

# Disclosure Report Cover Sheet

Please note that this cover sheet cannot be used to amend committee information such as the committee address; treasurer, assistant treasurer, or custodian of books information; or depository information. You must amend the Statement of Organization (CRO-2100) to make those kinds of committee changes.

1. Name of Committee or Fund <i>John Polite for Sheriff</i>			6. Date <i>8-30-02</i>	
2. Address <i>1983 Emorywood Road</i>			7. ID Number	
3. City <i>Rural Hall</i>	4. State <i>NC</i>	5. Zip <i>27045</i>	8. Phone <i>969-9431</i>	

9. Type of Report <i>2002 Interim Report</i>	10. Period Covered Start <i>06-30-02</i> End <i>08-24-02</i>	11. Amendment <input type="checkbox"/> Yes <input type="checkbox"/> No
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12. Type of Committee or Fund (Check one)

<input type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> "Booster Fund"
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Soft Money Account	<input type="checkbox"/> Building Fund
<input type="checkbox"/> Other Fund:			

13. Treasurer Name  
*Nadine Clements*

14. Assistant Treasurer Name(s)

15. Custodian of Books Name  
*John Polite for Sheriff*

16. Bank/Depository/Credit Account Information

a. Name	b. Purpose	c. Code	d. Period Begin Balance
<i>BB+T Bank</i>	<i>For all Campaign expens</i>		<i>\$ 1,401.53</i>
			\$
			\$
			\$
			\$
			\$

### 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.

*Nadine M Clements*  
Signature of Appointed Treasurer or Candidate

*8/30/02*  
Date

# Detailed Summary

1. Name of Committee or Fund		2. Type of Report		3. ID Number	
John Polite for Sheriff					
Start of Election Cycle: January 1, 2002		Total this Period	Total this Election Cycle	For Office Use Only	
4) Cash on Hand at Start of Election Cycle			\$		
5) Cash on Hand at Start of Present Reporting Period		\$ 1401.53			
<b>RECEIPTS</b>					
6) Contributions from Individuals (CRO-1210)		\$ 6435.00	\$ 11485.00		
7) Contributions from Political Party Committees (CRO-1220)		\$	\$		
8) Contributions from Other Political Committees (CRO-1230)		\$	\$		
9) Loan Proceeds (CRO-1410)		\$ 1000.00	\$ 1751.00		
10) Refunds & Reimbursements to 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)		\$ 2918.00	\$ 5279		
12) TOTAL RECEIPTS (Add lines 6, 7, 8, 9, 10, 11a, 11b, and 11c)		\$ 10153.00	\$ 18515.00		
<b>EXPENDITURES</b>					
13) Disbursements (CRO-1310)					
13a) Operating Expenditures (CRO-1310)		\$ 7210.30	\$ 13630.77		
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$	\$		
13c) Coordinated Party Expenditures (CRO-1310)		\$	\$		
14) Loan Repayments (CRO-1420)		\$	\$		
15) Refunds from Committee (CRO-1320)		\$	\$		
16) In-Kind Contributions (CRO-1510)		\$ 3985.00	\$ 4585.00		
17) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, and 16)		\$ 11195.30	\$ 18215.77		
18) Cash on Hand at End of Reporting Period (For this Period, add lines 5 and 12 together, then subtract line 17) (For this Election Cycle, add lines 4 and 12 together, then subtract line 17)		\$ 359.23	\$ 359.23		
<b>Additional Information</b>					
19) Non-Monetary Gifts Given to Committees (CRO-1330)		\$			
20) Outstanding Loans (including ones from other campaigns) (CRO-1430)		\$ 751.00			
21) Debts and Obligations owed BY the Committee (CRO-1610)		\$			
22) Debts and Obligations owed TO the Committee (CRO-1620)		\$			
23) Parent Entity's Administrative Support (CRO-1710)		\$			

