COPY

Disclosure Report Cover

Amendment Yes No

Please note that	t this cover sheet	cannot be used	to amend con	mittee information s	such as the c	ommittee address, treasurer,
	accietant	treasurer custo	odian of books	information, or acco	ount information	tion.
You mu	st amend the State	ement of Organ	nization (CRO	2100A-E) to make the formation of the second	nose kinds of	f committee changes.
1. Committee I		are Addendum		ivity if more chules	are needed.	· · · · · · · · · · · · · · · · · · ·
1. Committee II a. Full Name	погшянон		• · · · _			c. ID Number
Robinson Com	imittee	<u></u>				N1Y803
b. Mailing Address	(include City, State	and Zin Code)			· · · · ·	d. Date Filed
P.O. Box 272	(1111111 01, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0,	<u> </u>				09/19/2005
Winston-Salerr	n, NC 27102				•	e. Phone Number
						336 768-3567
2. Report Year	3. Period Start Dat	e (mm/dd/yyyy)	4. Period End	Date (mm/dd/yyyy)	5. Treasurer F	ull Name
	08/18/2005		09/12/2005	5	non e .	
6. Type of Commit	tee (Check one)	8.	Type of Report	(check only one type		
Candidate Cam		M	unicipal	State/County		Referendum
Joint Fundraise	er 🗖 PAC	l 🗆	Organizational		onal	Organizational
Referendum		<u></u>		Quarterly	Ditto	Pre-referendum
7. Type of Fund	(if applicable, o	cneck one)	Pre-primary Pre-election			Supplemental Final
Soft Money Ac		님	Pre-monoff		i Plus	Annual
Building Fund		ļ-	Semi-annual	Four		Special
	arty Financing Fund	lc	Mid Year	Semi-annu	ıal	
	ection Year Candidat	es Fund	Year End	Mid 1	Year	9. Special Report Name
	npaign Financing Fur		Final	Year Year	End	
Other:			Special	🔁 Final		
-				Special		
10. Account Inf				10. Account Inform		· · · · · · · · · · · · · · · · · · ·
a. Financial Institu	tion Full Name		·	a. Financial Institution	Full Name	
BB&T						
b. Parpose		c. Code		b. Purpose		c. Code
receipts and ex	kpendtures	1				
		d. Period Begin]	Balance			d. Period Begin Balance
						\$
CERTIFICATI	ION	\$ 3,115.00	·			
				one of Article 22 Art	including the	t no funds are commingled
I certify that the with funds for	a federal or off-	n compliance v of-state PAC.	I further say th	at this report is camp	plete, true an	id correct.
	anti-	_		h. Ala		0014010005
1 low	m			WANK !!!	<u> </u>	09/19/2005
P	rinted Name of Sign	er	U Sig	nature of Appointed Treas	surer	Date
FOR OFFICE	USE ONLY					
	0	19-05	E	. Queder Al	Del	livery Method
Date Receiv	/ea: _/-		Employ	m. Jangyap		Normal Mail
Date Postma	orked.		Employ	vee:		Registered Mail
Date Postina				, · · · · · · · · · · · · · · · · ·	- 5	Hand Delivered
Date Scanne	ed:		Employ		- 86	Electronically Filed 5007
CRO-1000			NC State Boa	rd of Elections		50 03 March 2003

