

COPY

Disclosure Report Cover

Amendment
[] Yes [X] No

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: MCNEILL 2012
c. ID Number
b. Mailing Address: 1118 S HAWTHORNE RD, WINSTON-SALEM, NC 27103
d. Date Filed: 10/29/2012
e. Phone Number
2. Report Year: 2012
3. Period Start Date: 07/01/2012
4. Period End Date: 10/20/2012
5. Treasurer Full Name: JACK H CAMPBELL JR
6. Type of Committee: Candidate Campaign
9. Type of Report: Third
7. Type of Fund: Other
8. Number of Fundraisers: 6
3. Account Information: WELLS FARGO BANK, OPERATING FUNDS, C-1
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...
FOR OFFICE USE ONLY: Date Received: 10/31/2012, Date Postmarked: 10/29/2012, Employee: Judy Speas, Delivery Method: Registered Mail

Detailed Summary

Amendment

Yes No

Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
MCNEILL 2012	2012 Third Quarter	
Start of Election Cycle: January 1, <u>2012</u>		
	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 825.00	\$ 0.00
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 1,926.40	\$ 2,001.40
6) Contributions from Individuals (CRO-1210)	\$ 19,964.42	\$ 20,953.23
7) Contributions from Political Party Committees (CRO-1220)	\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees (CRO-1230)	\$ 400.00	\$ 400.00
9) Loan Proceeds (CRO-1410)	\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$ 0.00	\$ 0.00
11) Other Receipt Sources		
11a) Interest on Bank Accounts (CRO-1250)	\$ 0.00	\$ 0.00
11b) Contributions from Not-For-Profit Organizations (CRO-1250)	\$ 0.00	\$ 0.00
11c) Outside Sources of Income (CRO-1250)	\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales (CRO-1265)	\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 22,290.82	\$ 23,354.63
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 7,074.92	\$ 7,074.92
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 883.00	\$ 883.00
13c) Coordinated Party Expenditures (CRO-1310)	\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures (CRO-1315)	\$ 0.00	\$ 0.00
15) Loan Repayments (CRO-1420)	\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$ 0.00	\$ 0.00
17) In-Kind Contributions (CRO-1510)	\$ 10,417.82	\$ 10,656.63
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 18,375.74	\$ 18,614.55
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 4,740.08	\$ 4,740.08
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	\$ 0.00
26) Forgiven Loans (CRO-1440)	\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum (CRO-2220)	\$ 0.00	\$ 0.00
28) Contributions to be Refunded (CRO-1215)	\$ 0.00	\$ 0.00

Aggregated Contributions from Individuals

Page 1 of 3

Amendment
 Yes No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)					2. ID Number	
MCNEILL 2012						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Electric Funds Tran		10/02/2012	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		08/15/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		08/17/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		08/09/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	In-Kind	POSTAGE - ACE HDWE	07/11/2012	\$ 3.40	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Electric Funds Tran		08/01/2012	\$ 10.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/27/2012	\$ 20.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/20/2012	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/11/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/27/2012	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		08/31/2012	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		10/11/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/27/2012	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Electric Funds Tran		08/28/2012	\$ 18.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/28/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		08/31/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		08/16/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		08/17/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		08/16/2012	\$ 20.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/04/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/20/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		07/10/2012	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/24/2012	\$ 50.00	
4. Total only this Page					\$ 821.40	
5. Total of ALL CRO-1205 Pages					\$ 1,926.40	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

Aggregated Contributions from Individuals

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)					2. ID Number	
MCNEILL 2012						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		08/09/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		08/13/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/11/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/20/2012	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		08/13/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		10/01/2012	\$ 35.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		08/13/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		08/13/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/21/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/21/2012	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/20/2012	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		08/11/2012	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/22/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/16/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		08/29/2012	\$ 15.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/27/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/27/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Electric Funds Tran		09/16/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/27/2012	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		08/23/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/17/2012	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		08/29/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		08/10/2012	\$ 50.00	
4. Total only this Page					\$ 950.00	
5. Total of ALL CRO-1205 Pages					\$ 1,926.40	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

Aggregated Contributions from Individuals

Page 3 of 3

Amendment
 Yes No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)					2. ID Number	
MCNEILL 2012						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/14/2012	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Electric Funds Tran		08/14/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/27/2012	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	C-1	Check		09/27/2012	\$ 25.00	
4. Total only this Page					\$ 155.00	
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 1,926.40	

CRO-1205

NC State Board of Elections

April 2007

Contributions from Individuals

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Amendment
 Yes 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) MCNEILL 2012						2. ID Number
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) TERRY B ALLEN 1090 VIENNA FOREST RD PFAFFTOWN, NC 27040			b. Job Title/Profession RADIOLOGY TECHNICIAN		d. Comments	
			c. Employer's Name/Specific Field PREMIER MEDICAL		e. Election 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"/>	C-1	Check		07/12/2012	\$ 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) SARAH BARBOUR 1229 W FIRSTST WINSTON-SALEM, NC 27101			b. Job Title/Profession PROFESSOR		d. Comments	
			c. Employer's Name/Specific Field WAKE FOREST UNIVERSITY		e. Election 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"/>	C-1	Check		08/17/2012	\$ 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) JAMES BAREFIELD 120 BELLE VISTA CT WINSTON-SALEM, NC 27106			b. Job Title/Profession RETIRED		d. Comments	
			c. Employer's Name/Specific Field RETIRED		e. Election 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"/>	C-1	Check		09/03/2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 300.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 19,964.42	

