

Disclosure Report Cover

Amendment	
-	
☐ Yes	No
7 mar 1 mar 2 mar	

Please note tha	at this cover she	et cannot be used	to amend c	ommitte	e info	ormation	such as the	committee ad	dress, 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.									
		se the Addendum	ı form (CRC)-1010) i	f mo	re entrie	s are needed	i.	
1. Committee l	nformation							_	
a. Full Name		n 11 (1.		a ,	A		,	c. ID Number	
		nuly Le	upt for	City	6 C	Herse	L.	20-353	58114
b. Mailing Address								d. Date Filed	
	_	ain St						10/31/	2005
Wins	for Thee	m, MC a	17101					e. Phone Numb	er
								336-7	75-4325
2. Report Year	3. Period Start De	te (mm/dd/yyyy)	4. Period En	ıd Date (m	ım/dd	/уууу)	5. Treasurer	Full Name	
8005	10/11/2	005	10/2	4/200	95	-	Line	da Hob	b5
6. Type of Committ	ee (Check ane)	8. 1	ype of Repor	t (ch	eck on	ly one typ	e of report from	n one category)	
Candidate Cam		· •	nicipal		State	/County		Referendum	
Joint Fundraise	r 🔲 PA	c 📮	Organization			Organizat	ional	Organization	
Referendum	40° 51 15		Thirty-five da	ıy	' ــــا	Quarterly		Pre-referen	dom
7. Type of Fund Soft Money Acc	(if applicable,		Pre-primary		H	First		Final	and Trimes
"Booster Fund"	xoun	恺	Pre-election Pre-runoff		片	Seco	na i Plus	Supplement	iai pinai
Building Fund		ļu.	Semi-annual		H	Four		Special	
	ty Financing Fund	lr ₁	Mid Yes		, ال	Semi-annu		spc.m	
=	ction Year Candida	tes Fund	Year En	_		Mid '		9. Special Report	rt Name
NC Public Camp	paign Financing Fu	nd 🗂	Final	_	Ħ	Year			
Other:			Special		o i	Final			
						Special			
10. Account Info				10. Acc	ount	Inform	ation		
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Waehov	ia								
. Purpose		c. Code		b. Purpo:	e			c. Code	
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receips	-00	d. Period Begin Bal	ance					d. Period Begin	Balance
expens	7° >	s 7959.	18					S	
ERTIFICATIO	N .	 -							
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.									
	HOBBS ted Name of Signe	r	Sign	ature of A	ppoint	ZJOB led Treasu	ids rer		/ 2005 ate
OR OFFICE USE ONLY 11-1-05									
Date Received		31-05	Employ	ee: Ju	ly:	Spea		very Method Normal Mail	4
Date Postmark	ed:		Employe	ee:				Registered Ma Hand Delivere	
Date Scanned:		U3/	Employ)_ .e:				Electronically	
RO-1000		19 8 53	IC State Board	of Election	une .	90	·IIWY	- AUM SUUC	March 2003

FORSKIN COUNTY

EORSYTH CEURTY

Detailed Summary

Amendment

Yes No

1. Committee Full Name (and Fund if applicable)	2. Type of Re	eport	3. ID Number
Committee to Gelet Mally Lught Consider	Pre-u	election	ao-35581119
Start of Election Cycle: January 1, <u>2002</u>)	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 7959.18	
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 2663.	\$ 4452.
6) Contributions from Individuals	(CRO-121 0)		\$ 4452. \$ 16,079.03
7) Contributions from Political Party Committees	(CRO-1220)	1	s 25.
8) Contributions from Other Political Committees	(CRO-123 0)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$
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)	s	\$
13) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)		s 9507.	\$ 40,556-03
EXPENDITURES			
14) Disbursements	(CRO-1310)		
14a) Operating Expenditures	(CRO-1310)	\$ 3561.99	\$ 4651.84
14b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$
14c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
15) Loan Repayments	(CRO-1429)	\$	\$
16) Refunds/Reimbursements From the Committee	(CRO-1326)	S	\$
17) In-Kind Contributions	(CRO-1510)	\$ 78.	s 18.
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)		\$ 3639.99	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)		\$ 13,826.19	\$ 13,826.19
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-143 6)	\$	
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)	\$	S
27) 48-Hour Notice Reports Sum		\$	\$
NC State Boom	1 - CT21		March 2003

