

Disclosure Report Cover Sheet

COPY

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 Schatzman for Sheriff				6. Date 8/28/02	
2. Address 3880 Vest Mill Road Suite 9				7. ID Number	
3. City Winston-Salem		4. State NC	5. Zip 27103	8. Phone 336-794-0988	
9. Type of Report INTERIM DISCLOSURE REPORT				10. Period Covered Start 7-1-02 End 8-24-02	
11. Amendment <input checked="" type="checkbox"/> No					
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"/> PAC		<input type="checkbox"/> Referendum		<input type="checkbox"/> "Booster Fund"	
Other Fund:		<input type="checkbox"/> Soft Money Account		<input type="checkbox"/> Building Fund	
13. Treasurer Name Wes Brooks 760-1120					
14. Assistant Treasurer Name(s)					
15. Custodian of Books Name Wes Brooks 760-1120					
16. Bank/Depository/Credit Account Information					
a. Name	b. Purpose	c. Code	d. Period Begin Balance		
Southern Community Bank	Campaign receipts & disbursements	SCB	\$ 10,300.76		
			\$		
			\$		
			\$		
			\$		
			\$		

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

Date

Detailed Summary

1. Name of Committee or Fund		2. Type of Report	3. ID Number	
Schatzman for Sheriff		INTERIM DISCLOSURE		
Start of Election Cycle: January 1, 20 <u>02</u>		Total this Period	Total this Election Cycle	For Office Use Only
4) Cash on Hand at Start of Election Cycle			\$ 4301.72	
5) Cash on Hand at Start of Present Reporting Period		\$ 10,300.76		
RECEIPTS				
6) Contributions from Individuals	(CRO-1210)	\$ 7425.00	\$ 23816.25	
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$	
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$ 100.00	
9) Loan Proceeds	(CRO-1410)	\$	\$	
10) Refunds & Reimbursements to Committee	(CRO-1240)	\$	\$	
11) Other Receipt Sources	(CRO-1250)			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 4.19	\$ 23.85	
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$	\$	
11c) Outside Sources of Income	(CRO-1250)	\$	\$	
12) TOTAL RECEIPTS (Add lines 6, 7, 8, 9, 10, 11a, 11b, and 11c)		\$ 7429.19	\$ 23,940.10	
EXPENDITURES				
13) Disbursements	(CRO-1310)			
13a) Operating Expenditures	(CRO-1310)	\$ 1605.24	\$ 9370.86	
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$	
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$	
14) Loan Repayments	(CRO-1420)	\$	\$ 2500.00	
15) Refunds from Committee	(CRO-1320)	\$	\$	
16) In-Kind Contributions	(CRO-1510)	\$ 450.00	\$ 696.25	
17) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, and 16)		\$ 2055.24	\$ 12,567.11	
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)		\$ 15674.71	\$ 15,674.71	
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		

Contributions from INDIVIDUALS

Page 1 of 4

1. Name of Committee or Fund				2. ID Number			
Schatzman 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 BOLES 2930 Reynolds Square Winston-Salem, NC 27106 336.723.6388	[REDACTED]	CK	8/8/02	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$ 450.00
				5/1/02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 50.00
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession	j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
	OWNER	Add Delete		\$			
	c. Employer's Name/Specific Field						
	Smith Phillips Lumber						
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 Davidson 711 East Main St Pilot Mountain, NC 27041 336.368.5478	[REDACTED]	CK	8/2/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 500.00
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession	j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
	134 Sine ss OWNER	Add Delete		\$			
	c. Employer's Name/Specific Field						
	POTTERWALL						
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 N Davis III 1521 Barrington Way W-S, NC 27106 336.760.2772	[REDACTED]	CK	8/8/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 300.00
				4/30/02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 500.00
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession	j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
	Rider / Developer	Add Delete		\$			
	c. Employer's Name/Specific Field						
	Water Edge						
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 Dillard Jr 5145 Shagbark Rd Kernersville, NC 27284 336.720.9629	[REDACTED]	CK	8/2/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 250.00
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession	j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
	Lawyer	Add Delete		\$			
	c. Employer's Name/Specific Field						
	0220CK Bowden Buckle Dillard						
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 Dredak 121 Tall Pine Ct. Lake Wylie, SC 29710 803.831.0007	[REDACTED]	CK	8/8/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 200.00
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession	j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
	Bus owner	Add Delete		\$			
	c. Employer's Name/Specific Field						
	Drd Consulting						
4. Total only this Page							\$ 1700.00
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)							\$