Contributions from Individuals

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
MCNEILL 2012						
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
BERT BENNETT 1700 CHICKASHA DR. PFAFFTOWN, NC 27040				RETIREED		
				c. Employer's Name/Specific Field		
				RETIREED		
e. Election Sum to Date						
						\$ 300.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	Check		07/10/2012	\$ 300.00	
<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
BERT BENNETT 1065 ENGLEWOOD DR WINSTON-SALEM, NC 27106				PSYCHOLOGIST		
				c. Employer's Name/Specific Field		
				SELF		
e. Election 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"/>	C-1	Check		07/17/2012	\$ 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
GRAHAM F BENNETT PO BOX 2736 WINSTON-SALEM, NC 27101				PRESIDENT		
				c. Employer's Name/Specific Field		
				QUALITY OIL COMPANY		
e. Election 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"/>	C-1	Check		07/17/2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 500.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 19,964.42

Contributions from Individuals

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	
MCNEILL 2012							
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	
JAMES BENNETT 605 WOODLAND DR GREENSBORO, NC 27408				PRESIDENT			
				c. Employer's Name/Specific Field			
				ATLAS ELECTRIC			
						e. Election 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"/>	C-1	Check		07/12/2012	\$ 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	
JOHN J BENNETT 2320 GADDY DR RALEIGH, NC 27609				CHAIRMAN			
				c. Employer's Name/Specific Field			
				CAPITAL DEVELOPMENT SERVICES			
						e. Election 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"/>	C-1	Check		07/22/2012	\$ 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	
LOUISE BENNETT 1001 WHITE OAK CREEK DR APEX, NC 27523				REGISTERED NURSE			
				c. Employer's Name/Specific Field			
				SELF-EMPLOYED			
						e. Election 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"/>	C-1	Check		07/18/2012	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 300.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 19,964.42	

Contributions from Individuals

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) MCNEILL 2012						2. ID Number
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) ANN BENNETT-PHILLIPS 1740 CHICKASHA DR PFAFFTOWN, NC 27040				b. Job Title/Profession BANKER		d. Comments
				c. Employer's Name/Specific Field FIRST CITIZENS		
						e. Election 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"/>	C-1	Check		07/13/2012	\$ 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) CHRISTINE BOHLE 5000 MARBLE ARCH RD WINSTON-SALEM, NC 27104				b. Job Title/Profession REGISTERED NURSE		d. Comments
				c. Employer's Name/Specific Field RETIRED		
						e. Election 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"/>	C-1	Check		09/09/2012	\$ 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) N.B. BRAGG 260 CREPE MYRTLE CIRCLE WINSOTN-SALEM, NC 27106				b. Job Title/Profession RETIRED		d. Comments
				c. Employer's Name/Specific Field RETIRED		
						e. Election 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"/>	C-1	Check		09/24/2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 300.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 19,964.42

Contributions from Individuals

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Amendment
 Yes 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
MCNEILL 2012						
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	
HOMER BROOKSHIRE 116 LOGONIER DR ADVANCE, NC 27006			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	Check		08/22/2012	\$ 250.00	
<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	
SUSAN CAMPBELL 1208 BROOKSTOWN AVE WINSTON-SALEM, NC 27101			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election 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"/>	C-1	Electric Funds Tran		09/30/2012	\$ 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	
DAVID COATES 2113 BENWICKE DR PFAFFTOWN, NC 27040			ACADEMIC			
			c. Employer's Name/Specific Field			
			WAKE FORST UNIVERSITY		e. Election 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"/>	C-1	Check		08/09/2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 450.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 19,964.42	

Contributions from Individuals

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	
MCNEILL 2012						
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	
JOSEPH COLTRANE JR 6001 KNIGHTSBRIDGE CT. KERNERSVILLE, NC 27284			ATTORNEY			
			c. Employer's Name/Specific Field			
			SELF		e. Election 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"/>	C-1	Check		08/14/2012	\$ 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	
NANCY COTTON 2648 BELWICK VILLAGE DR WINSTON-SALEM, NC 27106			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	Check		08/06/2012	\$ 200.00	
<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	
SCOTT CRAMER 1244 ARBOR RD #454 WINSTON-SALEM, NC 27104			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election 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"/>	C-1	Check		08/20/2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 19,964.42	