### Contributions from INDIVIDUALS

1. Name of Committee or Fund							2. ID Number		
John Polite for Sheriff									
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount		
	Alma Keen 2023 E. End Blvd Winston-Salem, NC 27101				<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
b. Job Title/Profession									
Retired Teacher									
c. Employer's Name/Specific Field									
j. If Amendment, choose change type:							k. Election Cycle Sum to Date		
<input type="checkbox"/> Add <input type="checkbox"/> Delete							\$		
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount		
	James Webster 800 Cameron Ave Winston-Salem, NC 27101				<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
b. Job Title/Profession									
Asst. Coach									
c. Employer's Name/Specific Field									
UNC - Chapel Hill									
j. If Amendment, choose change type:							k. Election Cycle Sum to Date		
<input type="checkbox"/> Add <input type="checkbox"/> Delete							\$		
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount		
	James Beatty 125 Scarlett Oak Way Fairburn, Ga 30213				<input type="checkbox"/>	<input type="checkbox"/>	\$ 3985.00		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
b. Job Title/Profession									
Producer/Director									
c. Employer's Name/Specific Field									
Self Employed									
j. If Amendment, choose change type:							k. Election Cycle Sum to Date		
<input type="checkbox"/> Add <input type="checkbox"/> Delete							\$		
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount		
	John Shelton 315 Retnah Drive Winston-Salem, NC 27106				<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 500.00		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
b. Job Title/Profession									
c. Employer's Name/Specific Field									
j. If Amendment, choose change type:							k. Election Cycle Sum to Date		
<input type="checkbox"/> Add <input type="checkbox"/> Delete							\$		
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
b. Job Title/Profession									
c. Employer's Name/Specific Field									
j. If Amendment, choose change type:							k. Election Cycle Sum to Date		
<input type="checkbox"/> Add <input type="checkbox"/> Delete							\$		
4. Total only this Page							\$ 4685.00		
5. Total of ALL CRO-1210 Pages							\$		
(This line must be on line 6 of Detailed Summary Page CRO-1100)									

# Contributions from INDIVIDUALS

1. Name of Committee or Fund							2. ID Number		
<b>John Polite for Sheriff</b>									
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Jimmy Durham P.O. Box 577 East Bend, NC 2708			<del>0000000000</del>	Check	07/30/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 1,000.00
	b. Job Title/Profession Debtor						<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Don Popin 140 S Stratford Rd Winston-Salem, NC 27104			<del>0000000000</del>	Check	8/14/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
	b. Job Title/Profession Owen Service Station						<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Self-Employed			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Harvy Smooth			<del>0000000000</del>	Money Order	07/17/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 200.00
	b. Job Title/Profession						<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Michael A. Grace 390 Gaither Road Winston-Salem, NC 27101			<del>0000000000</del>	Check	07-19-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 200.00
	b. Job Title/Profession Lawyer						<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Self-Employed			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Cedrick Russel 1616 Eagle Crest Dr. Pittsboro, NC 27040			<del>0000000000</del>	Check	07-16-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 250.00
	b. Job Title/Profession Funeral Director						<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Self-Employed			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
4. Total only this Page							\$ 1750.00		
5. Total of ALL CRO-1210 Pages (only show on last page)							\$		
(This line must be on line 6 of Detailed Summary Page CRO-1100)									

### Other Receipt Sources

1. Name of Committee or Fund <b>John Polite for Sheriff</b>				2. ID Number	
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>					
<input type="checkbox"/> Interest		<input type="checkbox"/> Contributions from Not-for-Profit Organizations		<input type="checkbox"/> Outside Sources of Income	
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
	<b>Compassion Committee for John Polite</b> <b>Golden Mutual Insurance Building</b> <b>Winston-Salem, NC 27101</b>		<b>Cash</b>	<b>08/15/02</b>	<b>\$ 3,658.00</b>
f. If Outside Source of Income, explain: <b>Fundraiser</b>		g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		h. If Not-for-Profit, list Fed ID #:	
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		h. If Not-for-Profit, list Fed ID #:	
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		h. If Not-for-Profit, list Fed ID #:	
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		h. If Not-for-Profit, list Fed ID #:	
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		h. If Not-for-Profit, list Fed ID #:	
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		h. If Not-for-Profit, list Fed ID #:	
5. Total only this Page					\$ 3658.00
6. Total of ALL CRO-1250 Related Pages <i>(only show on last page)</i>					\$
<i>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</i>					
<i>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</i>					
<i>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</i>					

### In-Kind Contributions

1. Name of Committee or Fund		2. ID Number		
John Polite for Sheriff				
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)	e. Fair Market Amount
	Kelsher Communications, Inc 125 Commerce Drive, Suite J Fayetteville, Ga 30214	Commercials	08/03/02	\$ 3985.00
b. Type of Contributor		f. If Amendment, choose change type:		g. Election Cycle Sum to Date
<input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)	e. Fair Market Amount
				\$
b. Type of Contributor		f. If Amendment, choose change type:		g. Election Cycle Sum to Date
<input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)	e. Fair Market Amount
				\$
b. Type of Contributor		f. If Amendment, choose change type:		g. Election Cycle Sum to Date
<input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)	e. Fair Market Amount
				\$
b. Type of Contributor		f. If Amendment, choose change type:		g. Election Cycle Sum to Date
<input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)	e. Fair Market Amount
				\$
b. Type of Contributor		f. If Amendment, choose change type:		g. Election Cycle Sum to Date
<input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)	e. Fair Market Amount
				\$
b. Type of Contributor		f. If Amendment, choose change type:		g. Election Cycle Sum to Date
<input type="checkbox"/> Individual <input type="checkbox"/> Party Committee <input type="checkbox"/> Other Political Committee <input type="checkbox"/> Other Receipt Source		<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$
4. Total only this Page				\$ 3985.00
5. Total of ALL CRO-1510 Pages (only show on last page)				\$
(This line must be on line 16 of Detailed Summary Page CRO-1100)				