Aggregated Contributions from Individuals Page / of 🎩

Page ____ of ______Amendment _____ No

1. Committ	ee Fuli Name (and Fi	and if applicable)			2. ID Number					
Con	Connettee to Est the Mally Leight for City Coursel									
3. Contri	3. Contributor Information									
2. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyy)	y) f. Amount					
Add Remove	117		Coffee	10/15/2005	\$ 18.					
☐ Add Remove	. 117	Check		10/11/2005	· \$ 100.					
☐ Add ☐ Remove	117	ched		10/11/2005	\$ 25					
☐ Add ☐ Remove	117	check		10/10/2005	\$ 25.					
☐ Add ☐ Remove	117	check		10/11/2005	\$ 100					
☐ Add ☐ Remove	117	check		10/11/2005	\$ 160					
☐ Add ☐ Remove	117	Check		10/13/2005	\$ 100					
Add Remove	117	check		10/13/2005	\$ 50.					
Add Remove	117	Check		10/16/2005	\$ 50.					
Add Remove	117	check		10/16/2005	\$ 100.					
Add Remove	117	Check		10/16/2005	\$ 100.					
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Aggregated Contributions from Individuals

Page 2 of 2 Amendment No

1. Committee	Full Name (and Fu	nd if applicable)			2. ID Number
Correr	ittee to	Eslect Mall	y Seight for CO	y Council	80-3528179
	itor Informatio				
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyy)) f. Amount
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Add Remove	117	chick		10/18/2005	\$ 25.
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Contributions from Individuals 1. Committee Full Name (and Fund if applicable) Committee to Elect Molly Leight for City Council 2. ID Number 20-3558119 Add ☐ Remove 3. Contributor Information b. Job Title/Profession d. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) Professor Charles P. Rose c. Employer's Name/Specific Field Wake Forest Univ e. Election Cycle Sum to Date Windon-Salem NC 27106 j. Date (mm/dd/yyyy) i. In-Kind Description . Prior 10/13/2005 Check 250.00 \$ П ☐ Remove ☐ Add 3. Contributor Information d. Comments Full Name, Mailing Address & Phone (include city, state, & zip) refired John W Reed 508 s. Main 5t. Winston-Satem,NC 27101 c. Employer's Name/Specific Field e. Election Cycle Sum to Date 336-722-0486 k. Amount j. Date (mm/dd/yyyy) Prior g. Account Code h. Form of Payment i. In-Kind Description 10/14/2005 \$250.00 check П Remove Add 3. Contributor Information b. Job Title/Profession d. Comments Full Name, Mailing Address & Phone (include city, state, & zip) Professor Thomas E. Roberts 101 Chestrut St. Unit 6 Winston-Salem NC 27101 c. Employer's Name/Specific Field Wake Forest UniV e. Election Cycle Sum to Date a50. j. Date (mm/dd/yyyy) k Amount h. Form of Payment i. In-Kind Description f. Prior g. Account Code 10/14/2005 Check \$ 820.00 1320.00 \$ 4. Total only this Page

CRO-1210

5. Total of ALL CRO-1210 Pages

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NC State Board of Elections

March 200

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Amendment

			6	Amendment	
Pg	2	of	3	Yes	□ No

i. Com	mittee Full Name (s	and Fund if applicable)					D Number	
Committee to Elect Nelly Leight to City Council 20-3558779								
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Pg	4	of	Amendment Yes No	

1. Co	1. Committee Full Name (and Fund if applicable) 2. ID Number									
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	5		6	Amendment	
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1. Committee Full Name (and Fund if applicable)					2. ID Number		
Committee to Elect mily Suight for Coty Council					cil	20-3558779	
2 60	3. Contributor Information Add Remove						
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Contribut	uons irom Politi	cal Party Committees	Pg of		Amendment Yes No
	l Name (and Fund if applica			2.	ID Number
		molly Light for Cit	ylouncil	1	20-3558779
3. Contributor		☐ Add ☐	Remove		
a. Full Name, Mai (include city, sta	iling Address & Phone			b.	Comments
		icusof Forsyth Co	ounty		
				c. 1	Election Cycle Sum to Date
d. Account Code	lo Formacina			\$	25
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i. Account Code e	. Form of Payment	f. In-Kind Description	g. Date (mm/dd/y	Ľ	h. Amount
				,,,,	\$
					\$
					\$
. Contributor In		Add R	emove		
Full Name, Mailing (include city, state,				b. Co	nments
				c. Kle	ction Cycle Sum to Date
Account Code e. 1	Form of Payment	. In-Kind Description	g. Date (mm/dd/yy	yy) la	. Amount
					\$
					\$
					S
Total only thi				S	25_
	CRO-1220 Pages line 7 of Detailed Summary	Peee CRO-1196		\$	25 <u> </u>