Contributions from Individuals

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) MCNEILL 2012						2. ID Number
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	
MARY M DICKINSON 3720 KIRKLEES RD WINSTON-SALEM, NC 27104			ESL TEACHER			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			FORSYTH TECHNICAL COMMUNITY COLLEGE		\$ 130.94	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	Check		08/15/2012	\$ 50.00	
<input type="checkbox"/>	C-1	In-Kind	FOOD FOR EVENT - COSTCO	09/25/2012	\$ 80.94	
<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	
PATRICIA EISENACH 622 ARBOR RD WINSTON-SALEM, NC 27104			COMMUNITY VOLUNTEER			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			SELF		\$ 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"/>	C-1	Check		09/20/2012	\$ 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	
JAKAY ERVIN 111 W. 28TH ST. WINSTON-SALEM, NC 27105			RETIRED			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			RETIRED		\$ 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"/>	C-1	Check		08/31/2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 330.94	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 19,964.42	

Contributions from Individuals

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
MCNEILL 2012						
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	
CORTLANDT FREEMAN 701 ROSLYN RD WINSTON-SALEM, NC 27104			COMMUNITY VOLUNTEER			
			c. Employer's Name/Specific Field			
			SELF		e. Election 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"/>	C-1	Check		09/20/2012	\$ 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	
JAMES A. GALLAHER 1001 GREENHURST RD. WINSTON-SALEM, NC 27104			ATTORNEY			
			c. Employer's Name/Specific Field			
			WELLS FARGO		e. Election 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"/>	C-1	Check		10/13/2012	\$ 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	
JOAN GREASON 745 ARBOR RD WINSTON-SALEM, NC 27104			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	Check		08/15/2012	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 450.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 19,964.42	

Contributions from Individuals

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
MCNEILL 2012						
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	
CHARLOTTE HANES 530 N TRADE ST #3408 WINSTON-SALEM, NC 27101			RETIRE			
			c. Employer's Name/Specific Field			
			RETIRE		e. Election 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"/>	C-1	Electric Funds Tran		09/07/2012	\$ 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	
MRS. GORDON HANES 1244 ARBOR RD #448 WINSTON-SALEM, NC 27104			RETIRE			
			c. Employer's Name/Specific Field			
			RETIRE		e. Election 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"/>	C-1	Check		09/06/2012	\$ 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	
KATY HARRIGER 3391 POTEAT CT WINSTON-SALEM, NC 27106			PROFESSOR			
			c. Employer's Name/Specific Field			
			WAKE FOREST UNIVERSITY		e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	Check		08/18/2012	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 450.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 19,964.42	

Contributions from Individuals

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
MCNEILL 2012						
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	
BARBARA HAYES 3910 POMEROY DR WINSTON-SALEM, NC 27105			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	Check		08/17/2012	\$ 300.00	
<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	
KEITH HENNESSEE 1705 TIMBERWAY DR RICHARDSON, TX 75082			ATTORNEY			
			c. Employer's Name/Specific Field			
			VARCO CO.		e. Election 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"/>	C-1	Check		07/26/2012	\$ 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	
BEVERLY S. JOHNSTON 1620 LYNWOOD AVE. WINSTON-SALEM, NC 27104			BUSINESS OWNER			
			c. Employer's Name/Specific Field			
			BLESSINGS		e. Election Sum to Date	
					\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	Check		08/21/2012	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 900.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 19,964.42	

Contributions from Individuals

Pg 11 of 26

Amendment
 Yes 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
MCNEILL 2012						
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	
ALLEN JOINES 713 SURRY PATH TRAIL WINSTON-SALEM, NC 27104			MAYOR			
			c. Employer's Name/Specific Field CITY OF WINSTON-SALEM			
						e. Election 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"/>	C-1	Check		08/28/2012	\$ 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	
JUDY JOYCE 330 FISHEL RD WINSTON-SALEM, NC 27127			OWNER - NC LICENSE PLATE REG			
			c. Employer's Name/Specific Field SELF			
						e. Election 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"/>	C-1	Check		08/16/2012	\$ 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	
JANET JOYNER 4178 LYTCHFIELD CT WINSTON-SALEM, NC 27104			RETIRED			
			c. Employer's Name/Specific Field RETIRED			
						e. Election Sum to Date
						\$ 250.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	Check		08/07/2012	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 450.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 19,964.42

Contributions from Individuals

Pg 12 of 26

Amendment
 Yes 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
MCNEILL 2012						
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	
ELYSE D. JUNG 521 LYNHAVEN CT. WINSTON-SALEM, NC 27104			RESEARCH TECHNICIAN			
			c. Employer's Name/Specific Field			
			WAKE FOREST UNIVERSITY SCHOOL OF MEDICINE			
					e. Election Sum to Date	
					\$ 75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	Check		09/27/2012	\$ 75.00	
<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	
DORIS KENDRICK 2419 ROSEWOOD AVE WINSTON-SALEM, NC 27103			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election 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"/>	C-1	Check		08/14/2012	\$ 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	
ROGER KIRKMAN 2550 BITTING GRD WINSTON-SALEM, NC 27104			TECHNOLOGY ANALYST			
			c. Employer's Name/Specific Field			
			WINSTON-SALEM STATE UNIV			
					e. Election 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"/>	C-1	Check		08/17/2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 275.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 19,964.42