CRO-1210

NC State Board of Elections

February 2002

Contributions from INDIVIDUALS

Page 2 of 4

1. Name of Committee or Fund						2. ID Number		
Schatzman 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	
	Aggregated Individual Contribution	[REDACTED]	CK	8/8/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
	b. Job Title/Profession					<input type="checkbox"/>	\$	
	c. Employer's Name/Specific Field	j. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>				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	
	Aggregated Individual Contribution	[REDACTED]	CK	8/8/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
	b. Job Title/Profession					<input type="checkbox"/>	\$	
	c. Employer's Name/Specific Field	j. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>				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	
	H. J. Runnion, Jr 3521 York Rd W-S, NC 27104 336.732.6552	[REDACTED]	CK	8/8/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 2000	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
	b. Job Title/Profession					<input type="checkbox"/>	\$	
	c. Employer's Name/Specific Field	j. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>				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	
	Gary J Walker 2338 N. Liberty St W-S, NC 27105 336.725.8951	[REDACTED]	CK	8/8/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 300.00	
				1/3/02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 250.00	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
	b. Job Title/Profession					<input type="checkbox"/>	\$	
	c. Employer's Name/Specific Field	j. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>				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	
	Aggregated Individual Contribution	[REDACTED]	CK	8/8/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
	b. Job Title/Profession					<input type="checkbox"/>	\$	
	c. Employer's Name/Specific Field	j. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>				k. Election Cycle Sum to Date \$		
4. Total only this Page						\$ 2550.00		
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 3 of 4

1. Name of Committee or Fund				2. ID Number			
Schatzman 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
	Aggregated Individual Contribution	[REDACTED]	CK	8/8/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 75.00
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
c. Employer's Name/Specific Field		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
	Victor [REDACTED] 1207 [REDACTED] Place [REDACTED] NC 27115 [REDACTED] 20316	[REDACTED]	CK	8/12/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 200.00
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
c. Employer's Name/Specific Field		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
	Leon Locklear 3971 Seaton Road Winston-Salem, NC 27104 336-760-2503	[REDACTED]	CK	8/12/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 2000.00
				11/9/02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 2000.00
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
c. Employer's Name/Specific Field		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
	Donna Canale 2615 Courthouse Rd Winston-Salem, NC 27104 336-768-1431	[REDACTED]	CK	8/12/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 250.00
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
c. Employer's Name/Specific Field		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
	Aggregated Individual Contribution	[REDACTED]	CK	8/12/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100
					<input type="checkbox"/>	<input type="checkbox"/>	\$
					<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
c. Employer's Name/Specific Field		Add Delete				\$	

4. Total only this Page

\$ 2625.00

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)

\$

CRO-1210

NC State Board of Elections

February 2002

Contributions from INDIVIDUALS

Page 4 of 4

1. Name of Committee or Fund							2. ID Number		
Schatzman 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		
	Aggregated Individual Contribution	[REDACTED]	CK	2/12/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00		
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$		
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$		
				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		
	20 Box 58 Reidsville, NC 27023 336.940.5673	[REDACTED]	CK	8/12/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 250.00		
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$		
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$		
				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		
	Dennis Cheek 166 Brook Dr. Winston-Salem, NC 27106 336.768.4949	[REDACTED]	CK	8/12/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 200.00		
	b. Job Title/Profession			4/20/02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 100.00		
	c. Employer's Name/Specific Field			3/26/02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 100.00		
				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		
		[REDACTED]	CK		<input type="checkbox"/>	<input type="checkbox"/>	\$		
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$		
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$		
				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		
		[REDACTED]	CK		<input type="checkbox"/>	<input type="checkbox"/>	\$		
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$		
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$		
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
				Add Delete		\$			
4. Total only this Page							\$ 550.00		
5. Total of ALL CRO-1210 Pages (only show on last page)							\$ 7425.00		
(This line must be on line 6 of Detailed Summary Page CRO-1100)									

CRO-1210

NC State Board of Elections

February 2002

Other Receipt Sources

Page 1 of 1

1. Name of Committee or Fund		2. ID Number		
Schatzman for Sheriff				
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>				
<input checked="" type="checkbox"/> 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)
	Southern Community Bank PO Box 26134 Winston-Salem, NC 27104 68-8500	[REDACTED]	Bank Credit	7/31/02
				\$ 4.19
				\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>		
		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)
				\$
				\$
				\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>		
		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)
				\$
				\$
				\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>		
		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)
				\$
				\$
				\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>		
		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)
				\$
				\$
				\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>		
		h. If Not-for-Profit, list Fed ID #:		
5. Total only this Page		\$ 4.19		
6. Total of ALL CRO-1250 Related Pages <i>(only show on last page)</i>		\$ 4.19		
<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

