

Disclosure Report Cover Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

1. Committee Information					
a Full Name				c. ID Number	
b. Mailing Address (include City, State and Eip Cod	2-for Kid	5	- <u></u>	d. Date Filed	900 - 11 - 1 2 80
	ie) •		han iyo na shirin a	a. Date Filed	
POB12523	Ŷ			<u>03-09-11</u> e. Phone Number	
Winston-Salem,	27117			336-771-197	2) 7
2. Report Year 3. Period Start Date (mm/d		End Date (mm/dd/yy)	5. Treasure		
7-10-10	02-0	03-11	Karen 1	Venable	
6. Type of Committee (Check One)	9. Type of Rep			rt from one category).	
Candidate Campaign Party	Municipal	State/County	Starker of The King of	Referendum	an a
PAC Referendum Independent Expenditure Joint Fundraiser	Organization			Organizational Pre-referendum	
Legal Expense Fund	Pre-primary	First		Final	
	Pre-election	Seco	nd	Supplemental Final	:
7. Type of Fund (if applicable, check one)	Pre-runoff	Thire Thire	-	Annual	
Booster Fund Building Fund	Semi-annual Mid Yea	ar Semi-ann		Special Special	
	Year En	I		10, Special Report N	ame
Other:	Final	Tear Year	End		
8. Number of Fundraisers this Report	🗖 Special	Final			
		Special			
11. Account Information		11. Account Inform			2
a. Financial Institution Full Name		a. Financial Institution	Full Name	~	
SunTrust Bank					H S
b. Purpose c. Account C.	ode	b. Purpose		c. Account Code	
STR5	3	compary ny	inance		
STB 5 d. Period Reg		Company 917		d. Period Begin Balance	
		Company 7		d. Period Begin Balance	
		Comparisny			
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d. Period Beg \$ \$3, CERTIFICATION I certify that the Committee or Fund is in compl of the NC General Statutes and that no funds are	in Balance 4/2 iance with all apple commingled with	prohibited or other no:	ticle 22A, 22B n-disclosed fur	\$ C & 22D-22M of Chapter	FI 2: 05 163
d. Period Beg & S3, CERTIFICATION I certify that the Committee or Fund is in compl of the NC General Statutes and that no funds are report is complete, true and correct and that I ha	in Balance 4/2 iance with all apple commingled with	prohibited or other nor the NC State Board of	ticle 22A, 22B n-disclosed fur Elections.	\$ C & 22D-22M of Chapter	FI 2: 05 163
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Detailed Summary Use this form to summarize a

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Amendment	
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Use this form to summarize all disclosure reporting forms and to total n 1. Committee Full Name (and Fund if applicable) [2. Type		TD Number
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Committe to elect Joyce Brkids fin	<u>     Total this</u>	Total this
Start of Election Cycle: January 1, <u>2011</u>	Reporting Period	Election Cycle
4) Cash on Hand at Start	\$ \$3.42	\$ 83.42
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-120)	······································	\$
6) Contributions from Individuals (CRO-121)	0) \$	\$
7) Contributions from Political Party Committees (CR0-1220	0) \$	\$
8) Contributions from Other Political Committees (CR0-1230	9) <b>\$</b>	\$
9) Loan Proceeds (CR0-1410	» <b>\$</b>	\$
10) Refunds/Reimbursements to the Committee   (CR0-1240)	» \$ '40.00	\$ 40.00
11) Other Receipt Sources		
11a) Interest on Bank Accounts         (CR0-1250)	) <b>\$</b>	\$
11b) Contributions from Not-For-Profit Organizations (CRO-1250	)\$	\$
11c) Outside Sources of Income (CRO-1250	)\$	\$
11d) Legal Expense Fund - Other Sources   (CR0-1270)	)\$	\$
11e) Exempt Purchase Price Sales         (CR0-1265)	)\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e	\$ 40.00	\$ 40.00
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures   (CR0-1310)	\$	\$
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures         (CR0-1310)	\$	\$
14) Aggregated Non-Media Expenditures (CR0-1315)	\$ 40.00	\$ 40.00
15) Loan Repayments (CRO-1420)	· · · · · · · · · · · · · · · · · · ·	\$
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$ 83.42	\$83.42
17) In-Kind Contributions (CRO-1510)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 123.42	\$ 123.42
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 0
ADDITIONAL INFORMATION		
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$	
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)	\$	\$
27) 48-Hour Notice Reports Sum (CRO-2220)	\$	\$
28) Contributions to be Refunded (CRO-1215)	\$	\$

