

# COPY

## Disclosure Report Cover

Amendment

☐ Yes☒ No

Please note that this cover sheet cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.  
You must amend the Statement of Organization (CRO-2100A-E) to make those kinds of committee changes.  
Use the Addendum form (CRO-1010) if more entries are needed.

### 1. Committee Information

a. Full Name	c. ID Number
COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF	
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
404 CARPENTER AVE. WINSTON-SALEM, NC 27107	01/25/2006
	e. Phone Number
	336-785-0696

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name
	07/01/2005	12/31/2005	MARK WILLIAMS

6. Type of Committee (Check one)	8. Type of Report (check only one type of report from one category)	9. Special Report Name
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Referendum <input type="checkbox"/> Party <input type="checkbox"/> PAC	<b>Municipal</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special <b>State/County</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First Plus <input type="checkbox"/> Second <input type="checkbox"/> Third Plus <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input checked="" type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special <b>Referendum</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special	

10. Account Information		10. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
BB&T			
b. Purpose	c. Code	b. Purpose	c. Code
CAMPAIGN RECEIPTS AND DISBURSEMENTS	bbt		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 400.00		\$

### 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.

MARK WILLIAMS

Printed Name of Signer



Signature of Appointed Treasurer

01/25/2006

Date

### FOR OFFICE USE ONLY

Date Received:

1-25-2006

Employee:

Judy Spears

Date Postmarked:

RECEIVED

Employee:

Date Scanned:

JAN 25 2006

Delivery Method

- ☐ Normal Mail  
☐ Registered Mail  
☒ Hand Delivered  
☐ Electronically Filed

CRO-1000

NC State Board of Elections  
BOARD OF ELECTIONS  
FORSYTH COUNTY

March 2003

# Detailed Summary

Amendment  
☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF		YEAR END			
Start of Election Cycle: January 1, 2005		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 400.00		\$	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 2,025.00		\$ 2,425.00	
6) Contributions from Individuals (CRO-1210)		\$		\$	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$ 20,000.00		\$ 20,000.00	
10) Refunds/Reimbursements To the 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)		\$		\$	
12) "Goods and Services" Contributions (CRO-1260)		\$		\$	
13) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)		\$ 22,025.00		\$ 22,425.00	
<b>EXPENDITURES</b>					
14) Disbursements (CRO-1310)					
14a) Operating Expenditures (CRO-1310)		\$ 25.80		\$ 25.80	
14b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
14c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
15) Loan Repayments (CRO-1420)		\$		\$	
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$		\$	
17) In-Kind Contributions (CRO-1510)		\$		\$	
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)		\$ 25.80		\$ 25.80	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)		\$ 22,399.20		\$ 22,399.20	
<b>ADDITIONAL INFORMATION</b>					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$			
22) Debts and Obligations owed By the Committee (CRO-1610)		\$			
23) Debts and Obligations owed To the Committee (CRO-1620)		\$			
24) Account Transfers Within the Committee (CRO-1720)		\$			
25) Administrative Support (CRO-1710)		\$		\$	
26) Forgiven Loans (CRO-1440)		\$		\$	
27) 48-Hour Notice Reports Sum		\$		\$	

# Contributions from Individuals

Pg 1 of 2

Amendment

☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
AGGREGATE INDIVIDUAL CONTRIBUTIONS				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date \$
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	bbt	CASH		09/02/2005	\$ 25.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
PHILLIP W MARSHALL P.O. BOX 1336 CLEMMONS, NC 27102				ELECTRICIAN		e. Election Cycle Sum to Date \$ 500.00
				c. Employer's Name/Specific Field		
				SELF-EMPLOYED		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	bbt	CHECK		09/02/2005	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
KATHY A EDENS 1110 BOULDER RD YADKINVILLE, NC 271055				ADMINISTRATOR		e. Election Cycle Sum to Date \$ 500.00
				c. Employer's Name/Specific Field		
				CLEMMONS VILLAGE		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	bbt	CHECK		09/29/2005	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1,025.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,025.00	

# Contributions from Individuals

Pg 2 of 2

Amendment

☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JERRY R MATHIS 3016 MIDDLEBROOK DR CLEMMONS, NC 27012				OWNER			
				c. Employer's Name/Specific Field			
				RAY'S BODY SHOP			
				e. Election Cycle Sum to Date			
				\$		1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	bbt	CHECK		10/25/2005	\$ 1,000.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
				c. Employer's Name/Specific Field			
				e. Election Cycle Sum to Date			
				\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
				c. Employer's Name/Specific Field			
				e. Election Cycle Sum to Date			
				\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1,000.00	
5. Total of ALL CRO-1210 Pages						\$ 2,025.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

# Disbursements

Pg 1 of 1

Amendment

☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
BB&T 121 JONESTOWN RD WINSTON-SALEM, NC 27103  336-733-0215			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:		
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 25.80
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
bbt	AUTO WITHDRAW	CHECK ORDER	11/23/2005	\$ 25.80	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
5. Total only this Page				\$ 25.80	
6. Total of ALL CRO-1310 Pages				\$ 25.80	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

