

# Disclosure Report Cover Sheet

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

1. Name of Committee or Fund <b>John Polite for Sheriff</b>			6. Date <b>5-6-02</b>	
2. Address <b>1983 Emerywood Road NC</b>			7. ID Number	
3. City <b>Rural Hall</b>	4. State <b>NC</b>	5. Zip <b>27045</b>	8. Phone <b>969-9438</b>	

9. Type of Report <b>2002 First Quarter Plus Report GS/63-278.9</b>	10. Period Covered Start <b>2-25-02</b> End <b>4-29-02</b>	11. Amendment <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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12. Type of Committee or Fund (Check one)			
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> "Booster Fund"
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Soft Money Account	<input type="checkbox"/> Building Fund
<input type="checkbox"/> Other Fund:			

13. Treasurer Name <b>Nadine Clements</b>
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14. Assistant Treasurer Name(s)

15. Custodian of Books Name <b>John Polite</b>
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16. Bank/Depository/Credit Account Information			
a. Name	b. Purpose	c. Code	d. Period Begin Balance
<b>BB&amp;T Bank</b>	<b>For all campaign expenses</b>		<b>\$ 751.00</b>
			\$
			\$
			\$
			\$
			\$
			\$

## 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.

**Nadine Clements**  
Signature of Appointed Treasurer or Candidate

**5-6-02**  
Date

# Detailed Summary

1. Name of Committee or Fund		2. Type of Report		3. ID Number	
John Polite for Sheriff		1 <sup>st</sup> Qtr Report			
Start of Election Cycle: January 1, 20__		Total this Period	Total this Election Cycle	For Office Use Only	
4) Cash on Hand at Start of Election Cycle			\$ 751.00		
5) Cash on Hand at Start of Present Reporting Period		\$ 751.00			
<b>RECEIPTS</b>					
6) Contributions from Individuals	(CRO-1210)	\$ 3450.00	\$ 3450.00		
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$		
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$		
9) Loan Proceeds	(CRO-1410)	\$ 751.00	\$ 751.00		
10) Refunds & Reimbursements to Committee	(CRO-1240)	\$ .00	\$ .00		
11) Other Receipt Sources	(CRO-1250)				
11a) Interest on Bank Accounts	(CRO-1250)	\$ .00	\$ .00		
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$ .00	\$ .00		
11c) Outside Sources of Income	(CRO-1250)	\$ .00	\$ .00		
12) TOTAL RECEIPTS	(Add lines 6, 7, 8, 9, 10, 11a, 11b, and 11c)	\$ 4201.00	\$ 4201.00		
<b>EXPENDITURES</b>					
13) Disbursements	(CRO-1310)				
13a) Operating Expenditures	(CRO-1310)	\$ 2725.54	\$ 2725.54		
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$		
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$		
14) Loan Repayments	(CRO-1420)	\$	\$		
15) Refunds from Committee	(CRO-1320)	\$	\$		
16) In-Kind Contributions	(CRO-1510)	\$ 600.00	\$ 600.00		
17) TOTAL EXPENDITURES	(Add lines 13a, 13b, 13c, 14, 15, and 16)	\$ 3325.54	\$ 3325.54		
18) Cash on Hand at End of Reporting Period	(For this Period, add lines 5 and 12 together, then subtract line 17) (For this Election Cycle, add lines 4 and 12 together, then subtract line 17)	\$ 875.46	\$ 875.46		
<b>Additional Information</b>					
19) Non-Monetary Gifts Given to Committees	(CRO-1330)	\$			
20) Outstanding Loans (including ones from other campaigns)	(CRO-1430)	\$			
21) Debts and Obligations owed BY the Committee	(CRO-1610)	\$			
22) Debts and Obligations owed TO the Committee	(CRO-1620)	\$			
23) Parent Entity's Administrative Support	(CRO-1710)	\$			

## Contributions from INDIVIDUALS

1. Name of Committee or Fund							2. ID Number		
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount		
	Rev. William Fair 306 Hampton Drive High Point NC 27265		Money Order	3/26/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 25.00		
	b. Job Title/Profession							\$	
	Pastor							\$	
c. Employer's Name/Specific Field		j. If Amendment, choose change type:			k. Election Cycle Sum to Date				
		<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$				
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount		
	James Clyburn 2111 Nettlebrook Dr. Winston-Salem, NC 27106		check	4-14-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00		
	b. Job Title/Profession							\$	
	Pastor							\$	
c. Employer's Name/Specific Field		j. If Amendment, choose change type:			k. Election Cycle Sum to Date				
Red Bank Church		<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$				
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount		
	Adrienne Campbell 209 Brambleton Court Winston-Salem, NC 27106		check	4-23-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.00		
	b. Job Title/Profession							\$	
	Bankruptcy Interviewer							\$	
c. Employer's Name/Specific Field		j. If Amendment, choose change type:			k. Election Cycle Sum to Date				
Federal Government		<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$				
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount		
	Miles Computers Services 515 W 14th Street W-S, NC 27105			3-16-02	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$ 600.00		
	b. Job Title/Profession							\$	
								\$	
c. Employer's Name/Specific Field		j. If Amendment, choose change type:			k. Election Cycle Sum to Date				
		<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$				
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
	b. Job Title/Profession							\$	
								\$	
c. Employer's Name/Specific Field		j. If Amendment, choose change type:			k. Election Cycle Sum to Date				
		<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$				

