

# 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.

SEP 3 02

RECEIVED

1. Name of Committee or Fund <b>Gentry For Sheriff</b>		6. Date <b>9-3-02</b>	
2. Address <b>4610 Meeting House Lane</b>		7. ID Number	
3. City <b>Clemmons,</b>	4. State <b>N.C.</b>	5. Zip <b>27012</b>	8. Phone <b>766-0504</b>
9. Type of Report <b>2002 Interim Report</b>		10. Period Covered Start <b>7-01-02</b> End <b>8-24-02</b>	11. Amendment <input type="checkbox"/> Yes <input type="checkbox"/> No
12. Type of Committee or Fund (Check one)			
<input checked="" type="checkbox"/> Candidate Campaign		<input type="checkbox"/> Joint Fundraiser	
<input type="checkbox"/> PAC		<input type="checkbox"/> Soft Money Account	
<input type="checkbox"/> Other Fund:		<input type="checkbox"/> "Booster Fund"	
<input type="checkbox"/> Party		<input type="checkbox"/> Building Fund	
<input type="checkbox"/> Referendum			
13. Treasurer Name <b>Kay Long</b>			
14. Assistant Treasurer Name(s)			
15. Custodian of Books Name <b>Kay Long</b>			
16. Bank/Depository/Credit Account Information			
a. Name	b. Purpose	c. Code	d. Period Begin Balance
<b>Branch Banking + Trust Co.</b>	<b>Gentry For Sheriff Contributions Expenses</b>		<b>\$ 6,013.96</b>
			\$
			\$
			\$
			\$
			\$

## 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.

*Kay Long*  
Signature of Appointed Treasurer or Candidate

9-03-02  
Date

# Detailed Summary

1. Name of Committee or Fund	2. Type of Report		3. ID Number	
Gentry For Sheriff	2002 Interim Report			
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	\$ 6,013.96			
<b>RECEIPTS</b>				
6) Contributions from Individuals	(CRO-1210) \$ 4,130.00	\$ 16,239.00		
7) Contributions from Political Party Committees	(CRO-1220) \$	\$		
8) Contributions from Other Political Committees	(CRO-1230) \$	\$		
9) Loan Proceeds	(CRO-1410) \$ 2,500.00	\$ 2,600.00		
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) \$	\$		
12) TOTAL RECEIPTS (Add lines 6, 7, 8, 9, 10, 11a, 11b, and 11c)	\$ 6,630.00	\$ 18,839.00		
<b>EXPENDITURES</b>				
13) Disbursements	(CRO-1310)			
13a) Operating Expenditures	(CRO-1310) \$ 7,360.58	\$ 13,455.62		
13b) Contributions to Candidates/Political Committees	(CRO-1310) \$	\$		
13c) Coordinated Party Expenditures	(CRO-1310) \$ 125.00	\$ 125.00		
14) Loan Repayments	(CRO-1420) \$	\$ 100.00		
15) Refunds from Committee	(CRO-1320) \$	\$		
16) In-Kind Contributions	(CRO-1510) \$ 100.00	\$ 100.00		
17) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, and 16)	\$	\$		
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)	\$ 5,058.38	\$ 5,058.38		
<b>Additional Information</b>				
19) Non-Monetary Gifts Given to Committees	(CRO-1330) \$			
20) Outstanding Loans (including ones from other campaigns)	(CRO-1430) \$			
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		
3. Contributor	Gentry For Sheriff								
	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		
	Robert Egleson 4129 Gladstonburg Road Winston-Salem, N.C. 27104 765-0112	<del>XXXXXXXXXX</del>	Cash	07-06-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00		
		"	check	05-21-02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 100.00		
b. Job Title/Profession							k. Election Cycle Sum to Date		
Manager	j. If Amendment, choose change type:						\$200.00		
c. Employer's Name/Specific Field	<input type="checkbox"/> Add <input type="checkbox"/> Delete								
LOWES									
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		
		<del>XXXXXXXXXX</del>	Cash	07-06-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
b. Job Title/Profession							k. Election Cycle Sum to Date		
c. Employer's Name/Specific Field	j. If Amendment, choose change type:						\$		
	<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		
		<del>XXXXXXXXXX</del>	Cash	07-07-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
b. Job Title/Profession							k. Election Cycle Sum to Date		
c. Employer's Name/Specific Field	j. If Amendment, choose change type:						\$		
	<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		
	Mary Fairchild 4520 Dare Ave. Winston-Salem, N.C. 27101 727-1574	<del>XXXXXXXXXX</del>	Cash	07-07-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00		
		"	check	03-14-02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 400.00		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
b. Job Title/Profession	Retired						k. Election Cycle Sum to Date		
c. Employer's Name/Specific Field	j. If Amendment, choose change type:						\$500.00		
	<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		
	Lonnie Gentry 2538 Little Elkin Church Road Ronda, N.C. 28670 336-835-5395	<del>XXXXXXXXXX</del>	Cash	07-07-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00		
		"	"	03-02-02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 100.00		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
b. Job Title/Profession	Retired						k. Election Cycle Sum to Date		
c. Employer's Name/Specific Field	j. If Amendment, choose change type:						\$200.00		
	<input type="checkbox"/> Add <input type="checkbox"/> Delete								
4. Total only this Page							\$ 500.00		
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									

