	eneral repo	ort and committee i	informa	tion, must be	e signed	and sub	omitted along with ot	_	l'es	\boxtimes	No
Do not use this form		e information								····	
a. Full Name	1. Committee Information										
COMMITTEE TO ELECT MOLLY LEIGHT FOR CITY COUNCIL 20-355879											
b. Mailing Address (inc								d. Dat	te Filed		
313 SOUTH MAIN STREET 09/03/2009									009		
WINSTON SALEM, NC 27101								e. Pho	ne Number		
									336-725-	4325	
2. Report Year	3. Perio	od Start Date (mm/d	dd/yy)	4. Period (mm/dd/yy)		te	5. Treasurer Full	Name			
2009	l	08/05/2009		09/0	01/2009		LINDA HOBBS			_	
6. Type of Committ				pe of Report	t (c		ly one type of report				
Candidate Campa	aign 📋	Party	Municip			State/Co		Refere			
PAC Independent	ᆜ	Referendum		Organizational	i		Organizational		Organizational	<u> </u>	
Independent Expenditure Legal Expense Fr	und	Joint Fundraiser		Thirty-five day	У	(Quarterly		Pre-referendum	2	
7. Type of Fund		cable, check one)		Pre-primary	ļ		First		Final		
Booster Fund"	**	,	7 —	Pre-election	. !	Π	Second		Supplemental F	inal	
Building Fund		Ī		Pre-runoff	1		Third		Annual		
		Į.		Semi-annual			Fourth		Special		
		!		Mid Year		S	Semi-annual	<u></u>			
Other:		1	IЦ	Year End	1		Mid Year	10. Sp	pecial Repor	rt Nam	ie
O Martin of Fund	* 4h		1 🖂	Final Special		Ц, ,	Year End				
8. Number of Fund	raisers un	is Report		Special			inal Special				
11. Account Inform	etion		<u> </u>		11. Ac		nformation				
a. Financial Institution F							tution Full Name	<u> </u>	===	e general	
BB&T			-		-	102	Philippe A				
b. Purpose	c.	Account Code			b. Purp	ose		c. Ac	count Code		
CHECKING FOR RECEIPTS AND		1							(
EXPENSES	d.	. Period Begin Balance	;		İ			d. Per	riod Begin Bak	ance	
	\$	2453.09]	ĺ			\$	E		y T
CERTIFICATION											
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections. LINDA A. HOBBS											
	Printed N	Name of Signer		Si	gnature of	Appointe	ed Treasurer		Date		
FOR OFFICE USE OF	,	^									
Date Received:	_	9-3-09	Ţ	Employee:	ς.	Jupy	ispeas [☐ No	Method ormal Mail	·	
Date Postmarked	Employee:			<u>[</u>	Ha	egistered Ma and Delivere	d				
Date Scanned: Employee:								Si	ectronically l igner has not	receiv	ed
Date Data Entere	:d:]	Employee:			· · · · · · · · · · · · · · · · · · ·	ma	andatory train	ning	

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

Amendment

Yes No

Detailed Summary			Amendment Yes No
Use this form to summarize all disclosure reporting form 1. Committee Full Name (and Fund if applicable).	s and to total mo	netary information Report	3. ID Number
Committee to relief nilly		Primany	
suget to course			20-35587
Start of Election Cycle: January 1, 200	<u>م د</u>	Total this Reporting Period	Total this d Election Cycle
4) Cash on Hand at Start		\$ 2,453.00	
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$ 56.0
6) Contributions from Individuals	(CRO-1210)	\$ 375.95	* 740 a.
7) Contributions from Political Party Committees	(CRO-1220)		\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources	ragragation complete of the state of the sta	181	
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-For-Profit Organizati		\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
(2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,		· ·	\$ 7458.04
EXPENDITURES		<u> </u>	
(3) Disbursements		on the programme of the co	
13a) Operating Expenditures	(CRO-1310)	\$ 68.45	\$ 4820.89
13b) Contributions to Candidates/Political Committee	******************	\$	\$ 350.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$ 355,000
4) Aggregated Non-Media Expenditures	(CRO-1315)	\$	
5) Loan Repayments	(CRO-1420)	\$	\$ 338.00
6) Refunds/Reimbursements from the Committee	MMM to the state of the state o	····	\$
	(CRO-1320)	\$	\$ 100.00
7) In-Kind Contributions	(CRO-1510)	\$ 75.95	\$ 304.18
8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14 9) Cash on Hand at End (Add lines 4 and 12 together, then		\$ 144.40 \$01.661.41	\$ 5863.0
DDITIONAL INFORMATION	subtract line 18]	<u>\$2684.64</u>	1 = 2684.60
0) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
1) Outstanding Loans (incl. ones from other campaigns	At with A. A. Service Co., 11 commission makes and page page	\$	
2) Debts and Obligations owed by the Committee	and the contract of the contra	\$	er is beingere
3) Debts and Obligations owed to the Committee		\$ \$	reconstant a salat en al salat Transportant en salat en al salat en a
Account Transfers Within the Committee		\$	
5) Administrative Support	A company of the same of the s		o d
The state of the s		<u> </u>	\$
5) Forgiven Loans	No. Ch. A. and A. A. and A. an	<u> </u>	\$
() 48-Hour Notice Reports Sum (c) Contributions to be Refunded			\$
	(CRO-1215) S	· · · · · · · · · · · · · · · · · · ·	\$ August 20