4. Total only this Page

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)

CRO-1210

NC State Board of Elections

February 2002

## Disbursements

<b>1. Name of Committee or Fund</b>						<b>2. ID Number</b>	
John Polite for Sher. ff							
<b>3. Type of Disbursement</b> (Please use separate CRO-1330 forms for each type of Disbursements.)							
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee	<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, and zip)		<b>d. Purpose</b>	<b>e. Account Number/Code</b>	<b>f. Form of Payment</b>	<b>g. Date</b> (mm/dd/yyyy)	<b>h. Amount</b>
	BB+T Bank 5610 University Parkway Winston-Salem, NC 27105		Check order <del>612022010209</del>	Check	8/15/02	\$ 13.00	
	<b>b. If Contribution to County Committee, specify:</b>		<b>c. If Coordinated Party Expense, list office:</b>		<b>i. If Amendment, choose change type:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete		
<b>j. Election Cycle Sum To Date</b> \$							
4. Payee	<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, and zip)		<b>d. Purpose</b>	<b>e. Account Number/Code</b>	<b>f. Form of Payment</b>	<b>g. Date</b> (mm/dd/yyyy)	<b>h. Amount</b>
	Kinko 232 S. Stratford Rd Winston-Salem, NC 27103		Printing			4/14/02	\$ 410.29
	<b>b. If Contribution to County Committee, specify:</b>		<b>c. If Coordinated Party Expense, list office:</b>		<b>i. If Amendment, choose change type:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete		
<b>j. Election Cycle Sum To Date</b> \$							
4. Payee	<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, and zip)		<b>d. Purpose</b>	<b>e. Account Number/Code</b>	<b>f. Form of Payment</b>	<b>g. Date</b> (mm/dd/yyyy)	<b>h. Amount</b>
	Miller, the Printer 616 N. Trade Street Winston-Salem, NC 27101		Poster		Check	5-5-02	\$ 678.62
	<b>b. If Contribution to County Committee, specify:</b>		<b>c. If Coordinated Party Expense, list office:</b>		<b>i. If Amendment, choose change type:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete		
<b>j. Election Cycle Sum To Date</b> \$							
4. Payee	<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, and zip)		<b>d. Purpose</b>	<b>e. Account Number/Code</b>	<b>f. Form of Payment</b>	<b>g. Date</b> (mm/dd/yyyy)	<b>h. Amount</b>
	Staples 430 Hanes Mill Road Winston-Salem, NC 27105		Office Supplies		Check (309)	4-9-02	\$ 29.32
	<b>b. If Contribution to County Committee, specify:</b>		<b>c. If Coordinated Party Expense, list office:</b>		<b>i. If Amendment, choose change type:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete		
<b>j. Election Cycle Sum To Date</b> \$							
4. Payee	<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, and zip)		<b>d. Purpose</b>	<b>e. Account Number/Code</b>	<b>f. Form of Payment</b>	<b>g. Date</b> (mm/dd/yyyy)	<b>h. Amount</b>
	Portrait on a Button 1001 S. Marshall Suite 123 Winston-Salem, NC 27101		Buttons		Check (309)		\$ 262.50
	<b>b. If Contribution to County Committee, specify:</b>		<b>c. If Coordinated Party Expense, list office:</b>		<b>i. If Amendment, choose change type:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete		
<b>j. Election Cycle Sum To Date</b> \$							
<b>5. Total only this Page</b>							\$
<b>6. Total of ALL CRO-1310 Related Pages</b> (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)							