**Disbursements**

<b>1. Name of Committee or Fund</b>						<b>2. ID Number</b>		
John Polite for Sheriff								
<b>3. Type of Disbursement</b> <small>(Please use separate CRO-1330 forms for each type of Disbursements.)</small>								
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees			<input type="checkbox"/> Coordinated Party Expenditures			
4. Payee	<b>a. Full Name, Mailing Address &amp; Phone</b> <small>(include city, state, and zip)</small>			<b>d. Purpose</b>	<b>e. Account Number/Code</b>	<b>f. Form of Payment</b>	<b>g. Date</b> <small>(mm/dd/yyyy)</small>	<b>h. Amount</b>
	Advertising & Supply 7630 Cass Street Omaha, NE 68114			Window Decals	<del>0000000000</del>	Check	07/09/02	\$ 306.34
<b>b. If Contribution to County Committee, specify:</b>		<b>c. If Coordinated Party Expense, list office:</b>		<b>i. If Amendment, choose change type:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete			<b>j. Election Cycle Sum To Date</b> \$	
4. Payee	<b>a. Full Name, Mailing Address &amp; Phone</b> <small>(include city, state, and zip)</small>			<b>d. Purpose</b>	<b>e. Account Number/Code</b>	<b>f. Form of Payment</b>	<b>g. Date</b> <small>(mm/dd/yyyy)</small>	<b>h. Amount</b>
	Blair Enterprises 1001 S. Marshall St. Su. K 2-35 Box 36 Winston-Salem, NC 27101			Whik Tee Shirts	<del>0000000000</del>	Check	07/14/02	\$ 550.00
<b>b. If Contribution to County Committee, specify:</b>		<b>c. If Coordinated Party Expense, list office:</b>		<b>i. If Amendment, choose change type:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete			<b>j. Election Cycle Sum To Date</b> \$	
4. Payee	<b>a. Full Name, Mailing Address &amp; Phone</b> <small>(include city, state, and zip)</small>			<b>d. Purpose</b>	<b>e. Account Number/Code</b>	<b>f. Form of Payment</b>	<b>g. Date</b> <small>(mm/dd/yyyy)</small>	<b>h. Amount</b>
	Reggie Lovell 2401 North Liberty Street Winston-Salem, NC 27105			Signs	<del>0000000000</del>	Check	07/24/02	\$ 442.00
<b>b. If Contribution to County Committee, specify:</b>		<b>c. If Coordinated Party Expense, list office:</b>		<b>i. If Amendment, choose change type:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete			<b>j. Election Cycle Sum To Date</b> \$	
4. Payee	<b>a. Full Name, Mailing Address &amp; Phone</b> <small>(include city, state, and zip)</small>			<b>d. Purpose</b>	<b>e. Account Number/Code</b>	<b>f. Form of Payment</b>	<b>g. Date</b> <small>(mm/dd/yyyy)</small>	<b>h. Amount</b>
	Reggie Lovell 2401 North Liberty Street Winston-Salem, NC 27105			Signs (pd Balance)	<del>0000000000</del>	Check	08/20/02	\$ 442.00
<b>b. If Contribution to County Committee, specify:</b>		<b>c. If Coordinated Party Expense, list office:</b>		<b>i. If Amendment, choose change type:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete			<b>j. Election Cycle Sum To Date</b> \$	
4. Payee	<b>a. Full Name, Mailing Address &amp; Phone</b> <small>(include city, state, and zip)</small>			<b>d. Purpose</b>	<b>e. Account Number/Code</b>	<b>f. Form of Payment</b>	<b>g. Date</b> <small>(mm/dd/yyyy)</small>	<b>h. Amount</b>
	Staples / Agress Polik 430 Hines Mill Road Winston-Salem NC 27105			Campaign Supplies	<del>0000000000</del>	Check	7/26/02	\$ 57.18
<b>b. If Contribution to County Committee, specify:</b>		<b>c. If Coordinated Party Expense, list office:</b>		<b>i. If Amendment, choose change type:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete			<b>j. Election Cycle Sum To Date</b> \$	
<b>5. Total only this Page</b>							\$ 1798.62	
<b>6. Total of ALL CRO-1310 Related Pages</b> <small>(only show on last page)</small>							\$	
<small>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</small>								
<small>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</small>								
<small>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</small>								