Page 1 of 1

1. Name of Committee or Fund Schatzman for Sheriff						2. ID Number	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursements.)</i>							
<input 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
	The Positive Influence PO Box 5964 WS, NC 27113 336-765-8855		YARD SIGN DIRECT MAIL	[REDACTED]	CK	8/2/02	\$ 970.66
	b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		j. Election Cycle Sum To Date		
					\$ 16341.79		
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 Positive Influence PO Box 5964 WS, NC 27113 336-765-8855		ADVERTISING	[REDACTED]	CK	8/14/02	\$ 634.53
	b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		j. Election Cycle Sum To Date		
					\$ 16,976.37		
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
				[REDACTED]	CK		\$
	b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		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
				[REDACTED]	CK		\$
	b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		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
				[REDACTED]	CK		\$
	b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		j. Election Cycle Sum To Date		
					\$		
5. Total only this Page						\$ 1695.24	
6. Total of ALL CRO-1310 Related Pages <i>(only show on last page)</i>						\$ 1695.24	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>							
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>							
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							

Loan Proceeds

Page 1 of 1

1. Name of Committee or Fund				2. ID Number	
Schatzman 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 %	i. Account Number/Code
	NONE	e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			k. Amount \$
		h. 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 %	i. Account Number/Code
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			k. Amount \$
		h. 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 %	i. Account Number/Code
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			k. Amount \$
		h. 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 %	i. Account Number/Code
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			k. Amount \$
		h. 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 %	i. Account Number/Code
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			k. Amount \$
		h. 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 %	i. Account Number/Code
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			k. Amount \$
		h. If Amendment, choose change type: Add Delete			
4. Total only this Page					\$
5. Total of ALL CRO-1410 Pages (only show on last page)					\$
(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		
Schatzman 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	
	NONE	d. Original Loan Amount	e. Remaining Balance of Loan	h. Form of Payment	
		\$	\$	i. Repayment Amount	
		f. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>		\$	
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 <input type="checkbox"/> Delete <input type="checkbox"/>		\$	
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 <input type="checkbox"/> Delete <input type="checkbox"/>		\$	
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 <input type="checkbox"/> Delete <input type="checkbox"/>		\$	
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 <input type="checkbox"/> Delete <input type="checkbox"/>		\$	
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 <input type="checkbox"/> Delete <input type="checkbox"/>		\$	
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 <input type="checkbox"/> Delete <input type="checkbox"/>		\$	
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)					

Outstanding Loans

Page 1 of 1

1. Name of Committee or Fund			2. ID Number		
Schatzman 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
	NONE	e. Job Title/Profession	f. Employer's Name/Specific Field		\$
		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 %	h. Original Loan Amount
		e. Job Title/Profession	f. Employer's Name/Specific Field		\$
		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 %	h. Original Loan Amount
		e. Job Title/Profession	f. Employer's Name/Specific Field		\$
		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 %	h. Original Loan Amount
		e. Job Title/Profession	f. Employer's Name/Specific Field		\$
		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 %	h. Original Loan Amount
		e. Job Title/Profession	f. Employer's Name/Specific Field		\$
		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 %	h. Original Loan Amount
		e. Job Title/Profession	f. Employer's Name/Specific Field		\$
		g. Security Pledged			i. Loan Balance
					\$
		j. If Amendment, choose change type: Add Delete			
4. Total only this Page					\$
5. Total of ALL CRO-1430 Pages (only show on last page)					\$
(This line must be on line 20 of Detailed Summary Page CRO-1100)					\$

In-Kind Contributions

Page 1 of 1

1. Name of Committee or Fund		2. ID Number		
Schatzman for Sheriff				
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)	e. Fair Market Amount
	MICKEY W BOLES	WOODEN STAKES	7/17/02	\$ 450.00
				\$
3. Contributor	b. Type of Contributor <input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source	f. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>		g. Election Cycle Sum to Date
				\$ 500.00
				\$
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)	e. Fair Market Amount
				\$
				\$
3. Contributor	b. Type of Contributor <input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source	f. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>		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
				\$
				\$
3. Contributor	b. Type of Contributor <input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source	f. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>		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
				\$
				\$
3. Contributor	b. Type of Contributor <input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source	f. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>		g. Election Cycle Sum to Date
				\$
				\$
4. Total only this Page				\$ 450.00
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)				\$ 450.00