# In-Kind Contributions

Page \_\_\_\_ of \_\_\_\_

1. Name of Committee or Fund		2. ID Number	
<div style="font-family: cursive; font-size: 1.2em;">JOHN POLITE FOR SHERIFF</div>			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)
	<div style="font-family: cursive; font-size: 1.2em;">MILES COMPUTERS SERVICES 515 W. 14th (MILES HARRY) W-S, NC 27105</div>	<div style="font-family: cursive; font-size: 1.2em;">COMPUTER SERVICES</div>	<div style="font-family: cursive; font-size: 1.2em;">03/16/2012</div>
	e. Fair Market Amount		\$600.00
b. Type of Contributor		f. If Amendment, choose change type:	
<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source		<input type="checkbox"/> Add <input type="checkbox"/> Delete	
		g. Election Cycle Sum to Date	
		\$	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)
	e. Fair Market Amount		\$
b. Type of Contributor		f. If Amendment, choose change type:	
<input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source		<input type="checkbox"/> Add <input type="checkbox"/> Delete	
		g. Election Cycle Sum to Date	
		\$	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)
	e. Fair Market Amount		\$
b. Type of Contributor		f. If Amendment, choose change type:	
<input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source		<input type="checkbox"/> Add <input type="checkbox"/> Delete	
		g. Election Cycle Sum to Date	
		\$	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)
	e. Fair Market Amount		\$
b. Type of Contributor		f. If Amendment, choose change type:	
<input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source		<input type="checkbox"/> Add <input type="checkbox"/> Delete	
		g. Election Cycle Sum to Date	
		\$	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)
	e. Fair Market Amount		\$
b. Type of Contributor		f. If Amendment, choose change type:	
<input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source		<input type="checkbox"/> Add <input type="checkbox"/> Delete	
		g. Election Cycle Sum to Date	
		\$	
4. Total only this Page			\$
5. Total of ALL CRO-1510 Pages (only show on last page)			\$
(This line must be on line 16 of Detailed Summary Page CRO-1100)			

- ☐ The ending balance is negative. The Committee cannot operate on a negative balance.
- ☐ Some of the occupation information was incomplete or incorrect on the Itemized Receipts page(s).
- ☐ A contribution from a business entity/non-registered committee was listed. You must supply more information regarding this contributor to show that it is a non-profit organization, a registered committee with the State Board of Elections or other North Carolina county board of elections, or other allowable contributor.
- ☐ The purpose of expenditure was not listed on the Itemized Disbursements page.
- ☐ We are in receipt of a Final Report, but are unable to close the Committee because there is a remaining balance of \$\_\_\_\_\_.
- ☐ No matching "In Kind" entry. "In Kind" contributions must be disclosed in the Itemized Receipts and Disbursements pages. You will also need to amend your "Detailed Summary Page" to reflect these changes.
- ☐ Contributions from the following contributors exceed the \$4,000 per election limit:

\_\_\_\_\_ on \_\_\_\_\_  
\_\_\_\_\_ on \_\_\_\_\_

The contribution amount exceeding \$4,000 must be returned to the contributor, a copy of the refund check sent to this office, and the refund reported on the next scheduled report. If the contributor is the spouse, sibling, or parent of the candidate, please advise in writing.

- ☒ OTHER Loan Proceeds on CRO-1410 do not match total shown on Detailed Summary sheet.
- ☒ Totals on Detailed Summary sheet (CRO-1100) do not equal

Please send your reply to : Campaign Reporting Office  
Forsyth County Board of Elections  
680 W. Fourth Street  
Winston-Salem, NC 27101-2730

If you have any questions please refer to the Campaign Reporting section on the SBOE website, [www.sboe.state.nc.us](http://www.sboe.state.nc.us), or call (336) 727-2162.

FOR THE CAMPAIGN REPORTING OFFICE:

Bonnie A. Myers  
Campaign Reporting Staff Member

- ☐ The ending balance is negative. The Committee cannot operate on a negative balance.
- ☐ Some of the occupation information was incomplete or incorrect on the Itemized Receipts page(s).
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- ☐ The purpose of expenditure was not listed on the Itemized Disbursements page.
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- ☐ Contributions from the following contributors exceed the \$4,000 per election limit:

\_\_\_\_\_ on \_\_\_\_\_  
 \_\_\_\_\_ on \_\_\_\_\_

The contribution amount exceeding \$4,000 must be returned to the contributor, a copy of the refund check sent to this office, and the refund reported on the next scheduled report. If the contributor is the spouse, sibling, or parent of the candidate, please advise in writing.

- ☒ OTHER CRO-1000 DISCLOSURE REPORT COVER SHEET- #10. Period Covered-  
The period covered is the date bank account was opened through April 20.
- ☒ Cash on hand at start of Election cycle should have been -0- (CRO-1100) #4&5
- ☒ CRO-1510 & CRO-1210-In-Kind contributions can be from individuals only
- ☒ CRO-1310- Disbursement to Miller the Printer is dated after the reporting period ended.

Please send your reply to : Campaign Reporting Office  
 Forsyth County Board of Elections  
 680 W. Fourth Street  
 Winston-Salem, NC 27101-2730

If you have any questions please refer to the Campaign Reporting section on the SBOE website, [www.sboe.state.nc.us](http://www.sboe.state.nc.us), or call (336) 727-2162.

FOR THE CAMPAIGN REPORTING OFFICE:

Bonnie D. Myers  
 Campaign Reporting Staff Member