		om individuals			Pg	_1 of		☐ Ye	s 🛛 No	
Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used										
1. Committee Full Name (and Fund if applicable)								2. ID Number		
COMMITTEE TO ELECT MOLLY LEIGHT FOR CITY COUNCIL								20 -3558779		
3. Contributor Information										
a. Full Name, Mailing Address & Phone b. Job 7						N T C	d. Commer	ats	· · · · · · -	
	e city, state, & zip) OL LEGGETT	PUBLIC RELA	1110	NS						
1	OUTH MARSHA	LL STREET	c. Employer's Name/Specific Field							
WINSTON SALEM, NC 27101				SELF EMPLOYED						
336-							e. Election Sum to Date			
							\$	100.00		
f. Prior	g. Account Code	b. Form of Payment	i. In-	Kind Description		j. Date (mm/dd/y	ууу)	k. Amount		
	1	CHECK	_			08/26/2	2009	\$	100.00	
	<u> </u>							\$		
			<u> </u>	····		[\$		
	ributor Informati			Add 🔲	Rem	ove				
	me, Mailing Address	& Phone		b. Job Title/Profess	ion		d. Commen	ts		
	city, state, & zip) IA WOOD		, ,	RETIRED						
	D TOWN ROAD			c. Employer's Name	e/Sper	cific Field	1			
	ON SALEM, NC 2	27106		Prudentia	TR	eal Estate	İ			
336.923.	2065			Prodential Real Estate Winston-Salem, NC			e. Election Sum to Date			
				10(110)07	\$ 200.00					
f. Prior	g. Account Code	h. Form of Payment	i. In-K	and Description	\longrightarrow	j. Date (mm/dd/yy	уу)	k. Amount		
	1	BANK TRANS	ļ	:		07/28/2009		\$	200.00	
							· · · ·	\$		
			<u> </u>					\$		
	ibutor Informatio				Remo	ve				
	ne, Mailing Address & city, state, & zip)	x ruone		b. Job Title/Professi	on /		d. Comment	<u> </u>		
ANI	P. N. 802	2		retire	9					
445 MayShall View Court c. Employer's Name/Specific Field						ific Field				
Anne Wilson 445 Marshall View Court c. Employer's Name/Specific Fiel Winston-Scalem, NC						e. Election S	um to Date			
	-	27101		· · · · · · · · · · · · · · · · · · ·			\$	31-23	·	
f. Prior	g. Account Code	h. Form of Payment	1	ind Description	_+	j. Date (mm/dd/yyy	y)	k. Amount		
<u> </u>			allons		08/11/2	2009	\$ 7.5	50		
					_			\$		
4 Tra4-1	anh, 4kir D-				\bot			\$		
	only this Page						\$	07.50	. 300.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)							\$ =	307,4	3 00.0 0	
(This line	must be on line 6 of D	etailed Summary Page CR	O-1100)			ļ	5			