Contributions from Individuals

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
MCNEILL 2012						
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
TOM LAMBETH 700 YORKSHIRE RD WINSTON-SALEM, NC 27106				RETIRED		
				c. Employer's Name/Specific Field		
				RETIRED		
						e. Election Sum to Date
						\$ 250.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	Check		09/24/2012	\$ 250.00	
<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
CARROLL LEGGETT 705-B South Marshall St. WINSTON-SALEM, NC 27101				PUBLIC RELATIONS CONSULTANT		
				c. Employer's Name/Specific Field		
				RALPH SIMPSON & ASSOC		
						e. Election Sum to Date
						\$ 250.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	Check		09/19/2012	\$ 250.00	
<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
GENE LUCAS 3540 YORK RD WINSTON-SALEM, NC 27104				RETIRED		
				c. Employer's Name/Specific Field		
				RETIRED		
						e. Election 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"/>	C-1	Check		08/06/2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 600.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 19,964.42

Contributions from Individuals

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
MCNEILL 2012						
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
TRACEY MAXWELL 4260 SADDLEWOOD FOREST DR WINSTON-SALEM, NC 27106				INDEPENDENT VIDEO PRODUCER		
				c. Employer's Name/Specific Field		
				SELF-EMPLOYED		
						e. Election Sum to Date
						\$ 250.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	Check		09/04/2012	\$ 250.00	
<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
DREW MCNEILL 506 BING CROSBY BLVD ADVANCE, NC 27006				MEDICAL LITIGATION CONSULTANT		
				c. Employer's Name/Specific Field		
				FIRM LOGIC LTD		
						e. Election 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"/>	C-1	Check		09/20/2012	\$ 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
HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103				RETIRED		
				c. Employer's Name/Specific Field		
				RETIRED		
						e. Election Sum to Date
						\$ 10,333.48
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	In-Kind	HISPANIC LEAGUE BOOTH FEE	07/31/2012	\$ 25.00	
<input type="checkbox"/>	C-1	In-Kind	COPIES & POSTAGE - OFFICE DEPOT	07/31/2012	\$ 68.11	
<input type="checkbox"/>	C-1	In-Kind	CAMPAIGN ADMIN - PATTY GARRISON	08/03/2012	\$ 80.00	
4. Total only this Page						\$ 523.11
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 19,964.42

Contributions from Individuals

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
MCNEILL 2012						
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	
HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103			RETIRE			
			c. Employer's Name/Specific Field			
			RETIRE			
e. Election Sum to Date						
\$ 10,333.48						
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	In-Kind	STAMPS - ACE HARDWARE	08/04/2012	\$ 90.00	
<input type="checkbox"/>	C-1	In-Kind	HISPANIC LEAGUE BOOTH	08/08/2012	\$ 25.00	
<input type="checkbox"/>	C-1	In-Kind	YARD SIGNS - MYRA GROZINGER	08/15/2012	\$ 1,414.21	
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	
HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103			RETIRE			
			c. Employer's Name/Specific Field			
			RETIRE			
e. Election Sum to Date						
\$ 10,333.48						
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	In-Kind	AD PROPS- PLAY IT AGAIN SPORTS	08/18/2012	\$ 32.01	
<input type="checkbox"/>	C-1	In-Kind	SUPPLIES - OFFICE DEPOT	08/25/2012	\$ 16.00	
<input type="checkbox"/>	C-1	In-Kind	ELAINE MARSHALL EVENT	08/29/2012	\$ 100.00	
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	
HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103			RETIRE			
			c. Employer's Name/Specific Field			
			RETIRE			
e. Election Sum to Date						
\$ 10,333.48						
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	In-Kind	SUPPLIES - GOTPRINT.COM	08/29/2012	\$ 228.94	
<input type="checkbox"/>	C-1	In-Kind	MAILING SERVICES - CB GARRISON	08/31/2012	\$ 225.00	
<input type="checkbox"/>	C-1	In-Kind	SUPPLIES - FORSYTH BOE	09/04/2012	\$ 6.00	
4. Total only this Page					\$ 2,137.16	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 19,964.42	