Detailed Summary				Amendment	No No
1. Committee Full Name (and Fund if applicable)	2. Type of R	eport	3. П	D Number	
Robinson Committee	Pre-Prima		N1	Y803	
Start of Election Cycle: January 1,	<u>0</u> 2	Total this Reporting Pe			al this on Cycle
4) Cash on Hand at Start		\$ 3,1	15.00	\$	0.00
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	25.00	\$	255.00
6) Contributions from Individuals	(CRO-1210)	\$ 3,	500.00	\$	6,700.00
7) Contributions from Political Party Committees	(CRO-1220)	\$	0.00	\$	
8) Contributions from Other Political Committees	(CRO-1230)	\$	0.00	\$	
9) Loan Proceeds	(CRO-1410)	\$	0.00	\$	
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	0.00	\$	
11) Other Receipt Sources	(CRO-1250)				
11a) Interest on Bank Accounts	(CRO-1250)	\$	0.00	\$	
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$	0.00	\$	
11c) Outside Sources of Income	(CRO-1250)	\$	0.00	\$	
12) "Goods and Services" Contributions	(CRO-1260)	\$	0.00	\$	
13) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)		\$ 3,5	25.00	\$	6,955.00
EXPENDITURES					
14) Disbursements	(CRO-1310)				
14a) Operating Expenditures	(CRO-1310)	\$ 3,1	67.55	\$	3,482.55
14b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	0.00	\$	
14c) Coordinated Party Expenditures	(CRO-1310)	\$	0.00	\$	
15) Loan Repayments	(CRO-1420)	\$	0.00	\$	
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	0.00	\$	
17) In-Kind Contributions	(CRO-1510)	\$	0.00	\$	
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)		\$ 310	67.55	\$	3,482.55
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)		\$ 3,4	72.45	\$	3,472.45
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	0.00		
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$	0.00		
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$	0.00		
24) Account Transfers Within the Committee	(CRO-1720)	\$	0.00		
25) Administrative Support	(CRO-1710)	\$	0.00	\$	
26) Forgiven Loans	(CRO-1440)	S	0.00	\$	
27) 48-Hour Notice Reports Sum		S	0.00	\$	
CRO-1100 NC State Board	of Elections		L		March 2003

Aggrega	ted Contri	butions from I	ndividuals Page	1 of	Amendment 1 Yes I No		
1 Committee	Full Name (and Fu	nd if applicable)		2	. ID Number		
	Committee				N14803		
3. Contribu	tor Information	n					
a. Amend		c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy) f. Amount		
Add		Check	· · ·	08/29/200	5 \$ 25.00		
Add Remove					\$		
Add					\$		
Add		· · · · · · · · · · · · · · · · · · ·			\$		
Add					\$		
Remove Add					\$		
Remove					\$		
Remove							
Add Remove				·	\$		
Add Remove					\$		
Add Remove					\$		
Add					\$		
Add					\$		
Remove Add		· · · · · · · · · · · · · · · · · · ·			\$		
Remove Add		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·				
Remove					\$		
Add Remove					\$		
Add Remove					\$		
Add					\$		
Add			· · · · · ·		\$		
Add				<u> </u>	\$		
Remove Add		<u> </u>		ļ	\$		
Remove		ļ		· · ·			
Add Remove					\$		
Add Remove					\$		
Add Remove					\$		
	nly this Page	• • • • • • • • • • • • • • • • • • •			\$ 25.00		
5. Total o	f ALL CRO-	1205 Pages			\$ 25.00		
(This line must be on line 5 of Detailed Summary Page CRO 1100) March 2003							

CRO-1205

NC State Board of Elections

ł,

Conf	ributions f	rom Individua	ls	Pg	<u>1of_2</u>		Amendment	☑ №
		nd Fund if applicable)				_	Number	
	son Committee					N	11480	13
3 Cont	ributor Inform	ation		Add 🗖 Rer	move			
a. Full N	ame, Mailing Addr	ess & Phone		b. Job Title/Profes	ssion	d. Co	mments	
	le city, state, & zip)			Architect				
	as Stimmel angle Oak Dr.			c. Employer's Nan				
	nons, NC 27012	2-9260		Self-Employe	d	e. El	ection Cycle	Sum to Date
						\$		1,000.00
C. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip). Stien	j. Date (mm/dd/yyy	ry)	k. Amount	
		check	contribution		08/31/20	005	\$	1,000.00
			+				\$	
							•	
			<u></u>				\$	
	ributor Inform ame, Mailing Addr			Add Rer	move ssion	d. C	omments	
	le city, state, & zip)			Real Estate				
Grove	Shugart, Jr			c. Employer's Name/Specific Field		.		
	nestown Rd. n-Salem, NC 2	27104		Shugart Enter	Shugart Enterprises		action Cycle	Sum to Date
	·····, ···					s		2,000.00
		h. Form of Payment	i. In-Kind Descrij		j. Date (mm/dd/yy)		k. Amount	2,000.00
f. Prior	g. Account Code	check	contribution		09/09/20	(1)	\$	2,000.00
							\$	
							\$	
	ributor Inform				move	T		
	ame, Mailing Addr le city, state, & zip)			b. Job Title/Profe	ssi01	ld. C	omments	
	n White	·		Banker	17	1		
4131 V	Vedge Drive wn, NC 27040	0700		c. Employer's Nar Southern Nati				
Fianto	WII, NC 27040	-3103		000000000000000000000000000000000000000		· ·	ection Cycle	Sum to Date
						\$		250.00
. Prior	g. Account Code	b. Form of Payment	i. In-Kind Descri	tion	j. Date (mm/dd/yy		k. Amount	
		Check			08/25/2	005	\$	250.00
							\$	
		1		·····			\$	
			<u> </u>			\$		3,250.00
	al only this P	22C				\$		
[] [] 4. Tot	al only this P al of ALL CH	and the second sec						
4. Tot	al of ALL CH ne must be on line	age RO-1210 Pages 6 of Detailed Summary H		and of Elections		Ψ.	<u>.</u>	March 2003