Contributions from Individuals

Amendment

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not u	N₀ used
1. Committee Full Name (and Fund if applicable) 2. ID Number Committee to Calect Muly Spite to City Crunil 20-355	
3, Contributor Information Add Remove	O GOOD IT
a. Full Name, Mailing Address & Phone (include city, state, & zip) d. Comments	
Irene Phillips 3705 Poplar Valley Save Comployer's Name/Specific Field Winston Salent, Rl WSSV e. Election Sum to	
3705 Poplar Valley our	
Winston Salent, RC A7127 WSSV & Election Sum to \$ 68,4	######################################
f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount	' 3
refreshmente 08/11/2009 \$ 68.	45
□ s	
□ s	<u> </u>
3. Contributor Information	
a. Pull Name, Mailing Address & Phone (include city, state, & zip). b. Job Title/Profession d. Comments	
c. Employer's Name/Specific Field	
e: Election Sum to D \$	ate
Prior g. Account Code h. Form of Payment In Kind Description	7
□ s	
□ s	
3. Contributor Information Add Remove	
a. Full Name, Malling Address & Phone (include city, state, & zip) d. Comments	
c. Employer's Name/Specific Field	ļ
e. Election Sum to Da	<u>te</u>
Prior g. Account Code h. Form of Payment i-In-Kind Description j. Date (mm/dd/yyyy) k. Amount	
<u> </u>	<u> </u>
. Total only this Page \$ 68.4	15
* Total of ALL CRO-1210 Pages **Total of ALL CRO-1210 Pages **Total of ALL CRO-1210 Pages **Total of ALL CRO-1210 Pages *** \$ 375-95	5

In-Kind Contributions Pg 1 of 1 Yes No Use this form to report non-monetary contributions denotions goods or contribute and the denotions and the same its angle of the same i

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund. Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund	2. II	2. ID Number					
COMMITTEE TO ELECT MOLLY			20-355879				
2 C 4 T 4 T F 8 42	1 A 1.1				<u> </u>		
3. Contributor Information a. Full Name, Mailing Address & Phone	Add		Remove		T		
a. run ivame, maning Address & Phone (include city, state, & zip)				Contributor dividual	C. Co	mments	
ANNE G. WILSON			⊣	nviduai indidate			
445 MARSHAL VIEW COURT			Pa				
WINSTON SALEM, NC 27101			PA	•			
,				ferendum	d. Ele	ection Sum to Date	
				her Receipt Source			
			-	-	\$	31.23	
e. Description				f. Date (mm/dd/yy	уу)	g. Fair Market Amount	
BALLOONS FOR MEETING				08/11/2009	<u> </u>	\$ 7.50	
				00/11/200	<i>-</i>	Φ	
						\$	
	W			 		Ψ	
			÷			\$	
3. Contributor Information	Add	T T	Remove		·		
a. Full Name, Mailing Address & Phone	1.72.44	<u> </u>	7	Contributor	c. Cor	mments	
				ividual		imeaco	
Many Ochillian)		,	→ '=	ndidate			
There principle	Der. Lan	1.	Par				
3705 Popular VIII	The state of the s	~	PA	•			
I Nesce Phillips 3705 Poplar Val Winston-Salem, N	L'U	+	Ref	ferendum	d. Elec	ction Sum to Date	
ė die	87127	1	Ott	er Receipt Source	\$		
		_ ·		<u>, </u>	<u> </u>	68.45	
e. Description				f. Date (mm/dd/yyy		g. Fair Market Amount	
Refreshments				8/11/09		\$ 68.45	
1 3	· · · · · · · · · · · · · · · · · · ·					- C - C - C - C - C - C - C - C - C - C	
						\$	
			·				
						\$	
3. Contributor Information	** <u> </u>						
	☐ Add	R	Remove	<u> </u>			
a. Full Name, Mailing Address & Phone	Add	R	b. Type of (c. Com	ıments	
a. Full Name, Mailing Address & Phone (include city, state, & zip)	Add	R	b. Type of (vidual	c. Com	ıments	
=	Add	R	b. Type of C	vidual didate	c. Com	nments	
=	Add	R	b. Type of C Indi Can Part	vidual didate Y	c. Com	ments	
=	Add	R	b. Type of C Indi Can Part PAC	vidual didate y			
=	Add	R	b. Type of C Indi Can Part PAC Refe	vidual didate y C erendum		nments	
=	Add	R	b. Type of C Indi Can Part PAC Refe	vidual didate y			
=	Add	R	b. Type of C Indi Can Part PAC Refe	vidual didate y C erendum er Receipt Source	d. Elec	ction Sum to Date	
(include city, state, & zip)	Add	R	b. Type of C Indi Can Part PAC Refe	vidual didate y C erendum	d. Elec	ction Sum to Date g. Fair Market Amount	
(include city, state, & zip)	Add	R	b. Type of C Indi Can Part PAC Refe	vidual didate y C erendum er Receipt Source	d. Elec	ction Sum to Date	
(include city, state, & zip)	Add	R	b. Type of C Indi Can Part PAC Refe	vidual didate y C erendum er Receipt Source	d. Elec	etion Sum to Date g. Fair Market Amount	
(include city, state, & zip)	Add	R	b. Type of C Indi Can Part PAC Refe	vidual didate y C erendum er Receipt Source	d. Elec	ction Sum to Date g. Fair Market Amount	
(include city, state, & zip)	Add	R	b. Type of C Indi Can Part PAC Refe	vidual didate y C erendum er Receipt Source	d. Elec	g. Fair Market Amount \$	
(include city, state, & zip) e. Description	Add	R	b. Type of C Indi Can Part PAC Refe	vidual didate y C erendum er Receipt Source	d. Elec \$ y)	g. Fair Market Amount \$	
e. Description 4. Total only this Page	Add	R	b. Type of C Indi Can Part PAC Refe	vidual didate y C erendum er Receipt Source	d. Elec \$ y)	g. Fair Market Amount \$	
(include city, state, & zip) e. Description			b. Type of C Indi Can Part PAC Refe	vidual didate y C erendum er Receipt Source	d. Elec \$ y)	g. Fair Market Amount \$	