		4 55	4 G	•			Amendment	
Refunds/Rei					Pg of		Yes	□ No
Use this form to re		-		reimbursemen	ts for a previous	expen	diture.	
1. Committee Ful	l Name (	and Fund if ap	ilicable)			2.	ID Number	
Commi	the	tooler	+ Joyce	fiti	ds			
3. Contributor In	toomatic				Remove	(think is	- A &	1. 19 A. 19 A.
a. Full Name, Mailing		100 100 Per 20. 7 101. 1 10.		d. Type of Com		g. (	Comments	
(include city, state,				Candidate	PAC			<u>en el militar de la meren e ca</u>
Suntrue	TR	AIK		Referendur				
PhRal		+/1		e. Level Registe	ered (Specify)	<u>h. (</u>	riginal Expen	diture Date
LC ROOK (	099	マコイ		State	Municipality	v:		
Sun trus PBBOX ORLANDO	FL	32862-	2227				riginal Expend	liture Amt
	• •		•			\$		
b. Job Title/Profession			10 · · · · · · · · · · · · · · · · · · ·	S State Contract of the				
5, JOD/LINE/FIULSSION		c. Employer's Na	meropectric Field	f. Purpose		conce Maxix	lection Sum to	Date
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k. Account Code	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	of Payment	m. In-Kind Desci	iption	n, Date (mm/dd/	yyyy)	o. Amount	
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3. Contributor Inf		toh Jm		Add 🗖 R		·{/		$\overline{\mathcal{O}}$
a. Full Name, Mailing.				d. Type of Com		<u> </u>	omments	
(include city, state, &				Candidate		50.5	Vininency	<u></u>
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				e. Level Register	- Transfer the transfer to the second second second	ĥ. O	riginal Expend	liture Date
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							Prim Preberto	
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b. Job Title/Profession		c. Employer's Nan	ne/Specific Field	f. Purpose		j, El	ection Sum to I	Date
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3. Contributor Info	24447.448.147.448.278.96	and the second second of the second			emove			
a. Full Name, Mailing A (include city, state, &	Sec. 8. 35. 4. 6. 1. 2.	Phone		d. Type of Comn	niffee	g, Co	omments	
			<u>tha ng basa sa 20029 1899</u>	Referendum	=	ľ		
				e. Level Register		h. O	iginal Expend	iture Date
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CRO-1240			NC State Boar	d of Elections			D	ecember 2007

Aggreg	ated Non-M	ledia Expendi	tures	Page	of	Amendment Yes No
Optional f	orm used to rep	ort NC Non-Media	Expenditures			
		nd Fund if applicat			2. ID Number	
Comm	itte to (	elect Joyc	e-forkic	s		
3. Payee Ir	lormation				f. Amount	Design of Design of the
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E - Salarie I - Postage		E <b>quipment</b> nalties	G - Political I K* - Office I	Party H* - H Expenses O* - D	olding Public Of onations to Lega	
0* - Othe	er and a second				w	
<u>* Codes r</u> CRO-1315	equire detailed	explanation in re	equired remar e Board of Elections	ks field (g)		December 2009

<b>Refunds/Reimbursen</b>		_	g of _	Amendment
Use this form to report refunds/			rned to the contr	
1. Committee Full Name (and	11 - 0			2. ID Number
	lect Joycefor			THE ALL STATES AND AN ADDRESS OF STATES AND ADDRESS AND ADDRES
3. Payee Information a. Full Name, Mailing Address & Pho	ma	Add Real Real Real Real Real Real Real Real	emove.	h. Original Receipt Date
(include city, state, & zip)		Candidate		
Joyce MEAdr	2m 5	Referendum		2-25-10
2311 marble 5	L.	e. Level Register	ed County:	i. Original Receipt Amo
as Il Marple	)   ? .	State	Municipality	Stating 95
Winston-Sale	•	f. Purpose Code		j. Election Sum to Date
	27107			\$83,42
b. Job Title/Profession	Imployer's Name/Specific Field	g. Comments		k. Account Code
Reservations AGENT L	SAIrWAUS			SRT53
I. Form of Payment m. Required			n. Date (mm/dd/y	yyy) 0. Amount
CASh			02-03-	11 \$83742
3. Payee Information		Add 🔲 Re	A bow which a little A de Shin Alde a time for the time the galacte and	
<ul> <li>a. Full Name, Mailing Address &amp; Pho (include city, state, &amp; zip)</li> </ul>	ne	d. Type of Comm	ittee	h. Original Receipt Date
			PAC Party	2-25-10
Joyce MS Adam 2311 Marble St	n	e. Level Registere		i. Original Receipt Amo
2311 Marble St	-,	Federal State	County: Municipality	\$ 95.00
Winston-Sales	m, NC 27107	f. Purpose Code		j. Election Sum to Date
- •	/			\$ 53 .112
b. Job Title/Profession c. E	mployer's Name/Specific Field	g. Comments		k. Account Code
		0.00	<u> 1969-10191999 - 1979 - 1979 - 1979</u>	SBTER
RESERVATION AGENT (C. I. Form of Payment [m. Required I	SHN WHIS		n, Date (mm/dd/y	$(\nabla U )$
CASH		······································	1-02-11	\$43.42
3. Payee Information		Add. 🗖 Re	move	
a. Full Name, Mailing Address & Phor	ne	d. Type of Comm		h. Original Receipt Date
(include city, state, & zip)	<u>i in the state in the state</u>	Candidate	PAC Party	
		e. Level Registere		i. Original Receipt Amou
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Job Title/Profession c. Ei	nployer's Name/Specific Field	g. Comments		k. Account Code
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. Form of Payment m. Required R	temarks	) 65 8.200 8.3 0	n, Date (mm/dd/y	yy) o. Amount
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4. Total only this Page				\$ 83.42
5. Total of ALL CRO-1320 Pag				\$ 83,42
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L - Returned to Contributor	M - Overpayment for	and the second	N - Exce	eded Contribution Lim
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