Contributi	ons from Individu	als	. 1	Pg <u>2</u> of <u>2</u>	_	Yes	No No
1. Committee Full	Name (and Fund if applicable)	· · · · · · · · · · · · · · · · · · ·				Number	
Robinson Con	nmittee				1	<u>J148</u>	03
3. Contributor				temove	-		
a. Full Name, Mai (include city, sta	ing Address & Phone te, & zip)		b. Job Title/Pro		a. C	omments	
Rachael Brool			homemaker				
1656 Reynold	a Rd. 1, NC 27104-1020		c. Employer's N	Name/Specific Field			
WINSton-Salen	1, NC 27 104-1020		Tione		e. El	ection Cycle S	ium to Date
					\$		250.00
f. Prior g. Accou	nt Code h. Form of Payment	i. In-Kind Descri	ption	j. Date (mm/dd/yyy	(y)	k. Amount	
	Check			08/25/20	005	\$	250.00
						\$	
						\$	
3. Contributor	Information		Add 🗖 R	temove			
	ing Address & Phone		b. Job Title/Pro		d. Ce	omments	
(include city, sta	te, & zip)	<u> </u>					
			c. Employer's N	Name/Specific Field			
					e. El	ection Cycle S	Sum to Date
					s		
f. Prior g. Accou	at Code h. Form of Payment	i. In-Kind Descri	ption	j. Date (mm/dd/yy)		k. Amount	
					<u> </u>	\$	
			·····			\$	
						\$	
3. Contributor				temove	1		
a. Full Name, Mail (include city, stat	ing Address & Phone e. & zin)		b. Job Title/Pro	ofession	d. Co	omments	
			c. Employer's N	ame/Specific Field			
					e. El	ection Cycle S	Sum to Date
					\$		
f. Prior g. Accour	t Code h. Form of Payment	i. In-Kind Descri	ption	j. Date (mm/dd/yyy	vy)	k. Amount	
						\$	<u> </u>
						\$	
		-				\$	
		· · ·			s		250.00
	this Page				۳		200.00
1. Total only	this Page LL CRO-1210 Pages			···· .	\$		3,500.00