Disbursements

1. Name of Committee or Fund <b>John Polite for Sheriff</b>						2. ID Number	
3. Type of Disbursement (Please use separate CRO-1330 forms for each type of Disbursements.)							
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees			<input type="checkbox"/> Coordinated Party Expenditures		
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	The Chronicle 617 N. Liberty Street Winston-Salem, NC 27101		News paper Ad for fundraiser Fish Fry	<del>0000000000</del>	Check	08/13/02	\$ 52.16
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date	
						\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Kelsner Communication 125 Commerce Drive, Suite J Fayetteville, Georgia 30214		Commercials	<del>0000000000</del>	Check	08/03/02	\$ 500.00
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date	
						\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Kinkols 1640 Sardis R. N. Suite 100 Charlotte, NC 28270		Campaign Supplies (folding sheets)	<del>0000000000</del>	Check	08/10/02	\$ 1,348.20
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date	
						\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Ogburn Station Meat Market 4194 Glenn Ave Winston-Salem, NC		Fish for Fundraiser	<del>0000000000</del>	Check	08/16/02	\$ 221.34
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date	
						\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Costco # 361 Winston-Salem, NC		Supplies for Fundraiser	<del>0000000000</del>	Check	08/16/02	\$ 57.37
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date	
						\$	
5. Total only this Page							\$ 2179.07
6. Total of ALL CRO-1310 Related Pages (only show on last page)							\$
(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)							



### Disbursements

1. Name of Committee or Fund <b>John Polite for Sheriff</b>						2. ID Number	
3. Type of Disbursement (Please use separate CRO-1330 forms for each type of Disbursements.)							
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures			
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Time Warner Cable Adcast 7029 Albert Pick Rd Suite 200 Greensboro, NC 27409		TV Ads	<del>0300000000</del>	Check	08/05/09	\$ 1,080.00
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	U.S. Postal Service Winston-Salem, NC		Stamps	<del>0300000000</del>	Check	08/21/02	\$ 114.68
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Lovell Signs 2401 North Liberty Street Winston-Salem, NC 27105		Campaign Signs	<del>0300000000</del>	Check	08/21/02	\$ 900.00
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	BellSouth 629 West 5th Street Winston-Salem, NC 27101		Telephone Bill	<del>0300000000</del>	Check	07/18/02	\$ 68.40
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Class that Never Was		Ad	<del>0300000000</del>	Check	07/26/02	\$ 50.00
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$	
5. Total only this Page						\$ 2213.08	
6. Total of ALL CRO-1310 Related Pages (only show on last page)						\$	
(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)							

### Disbursements

1. Name of Committee or Fund <b>John Polite for Sheriff</b>						2. ID Number	
3. Type of Disbursement (Please use separate CRO-1330 forms for each type of Disbursements.)							
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures			
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Genesis Ads Genesis Victory Outreach Chrch 1882 Old Hollow Rd Waxhertown, NC 27051		Ad	<del>0000000000</del>	Check	08/10/02	\$ 50.00
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date \$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Bell South 629 W 5th Street Winston-Salem, NC 27101		Telephone Bill	<del>0000000000</del>	Check	08/23/02	\$ 74.53
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date \$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Lovell Signs 2401 N. Liberty Street Winston-Salem, NC 27105		Signs	<del>0000000000</del>	Check	08/21/02	\$ 895.00
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date \$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
							\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date \$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
							\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date \$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)		d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
							\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date \$	
5. Total only this Page						\$ 1019.53	
6. Total of ALL CRO-1310 Related Pages (only show on last page)						\$	
(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)							

Corrector

Outstanding Loans

1. Name of Committee or Fund		2. ID Number			
John Polite for Sheriff					
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	h. Original Loan Amount
	John Polite 1983 Emorywood Rd Rural Hill, NC 27045	08/12/02			\$ 257.00
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
		g. Security Pledged			\$ 257.00
	j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	h. Original Loan Amount
					\$
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
		g. Security Pledged			\$
	j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	h. Original Loan Amount
					\$
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
		g. Security Pledged			\$
	j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	h. Original Loan Amount
					\$
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
		g. Security Pledged			\$
	j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	h. Original Loan Amount
					\$
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
		g. Security Pledged			\$
	j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate %	h. Original Loan Amount
					\$
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
		g. Security Pledged			\$
	j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				
4. Total only this Page					\$ 257.00
5. Total of ALL CRO-1430 Pages (only show on last page)					\$
(This line must be on line 24 of Detailed Summary Page CRO-1100)					