Contributions from Individuals

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Amendment

Yes 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) MCNEILL 2012						2. ID Number
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103				b. Job Title/Profession RETIRED		d. Comments
				c. Employer's Name/Specific Field RETIRED		
						e. Election Sum to Date \$ 10,333.48
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	In-Kind	SUPPLIES - OFFICE DEPOT	09/04/2012	\$ 19.20	
<input type="checkbox"/>	C-1	In-Kind	POSTAGE - USPS	09/05/2012	\$ 480.00	
<input type="checkbox"/>	C-1	In-Kind	SUPPLIES - ONLINELABELS	09/06/2012	\$ 63.94	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103				b. Job Title/Profession RETIRED		d. Comments
				c. Employer's Name/Specific Field RETIRED		
						e. Election Sum to Date \$ 10,333.48
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	In-Kind	POSTAGE - ACE HDWE	09/07/2012	\$ 64.00	
<input type="checkbox"/>	C-1	In-Kind	POSTAGE - ACE HDWE	09/12/2012	\$ 160.00	
<input type="checkbox"/>	C-1	In-Kind	POSTAGE - ACE HDWE	09/13/2012	\$ 2.29	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103				b. Job Title/Profession RETIRED		d. Comments
				c. Employer's Name/Specific Field RETIRED		
						e. Election Sum to Date \$ 10,333.48
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	In-Kind	DEMOCRACY NC EVENT	09/13/2012	\$ 40.00	
<input type="checkbox"/>	C-1	In-Kind	TEE SHIRTS - YAMABUSHI DESIGNS	09/13/2012	\$ 100.00	
<input type="checkbox"/>	C-1	In-Kind	POSTAGE - ACE HDWE	09/21/2012	\$ 2.29	
4. Total only this Page						\$ 931.72
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 19,964.42

Contributions from Individuals

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
MCNEILL 2012						
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	
HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103			RETIRE			
			c. Employer's Name/Specific Field			
			RETIRE			
						e. Election Sum to Date
						\$ 10,333.48
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	In-Kind	WALTER DALTON EVENT	09/21/2012	\$ 70.00	
<input type="checkbox"/>	C-1	In-Kind	ADVERTISING - TIME WARNER	09/21/2012	\$ 2,945.25	
<input type="checkbox"/>	C-1	In-Kind	POSTAGE - ACE HDWE	09/27/2012	\$ 323.09	
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	
HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103			RETIRE			
			c. Employer's Name/Specific Field			
			RETIRE			
						e. Election Sum to Date
						\$ 10,333.48
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	In-Kind	POSTAGE - COSTCO	09/28/2012	\$ 44.75	
<input type="checkbox"/>	C-1	In-Kind	POSTAGE - ACE HDWE	09/29/2012	\$ 160.00	
<input type="checkbox"/>	C-1	In-Kind	ADAM FDN EVENT	09/30/2012	\$ 30.00	
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	
HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103			RETIRE			
			c. Employer's Name/Specific Field			
			RETIRE			
						e. Election Sum to Date
						\$ 10,333.48
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	In-Kind	PRINTING - GO PRINT	10/02/2012	\$ 105.20	
<input type="checkbox"/>	C-1	In-Kind	LUNCHEON - UNION BAPTIST CHURCH	10/04/2012	\$ 40.00	
<input type="checkbox"/>	C-1	In-Kind	LILLIAN'S LIST EVENT	10/05/2012	\$ 250.00	
4. Total only this Page						\$ 3,968.29
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 19,964.42

Contributions from Individuals

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
MCNEILL 2012						
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	
HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103			RETIRE			
			c. Employer's Name/Specific Field			
			RETIRE		e. Election Sum to Date	
					\$ 10,333.48	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	In-Kind	POSTAGE - USPS	10/09/2012	\$ 384.00	
<input type="checkbox"/>	C-1	In-Kind	POSTAGE - ACE HDWE	10/15/2012	\$ 128.00	
<input type="checkbox"/>	C-1	In-Kind	ADVERTISING - TIME WARNER	10/17/2012	\$ 2,611.20	
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	
TOM MULLEN 3380 POTEAT CT WINSTON-SALEM, NC 27106			RETIRE			
			c. Employer's Name/Specific Field			
			RETIRE		e. Election 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"/>	C-1	Electric Funds Tran		09/17/2012	\$ 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	
KEN OSTBERG 605 RITTENHOUSE CT. WINSTON-SALEM, NC 27104			RETIRE			
			c. Employer's Name/Specific Field			
			RETIRE		e. Election 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"/>	C-1	Check		08/14/2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 3,323.20	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 19,964.42	

Contributions from Individuals

Pg 19 of 26

Amendment
 Yes 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) MCNEILL 2012						2. ID Number
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	
DELMAS E PARKER JR 7525 HARPERS CROSSING LN CLEMMONS, NC 27102			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election 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"/>	C-1	Check		08/17/2012	\$ 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	
KATHY POUNDS 1102 MELROSE ST WINSTON-SALEM, NC 27103			LIBRARIAN			
			c. Employer's Name/Specific Field			
			SUMMIT SCHOOL			
					e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	Check		09/27/2012	\$ 200.00	
<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	
TERESA POWELL 4019 KATHRYN CT PFAFFTOWN, NC 27040			COMMUNITY VOLUNTEER			
			c. Employer's Name/Specific Field			
			SELF			
					e. Election 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"/>	C-1	Check		09/26/2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 19,964.42	

