

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 John Polite for Sheriff				6. Date SEP 17 02	
2. Address 1983 Emorywood Road				7. ID Number 8-30-02	
3. City Rural Hall		4. State NC	5. Zip 27045	8. Phone 969-9431	
9. Type of Report 2002 Interim Report				10. Period Covered Start 06-30-02 End 08-24-02	
12. Type of Committee or Fund (Check one)				11. Amendment ☐ Yes ☒ No	
☐ Candidate Campaign		☐ Party		☐ Joint Fundraiser	
☐ PAC		☐ Referendum		☐ "Booster Fund"	
☐ Other Fund:		☐ Soft Money Account		☐ Building Fund	
13. Treasurer Name Nadine Clement					
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		
BB+T Bank	For all Campaign expenses		\$ 1,401.53		
			\$		
			\$		
			\$		
			\$		
			\$		

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 M. Clement
Signature of Appointed Treasurer or Candidate

8/30/02
Date

Detailed Summary

1. Name of Committee or Fund		2. Type of Report		3. ID Number	
John Polite for Sheriff					
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			\$		
5) Cash on Hand at Start of Present Reporting Period		\$ 1401.53			
RECEIPTS					
6) Contributions from Individuals	(CRO-1210)	\$ 6435.00	\$ 11,485.00		
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$		
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$		
9) Loan Proceeds	(CRO-1410)	\$ 1000.00	\$ 1751.00		
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)	\$ 2918.00	\$ 5279		
12) TOTAL RECEIPTS	(Add lines 6, 7, 8, 9, 10, 11a, 11b, and 11c)	\$ 10,153.00	\$ 18,515.00		
EXPENDITURES					
13) Disbursements	(CRO-1310)				
13a) Operating Expenditures	(CRO-1310)	\$ 7210.30	\$ 13,630.77		
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)	\$ 3985.00	\$ 4885.00		
17) TOTAL EXPENDITURES	(Add lines 13a, 13b, 13c, 14, 15, and 16)	\$ 11,195.30	\$ 18,215.77		
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)	\$ 359.23	\$ 359.23		
Additional Information					
19) Non-Monetary Gifts Given to Committees	(CRO-1330)	\$			
20) Outstanding Loans (including ones from other campaigns)	(CRO-1430)	\$ 751.00			
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)	\$			

Correction

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	
	Alma Keen 2023 E. End Blvd Winston-Salem, NC 27101				☐	☐	\$ 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						\$		
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 Webster 800 Cameron Ave Winston-Salem, NC 27101				☐	☐	\$ 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						\$		
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 Beatty 125 Scarlett Oak Way Fairburn, Ga 30213				☐	☐	\$ 398.00	
	b. Job Title/Profession				☐	☐	\$	
	c. Employer's Name/Specific Field				☐	☐	\$	
j. If Amendment, choose change type:						k. Election Cycle Sum to Date		
☐ Add ☐ Delete						\$		
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 Shelton 315 Retnuh Drive Winston-Salem, NC 27106				☐	☒	\$ 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						\$		
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						\$ 468.00		
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

