

Disclosure Report Cover Sheet

Correction

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 <i>John Polite for Sheriff</i>			6. Date <i>7-8-02</i>	
2. Address <i>1983 Emorywood Road</i>			7. ID Number	
3. City <i>Rural Hall</i>	4. State <i>NC</i>	5. Zip <i>27045</i>	8. Phone <i>969-9438</i>	

9. Type of Report <i>2002 Second Quarter Plus Report GS163-2789</i>	10. Period Covered Start <i>04-21-02</i> End <i>06-30-02</i>	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
Nadine Clements

14. Assistant Treasurer Name(s)

15. Custodian of Books Name
John Polite for Sheriff

16. Bank/Depository/Credit Account Information

a. Name	b. Purpose	c. Code	d. Period Begin Balance
<i>BB+T Bank</i>	<i>For all Campaign expenses</i>		<i>\$ 1554.08</i>
			\$
			\$
			\$
			\$
			\$

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 _____ *7-8-02* _____
 Signature of Appointed Treasurer or Candidate Date

Detailed Summary

Correction

1. Name of Committee or Fund		2. Type of Report		3. ID Number	
John Polite for Sheriff		Financial			
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			\$.00		
5) Cash on Hand at Start of Present Reporting Period		\$ 1554.08			
RECEIPTS					
6) Contributions from Individuals	(CRO-1210)	\$ 1600.00	\$ 5050.00		
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$		
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$		
9) Loan Proceeds	(CRO-1410)	\$	\$ 751.00		
10) Refunds & Reimbursements to Committee	(CRO-1240)	\$	\$		
11) Other Receipt Sources	(CRO-1250)				
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$		
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$	\$		
11c) Outside Sources of Income	(CRO-1250)	\$ 2621.00	\$ 2621.00		
12) TOTAL RECEIPTS	(Add lines 6, 7, 8, 9, 10, 11a, 11b, and 11c)	\$ 4221.00	\$ 8422.00		
EXPENDITURES					
13) Disbursements	(CRO-1310)				
13a) Operating Expenditures	(CRO-1310)	\$ 4373.55	\$ 6420.47		
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		
17) TOTAL EXPENDITURES	(Add lines 13a, 13b, 13c, 14, 15, and 16)	\$ 4373.55	\$ 7020.47		
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)	\$ 1,401.53	\$ 1,401.53		
Additional Information					
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	
John Polite 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
	Constance Smith 4009 Village Place Winston-Salem, NC 27127	0000000000	Check	05/26/2002	<input type="checkbox"/>	<input type="checkbox"/>	\$100.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field	j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date		\$	
City of Winston-Salem							
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
	Travis H. Simpson 2123 E. 23rd Street Winston-Salem, NC 27105	0000000000	Check	06/13/2002	<input type="checkbox"/>	<input type="checkbox"/>	\$100.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field	j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date		\$	
Lawyer							
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. Noble Sr 146 Ruth Ct. Winston-Salem, NC 27127	0000000000	Check	06/04/2002	<input type="checkbox"/>	<input type="checkbox"/>	\$100.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field	j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date		\$	
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
	Alan Caldwell 1370 Kerner Road Kernerville, NC 27284	0000000000	Check	04/30/2002	<input type="checkbox"/>	<input type="checkbox"/>	\$100.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field	j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date		\$	
RJ Reynolds							
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. Shelton Sr 315 Retnuh Dr Winston-Salem, NC 27105	0000000000	Check	04/29/2002	<input type="checkbox"/>	<input type="checkbox"/>	\$500.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field	j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date		\$	
Self-Employed							
4. Total only this Page						\$ 900	
5. Total of ALL CRO-1210 Pages (only show on last page)						\$ 1600	
(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		
John Polite 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	
	David Plummer 3801 Indiana Ave Winston-Salem, NC 27105	00000000	check	05/15/2002	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00	
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$	
	c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
	Self Employed	<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	
	Willard L. McCloud Jr. 620 N. Dunleith Ave Winston-Salem, NC 27101	00000000	check	04/25/2002	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00	
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$	
	c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
	Self Employed	<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	
	Bernard Scales Jr 1829 Pleasant St. Winston-Salem, NC 27107	00000000	check	05/29/2002	<input type="checkbox"/>	<input type="checkbox"/>	\$ 500.00	
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$	
	c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
	Brick Mason	<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				<input type="checkbox"/>	<input type="checkbox"/>	\$	
	c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
		<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$	
	c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
		<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
4. Total only this Page							\$ 700	
5. Total of ALL CRO-1210 Pages (only show on last page)							\$ 1600	
(This line must be on line 6 of Detailed Summary Page CRO-1100)								