Contributions from Individuals

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) MCNEILL 2012						2. ID Number
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) LISA PRICE 2200 N LAKESHORE DR CHAPEL HILL, NC 27514			b. Job Title/Profession RETIRED		d. Comments	
			c. Employer's Name/Specific Field RETIRED		e. Election 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"/>	C-1	Check		08/25/2012	\$ 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) HELEN PRICHARD 2751 CLUB PARK RD WINSTON-SALEM, NC 27104			b. Job Title/Profession RETIRED		d. Comments	
			c. Employer's Name/Specific Field RETIRED		e. Election 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"/>	C-1	Check		08/17/2012	\$ 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) ELIZABETH QUICK 5017 KNOB VIEW TRAIL WINSTON-SALEM, NC 27104			b. Job Title/Profession ATTORNEY		d. Comments	
			c. Employer's Name/Specific Field WOMBLE CARLYLE		e. Election 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"/>	C-1	Check		08/18/2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 300.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 19,964.42	

Contributions from Individuals

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
MCNEILL 2012						
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	
ANN ROGERS 6001 WESTWOOD TERRACE NORFOLK, VA 23508			DECORATING CONSULTANT			
			c. Employer's Name/Specific Field			
			SELF-EMPLOYED		e. Election 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"/>	C-1	Check		08/13/2012	\$ 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	
LILY SAADE 1021 PASCHAL DR WINSTON-SALEM, NC 27106			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election 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"/>	C-1	Check		08/07/2012	\$ 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	
PAUL SINAL 768 AUSTIN LN WINSTON-SALEM, NC 27106			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election 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"/>	C-1	Check		08/09/2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 300.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 19,964.42	

Contributions from Individuals

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	
MCNEILL 2012							
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	
MARGARET SUPPLEE SMITH 100 PIEDMONT AVE WINSTON-SALEM, NC 27101				UNIVERSITY PROFESSOR			
				c. Employer's Name/Specific Field			
				WAKE FOREST UNIVERSITY		e. Election 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"/>	C-1	Check		08/14/2012	\$ 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	
VIRGINIA UNDERHILL 1263 HUNTINGDON RD WINSTON-SALEM, NC 27104				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED		e. Election 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"/>	C-1	Check		07/23/2012	\$ 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	
SUSAN WALL 1244 ARBOR RD #1112 WINSTON-SALEM, NC 27104				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED		e. Election Sum to Date	
						\$ 75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	C-1	Check		07/23/2012	\$ 75.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 275.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 19,964.42	

Contributions from Individuals

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	
MCNEILL 2012							
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	
LLOYD WALTER 804 BUFFINGTON CT WINSTON-SALEM, NC 27104				RETIREED			
				c. Employer's Name/Specific Field			
				RETIREED		e. Election 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"/>	C-1	Check		08/17/2012	\$ 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	
MARY WAYNE-THOMAS 2997 VALLEY CT #G WINSTON-SALEM, NC 27106				PROFESSOR OF THEATRE			
				c. Employer's Name/Specific Field			
				WAKE FOREST UNIVERSITY		e. Election 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"/>	C-1	Check		09/24/2012	\$ 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	
MARY LYNN WIGODSKY 1140 E KENT RD WINSTON-SALEM, NC 27104				COMMUNITY VOLUNTEER			
				c. Employer's Name/Specific Field			
				SELF		e. Election 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"/>	C-1	Check		09/20/2012	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 300.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 19,964.42	

Contributions from Individuals

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
MCNEILL 2012						
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
MATILDA WILLIS 630 CAROLINA CIR WINSTON-SALEM, NC 27104				HOMEMAKER		
				c. Employer's Name/Specific Field		
				HOMEMAKER		
e. Election Sum to Date						
						\$ 250.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	Check		09/04/2012	\$ 250.00	
<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
ANNE G WILSON 445 MARSHALL VIEW CT WINSTON-SALEM, NC 27101				RETIRED		
				c. Employer's Name/Specific Field		
				RETIRED		
e. Election Sum to Date						
						\$ 150.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	Check		09/07/2012	\$ 150.00	
<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
EDWIN G. WILSON 3381 TIMBERLAKE LANE WINSTON-SALEM, NC 27106				UNIVERSITY		
				ADMINISTRATOR		
				c. Employer's Name/Specific Field		
				WAKE FOREST UNIVERSITY		
e. Election Sum to Date						
						\$ 350.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	Check		09/20/2012	\$ 250.00	
<input type="checkbox"/>	C-1	Check		09/27/2012	\$ 100.00	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 750.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 19,964.42

Contributions from Individuals

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
MCNEILL 2012						
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	
CRIS WINDHAM 6 GRAYLYN PLACE COURT WINSTON-SALEM, NC 27106			ATTORNEY			
			c. Employer's Name/Specific Field			
			WOMBLE CARLYLE SANDRIDGE & RICE		e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	Check		07/01/2012	\$ 250.00	
<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	
EVERETTE WITHERSPOON 181 E SIXTH ST #514 WINSTON-SALEM, NC 27101			SOCIAL WORKER			
			c. Employer's Name/Specific Field			
			CRS SERVICES		e. Election 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"/>	C-1	Electric Funds Tran		09/21/2012	\$ 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	
NANCY YOUNG 2061 POLO RD WINSTON-SALEM, NC 27106			PUBLIC RELATIONS			
			c. Employer's Name/Specific Field			
			WINSTON-SALEM STATE UNIVERSITY		e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	C-1	Check		08/14/2012	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 550.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 19,964.42	

