/20/02	☐	☐	\$ 1000.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
					☐	☐	\$	
j. If Amendment, choose change type:						k. Election Cycle Sum to Date		
☐ Add ☐ Delete						\$ 1000.00		
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	
	Kerry Venable 6005 Reidsville Rd. Belews Creek, NC 27009	XXXXXXXXXX	Check	4/17/02	☐	☐	\$ 500.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
					☐	☐	\$	
j. If Amendment, choose change type:						k. Election Cycle Sum to Date		
☐ Add ☐ Delete						\$ 500.00		
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	
	Otto E. Liipfert PO. Box 2292 Kernersville, NC 27285	XXXXXXXXXX	Check	4/20/02	☐	☐	\$ 200.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
					☐	☐	\$	
j. If Amendment, choose change type:						k. Election Cycle Sum to Date		
☐ Add ☐ 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	
	Donald C. Brinkley 214 Summit Court Unit 4 Walnut Cove, NC 27052	XXXXXXXXXX	Check	4/17/02	☐	☐	\$ 100.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
					☐	☐	\$	
j. If Amendment, choose change type:						k. Election Cycle Sum to Date		
☐ Add ☐ Delete						\$ 100.00		
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	
	R. Phillip Hawes Jr. PO Box 1704 Winston-Salem, NC 27102	XXXXXXXXXX	Check	4/17/02	☐	☐	\$ 100.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
					☐	☐	\$	
j. If Amendment, choose change type:						k. Election Cycle Sum to Date		
☐ Add ☐ Delete						\$ 100.00		
4. Total only this Page							\$ 1900.00	
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

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1. Name of Committee or Fund				2. ID Number			
Row Barker for Sheriff							
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
	37 tickets for reception A+ 50.00 Cash	XXXXXXXXXX	Cash		☐	☐	\$ 1850.00
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$ 1850.00	
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
					☐	☐	\$
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ 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
					☐	☐	\$
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ 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
					☐	☐	\$
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ 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
					☐	☐	\$
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ 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
					☐	☐	\$
	b. Job Title/Profession				☐	☐	\$
	c. Employer's Name/Specific Field				☐	☐	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				☐ Add ☐ Delete		\$	
4. Total only this Page							\$ 1850.00
5. Total of ALL CRO-1210 Pages (only show on last page)							\$ 36.670
(This line must be on line 6 of Detailed Summary Page CRO-1100)							