# Contributions from INDIVIDUALS

1. Name of Committee or Fund							2. ID Number	
3. Contributor	Gentry For Sheriff							
	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	
		<del>XXXXXXXXXX</del>	Cash	07-08-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00	
					<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	
		<del>XXXXXXXXXX</del>	Cash	07-08-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 60.00	
					<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	
	Dr. Gregory Tomas 3404 Jameson Lane Winston-Salem, N.C. 27106 659-8180	<del>XXXXXXXXXX</del>	Cash	07-08-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00	
		"	"	05-08-02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 100.00	
	"	"	04-18-02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 100.00		
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							\$ 300.00	
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	
		<del>XXXXXXXXXX</del>	Check	07-11-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00	
					<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	
		<del>XXXXXXXXXX</del>	Cash	07-11-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00	
					<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							\$	

\$ 460.00

4. Total only this Page  
 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

# Contributions from INDIVIDUALS

1. Name of Committee or Fund							2. ID Number		
<b>Gentry 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		
	Kathleen Gentry 2407 Austin Traphill Road Elkin, N.C. 28621 336 835-5154	<del>XXXXXXXXXX</del>	Cash	07-11-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00		
		"	"	03-02-02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 100.00		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
b. Job Title/Profession							k. Election Cycle Sum to Date		
Retired							\$ 200.00		
c. Employer's Name/Specific Field							j. If Amendment, choose change type:		
							<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		
	Mike Gentry 2407 Austin Traphill Road Elkin, N.C. 28621 336 835-5154	<del>XXXXXXXXXX</del>	Cash	07-11-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.00		
		"	"	03-02-02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 100.00		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
b. Job Title/Profession							k. Election Cycle Sum to Date		
Painter							\$ 150.00		
c. Employer's Name/Specific Field							j. If Amendment, choose change type:		
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		
		<del>XXXXXXXXXX</del>		07-12-02	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$ 40.00		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
b. Job Title/Profession							k. Election Cycle Sum to Date		
							\$		
c. Employer's Name/Specific Field							j. If Amendment, choose change type:		
							<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		
		<del>XXXXXXXXXX</del>	Check	07-27-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.00		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
b. Job Title/Profession							k. Election Cycle Sum to Date		
							\$		
c. Employer's Name/Specific Field							j. If Amendment, choose change type:		
							<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		
	Beverly H. McClellan 2718 Park Oak Drive Clemmons, N.C. 27012 766-9822	<del>XXXXXXXXXX</del>	check	07-27-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 500.00		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
b. Job Title/Profession							k. Election Cycle Sum to Date		
Housewife							\$		
c. Employer's Name/Specific Field							j. If Amendment, choose change type:		
							<input type="checkbox"/> Add <input type="checkbox"/> Delete		

4. Total only this Page \$ 740.00

5. Total of ALL CRO-1210 Pages \$  
(only show on last page)  
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# Contributions from INDIVIDUALS