Contributions from Individuals

Pg 26 of 26

Amendment
 Yes 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) MCNEILL 2012				2. ID Number	
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
JAMES ZIGLAR PO BOX 926 RURAL HALL, NC 27045			DENTIST		
			c. Employer's Name/Specific Field SELF		
					e. Election Sum to Date \$ 500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	C-1	Check		08/13/2012	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 500.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 19,964.42

CRO-1210

NC State Board of Elections

April 2007

Contributions from Other Political Committees Pg 1 of 1 Amendment Yes No

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name (and Fund if applicable)				2. ID Number	
MCNEILL 2012					
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
ED HANES FOR NORTH CAROLINA 3920 POMEROY DR WINSTON-SALEM, NC 27105			<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum		
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		e. Election Sum to Date
			<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 50.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
C-1	Check		09/23/2012	\$ 50.00	
				\$	
				\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
LINDA D. GARROU FOR NC SENATE PO BOX 11843 WINSTON-SALEM, NC 27116			<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum		
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		e. Election Sum to Date
			<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 250.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
C-1	Check		07/12/2012	\$ 250.00	
				\$	
				\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
PARMON 4 NC SENATE 3873 BARKWOOD DR WINSTON-SALEM, NC 27105			<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum		
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		e. Election Sum to Date
			<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 100.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
C-1	Check		09/28/2012	\$ 100.00	
				\$	
				\$	
4. Total only this Page				\$ 400.00	
5. Total of ALL CRO-1230 Pages (This line must be on line 8 of Detailed Summary Page CRO-1100)				\$ 400.00	

Disbursements

Amendment

Pg 1 of 1 Yes No

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) MCNEILL 2012		2. ID Number	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>			
<input type="checkbox"/> Operating Expenses <input checked="" 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) FORSYTH COUNTY DEMOCRATIC PARTY 1128 BURKE ST WINSTON-SALEM, NC 27101		b. Coordinated Committee Name	d. Comments
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date \$ 942.73
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)
C-1	Check	GO	09/01/2012
C-1	Check	AG	10/14/2012
		j. Amount	k. Required Remarks
		\$ 69.00	CONT FOR WSSU FLOAT
		\$ 814.00	CONT FOR BILLBOARD
5. Total only this Page			\$ 883.00
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>			\$ 883.00
7. Purpose Codes (List detailed expenditure code in (h.) above)			
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund
O* Other			
* Codes require detailed explanation in required remarks field (k)			

Disbursements

Amendment

Pg 1 of 3 Yes No

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) MCNEILL 2012						2. ID Number	
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) FORSYTH COUNTY DEMOCRATIC PARTY 1128 BURKE ST WINSTON-SALEM, NC 27101				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 942.73	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
C-1	Check	B	10/14/2012	\$ 59.73	COPIES		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 6,754.08	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
C-1	Check	O	09/01/2012	\$ 1,597.32	REIMB FOR CAMPAIGN		
C-1	Check	O	10/11/2012	\$ 5,156.76	EXPENSES REIMB CAMPAIGN EXPENSES		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) SWIFTWATER MEDIA 108 S SPRUCE ST WINSTON-SALEM, NC 27101				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 200.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
C-1	Check	O	10/02/2012	\$ 200.00	VIDEO PRODUCTION SERVICES		
5. Total only this Page						\$ 7,013.81	
6. Total of ALL CRO-1310 Pages						\$ 7,074.92	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

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	
MCNEILL 2012							
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	
TRANSFIRST 12202 AIRPORT WAY BROOMFIELD, CO 80021							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 31.11	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
C-1	Draft	K	07/30/2012	\$ (1.00)	CREDIT TO VERIFY ACCT		
C-1	Draft	K	08/10/2012	\$ 0.79	ONLINE CONT. FEES		
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	
TRANSFIRST 12202 AIRPORT WAY BROOMFIELD, CO 80021							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 31.11	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
C-1	Draft	K	09/10/2012	\$ 9.99	ONLINE CONT. FEES		
C-1	Draft	K	10/10/2012	\$ 21.33	ONLINE CONT. FEES		
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	
WELLS FARGO BANK NA 916 W FOURTH ST WINSTON-SALEM, NC 27101							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 30.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
C-1	Draft	K	07/01/2012	\$ 10.00	BANK FEE		
C-1	Draft	K	07/31/2012	\$ 10.00	BANK FEE		
5. Total only this Page						\$ 51.11	
6. Total of ALL CRO-1310 Pages						\$ 7,074.92	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

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	
MCNEILL 2012					
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
WELLS FARGO BANK NA 916 W FOURTH ST 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 Sum to Date
					\$ 30.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
C-1	Draft	K	08/31/2012	\$ 10.00	BANK FEE
				\$	
5. Total only this Page					\$ 10.00
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 7,074.92
7. Purpose Codes (List detailed expenditure code in (h.) above)					
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate		
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses		
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund		
O* Other					
* Codes require detailed explanation in required remarks field (k)					