Yes

No

 \boxtimes

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable) 2. ID Number										
COMMITTEE TO ELECT MOLLY LEIGHT FOR CITY COUNCIL 20-355879										
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)										
Operating F			ndidates/Political Committees		ordinated Party Expenditures					
			Add	Remove						
4. Payee Inform			b. Coordinated Committee I	 	d. Comments					
· ·	ing Address & Phone		b. Coordinated Committee	чаще	d. Comments					
(include city, state,			1							
IRENE PHILLI	(PS				1					
3705 POPLAR	VALLEY LANE		c. Level Registered (Specify))						
WINSTON SA	LEM, NC 27127		Federal	County:	}					
			State 🖂	Municipality:	e. Election Sum to Date					
					\$ 68.45					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks					
A. Account Code	g. Form of Layment	111111111111111111111111111111111111111	I. Date (intibutery)	J. Zimousi	REFRESHMENTS					
1	CHECK	С	08/11/2009	\$68.45	REFRESHIVENTS					
				\$						
4. Payee Inform	ation	T T	Add	Remove	<u> </u>					
			b. Coordinated Committee		d. Comments					
	ing Address & Phone		B. Cool disact Committee	TAME	W. Communication					
(include city, state,	& zip)		‡							
					4					
			c. Level Registered (Specify))						
			Federal	County:	l					
			State	Municipality:	e. Election Sum to Date					
					\$					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks					
1. Account Code	g. Form or rayment	- III T Grpost Code	i. Date (min/du/yyy)	J. Zimount	as resident of stomas as					
				\$						
				\$						
4 Davis Inform	ation	<u> </u>	Add	Remove	<u> </u>					
4. Payee Inform			,	 	d Comments					
a. Fuli Name, Maili	ing Address & Phone		b. Coordinated Committee N	vame	d. Comments					
(include city, state,	& zip)									
			c. Level Registered (Specify))						
			Federal	County:	1					
			State	Municipality:	e. Election Sum to Date					
					0.2200					
		:			\$					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks					
	-			\$						
				\$						
				Φ.						
5. Total only thi	is Page	\$ 68.45								
	CRO-1310 Pages									
		mary Page CRO-1100) if Operating Expenses)							
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)										
, •	(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)									
7. Purpose Codes (List detailed expenditure code in (h.) above) A*-Media B*-Printing C*-Fundraising D-To Another Candidate										
A* - Media	her Candidate									
E - Salaries	F* - Equipmen		•	H* - Holding Public Office Expenses						
I - Postage	J - Penalties	K* - Offi	ice Expenses	O* - Other						
* Codes require detailed explanation in required remarks field (k)										