

# COPY

## Disclosure Report Cover

Amendment  
☐ Yes ☒ No

FORSYTH COUNTY

BOARD OF ELECTIONS

2006 JUL -3 PM

RECEIVED

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

06/30/2006

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

01/01/2006

06/30/2006

MARK WILLIAMS

6. Type of Committee (Check one)

☒ Candidate Campaign☐ Party☐ Joint Fundraiser☐ PAC☐ Referendum

8. Type of Report

(check only one type of report from one category)

Municipal

State/County

Referendum

☐ Organizational☐ Organizational☐ Organizational☐ Thirty-five day

Quarterly

☐ Pre-referendum☐ Pre-primary☐ First Plus☐ Final☐ Pre-election☒ Second☐ Supplemental Final☐ Pre-runoff☐ Third Plus☐ Annual☐ Semi-annual☐ Fourth☐ Special☐ Mid Year

Semi-annual

9. Special Report Name

☐ Year End☐ Mid Year☐ Year End☐ Final☐ Final☐ Special☐ Special

### 10. Account Information

a. Financial Institution Full Name

BB&amp;T

b. Purpose

c. Code

CAMPAIGN RECEIPTS  
AND DISBURSEMENTS

bbt

d. Period Begin Balance

\$ 14,742.37

### 10. Account Information

a. Financial Institution Full Name

b. Purpose

c. Code

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.

MARK WILLIAMS

Printed Name of Signer



Signature of Appointed Treasurer

06/30/2006

Date

### FOR OFFICE USE ONLY

Date Received:

7-3-06

Employee:

Judy Spears

Delivery Method

☒ Normal Mail

Date Postmarked:

6-30-06

Employee:

Judy Spears

☐ Registered Mail

Date Scanned:

Employee:

☐ Hand Delivered☐ Electronically Filed

# 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		SECOND QUARTER			
Start of Election Cycle: January 1, 2005		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 14,742.37		\$ 0.00	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 52.00		\$ 955.00	
6) Contributions from Individuals (CRO-1210)		\$ 650.00		\$ 4,321.97	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$		\$ 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)		\$ 572.00		\$ 572.00	
13) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)		\$ 1,274.00		\$ 25,848.97	
<b>EXPENDITURES</b>					
14) Disbursements (CRO-1310)					
14a) Operating Expenditures (CRO-1310)		\$ 3,918.90		\$ 13,751.50	
14b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
14c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
15) Loan Repayments (CRO-1420)		\$ 11,000.00		\$ 11,000.00	
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$		\$	
17) In-Kind Contributions (CRO-1510)		\$ 721.97		\$ 721.97	
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)		\$ 15640.87		\$ 25,473.47	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)		\$ 375.50		\$ 375.50	
<b>ADDITIONAL INFORMATION</b>					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 375.50			
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)		\$ 9,000.00		\$ 9,000.00	
27) 48-Hour Notice Reports Sum		\$		\$	

Page 1 of 1 **Amendment** ☐ Yes ☒ No

# Contributions from Individuals

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. 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
T LEE COLLINS 5081 FARMBROOK RD MT AIRY, NC				PRESIDENT		
				c. Employer's Name/Specific Field		
				COLLINS CHEVROLET		
				e. Election Cycle Sum to Date		
				\$ 100.00		
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		04/14/2006	\$ 100.00	
<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
CALVIN WEATHERMAN 4306 OLD BELEWS CREEK RD WINSTON SALEM, NC 27101				SELF-EMPLOYED		
				c. Employer's Name/Specific Field		
				OSHA MOBILE TESTING		
				e. Election Cycle Sum to Date		
				\$ 650.00		
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		04/21/2006	\$ 550.00	
<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"/>					\$	
4. Total only this Page					\$	
5. Total of ALL CRO-1210 Pages					\$	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

# Disbursements

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. 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
THREADS PLUS 114 BACK FOURTY DR WINSTON SALEM, NC 27127					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 532.86
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
bbt	CHECK	CAMPAIGN T-SHIRTS	04/17/2006	\$ 532.86	
				\$	
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
WINSTON SALEM JOURNAL 418 N MARSHALL ST WINSTON SALEM, NC 27101					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 341.04
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
bbt	CHECK	CAMPAIGN AD	04/24/2006	\$ 341.04	
				\$	
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 WARNE CABLE 1410 TRADEMART BLVD WINSTON SALEM, NC					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 499.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
bbt	CHECK	CAMPAIGN TAPE	04/25/2006	\$ 499.00	
				\$	
5. Total only this Page				\$ 1,372.90	
6. Total of ALL CRO-1310 Pages					
(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)					
(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)					
(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)				\$ 3,981.90	