1. Name of Committee or Fund						2. ID Number		
<u>John Polite for Sheriff</u>								
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		
✓ <u>Jimmy Durham</u> <u>P.O. Box 577</u> <u>East Bend, NC 27608</u>	0000000000	<u>check</u>	<u>07/30/02</u>	☐	☐	\$ <u>1,000.00</u>		
				☐	☐	\$		
				☐	☐	\$		
				☐	☐	\$		
b. Job Title/Profession	j. If Amendment, choose change type:			k. Election Cycle Sum to Date				
<u>Deputy</u>	☐ Add ☐ Delete			\$				
c. Employer's Name/Specific Field								
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		
✓ <u>Don Popin</u> <u>140 S Stratford Rd</u> <u>Winston-Salem, NC 27104</u>	0000000000	<u>check</u>	<u>8/14/02</u>	☐	☐	\$ <u>100.00</u>		
				☐	☐	\$		
				☐	☐	\$		
				☐	☐	\$		
b. Job Title/Profession	j. If Amendment, choose change type:			k. Election Cycle Sum to Date				
<u>Owen Service Station</u>	☐ Add ☐ Delete			\$				
c. Employer's Name/Specific Field								
<u>Self-Employed</u>								
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		
✓ <u>Harvy Smooth</u>	0000000000	<u>Money Order</u>	<u>07/17/02</u>	☐	☐	\$ <u>200.00</u>		
				☐	☐	\$		
				☐	☐	\$		
				☐	☐	\$		
b. Job Title/Profession	j. If Amendment, choose change type:			k. Election Cycle Sum to Date				
	☐ Add ☐ Delete			\$				
c. Employer's Name/Specific Field								
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		
✓ <u>Michael A. Grace</u> <u>390 Gaither Road</u> <u>Winston-Salem, NC 27101</u>	0000000000	<u>check</u>	<u>07-19-02</u>	☐	☐	\$ <u>200.00</u>		
				☐	☐	\$		
				☐	☐	\$		
				☐	☐	\$		
b. Job Title/Profession	j. If Amendment, choose change type:			k. Election Cycle Sum to Date				
<u>Lawyer</u>	☐ Add ☐ Delete			\$				
c. Employer's Name/Specific Field								
<u>Self-Employed</u>								
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		
✓ <u>Cedrick Russel</u> <u>1616 Engle Crest Dr.</u> <u>Pfafftown, NC 27040</u>	0000000000	<u>check</u>	<u>07-16-02</u>	☐	☐	\$ <u>250.00</u>		
				☐	☐	\$		
				☐	☐	\$		
				☐	☐	\$		
b. Job Title/Profession	j. If Amendment, choose change type:			k. Election Cycle Sum to Date				
<u>Funeral Director</u>	☐ Add ☐ Delete			\$				
c. Employer's Name/Specific Field								
<u>Self-Employed</u>								
4. Total only this Page						\$ <u>1750.00</u>		
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)								

Other Receipt Sources

Page 1 of 1

1. Name of Committee or Fund John Polite for Sheriff		2. ID Number		
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>				
☐ Interest		☐ Contributions from Not-for-Profit Organizations		☐ 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)
	Compassion Committee for John Polite		Cash	08/15/02
	Golden Mutual Insurance Building			
	Wilmington-Salem NC 27101			
		e. Amount		
				\$ 3,658.00
				\$
				\$
f. If Outside Source of Income, explain: Fundraiser		g. If Amendment, choose change type: ☐ Add ☐ 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: ☐ Add ☐ 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: ☐ Add ☐ 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: ☐ Add ☐ 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: ☐ Add ☐ Delete		h. If Not-for-Profit, list Fed ID #:
5. Total only this Page				\$ 3658.00
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>				

In-Kind Contributions

Page 1 of 1

1. Name of Committee or Fund		2. ID Number	
John Polite for Sheriff			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)
	Kelsher Communications, Inc 125 Commerce Drive, Suite J Fayetteville, Ga 30214	Commercials	08/23/02
			e. Fair Market Amount \$ 3985.00
			\$
b. Type of Contributor		f. If Amendment, choose change type:	
☐ Individual ☐ Party Committee ☐ Other Political Committee ☐ Other Receipt Source		☐ Add ☐ 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:	
☐ Individual ☐ Party Committee ☐ Other Political Committee ☐ Other Receipt Source		☐ Add ☐ 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:	
☐ Individual ☐ Party Committee ☐ Other Political Committee ☐ Other Receipt Source		☐ Add ☐ 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:	
☐ Individual ☐ Party Committee ☐ Other Political Committee ☐ Other Receipt Source		☐ Add ☐ 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:	
☐ Individual ☐ Party Committee ☐ Other Political Committee ☐ Other Receipt Source		☐ Add ☐ 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:	
☐ Individual ☐ Party Committee ☐ Other Political Committee ☐ Other Receipt Source		☐ Add ☐ Delete	
		g. Election Cycle Sum to Date \$	
4. Total only this Page		\$ 3985.00	
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)			

Disbursements

Page 1 of 4

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.)							
☒ 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
	Advertising & Supply 7630 Cass Street Omaha, NE 68114		Window Decals	0000000000	Check	07/09/02	\$ 306.34
	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 \$	
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
	Blair Enterprises 1001 S. Marshall St. Su. K 2-35 Bx 36 Winston-Salem, NC 27101		Wh. Tee Shirts	0000000000	Check	07/14/02	\$ 550.00
	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 \$	
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
	Reggie Lovell 2401 North Liberty Street Winston-Salem, NC 27105		Signs	0000000000	Check	07/24/02	\$ 442.00
	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 \$	
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
	Reggie Lovell 2401 North Liberty Street Winston-Salem, NC 27105		Signs (pd Balance)	0000000000	Check	08/20/02	\$ 442.00
	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 \$	
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 / Agress Polite 430 Hanes Mill Road Winston-Salem NC 27105		Campaign Supplies	0000000000	Check	7/26/02	\$ 57.18
	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							\$ 1798.62
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 2 of 4