Other Receipt Sources

1. Name of Committee or Fund				2. ID Number	
John Polite for Sheriff					
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>					
<input type="checkbox"/> Interest		<input type="checkbox"/> Contributions from Not-for-Profit Organizations		<input type="checkbox"/> Outside Sources of Income	
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
					\$
					\$
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		h. If Not-for-Profit, list Fed ID #:	
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
	John Polite for Sheriff Campaign 1983 Emorywood Rd Rural Hall, NC 27045				\$ 2621
					\$
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		h. If Not-for-Profit, list Fed ID #:	
	Fundraiser				
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
					\$
					\$
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		h. If Not-for-Profit, list Fed ID #:	
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
					\$
					\$
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		h. If Not-for-Profit, list Fed ID #:	
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
					\$
					\$
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		h. If Not-for-Profit, list Fed ID #:	
5. Total only this Page					\$ 2621
6. Total of ALL CRO-1250 Related Pages <i>(only show on last page)</i>					\$
<i>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</i>					
<i>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</i>					
<i>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</i>					

Disbursements

Correction

1. Name of Committee or Fund						2. ID Number		
John Polite for Sheriff								
3. Type of Disbursement (Please use separate CRO-1330 forms for each type of Disbursements.)								
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures				
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	US Postal Service 7840 North Point Blvd Winston-Salem, NC 27105/06			Postage	602200000	Check	04/08/2002	\$ 3.40
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	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Lowe's University Parkway Winston-Salem, NC			Office Supplies	602200000	Check	05/01/2002	\$ 26.96
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	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Miller the Printer 616 N Trade Street Winston-Salem, NC 27101			Posters	602200000	Check		\$ 678.62
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	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Staples 436 Hanes Mill Road Winston-Salem, NC 27105			Office Supplies	602200000	Check	05/06/2002	\$ 15.96
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	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Kinko's Copies 232 S Stratford Rd Winston-Salem, NC 27103			Brochures	602200000	Check	05/10/2002	\$ 390.06
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	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$	
5. Total only this Page							\$ 1115.00	
6. Total of ALL CRO-1310 Related Pages (only show on last page)							\$	
<small>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</small>								
<small>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</small>								
<small>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</small>								

Disbursements

1. Name of Committee or Fund						2. ID Number	
John Polite for Sheriff							
3. Type of Disbursement (Please use separate CRO-1330 forms for each type of Disbursements.)							
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures			
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Henry S. Lewis 795 Crawford Rd. At Pleasant Church Winston-Salem, NC 27105		Church Aid	6180000000	check	05/11/2002	\$ 25.00
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	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Bell South 629 W 5th Street Winston-Salem, NC 27101		Telephone Bill	6180000000	check	05/22/2002	\$ 65.60
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	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Bell South 629 W 5th Street Winston-Salem, NC 27101		Telephone Bill Additional amt due	6180000000	check	06/16/2002	\$ 30.00
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	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Bell South 629 W 5th Street Winston-Salem, NC 27101		Telephone Bill	6180000000	check	06/20/2002	\$ 68.12
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	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Kinko Copies 232 S Stratford Rd Winston-Salem, NC 27103		Copies	6180000000	check	7/14/02	\$ 339.47
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	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$	
5. Total only this Page						\$528.19	
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

"Correction"