In-Kind Contributions

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 if applicable)		2. ID Number	
MCNEILL 2012			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
Aggregated Individual Contribution		<input checked="" 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	
		d. Election Sum to Date	
		\$	13.40
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
POSTAGE - ACE HDWE		07/11/2012	\$ 3.40
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
MARY M DICKINSON 3720 KIRKLEES RD WINSTON-SALEM, NC 27104		<input checked="" 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	
		d. Election Sum to Date	
		\$	130.94
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD FOR EVENT - COSTCO		09/25/2012	\$ 80.94
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103		<input checked="" 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	
		d. Election Sum to Date	
		\$	10,333.48
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
HISPANIC LEAGUE BOOTH FEE		07/31/2012	\$ 25.00
COPIES & POSTAGE - OFFICE DEPOT		07/31/2012	\$ 68.11
CAMPAIGN ADMIN - PATTY GARRISON		08/03/2012	\$ 80.00
4. Total only this Page			\$ 257.45
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>			\$ 10,417.82

In-Kind Contributions

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 if applicable)		2. ID Number	
MCNEILL 2012			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103		<input checked="" 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 Sum to Date	
		\$ 10,333.48	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
STAMPS - ACE HARDWARE		08/04/2012	\$ 90.00
HISPANIC LEAGUE BOOTH		08/08/2012	\$ 25.00
YARD SIGNS - MYRA GROZINGER		08/15/2012	\$ 1,414.21
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103		<input checked="" 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 Sum to Date	
		\$ 10,333.48	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
AD PROPS- PLAY IT AGAIN SPORTS		08/18/2012	\$ 32.01
SUPPLIES - OFFICE DEPOT		08/25/2012	\$ 16.00
ELAINE MARSHALL EVENT		08/29/2012	\$ 100.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103		<input checked="" 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 Sum to Date	
		\$ 10,333.48	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
SUPPLIES - GOTPRINT.COM		08/29/2012	\$ 228.94
MAILING SERVICES - CB GARRISON		08/31/2012	\$ 225.00
SUPPLIES - FORSYTH BOE		09/04/2012	\$ 6.00
4. Total only this Page			\$ 2,137.16
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>			\$ 10,417.82

In-Kind Contributions

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 if applicable)		2. ID Number	
MCNEILL 2012			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103		<input checked="" 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 Sum to Date	
		\$ 10,333.48	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
SUPPLIES - OFFICE DEPOT		09/04/2012	\$ 19.20
POSTAGE - USPS		09/05/2012	\$ 480.00
SUPPLIES - ONLINELABELS		09/06/2012	\$ 63.94
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103		<input checked="" 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 Sum to Date	
		\$ 10,333.48	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
POSTAGE - ACE HDWE		09/07/2012	\$ 64.00
POSTAGE - ACE HDWE		09/12/2012	\$ 160.00
POSTAGE - ACE HDWE		09/13/2012	\$ 2.29
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103		<input checked="" 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 Sum to Date	
		\$ 10,333.48	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
DEMOCRACY NC EVENT		09/13/2012	\$ 40.00
TEE SHIRTS - YAMABUSHI DESIGNS		09/13/2012	\$ 100.00
POSTAGE - ACE HDWE		09/21/2012	\$ 2.29
4. Total only this Page			\$ 931.72
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>			\$ 10,417.82

In-Kind Contributions

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 if applicable) MCNEILL 2012		2. ID Number	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103		b. Type of Contributor <input checked="" 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 Sum to Date \$ 10,333.48	
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount	
WALTER DALTON EVENT	09/21/2012	\$ 70.00	
ADVERTISING - TIME WARNER	09/21/2012	\$ 2,945.25	
POSTAGE - ACE HDWE	09/27/2012	\$ 323.09	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103		b. Type of Contributor <input checked="" 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 Sum to Date \$ 10,333.48	
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount	
POSTAGE - COSTCO	09/28/2012	\$ 44.75	
POSTAGE - ACE HDWE	09/29/2012	\$ 160.00	
ADAM FDN EVENT	09/30/2012	\$ 30.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103		b. Type of Contributor <input checked="" 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 Sum to Date \$ 10,333.48	
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount	
PRINTING - GO PRINT	10/02/2012	\$ 105.20	
LUNCHEON - UNION BAPTIST CHURCH	10/04/2012	\$ 40.00	
LILLIAN'S LIST EVENT	10/05/2012	\$ 250.00	
4. Total only this Page		\$ 3,968.29	
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 10,417.82	

In-Kind Contributions

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 if applicable) MCNEILL 2012		2. ID Number	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
HAYES MCNEILL 1118 S HAWTHORNE RD WINSTON-SALEM, NC 27103		<input checked="" 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 Sum to Date	
		\$ 10,333.48	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
POSTAGE - USPS		10/09/2012	\$ 384.00
POSTAGE - ACE HDWE		10/15/2012	\$ 128.00
ADVERTISING - TIME WARNER		10/17/2012	\$ 2,611.20
4. Total only this Page		\$ 3,123.20	
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 10,417.82	