# Loan Proceeds

Pg 1 of 1

Amendment

☐ Yes ☒ No

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF					
<b>3. Lender Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>
LONNIE M MAINES 404 CARPENTER AVE WINSTON-SALEM, NC 27107  336-785-0696			RETIRED WSPD OFFICER		<b>e. Start Date (mm/dd/yyyy)</b>
			<b>c. Employer's Name/Specific Field</b>		07/01/2005
			RETIRED		<b>f. End Date (mm/dd/yyyy)</b> 12/31/2005
<b>g. Rate</b> 5 %	<b>h. Security Pledged</b> N/A	<b>i. Account Code</b> bbt	<b>j. Form of Payment</b> CHECK		<b>k. Amount</b> \$ 20,000.00
<b>l. Full Name of Lending Institution</b>					<b>m. Loan Number</b>
N/A					
<b>4. Endorsers/Makers</b> (The people who guarantee the loan.)					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>
N/A					
			<b>d. Percentage</b> %		<b>e. Amount</b> \$
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>
			<b>d. Percentage</b> %		<b>e. Amount</b> \$
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>
			<b>d. Percentage</b> %		<b>e. Amount</b> \$
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>
			<b>d. Percentage</b> %		<b>e. Amount</b> \$
<b>5. Total of ALL CRO-1410 Pages</b> (This line must be on line 9 of Detailed Summary Page CRO-1100)					\$ 20,000.00

## Loan Proceeds Statement

The individual making a loan to the committee must provide the following information. Failure to provide all of the information requested could be a violation of campaign reporting disclosure laws.

• <b>Name of committee to receive loan:</b>	COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF
• <b>Person lending money to committee (Lender):</b>	LONNIE M MAINES
• <b>Date of loan to committee:</b>	07/01/2005
• <b>Name of lending institution and account number (source):</b>	N/A
• <b>Amount of loan:</b>	\$20,000.00
• <b>Names of all parties responsible for payment of loan (guarantors):</b>	N/A
• <b>Period of loan:</b>	18 MONTHS
• <b>Rate of interest of loan:</b>	5%
• <b>Security pledged for loan:</b>	N/A

I, LONNIE M MAINES, acknowledge that all of the information  
(Person lending money to committee)  
provided is complete, true, and accurate. I further understand I may not forgive a loan  
that has an outstanding balance to any source.

  
\_\_\_\_\_  
Signature of Lender

  
\_\_\_\_\_  
Signature of Treasurer of Committee

This form must be submitted with the disclosure report for which the loan is initially disclosed.

**CAMPAIGN REPORT DISCREPANCIES  
REPLY REQUIRED**

TO:           Treasurer     Mark Williams  
              Committee    Committee to Elect Lonnie Maines for Sheriff  
              Address      353 Jonestown Road, #195  
                              Winston-Salem, NC 27104

FROM:       Campaign Finance Office

REPORT IN QUESTION:  
2005 YESA

DATE:       01/25/2006

A recent preliminary audit of reports filed revealed the following discrepancies. Please supply this office with the missing or corrected information in order to complete the reports. A more detailed audit of the reports listed will be conducted after the following information is provided.

This is your first notice. You must respond within thirty days of receipt of this notice.

Failure to respond will result in noncompliance. In order to comply with the required information, the forms to amend are provided for completion. Amend only the forms required.

- ☐ The depository information was not listed on the Political Committee Disclosure Report.
- ☐ Addresses were either missing or incomplete. Contributions received without the contributor's complete name and mailing address that remain incomplete for forty-five (45) days are considered anonymous and must be paid over to the State Board of Elections for deposit to the general fund of the State. All disbursements must be listed by name and complete mailing address of the payee.
- ☐ Joint contributions, which are prohibited, were listed on the Report of Contributions. You must determine the individual amount of contribution for each contributor.
- ☐ Some or no dates were shown on the reports. A date is required for each entry.
- ☐ Details were not provided for the sums listed on the Detailed Summary Page
- ☐ Method of payment not provided
- ☐ Contributions over \$100 are listed with "cash" being the method of payment.
- ☐ Contributions over \$100 are listed as "aggregated individual contribution" (AIC).
- ☐ 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).

Name of contributor(s):


- ☐ A contribution from a business entity/non-registered committee was listed. The contribution must be paid to the Civil Penalty and Forfeiture Fund and reported as a disbursement on the next report.
- ☐ The purpose of expenditure was not listed on the Itemized Disbursements page.
- ☐ Disbursements for media expenses are paid with cash.
- ☐ Disbursements over \$50 that are not for postage are paid with cash.
- ☐ "Sum to date" information not provided.
- ☐ 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. "InKind" 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 \_\_\_\_\_

\_\_\_\_\_ 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-1210 - Contribution amounts mixed with contribution amounts of the CRO-1205. Please separate and amend with a CRO-1000, CRO-1100. Refer to the 2005 MYSA (Mid Year Semi-Annual report). It would be best to place the \$25 contribution on the CRO-1205 as well in the 2005 YESA (Year End Semi-Annual). Thank you.

Please send your reply to : Judy J. Speas Forsyth County Board of Elections 201 N. Chestnut St. Winston-Salem, NC 27101

If you have any questions please refer to the Campaign Finance section on the SBOE website, [www.sboe.state.nc.us](http://www.sboe.state.nc.us), or call (919)733-7173.

FOR THE CAMPAIGN FINANCE OFFICE:

ICR-001