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.)							
☐ 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
	The Chronicle 617 N. Liberty Street Winston-Salem, NC 27101		Newspaper Ad for fundraiser Fish Fry	0100000000	check	08/13/02	\$ 52.16
	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 \$
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
	Kelsner Communication 125 Commerce Drive, Suite J Fayetteville, Georgia 30214		Commercials	0100000000	check	08/03/02	\$ 500.00
	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 \$
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
	Kinkols 1640 Sardis R. N. Suite 100 Charlotte, NC 28270		Campaign Supplies (folding shubs)	0100000000	check	08/10/02	\$ 1,348.20
	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 \$
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
	Ogburn Station Meat Market 4194 Glenn Ave Winston-Salem, NC		Fish for Fundraise	0100000000	check	08/16/02	\$ 221.34
	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 \$
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
	Costco #361 Winston-Salem, NC		Supplies for Fundraise	0100000000	check	08/16/02	\$ 57.37
	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							\$ 2179.07
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 <u>John Polite for Sheriff</u>						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
	Time Warner Cable Adcast 7029 Albert Pick Rd Suite 200 Greensboro, NC 27409		TV Ads	0000000000	Check	08/05/09	\$ 1,080.00
	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 \$	
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
	U.S. Postal Service Winston-Salem, NC		Stamps	0000000000	Check	08/21/02	\$ 114.68
	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 \$	
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
	Lovell Signs 2401 North Liberty Street Winston-Salem, NC 27105		Campaign Signs	0000000000	Check	08/21/02	\$ 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 \$	
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
	BellSouth 629 West 5th Street Winston-Salem, NC 27101		Telephone Bill	0000000000	Check	07/18/02	\$ 68.40
	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 \$	
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
	Class that Never Wins		Ad	0000000000	Check	07/26/02	\$ 50.00
	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 \$	
5. Total only this Page							\$ 2213.08
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.)							
☒ 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
	Genesis Ads Genesis Victory Outreach Ctr 1882 Old Hollow Rd Waxhorough, NC 27051		Ad	0000000000	Check	03/01/02	\$ 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		\$
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	0000000000	Check	08/23/02	\$ 74.53
	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		\$
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
	Lovell Signs 2401 N. Liberty Street Winston-Salem, NC 27105		Signs	0000000000	Check	08/21/02	\$ 895.00
	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		\$
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
					☐ Add ☐ 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
					☐ Add ☐ Delete		\$
5. Total only this Page						\$ 1019.53	
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)							

Corrected

Outstanding Loans

Page 1 of 1

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 %
	John Polite 1983 Emorywood Rd Rural Hall, NC 27045	08/12/02		
	e. Job Title/Profession	f. Employer's Name/Specific Field		h. Original Loan Amount
	g. Security Pledged			i. Loan Balance
	j. If Amendment, choose change type: ☐ Add ☐ Delete			\$ 257.00
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 %
	e. Job Title/Profession	f. Employer's Name/Specific Field		h. Original Loan Amount
	g. Security Pledged			i. Loan Balance
	j. If Amendment, choose change type: ☐ Add ☐ 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 %
	e. Job Title/Profession	f. Employer's Name/Specific Field		h. Original Loan Amount
	g. Security Pledged			i. Loan Balance
	j. If Amendment, choose change type: ☐ Add ☐ 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 %
	e. Job Title/Profession	f. Employer's Name/Specific Field		h. Original Loan Amount
	g. Security Pledged			i. Loan Balance
	j. If Amendment, choose change type: ☐ Add ☐ 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 %
	e. Job Title/Profession	f. Employer's Name/Specific Field		h. Original Loan Amount
	g. Security Pledged			i. Loan Balance
	j. If Amendment, choose change type: ☐ Add ☐ 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 %
	e. Job Title/Profession	f. Employer's Name/Specific Field		h. Original Loan Amount
	g. Security Pledged			i. Loan Balance
	j. If Amendment, choose change type: ☐ Add ☐ 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 %
	e. Job Title/Profession	f. Employer's Name/Specific Field		h. Original Loan Amount
	g. Security Pledged			i. Loan Balance
	j. If Amendment, choose change type: ☐ Add ☐ Delete			\$
4. Total only this Page				\$ 757.00
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)				

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CRO-1410