Disbursen	nents		Pg	<u>, 1</u> of <u>2</u>	Amendm	ent 🔽 No	
1 Committee Full	I Name (and Fund if applica	ble)			2. ID Number		
Robinson Co		· · ·			NIV	803	
3. Type of Disl		separate CRO-1310 forms					
Operating Ex		butions to Candidates/Politi			ted Party Expen	ditures	
4. Payee Infor	mation		Add 🖸 Re				
a. Full Name, Ma	iling Address & Phone		b. Coordinated C	Committee Name	d. Comments		
(include city, st	ate, & zip)		_				
Joy-Maria Le P.O. Box 156	5		c. Level Register	ed (Specify)			
Hamilton NC	, 27840		State	Municipality:	e. Election Cy	cle Sum to Date	
•					\$	660.00	
f. Account Code	g. Form of Payment	h. Purpose		i. Date (mm/dd/yy	yy) j. Amoun	it	
1	check	campaign manag	gement	08/21/2005	\$	100.00	
1	check	campaign manag	gement	08/28/2005	\$	250.00	
4. Payee Infor	mation	8	· <u> </u>				
a. Full Name, Mai	iling Address & Phone		b. Coordinated C	Committee Name	d. Comments		
(include city, sta Joy-Maria Le			c. Level Register	ed (Specify)			
P.O. Box 156			Federal	County:			
Hamilton NC	, 27840		L State	Municipality:	e. Election Cy	cle Sum to Date	
					\$	1,100.00	1160
f. Account Code	g. Form of Payment	h. Purpose		i. Date (mm/dd/yy)	yy) j. Amour	ıt	. .
1	check	campaign manag	gement	09/04/2005	\$	250.00	
1 .	check	campaign manag	gement	09/10/2005	\$	250.00	
4. Payee Inform	mation		Add 🗖 Re				
a. Full Name, Mai (include city, sta	iling Address & Phone ate, & zip)		b. Coordinated C	Committee Name	d. Comments		
John Hewitt 1001 South M	Aarshall St		c. Level Register				
	m, NC 27101		Federal State	County: Municipality:	e. Election Cy	cle Sum to Date	
					\$	365.00	
f. Account Code	g. Form of Payment	h. Purpose		i. Date (mm/dd/yy	yy) j. Amour	nt	1
1	check	office rent		08/31/2005	\$	365.00	
			·		\$		1215.0
5. Total only	v this Page				\$	1.225.00	1213.0
(This line goes is (This line goes is	LL CRO-1310 Pay n line 14a of Detailed Summ n line 14b of Detailed Summ n line 14c of Detailed Summ	ary Page CRO-1100 if Ope ary Page CRO-1100 if Cou	ntrib to Candidates		\$		
(1 nis une goes in	n une 140 0J Detallea Summ		ard of Elections		1	March 2003	i i

CRO-1310

NC State Board of Ele жs

Disbursem	ents		Pg	2of <u>2</u>		Amendmen Ves	No No
1. Committee Full	Name (and Fund if applicabl	e)			2. II) Number	
Robinson Cor					1	<u>9178</u>	103
3. Type of Disb		eparate CRO-1310 forms					
Operating Exp	enses 🗖 Contribu	tions to Candidates/Politi			ted Pa	rty Expendit	ures
4. Payee Inform	nation		Add 🖸 Re	move			
a. Full Name, Mail	ing Address & Phone		b. Coordinated C	ommittee Name	d. C	omments	
(include city, sta	te, & zip)						
Time Warner 496 F Gallimo Winston-Sale			c. Level Registere Federal State	County:	e. El	ection Cycle	Sum to Date
					\$		199.90
f. Account Code	g. Form of Payment	h. Purpose	1	i. Date (mm/dd/yy	<u>+</u> yy)	j. Amount	
1	check	internet installation	on	08/31/2005		\$	199.90
						\$	
4. Payee Inform	nation		Add 🖸 Re	move			
	ing Address & Phone		b. Coordinated C	ommittee Name	d. C	omments	
(include city, sta	te, & zip)						
ccAdvertising 13800 Coppe Herndon, VA			c. Level Registere Federal State	d (Specify) County: Municipality:	e. El	ection Cycle	Sum to Date 1,726.65
f. Account Code	g. Form of Payment	h. Purpose	· · ·	i. Date (mm/dd/yy	yy)	j. Amount	
1	check	advertising		09/06/2005		\$	1,726.65
······						\$	
4. Payee Inform	nation		Add 🗖 Re	move			
a. Full Name, Mail	ing Address & Phone		b. Coordinated C	ommittee Name	d. C	omments	
(include city, stat BB&T	te, & zip)		c. Level Registere	ed (Specify)	Ba	nk Charg	es
1 Triad Plaza Winston-Sale	m NC 27101		Federal	County:			
Winston-Oalo	1110,21101		State	Municipality:	e. El	ection Cycle	Sum to Date
					\$		16.00
f. Account Code	g. Form of Payment	h. Purpose		i. Date (mm/dd/yy	yy)	j. Amount	
	EFT	bank charges		08/20/2005		\$	16.00
						\$	
5. Total only	this Page				\$		1,942.55
	LL CRO-1310 Page	S	, <u></u> ,,		İ		
(This line goes in (This line goes in	line 14a of Detailed Summar line 14b of Detailed Summar line 14c of Detailed Summar	y Page CRO-1100 if Ope y Page CRO-1100 if Cor	trib to Candidates/		\$		3,167.55
CRO-1310			rd of Elections		š		March 2003

3157,55

for Office Use Only

SBOE ID #_____ Follow-Up Date _____ Revisived By_____

CAMPAIGN REPORT DISCREPANCIES REPLY REQUIRED

TO:TreasurerVernon RobinsonCommitteeRobinson CommitteeAddressPO Box 272Winston-Salem, NC 27102

FROM: Campaign Finance Office

REPORT IN QUESTION: 2005 Pre-primary

DATE: 09/20/2005

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 <u>first</u> notice. You must respond within <u>thirty</u> 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.

	j	
	1	

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-1310 - Election cycle sum-to-date for Joy Maria Lee is found to be \$1160. Disbursements total is found to be \$3157.55. See CRO-1100 sample; check computations for correctness to amend. Thank you.

Please send your reply to : Judy J. Speas 201 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:

Detailed Summary				Amendment Yes / No
1. Committee Full Name (and Fund if applicable)	2. Type of R	eport	3. II	D Number
Robinson Committee	Pre-Prima	ary	N1	Y803
Start of Election Cycle: January 1,20	02	Total this Reporting Perio	d	Total this Election Cycle
4) Cash on Hand at Start		\$ 3,115	5.00	\$ 0.0
RECEIPTS				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 25	5.00	\$ 255.0
6) Contributions from Individuals	(CRO-1210)	\$ 3,500	0.00	\$ 6,700.0
7) Contributions from Political Party Committees	(CRO-1220)	\$ (0.00	\$
8) Contributions from Other Political Committees	(CRO-1230)	s c	0.00	\$
9) Loan Proceeds	(CRO-1410)	\$ C	0.00	\$
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$ C	0.00	\$
11) Other Receipt Sources	(CRO-1250)			
11a) Interest on Bank Accounts	(CRO-1250)	S 0	0.00	\$
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	f	.00	\$
11c) Outside Sources of Income	(CRO-1250)		.00	<u> </u>
2) "Goods and Services" Contributions	(CRO-1260)		.00	\$
3) TOTAL RECEIPTS	(010 100)	c		¢
(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)		3 ,525	.00	\$ 6,955.00
EXPENDITURES	(())			
4) Disbursements	(CRO-1310)		ļ	
14a) Operating Expenditures	(CRO-1310)			\$ 3472.55-3,482.55
14b) Contributions to Candidates/Political Committees		· · · · · ·		
14c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.	.00	<u>\$</u>
5) Loan Repayments	(CRO-1420)		00	\$
6) Refunds/Reimbursements From the Committee	(CRO-1320)	\$ 0.	00	\$
7) In-Kind Contributions	(CRO-1510)	\$ 0.	00	\$
8) TOTAL EXPENDITURES		\$ 3,5755 3167	55	\$3472.55_ <mark>3,482.55</mark>
(Add lines 14a, 14b, 14c, 15, 16, and 17) 9) Cash on Hand at End				
(Add lines 4 and 13 together, then subtract line 18)		\$ 3482.45 -3,472.	45	\$ 3482.45 3,472.4 6
DDITIONAL INFORMATION				
)) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.0	00	
) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0.	00	
) Debts and Obligations owed By the Committee	(CRO-1610)	\$ 0.	00	
) Debts and Obligations owed To the Committee	(CRO-1620)		00	
	(CRO-1720)		00	
		\$ 0.0	_	\$
				\$
) 48-Hour Notice Reports Sum		<u>\$</u> 0.0		s
CO-1100 NC State Board		ψ U.C		March 2003