1. Name of Committee or Fund							2. ID Number	
Gentry 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	
	Russell K. Soc, II 2330 Westover Drive Winston-Salem, N.C. 27103 727-9291	[REDACTED]	Cash	07-27-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 75.00	
		"	check	04-18-02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 50.00	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
b. Job Title/Profession Corp. Security								
c. Employer's Name/Specific Field R.J. Reynolds Tobacco Co.								
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete							k. Election Cycle Sum to Date \$ 125.00	
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 Barnette 235 Brentwood Drive Advance, N.C. 27006 998-7419	[REDACTED]	Cash	08-10-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00	
		"	check	03-14-02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 100.00	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
b. Job Title/Profession Sales								
c. Employer's Name/Specific Field Ciba Vision Corp.								
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete							k. Election Cycle Sum to Date \$ 200.00	
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	
	Deborah Barnette 235 Brentwood Dr. Advance, N.C. 27006 998-7419	[REDACTED]	Cash	08-10-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00	
		"	check	03-14-02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 100.00	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
b. Job Title/Profession Housewife								
c. Employer's Name/Specific Field								
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete							k. Election Cycle Sum to Date \$ 200.00	
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	
	Jerry Conady 7345 Foster St. Rural Hall, N.C. 27043 969-6851	[REDACTED]	Cash	08-10-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00	
		"	check	02-28-02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 100.00	
					<input type="checkbox"/>	<input type="checkbox"/>	\$	
b. Job Title/Profession Retired								
c. Employer's Name/Specific Field								
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete							k. Election Cycle Sum to Date \$ 200.00	
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	
		[REDACTED]	Cash	08-10-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00	
					<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: <input type="checkbox"/> Add <input type="checkbox"/> Delete							k. Election Cycle Sum to Date \$	
4. Total only this Page							\$ 475.00	
5. Total of ALL CRO-1210 Pages (only show on last page)							\$	
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# Contributions from INDIVIDUALS

1. Name of Committee or Fund							2. ID Number		
3. Contributor	<b>Gentry For Sheriff</b>								
	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
	Carolyn Scheviak 7404 River Knoll Ct. Clammons, N.C. 27012 712-4551			[REDACTED]	check	08-10-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
				"	cash	03-02-02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 100.00
							<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Retired			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$ 200.00			
c. Employer's Name/Specific Field									
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)								
	Robert Johnston 500 Ridgehaven Circle Winston-Salem, N.C. 27104 714-2324			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
				[REDACTED]	Cash	08-14-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
				"	check	04-11-02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 50.00
							<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Retired			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$ 150.00			
c. Employer's Name/Specific Field									
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)								
	Charles Lynch 461 Chadbourne Ct. Winston-Salem, N.C. 27104 714-2324			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
				[REDACTED]	Cash	08-14-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
				"	"	05-09-02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 100.00
				"	check	02-20-02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 500.00
b. Job Title/Profession			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Police Examiner			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$ 700.00			
c. Employer's Name/Specific Field									
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
				[REDACTED]	Cash	08-14-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 25.00
					check	05-21-02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 50.00
							<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$ 75.00			
c. Employer's Name/Specific Field									
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)								
	Helen Monroe 2033 Heidelberg Dr. Winston-Salem, N.C. 27106 922-5193			d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
				[REDACTED]	check	08-14-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 200.00
							<input type="checkbox"/>	<input type="checkbox"/>	\$
							<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Housewife			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
c. Employer's Name/Specific Field									
4. Total only this Page							\$ 525.00		
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)									