1. Name of Committee or Fund John Polite for Sheriff						2. ID Number		
3. Type of Disbursement (Please use separate CRO-1330 forms for each type of Disbursements.)								
<input checked="" type="checkbox"/> Operating Expenses				<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures		
* 4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	R K Blayins Salvage Discount 4300 Kernsville Road Winston-Salem, NC 27284			Stacks for putting signs in yards	620071002000	Check	04/29/2002	\$ 42.60
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	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Phoenix News paper 545 Trade street Winston-Salem, NC 27101			Ads	620071002000	Check	4/29/02	\$ 400.00
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	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Staples 430 Hanes Mill Road Winston-Salem, NC 27105			Office Supplies	620071002000	Check	04/24/2002	\$ 12.87
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	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Winston Lake YMCA 901 Waterworks Road Winston-Salem, NC 27101			Contribution	620071002000	Check	05/02/2002	\$ 80.00
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	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Portrait on a Button 1001 S. Marshall Suite 123 Winston-Salem, NC 27101			Buttons	620071002000	check		\$ 112.00
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	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$	
5. Total only this Page							\$ 647.47	*
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

1. Name of Committee or Fund		2. ID Number					
John Polite for Sheriff							
3. Type of Disbursement (Please use separate CRO-1330 forms for each type of Disbursements.)							
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures			
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)	d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount	
	US Postal Service 7840 North Point Blvd. Winston-Salem, NC 27108/02	Postage	6200000000	check	05/10/2002	\$ 136.49	
	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	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)	d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount	
	Tony's Lounge Jetway Shopping Center Winston-Salem, NC	Fundraiser	6200000000	check	05/25/2002	\$ 125.00	
	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	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)	d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount	
	Louell Signs 2461 North Liberty St Winston-Salem, NC 27106	Signs	6200000000	check	06/10/2002	\$ 1,790.00	
	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	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)	d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount	
	STAPLES 430 Hanes Mills Road Winston-Salem, NC 27105	Office Supplies	6200000000	check	06/08/2002	\$ 31.40	
	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	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)	d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount	
						\$	
	b. If Contribution to County Committee, specify:	c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$	
5. Total only this Page						\$ 2,082.89	
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)							

Outstanding Loans

1. Name of Committee or Fund			2. ID Number		
John Polite for Sheriff					
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	h. Original Loan Amount
	John Polite for Sheriff 1983 Emorywood Road Rural Hall, NC 27045	03/17/2002			\$ 757.00
	e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance	
		L. Polite, Sheriff, Forsyth County		757.00	
	g. Security Pledged				\$ 757.00
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete					
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	h. Original Loan Amount
					\$
	e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance	
	g. Security Pledged				\$
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete					
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	h. Original Loan Amount
					\$
	e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance	
	g. Security Pledged				\$
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete					
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	h. Original Loan Amount
					\$
	e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance	
	g. Security Pledged				\$
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete					
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	h. Original Loan Amount
					\$
	e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance	
	g. Security Pledged				\$
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete					
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	h. Original Loan Amount
					\$
	e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance	
	g. Security Pledged				\$
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete					
4. Total only this Page					\$
5. Total of ALL CRO-1430 Pages (only show on last page)					\$
(This line must be on line 24 of Detailed Summary Page CRO-1100)					

CLERK OF ELECTIONS

SEP 17 02

RECEIVED

Forsyth County Board of Elections
680 W. Fourth Street
Winston-Salem, NC 27101-2730

Attention: Bonnie S. Myers

Re: Fundraiser Report

The Campaign Committee for John Polite for Sheriff held a fundraiser in the parking lot of his campaign office. His offices are located in the Golden Mutual Insurance Building, 1225 E 5th street. The fundraiser was held August 17, 2002.

The fundraiser included a yard sale with the donation of cloths valued at \$300.00 and fish sale of \$5.00 each.

The expenses incurred total \$273.50. (Newspaper ad in The Chronicle-\$52.16 and purchase of fish at Ogburn Station-\$221.34)

Nadine Clements
Treasurer for John Polite for Sheriff