# Disbursements

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. 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
WSJS RADIO 875 W 5TH STREET WINSTON SALEM, NC 27107					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 1,430.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
bbt	CHECK	RADIO CAMPAIGN AD	04/25/2006	\$ 1,430.00	
				\$	
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
MATT ANTHONY 875 WEST 5TH STREET WINSTON SALEM, NC 27101					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 60.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
bbt	CHECK	WSJS PRODUCTION COST	04/26/2006	\$ 60.00	
				\$	
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 MEDIA SALES 1410 TRADEMART BLVD WINSTON SALEM, NC					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 1,056.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
bbt	CHECK	TV CAMPAIGN AD	04/25/2006	\$ 1,056.00	
				\$	
5. Total only this Page				\$ 2,546.00	
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>				\$ 3,981.90	

# Goods and Services (including Fundraisers)

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. Event Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove								
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  LONNIE MAINES 404 CARPENTER AVE. WINSTON SALEM, NC 27107					<b>b. Attendance (approx. count)</b>		<b>d. Date(s) Held (mm/dd/yyyy)</b>	
					136		FROM: 04/22/2006	
					<b>c. Description</b>		TO: 04/22/2006	
					RAFFLE TICKETS		<b>e. Total Event Amount</b>	
						\$ 572.00		
<b>4. Items (goods and/or services) Sold</b>								
a. Cnt	b. Payment Breakdown			c. Item Description	d. Acct Code	e. Date (mm/dd/yyyy)	f. Amount per Item	g. Total Amount
	Check	Cash	Other					
136	4	132	0	RAFFLE TICKETS	bbt	04/22/2006	\$ 1.00	\$ 572.00
							\$	\$
							\$	\$
							\$	\$
							\$	\$
							\$	\$
							\$	\$
							\$	\$
							\$	\$
							\$	\$
							\$	\$
							\$	\$
<b>5. Total only this Page</b> <i>(This should be the sum of all item '4g' from this page)</i>							\$ 572.00	
<b>6. Total of ALL CRO-1260 Pages</b> <i>(This line must be on line 12 of Detailed Summary Page CRO-1100)</i>							\$ 572.00	

# In-Kind Contributions

Pg 1 of 1

Amendment

☐ Yes

☒ No

1. Committee Full Name (and Fund if applicable) COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF		2. ID Number	
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)  LONNIE MAINES 404 CARPENTER AVE WINSTON SALEM, NC 27107		b. Type of Contributor <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Cycle Sum to Date \$ 721.97	
e. Description FILING FEE		f. Date (mm/dd/yyyy) 02/13/2006	g. Fair Market Amount \$ 721.97
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor <input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Cycle Sum to Date \$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor <input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Cycle Sum to Date \$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
4. Total only this Page		\$ 721.97	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 721.97	



# Loan Repayments

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. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
LONNIE MAINES 404 CARPENTER AVE WINSTON SALEM NC 27107				c. Original Loan Date	
				07/01/2005	
				d. Original Loan Amount	
\$ 20,000.00					
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$ 375.50	bbt	CHECK	06/27/2006	\$ 11,000.00	
\$				\$	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Original Loan Date	
				d. Original Loan Amount	
\$					
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$				\$	
\$				\$	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Original Loan Date	
				d. Original Loan Amount	
\$					
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$				\$	
\$				\$	
4. Total only this Page				\$ 11,000.00	
5. Total of ALL CRO-1420 Pages (This line must be on line 15 of Detailed Summary Page CRO-1100)				\$ 11,000.00	

