

## **Disclosure Report Cover**

Amendment	 	_
✓ Yes	No	

Please note that	t this cover sheet	cannot be used t	to amend cor	nmittee in	formation	such as the c	ommittee 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.							
You mu:	st amend the Stat	ement of Organi the Addendum	form (CRO-	-2100A-E	) to make ore entrie	tnose kmus c s are needed.	of committee changes.
1. Committee I		e tile Addendam	ioim (CRO-	1010) 11 11.		o die o medicale	· · · · · · · · · · · · · · · · · · ·
a. Full Name	aror macton						c. ID Number
Robinson Com	mittee				, - · · ·		n1y803
b. Mailing Address	(include City, State	e and Zip Code)					d. Date Filed
P.O. Box 272			<del></del>			· · · · · · · · · · · · · · · · · · ·	09/22/2005
Winston-Salem	i, 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 l	full Name
	08/18/2005		09/12/200	5		Vernon Ro	binson
6. Type of Commit			ype of Report			e of report from	
✓ Candidate Cam	• • = •	· -	nicipal		ate/County		Referendum
Joint Fundraise	r 🔲 PAC	155	Organizationa		Organiza		Organizational
Referendum			Thirty-five day	<sup>y</sup>  _	Quarterly		Pre-referendum
7. Type of Fund	(if applicable,	check one)	Pre-primary	┆	⊒ Firs	t Plus	Final Supplemental Final
Soft Money Ac			Pre-election Pre-runoff			ona od Plus	Annual
<u> </u>			Semi-annual		T Fou		Special
_	rty Financing Fund	lo lo	Mid Yea	,   <b>-</b>	Semi-ann		
	ction Year Candidat	es Fund	Year End		_	Year	9. Special Report Name
	paign Financing Fu	1=	Final	Ē	🕽 Yea	r End	
Other:	F0	i i i	Special		Final		· ·
	•		•	ĺ	Special		
10. Account Inf	ormation			10. Accou	unt Infor	nation	
a. Financial Institut	tion Full Name			a. Financia	l Institution	Full Name	
BB&T							
b. Purpose		c. Code		b. Purpose			c. Code
		1					
		d. Period Begin Ba	lance				d. Period Begin Balance
		\$ 3,115.00					\$
CERTIFICATI	ON	<del></del>		-			
I certify that the with funds for Vernon Rob	a federal or out-o	n compliance wi of-state PAC. I f	th all provisi	ons of Art	icle 22A ort is com	including that	t no funds are commingled d correct.
Printed Name of Signer Signature of Appointed Treasurer Date							
FOR OFFICE U	JSE ONLY			_	. 0		
Date Receive	ed: <u>9-</u>	22-05	Employ	ree:	dy of	eas Del	ivery Method Normal Mail
Date Postma	rked:		Employ			_ - B	Registered Mail Hand Delivered
Date Scanne	d:	1	Employ	<u>æ</u> s 4 <u>3</u> 8	2002		Electronically Filed

CRO-1000

NC State Board of Elections

March 2003

## **Detailed Summary**

Amendment
Ves Ves No

1. Committee Full Name (and Fund if applicable)	2. Type of Re	port	3. ID N	umber
Robinson Committee	Pre-Prima		N1Y8	303
		Total this	Total this	
Start of Election Cycle: January 1, 200	J2	Reporting Period		Election Cycle
4) Cash on Hand at Start		\$ 3,115	.00 1	0.00
RECEIPTS		<u>-</u>		
5) Aggregated Contributions from Individuals	(CRO-1205)		.00 3	
6) Contributions from Individuals	(CRO-1210)	\$ 3,500	.00 1	6,700.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0	.00 \$	S
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0	.00 \$	<b>S</b>
9) Loan Proceeds	(CRO-1410)	\$ 0	.00 \$	5
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$ 0	.00 \$	5
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 \$	3
11c) Outside Sources of Income	(CRO-1250)	\$ 0	.00 §	
12) "Goods and Services" Contributions	(CRO-1260)	\$ 0	.00 \$	<u> </u>
13) TOTAL RECEIPTS		\$ 2.505	00 \$	6.055.00
(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)		<sup>3</sup> 3,525	.00	6,955.00
EXPENDITURES				
14) Disbursements	(CRO-1310)			
14a) Operating Expenditures	(CRO-1310)	<del></del>		3472.553,482.55
14b) Contributions to Candidates/Political Committees	(CRO-1310)		.00 \$	
14c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.	.00 \$	3
15) Loan Repayments	(CRO-1420)	\$ 0.	00 \$	3
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$ 0.	00 \$	S
17) In-Kind Contributions	(CRO-1510)	\$ 0.	.00 \$	<b>.</b>
18) TOTAL EXPENDITURES		\$ 3157.	<sub>55</sub> \$	2 472 55
(Add lines 14a, 14b, 14c, 15, 16, and 17)		3137.	33	3,472.55
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)		\$ 3,482	.45	3,482.45
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 <b>\$</b>	
26) Forgiven Loans	(CRO-1440)	\$ 0.	00 \$	
27) 48-Hour Notice Reports Sum		\$ 0.	00 \$	
CDO 1100				March 2002

## Disbursements

				Amendment	
Pg	1	of	2	Yes	☑ Ne

1. Committee Full Name (and Fund if applicable)				2. ID Number			
Robinson Cor	nmittee						
3. Type of Disb	ursement (Please use se	parate CRO-1310 forms	for each type of	Disbursement.)			
Operating Exp	enses 🗖 Contribu	tions to Candidates/Politi	cal Committees	Coordina Coordina	ted Pa	arty Expenditur	es
4. Payee Inform	nation		Add 🗖 l	Remove			
a. Full Name, Mail	ing Address & Phone		b. Coordinated	Committee Name	d. C	omments	
(include city, sta	te, & zip)		1				
Joy-Maria Lee	9		<u> </u>		4		
P.O. Box 156			c. Level Regist		-		
Hamilton NC,	27840		☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Cycle Sum to Date		
			State	Z Municipality.	e. c.	rection Cycle s	ani to Date
					\$		660.00
f. Account Code	g. Form of Payment	h. Purpose		i. Date (mm/dd/yyy	<b>/y)</b>	j. Amount	
1	check	campaign manag	jement	08/21/2005		\$	100.00
1	check	campaign manag	jement	08/28/2005		\$	250.00
4. Payee Inforn	nation		Add 🗖 I	Remove			
a. Full Name, Mail	ing Address & Phone		b. Coordinated	Committee Name	d. C	omments	
(include city, stat	te, & zip)						
Joy-Maria Lee	•				l		
P.O. Box 156			c. Level Registered (Specify)				
Hamilton NC,	27840		Federal  State	County:  Municipality:	e. Election Cycle Sum to Date		
			State	Within cipanty.			
					\$		1,160.00
f. Account Code	g. Form of Payment	h. Purpose		i. Date (mm/dd/yy)	y)	j. Amount	
1	check	campaign manag	ement	09/04/2005		\$	250.00
1	check	campaign management 09/10/2005			\$	250.00	
4. Payee Inform	nation		Add 🗖 I	Remove			
a. Full Name, Maili	ing Address & Phone		b. Coordinated	Committee Name	d. C	omments	
(include city, stat	te, & zip)						
John Hewitt			7 15 14	1 (0 - 10)	i		
1001 South M	arshall St.		c. Level Registered (Specify)  Federal County:		_		
Winston-salem, NC 27101			State		e. Election Cycle Sum to Date		
			<b>State</b>	triumcipanty.		cetton Cycle 5	
					\$		365.00
f. Account Code	g. Form of Payment	h. Purpose		i. Date (mm/dd/yyy	<b>y</b> )	j. Amount	
1	check	office rent		08/31/2005		\$	365.00
						\$	
5. Total only	this Page		-		\$		1,235.00
6. Total of ALL CRO-1310 Pages						1215	
(This line goes in	line 14a of Detailed Summary line 14b of Detailed Summary	Page CRO-1100 if Oper			\$		,
(This line goes in	line 14c of Detailed Summary	Page CRO-1100 if Coor	dinated Party E	xpenditures)			

For Office Use Only	'n
SPOE ID#	
Follow-Up Date	
Reviewed By	

## CAMPAIGN REPORT DISCREPANCIES REPLY REQUIRED

TO:	Tr	easurer	Vernon Robinson	
	Co	ommittee	Robinson Committ	ree
	A	idress	PO Box 272	
	11		Winston-Salem, N	NC 27102
FROM	1: Ca	ampaign Fin	ance Office	REPORT IN QUESTION: 2005 Pre-primary amendment
DATE	E: <u>0</u>	9/23/2005		
office	with the mi	ssing or cor	rected information in o	the following discrepancies. Please supply this order to complete the reports. A more detailed following information is provided.
This is	s your <u>second</u>	notice.	You must respond with	in fifteen days of receipt of this notice.
Failur the for	e to respond rms to amer	l will result ad are provi	in noncompliance. In ded for completion. Ar	order to comply with the required information, mend only the forms required.
	Addresses contribute days are of deposit to	s were either or's complete considered a the general	r missing or incomplete e name and mailing ad nonymous and must be	n the Political Committee Disclosure Report.  e. Contributions received without the dress that remain incomplete for forty-five (45) e paid over to the State Board of Elections for disbursements must be listed by name and
	Joint cont	ributions, w	hich are prohibited, we	ere listed on the Report of Contributions. You ntribution for each contributor.
	Some or i	no dates wei	e shown on the reports	. A date is required for each entry.
	Details w	ere not prov	vided for the sums lister	d on the Detailed Summary Page
	Method o	f payment n	ot provided	
				sh" being the method of payment.
				egated individual contribution" (AIC).
	The endir	ng balance is	s negative. The Comm	ittee cannot operate on a negative balance.

Na	me 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.						
Ц	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.						
	n 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-1310 - Review and correct #5. CRO-1100 - Review and correct #14a. Submit new CRO-2100A if Joy Maria						
	Lee should be appointed as an assistant treasurer. Thank you.						
	•						
	send your reply to: Judy I Speed 201 N Chestput Street Winston Solom NC 27101						

If you have any questions please refer to the Campaign Finance section on the SBOE website, <a href="https://www.sboe.state.nc.us">www.sboe.state.nc.us</a>, or call (919)733-7173.

FOR THE CAMPAIGN FINANCE OFFICE: