

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		c. ID Number	
a. Full Name Robinson Committee		N1Y803	
b. Mailing Address (include City, State and Zip Code) P.O. Box 272 Winston-Salem, NC, 27101		d. Date Filed	
		e. Phone Number 336-768-3567	
2. Report Year	3. Period Start Date (mm/dd/yyyy) 08/18/2005	4. Period End Date (mm/dd/yyyy) 09/12/2005	5. Treasurer Full Name
6. Type of Committee (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		8. Type of Report (check only one type of report from one category)	
7. Type of Fund (if applicable, check one) <input type="checkbox"/> Soft Money Account <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> NC Political Party Financing Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input checked="" 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	State/County <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 type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special
10. Account Information		10. Account Information	
a. Financial Institution Full Name BB&T		a. Financial Institution Full Name	
b. Purpose receipts and expenditure	c. Code 1	b. Purpose	c. Code
	d. Period Begin Balance \$ 3,115.00		d. Period Begin Balance \$
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.			
<u>Vermon Robinson</u> Printed Name of Signer		<u>[Signature]</u> Signature of Appointed Treasurer	
		<u>07/10/05</u> Date	
FOR OFFICE USE ONLY			
Date Received:	<u>10-4-05</u>	Employee:	<u>Judy Spears</u>
Date Postmarked:		Employee:	
Date Scanned:		Employee:	
		Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed	

CRO-1000

NC State Board of Elections

March 2003

Detailed Summary

Amendment
☒ Yes ☐ No

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
Robinson Committee		Pre-Primary		N1Y803	
Start of Election Cycle: January 1, 2002		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 3,115.00		\$ 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)		\$ 3,525.00		\$ 6,955.00	
EXPENDITURES					
14) Disbursements (CRO-1310)					
14a) Operating Expenditures (CRO-1310)		\$ 3,157.55		\$ 3,472.55	
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)		\$ 3,157.55		\$ 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		\$	
26) Forgiven Loans (CRO-1440)		\$ 0.00		\$	
27) 48-Hour Notice Reports Sum		\$ 0.00		\$	

Disbursements

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Amendment

☒ Yes ☐ No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Robinson Committee				N1Y803	
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 checked="" type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Joy-Maria Lee P.O. Box 156, Hamilton, NC 27840					
			c. Level Registered (Specify)		
			<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 1,160.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	check	campaign management	08/21/2005	\$ 100.00	
1	check	campaign management	08/28/2005	\$ 250.00	
4. Payee Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Joy-Maria Lee P.O. Box 156, Hamilton, NC 27840					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 1,160.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	check	campaign management	09/04/2005	\$ 250.00	
1	check	campaign management	09/10/2005	\$ 250.00	
4. Payee Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
John Hewitt 1001 S. marshall St. Winston-Salem, NC 27101					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 365.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	check	office rent	08/31/2005	\$ 365.00	
				\$	
5. Total only this Page				\$ 1,215.00	
6. Total of ALL CRO-1310 Pages					
<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>				\$	

CRO-1310

NC State Board of Elections

March 2003

Disbursements

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Amendment
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Robinson Committee				N1Y803	
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	
Time Warner 496 F Gallimore Dairy Rd. Winston-Salem, NC					
		c. Level Registered (Specify)			
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				e. Election Cycle Sum to Date	
				\$ 199.90	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	check	internet installation	08/31/2005	\$ 199.90	
				\$	
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	
ccAdvertising 13800 Coppermine Rd. Herndon, VA, 27409					
		c. Level Registered (Specify)			
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				e. Election Cycle Sum to Date	
				\$ 1,726.65	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	check	advertising	09/06/2005	\$ 1,726.65	
				\$	
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 1 Triad Plaza Winston-Salem, NC 27101					
		c. Level Registered (Specify)			
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				e. Election Cycle Sum to Date	
				\$ 16.00	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	EFT	bank charges	08/20/2005	\$ 16.00	
				\$	
5. Total only this Page				\$ 1,942.55	
6. Total of ALL CRO-1310 Pages				\$ 3,157.55	
<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>					

CRO-1310

NC State Board of Elections

March 2003