# Outstanding Loans

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. Lender 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	
LONNIE MAINES 404 CARPENTER AVE WINSTON SALEM, NC 27107		RETIRED POLICE		
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)	
		RETIRED	07/01/2006	
			f. End Date (mm/dd/yyyy)	
			06/30/2006	
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance	
5 %	N/A	\$ 20,000.00	\$ 375.50	
k. Full Name of Lending Institution			l. Loan Number	
N/A				
3. Lender 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. Start Date (mm/dd/yyyy)	
			f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance	
%		\$	\$	
k. Full Name of Lending Institution			l. Loan Number	
3. Lender 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. Start Date (mm/dd/yyyy)	
			f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance	
%		\$	\$	
k. Full Name of Lending Institution			l. Loan Number	
4. Total only this Page			\$ 375.50	
5. Total of ALL CRO-1430 Pages (This line must be on line 21 of Detailed Summary Page CRO-1100)			\$ 375.50	

# Forgiven Loans

Pg 1 of 1

Amendment

☐ Yes ☒ No

This form should be completed for each loan NOT being repaid by the committee. A Forgiven Loan Statement (CRO-6200) should accompany each forgiven loan.

The lender information should contain the same information as supplied under the original loan proceed. The people who satisfied the loan should be listed under loan payers, and should include their occupational information, as well as the amount they paid and their sum to date total as a contributor for the election cycle covered by the report.

1. Committee Full Name (and Fund if applicable)

2. ID Number

COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF

## 3. Lender Information

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone  
(include city, state, & zip)

b. Comments

LONNIE MAINES  
404 CARPENTER AVE  
WINSTON SALEM, NC 27107

c. Original Loan Date (mm/dd/yyyy)

f. Election Cycle Sum to Date

07/01/2005

\$ 20,000.00

d. Original Loan Amount

g. Date (mm/dd/yyyy)

\$ 20,000.00

07/01/2006

e. Remaining Loan Balance

h. Forgiven Amount

\$ 375.50

\$ 9,000.00

## 4. Loan Payers *(These are the people who satisfied the loan, and the amount they paid, if it wasn't completely satisfied by the lender.)*

a. Full Name, Mailing Address & Phone  
(include city, state, & zip)

a. Full Name, Mailing Address & Phone  
(include city, state, & zip)

LONNIE MAINES  
404 CARPENTER AVE  
WINSTON SALEM, NC

b. Job Title/Profession

d. Forgiven Amount

RETIRED POLICE

\$ 9,000.00

b. Job Title/Profession

d. Forgiven Amount

\$

c. Employer's Name/Specific Field

e. Elect Cycle Sum to Date

RETIRED

\$ 9,000.00

c. Employer's Name/Specific Field

e. Elect Cycle Sum to Date

\$

a. Full Name, Mailing Address & Phone  
(include city, state, & zip)

a. Full Name, Mailing Address & Phone  
(include city, state, & zip)

b. Job Title/Profession

d. Forgiven Amount

\$

b. Job Title/Profession

d. Forgiven Amount

\$

c. Employer's Name/Specific Field

e. Elect Cycle Sum to Date

\$

c. Employer's Name/Specific Field

e. Elect Cycle Sum to Date

\$

## 5. Total only this Page

\$ 9,000.00

## 6. Total of ALL CRO-1440 Pages

*(This line must be on line 17 of Detailed Summary Page CRO-1100)*

\$ 9,000.00

## Forgiven Loan Statement

<b>Name of Lender:</b>	LONNIE MAINES
<b>Committee receiving loan:</b>	COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF
<b>Date of loan:</b>	07/01/2005
<b>Amount of original loan:</b>	\$20,000.00
<b>*Amount of loan to be forgiven:</b>	\$9,000.00

I, LONNIE MAINES, do not wish to be reimbursed for the amount of the loan indicated above\* and will consider the amount loaned a contribution to the committee.

I understand and confirm no other parties are responsible for payment of this loan. I may not forgive a loan for which there is an outstanding balance owed to any source.

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

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

**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:  
Second Quarter

DATE:       07/06/2006

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-1000 - Period Start Date - 4/16/06. CRO-1100 - line 17 - filing fee not refunded in Second Quarter. To correct problem of inflated balance, it is necessary to send First Plus amendment #2 as example shows. Include a CRO-1000, 1100 and 1510. Also, amend with a Second Quarter report with a CRO-1000, 1100, 1260 and 1310. This would give you a balance of \$375.50. CRO-1260 - Correct amount of tickets sold to show correct payment breakdown. CRO-1310 - correct total at #6.
- Make corrections by checking with your computations. 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