# Contributions from INDIVIDUALS

1. Name of Committee or Fund							2. ID Number		
3. Contributor	Gentry For Sheriff								
	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
	Ali'sa Phelps 5451 Moravian Heights Lane Clemmons, N.C. 27012 778-1724			[REDACTED]	Cash	08-14-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
				"	Check	05-21-02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 500.00
b. Job Title/Profession			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Computers			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$ 600.00			
c. Employer's Name/Specific Field									
Forsyth County									
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
	Gordon Peterson 4620 Meeting House Lane Clemmons, N.C. 27012 766-7051			[REDACTED]	Cash	08-14-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
				"	"	05-23-02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 100.00
							<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Advertising			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$ 200.00			
c. Employer's Name/Specific Field									
Keystone Market									
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
	Nancy Peterson 4620 Meeting House Lane Clemmons, N.C. 27012 766-7051			[REDACTED]	Cash	08-14-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
				"	"	05-23-02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 50.00
							<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Housewife			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$ 150.00			
c. Employer's Name/Specific Field									
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
				[REDACTED]	Cash	08-14-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
							<input type="checkbox"/>	<input type="checkbox"/>	\$
							<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
c. Employer's Name/Specific Field									
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
				[REDACTED]	Check	08-20-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 20.00
							<input type="checkbox"/>	<input type="checkbox"/>	\$
							<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession			j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
			<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
c. Employer's Name/Specific Field									

4. Total only this Page \$ 420.00

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)*



# Contributions from INDIVIDUALS

1. Name of Committee or Fund							2. ID Number					
3. Contributor	<b>Gentry for Sheriff</b> a. Full Name, Mailing Address & Phone (include city, state, & zip) Flora Ma Isasi 3989 Huddington Ct. Winston-Salem, N.C. 27106 760-8868						d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
							[REDACTED]	check	08-20-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 400.00
									" " "	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$ 60.00
										<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession						j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Housewife						<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
c. Employer's Name/Specific Field												
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip) Domingo Isasi 423 Mill Pond Dr. Winston-Salem, N.C. 27106 750-0500						d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
							[REDACTED]	check	08-20-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 200.00
										<input type="checkbox"/>	<input type="checkbox"/>	\$
										<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession						j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
Assist. Manager						<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
c. Employer's Name/Specific Field												
Que Pasa Radio												
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
							[REDACTED]	check	8-20-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.00
										<input type="checkbox"/>	<input type="checkbox"/>	\$
										<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession						j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
						<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
c. Employer's Name/Specific Field												
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
							[REDACTED]	check	08-20-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.00
										<input type="checkbox"/>	<input type="checkbox"/>	\$
										<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession						j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
						<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
c. Employer's Name/Specific Field												
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
							[REDACTED]	check	08-20-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.00
										<input type="checkbox"/>	<input type="checkbox"/>	\$
										<input type="checkbox"/>	<input type="checkbox"/>	\$
b. Job Title/Profession						j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
						<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
c. Employer's Name/Specific Field												

4. Total only this Page \$ 810.00

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)*

# Contributions from INDIVIDUALS

1. Name of Committee or Fund							2. ID Number		
Gentry 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		
		<del>XXXXXXXXXX</del>	check	08-21-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
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		
	Jerry Bledsoe 1421 Randolph Tarboro Rd Ashboro, N.C. 27203 919 672-2187	<del>XXXXXXXXXX</del>	Cash	08-21-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00		
			check	0206-02	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 100.00		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
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				
Author		<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$ 200.00				
Self Employed									
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		
		<del>XXXXXXXXXX</del>			<input type="checkbox"/>	<input type="checkbox"/>	\$		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
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		
		<del>XXXXXXXXXX</del>			<input type="checkbox"/>	<input type="checkbox"/>	\$		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
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		
		<del>XXXXXXXXXX</del>			<input type="checkbox"/>	<input type="checkbox"/>	\$		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
					<input type="checkbox"/>	<input type="checkbox"/>	\$		
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			\$				
4. Total only this Page							\$ 200.00		
5. Total of ALL CRO-1210 Pages							\$ 4,130.00		
(This line must be on line 6 of Detailed Summary Page CRO-1100)									

# Disbursements

1. Name of Committee or Fund <b>Gentry For Sheriff</b>						2. ID Number		
3. Type of Disbursement <i>(Please use separate CRO-1330 forms for each type of Disbursements.)</i>								
<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
	Tuttle Lumber Co. 1109 Tower St. Winston-Salem, N.C. 27117-2627 784-7930			Stakes	<del>XXXXXXXXXX</del>	check	07-10-02	\$ 542.09
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	
							\$ 896.74	
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
	Michael Wilcox 651 Summit St. Winston-Salem, N.C. 27101 748-8989			Party at Dot Dupuis Music -	<del>XXXXXXXXXX</del>	check	07-12-02	\$ 125.00
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
	King International Corp. 275 S. Main Street King, N.C. 27021 983-9875			Political Signs	<del>XXXXXXXXXX</del>	check	07-18-02	\$ 690.12
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	
							\$ 2,856.60	
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
	Winston-Salem Journal P.O. Box 3159 Winston-Salem, N.C. 27102 727-7211			Political Ads	<del>XXXXXXXXXX</del>	check	07-26-02	\$ 3,013.92
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	
							\$ 3,531.84	
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
	Clemmons Courier P.O. Box 765 Clemmons, N.C. 27012 766-4126			Political Ads	<del>XXXXXXXXXX</del>	check	07-30-02	\$ 366.00
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	
							\$ 894.00	
5. Total only this Page								\$ 5,697.76
6. Total of ALL CRO-1310 Related Pages <i>(only show on last page)</i>								\$
<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>								

1. Name of Committee or Fund						2. ID Number		
Gentry For Sheriff								
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
	Kernersville News 300 E. Mountain St. Kernersville, N.C. 27285 993-2161			Political Ads	[REDACTED]	check	07-30-02	\$ 919.80
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			\$1,538.00	
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
	Threads Plus 114 Back Forty Dr. Winston-Salem, N.C. 27127 785-4372			T-shirts	[REDACTED]	check	08-09-02	\$ 287.55
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			\$1,030.92	
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
	Sharpes Printing 1027 Payne Road Rural Hall, N.C. 27045 969-2590			Political Hand outs-Cards	[REDACTED]	check	08-19-02	\$ 375.73
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			\$1,194.13	
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. Postmasters Ardmore - STA-131 Winston-Salem, N.C. 27113-9998 791-1709			Mail outs, Stamps-Postage	[REDACTED]	check	08-20-02	\$ 37.00
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
	Smith-Phillips Lumber Co. 603 E. 17th St. Winston-Salem, N.C. 27105 722-8167			Stakes	[REDACTED]	check	08-22-02	\$ 167.74
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						\$1,787.82		
6. Total of ALL CRO-1310 Related Pages (only show on last page)						\$7,485.58		
(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)								

Loan Proceeds

1. Name of Committee or Fund				2. ID Number	
Gentry 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 %	i. Account Number/Code
	Allen Gentry 4610 Meeting House Lane Clemmons, N.C. 27012	08-19-02			<del>XXXXXXXXXX</del>
	766-0504				j. Form of Payment
		e. Job Title/Profession	f. Employer's Name/Specific Field		check
		g. Security Pledged			k. Amount
	h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				\$ 2,500.00
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 %	i. Account Number/Code
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			
		h. 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 %	i. Account Number/Code
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			
		h. 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 %	i. Account Number/Code
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			
		h. 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 %	i. Account Number/Code
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			
		h. 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 %	i. Account Number/Code
		e. Job Title/Profession	f. Employer's Name/Specific Field		j. Form of Payment
		g. Security Pledged			
		h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete			
4. Total only this Page					\$ 2,500.00
5. Total of ALL CRO-1410 Pages (only show on last page)					\$ 2,500.00
(This line must be on line 9 of Detailed Summary Page CRO-1100)					

# In-Kind Contributions

1. Name of Committee or Fund		2. ID Number		
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	c. Description	d. Date (mm/dd/yyyy)	e. Fair Market Amount
	Dot Duggins 3936 Justin Brook Lane Walkertown, N.C. 595-4125	Political gathering at her home. Refreshments.	07-12-02	\$ 40.00
b. Type of Contributor		f. If Amendment, choose change type:		g. Election Cycle Sum to Date
<input checked="" 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
	Flora Ma Isasi 3989 Huddington Ct. Winston-Salem, N.C. 27106 760-8868	Political gathering at her home. Refreshments.	08-20-02	\$ 60.00
b. Type of Contributor		f. If Amendment, choose change type:		g. Election Cycle Sum to Date
<input checked="" 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				\$ 100.00
5. Total of ALL CRO-1510 Pages (only show on last page)				\$ 100.00
(This line must be on line 16 of Detailed Summary Page CRO-1100)				