Amendment

In-Kind Contributions		Pg of		Amendment Yes No
L. Committee Full Name (and Fund if applicable)			2.	ID Number
Committee to Elect Molly Leight for	or Coty Co	uncil	6	80-3558779
3. Contributor Information		kemove		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Cont Individual	ributor	C.	Comments
	Candidate			
Nuncy G. Dennis 217 Tar Branch Court	Party PAC			
Winston-Saleun, UC 27101	Referendum Other Recei		d.	Election Cycle Sum to Date
e. Description			\$	10
		f. Date (mm/dd/	· · · · · · · · · · · · · · · · · · ·	g. Fair Market Amount
Coffee as fundraiser		10/15/20	05	\$ 78.00
				\$
				s
3. Contributor Information	Add □ Re	move		
a. Full Name, Mailing Address & Phone	b. Type of Contr	ibutor	c. C	ommenis
(include city, state, & zip)	Individual Candidate			
	Party	•	1	
	PAC			
	Referendum		d. E	lection Cycle Sum to Date
	Other Receip	Source	s	
e. Description		f. Date (mm/dd/y	(YY)	g. Fair Market Amount
				\$
				\$
				\$
3. Contributor Information	Add Ren	nove		
Full Name, Mailing Address & Phone	b. Type of Contrib	utor	c. Co	mments
(include city, state, & zip)	Individual Candidate			
	Party			
i	PAC		l	
	Referendum		d. Ek	ection Cycle Sum to Date
	Other Receipt	Source	\$	
Description		f. Date (mm/dd/yy	/y) [g. Fair Market Amount
				\$
				\$
				\$
Total only this Page			\$	78.00
Total of ALL CRO-1510 Pages	· ·			78.00
This line must be on line 17 of Detailed Summary Page CRO-1100)			\$.10.00

Dispuise	ments		P	g of		Yes	☑ No
1. Committee Fu	ll Name (and Fund if applica	ble)			2. IE) Number	
Commit	the vorlect n	sely Seight	for City (ouxil	a	6-355	8779
3. Type of Dis	sbursement (Please use	separate CRO-1310 form	s for each type of D	isbursement)			
Operating E	xpenses	rutions to Candidates/Poli	tical Committees	Coordin	ated Pa	nty Expenditu	res
4. Payee Info		£	Add Re	emove			
	ailing Address & Phone		b. Coordinated (Committee Name	d Co	omments	
(include city, s							
Worter	s graphics Vindle Fan		c Level Perister	ad (Specify)	-		
1723	Vixtle Fan	L.	c. Level Registered (Specify) Federal County:				
Weller	ne, TC 2737	<i>14</i>	State	Municipality:	e. Ek	ection Cycle S	um to Date
					\$	29	81
f. Account Code	g. Form of Payment	h. Purpose		i. Date (mm/dd/yy	уу)	j. Amount	
117	chich (1001)	zurd Sig	ns)	10/12/20	05	\$ 148	?/. —
						\$	
4. Payee Infor	mation		Add 🔲 Re	move			
	lling Address & Phone		b. Coordinated C	ommittee Name	d. Comments		
(include city, sta	· · · · · · · · · · · · · · · · · · ·		4				
Office	Deput our Point B	i	c. Level Registere	d (Specify)	-		
グファケ	and Point B	lod.	Federal County:				
	W5,NC 27104			Municipality:	e. Ele	ction Cycle S	am to Date
	3 2 110 4				\$	34	8.37
f. Account Code	g. Form of Payment	h. Purpose		i. Date (mm/dd/yy)	yy) j	. Amount	
117	Check (1002)	1		10/12/200	5	s 74	:03
167	Checa (1010)	labels + Ca	rtniage	10/21/2005	5	\$ /18	20
4. Payee Inform			Add 🔲 Rer	nove			
	ing Address & Phone		b. Coordinated Co	mmittee Name	d. Cor	mments	
(include city, sta				,			
	Printing	1.4	c. Level Registere	d (Specify)			
235	Sown Run	Lane	Federal	County:			
WSING	2 वपाठा	•	State	Municipality:	e. Elec	tion Cycle St	m to Date
					\$	1353.	14
	g. Form of Payment	h. Purpose		i. Date (mm/dd/yyy	y) ji	Amount	
117	7 Check (1003) door ha		engus 10/14/200		5	\$ 458	3.76
117		post ca	ias	10/18/2005		\$ 343	1.13
5. Total only	this Page				\$	247	7./2.
	LL CRO-1310 Page						
	line 14a of Detailed Summary line 14b of Detailed Summary			olitical Comm)	\$	356	1.99

(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

Amendment

Disburse	ements			Pg	2	of S	<u>گ</u>	Amendment Yes	☐ No
	ull Name (and Fund if applic						2. I	D Number	"
	ittle to belect	nolyBight	for Copy	Coc	uiil	-	a	0-3558	119
3. Type of D		separaté CRO-1319 fort		Disb	ursement.)				
Operating I 4. Payee Info		butions to Candidates/Pol				cording	ted P	arty Expenditure	es .
	Isiling Address & Phone			Remo			11. 4		·
(include city,	. 		b. Coordinated	Com	THILDRE MAI	ne	a c	Comments	
	tmaster								
	1 Station		c. Level Registered (Specify)]		
	C 27168		Federal	֝֟֝֟֝֟֝֟֝֟	County:		L.		
110/10	L 27108		State	L	Municit	xality:	e.E	lection Cycle St	im to Date
f. Account Code	I- r						\$	1173	
	g. Form of Payment	h. Purpose		L	Date (mm/	dd/yyy	<u>y)</u>	j. Amount	
117	Check(1601) stamp:	5	1	0/18/2	005		\$ 483	3.
								\$	
4. Payee Infor			Add R	emo	ve				
•	iling Address & Phone		b. Coordinated	Com	nittee Nam	e	d Co	noments	
(include city, st			4						
	Phoenix		c. Level Register	red (S	pecify)				
	× 17627		☐ Federal	È	County:	\Box			
N5,N6	C 27106		State		Municipa	ulity:	e, Ele	ction Cycle Sm	n to Date
							\$	325.	
f. Account Code	g. Form of Payment	h. Purpose		i. D	ate (mm/d	d/yyyy) j	. Amount	
117	check (1008)	advertises	ment	10	0/21/20	005		\$ 325	
								\$.	
4. Payee Infort			Add 🔲 Re	mov	e	•			
•	ing Address & Phone	2	b. Coordinated C	`omm	ittee Name	d	i. Coz	nments	
(include city, sta									
Jgn-A	-Rama	ี - 1 กิส	c. Level Registere	ed (S-	ecify)	\dashv			
634 D	South Stratf	maku.	Federal		County:				
WSINC	. 27103		State		Municipal	ity: e	Elec	tion Cycle Sum	to Date
							\$	2768	7
Account Code	g. Form of Payment	h. Purpose		i D	ite (mm/dd	/уууу)	j.	Amount	
117	check (1009)	magnetic 5	igns	10	121/20	05	_!	\$ 276	87
							1	\$	
. Total only							\$	1084	.87
	LL CRO-1310 Pages								
	line 14a of Detailed Summary				10 -	1	5	356	1.47
(1 mis une goes in i (This line goes in i	line 14b of Detailed Summary line 14c of Detailed Summary	rage CRO-1100 if Conti Page CRO-1100 if Coo-	rio to C andidates/) linated Pasto Fred	outic	at Comm) rev)				
RO-1310	J Omening y	NC State Board			. wy				March 2003

For Office Use Only
2BOE ID
Follow-Up Daie
Reviewed By

CAMPAIGN REPORT DISCREPANCIES REPLY REQUIRED

TO:		Treasurer	Linda Acree Hobbs		
		Committee	Molly Leight for City	Council	
		Address	516 South Main Stre	et	
			Winston-Salem, NC	27101	
FROM	1:	Campaign Fin	nance Office	REPORT IN QUESTION: Pre-Election	
DATE	ß:	11/02/2005			
office	with the	missing or cor	rected information in order	following discrepancies. Please supply to complete the reports. A more detail owing information is provided.	
This is	your <u>fir</u>	notice.	You must respond within _	thirty days of receipt of this notice.	
			in noncompliance. In orde	r to comply with the required information only the forms required.	on,
	The de	pository inform	nation was not listed on the	Political Committee Disclosure Report	
	Addres contrib days ar deposit	ses were either utor's complete e considered ar to the general	missing or incomplete. Con many and mailing address monymous and must be paid	ontributions received without the s that remain incomplete for forty-five (d over to the State Board of Elections foursements must be listed by name and	(45)
		•	hich are prohibited, were li dividual amount of contrib	sted on the Report of Contributions. You tion for each contributor.	ou
	Some o	r no dates were	e shown on the reports. A	date is required for each entry.	÷
	Details	were not provi	ided for the sums listed on	the Detailed Summary Page	
	Method	l of payment no	ot provided		
	Contrib	outions over \$1	00 are listed with "cash" be	eing the method of payment.	
	Contrib	utions over \$1	00 are listed as" aggregated	d individual contribution" (AIC).	
	The en	ding balance is	negative. The Committee	cannot operate on a negative balance.	

Na	Some of the occupation information was incomplete or incorrect on the Itemized Receipts page(s). me of contributor(s):						
114	inc 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.						
V	OTHER CRO-1210 - Check Election Cycle Sum to Date for Thomas E. Roberts.						
	CRO-1220 - provide mailing address and phone number for African American Caucus of Forsyth County.						
lease	send your reply to: Judy J. Speas 101 N. Chestnut Street, 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, or call (919)733-7173.

FOR THE CAMPAIGN FINANCE OFFICE: