

Disclosure Report Cover

COPY

Amendment

☐ Yes ☒ No

Please note that this cover sheet cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.
You must amend the Statement of Organization (CRO-2100A-E) to make those kinds of committee changes.
Use the Addendum form (CRO-1010) if more entries are needed.

1. Committee Information

a. Full Name	c. ID Number
JOINES FOR MAYOR	000-000000-0-000
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
PO BOX 20397 WINSTON-SALEM, NC 27120	08/22/2005
	e. Phone Number
	(336) 732-5389

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name
2005	07/01/2005	08/16/2005	WILLIAM C. ROSE

6. Type of Committee (Check one)		8. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	Municipal	State/County	Referendum
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum		<input checked="" type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus	<input type="checkbox"/> Final
<input type="checkbox"/> Soft Money Account		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third Plus	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Political Party Financing Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	9. Special Report Name
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
<input type="checkbox"/> Other:		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

10. Account Information		10. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
LEXINGTON STATE BANK			
b. Purpose	c. Code	b. Purpose	c. Code
TO PAY COMMITTEE EXPENSES	JFM		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 94,721.92		\$

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.

William C Rose
Printed Name of Signer

William C Rose
Signature of Appointed Treasurer

08/23/2005
Date

FOR OFFICE USE ONLY

Date Received:	08-23-05	Employee:	Judy Spears	Delivery Method
Date Postmarked:	8-23-05	Employee:		<input type="checkbox"/> Normal Mail
Date Scanned:	8-23-05	Employee:	Judy Spears	<input type="checkbox"/> Registered Mail
				<input checked="" type="checkbox"/> Hand Delivered
				<input type="checkbox"/> Electronically Filed

Detailed Summary

Amendment

☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)		2. Type of Report		2. ID Number	
JOINES FOR MAYOR		2005 Thirty-five-day		000-000000-0-000	
Start of Election Cycle: January 1, 2002		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 94,721.92		\$ 9,169.57	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 150.00		\$ 3,724.00	
6) Contributions from Individuals (CRO-1210)		\$ 7,850.00		\$ 91,210.00	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00		\$ 900.00	
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 (CRO-1250)					
11a) Interest on Bank Accounts (CRO-1250)		\$ 9.90		\$ 80.49	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)		\$ 0.00		\$ 0.00	
11c) Outside Sources of Income (CRO-1250)		\$ 0.00		\$ 0.00	
12) "Goods and Services" Contributions (CRO-1260)		\$ 0.00		\$ 0.00	
13) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)		\$ 8,009.90		\$ 95,914.49	
EXPENDITURES					
14) Disbursements (CRO-1310)					
14a) Operating Expenditures (CRO-1310)		\$ 0.00		\$ 2,352.24	
14b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00		\$ 0.00	
14c) Coordinated Party Expenditures (CRO-1310)		\$ 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)		\$ 0.00		\$ 0.00	
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)		\$ 0.00		\$ 2,352.24	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)		\$ 102,731.82		\$ 102,731.82	
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		\$ 0.00		\$ 0.00	

Aggregated Contributions from Individuals

Page 1 of 1

Amendment

☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)					2. ID Number	
JOINES FOR MAYOR					000-000000-0-000	
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	JFM	Check		07/29/2005	\$ 100.00	
<input type="checkbox"/> Remove	JFM	Check		07/08/2005	\$ 50.00	
4. Total only this Page					\$ 150.00	
5. Total of ALL CRO-1205 Pages					\$ 150.00	
(This line must be on line 5 of Detailed Summary Page CRO-1100)						

CRO-1205

NC State Board of Elections

March 2003

Contributions from Individuals

Pg 1 of 5 Amendment ☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
JOINES FOR MAYOR						000-000000-0-000	
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 ALLISON 205 SHAMROCK TRAIL LEWISVILLE, NC 27023-8630				BANK EXECUTIVE			
				c. Employer's Name/Specific Field			
				BB&T			
						e. Election Cycle Sum to Date	
						\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	JFM	Check		07/29/2005		\$ 1,000.00	
<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	
ALBERT E. DILLON JR 940 WALKERTOWN GUTHRIE RD WINSTON-SALEM, NC 27101				SECURITY WORKER			
				c. Employer's Name/Specific Field			
				Administrative and Support Services			
						e. Election Cycle 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"/>	JFM	Check		07/28/2005		\$ 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	
EARL GUILL 2431 REYNOLDS DRIVE WINSTON-SALEM, NC 27104 (336) 409-0672				DIRECTOR			
				c. Employer's Name/Specific Field			
				GLAXO SMITH KLINE			
						e. Election Cycle 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"/>	JFM	Check		07/08/2005		\$ 500.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 1,700.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 7,850.00	

Contributions from Individuals

Pg 2 of 5 Amendment ☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
JOINES FOR MAYOR						000-000000-0-000	
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	
LIDA HAYES-CALVERT 957 BRYANS PL WINSTON-SALEM, NC 27104-5008				BUSINESS EXECUTIVE			
				c. Employer's Name/Specific Field			
				Specialty Trade Contractors			
				e. Election Cycle Sum to Date			
						\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	JFM	Check		07/29/2005	\$ 1,000.00		
<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	
KELLY KING 2530 COUNTRY CLUB ROAD WINSTON-SALEM, NC 27104				BANK EXECUTIVE			
				c. Employer's Name/Specific Field			
				BB&T			
				e. Election Cycle 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"/>	JFM	Check		07/29/2005	\$ 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	
GERALD H. LONG 7631 LASATER ROAD CLEMMONS, NC 27012 (336) 945-5735				EXECUTIVE			
				c. Employer's Name/Specific Field			
				L.A. REYNOLDS NURSERY			
				e. Election Cycle Sum to Date			
						\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	JFM	Check		07/08/2005	\$ 1,000.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 2,250.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 7,850.00	

Contributions from Individuals

Pg 3 of 5 Amendment ☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
JOINES FOR MAYOR						000-000000-0-000	
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	
MICHAEL W. LONG 396 HOLLINSWOOD AVENUE WINSTON-SALEM, NC 27103 (336) 945-3776				EXECUTIVE			
				c. Employer's Name/Specific Field			
				L.A. REYNOLDS NURSERY			
				e. Election Cycle 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"/>	JFM	Check		07/08/2005	\$ 500.00		
<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	
WILLIAM SPENCER 367 PINEVALLEY ROAD WINSTON-SALEM, NC 27104				RETIRED			
				c. Employer's Name/Specific Field			
				RETIRED			
				e. Election Cycle Sum to Date			
				\$		1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	JFM	Check		07/29/2005	\$ 1,000.00		
<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 M. STEPHENS 3520 TRIAD COURT WINSTON-SALEM, NC 27107 (336) 784-2000				EXECUTIVE			
				c. Employer's Name/Specific Field			
				LANDMARK BUILDERS			
				e. Election Cycle 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 checked="" type="checkbox"/>	JFM	Check		05/13/2005	\$ 100.00		
<input type="checkbox"/>	JFM	Check		07/08/2005	\$ 200.00		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1,700.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 7,850.00	

Contributions from Individuals

Pg 4 of 5

Amendment

☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
JOINES FOR MAYOR						000-000000-0-000	
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	
ROBERT STRICKLAND 2000 WEST FIRST STREET #606 WINSTON-SALEM, NC 27104 (336) 723-1026				RETIRE			
				c. Employer's Name/Specific Field			
				RETIRE			
						e. Election Cycle 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"/>	JFM	Check		07/08/2005	\$ 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	
PAT SWANN 2984 ORMOND DRIVE WINSTON-SALEM, NC 27106				RETIRE			
				c. Employer's Name/Specific Field			
				RETIRE			
						e. Election Cycle 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"/>	JFM	Check		07/29/2005	\$ 500.00		
<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	
JACKSON D. WILSON JR 1069 E. KENT RD WINSTON-SALEM, NC 27104				BUSINESS EXECUTIVE			
				c. Employer's Name/Specific Field			
				EXCALIBUR ENTERPRISES			
						e. Election Cycle Sum to Date	
						\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	JFM	Check		07/29/2005	\$ 1,000.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1,700.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 7,850.00	

Contributions from Individuals

Pg 5 of 5 Amendment ☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
JOINES FOR MAYOR				000-000000-0-000	
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	
HUGH WRIGHT 1717 SANDERSTED ROAD WINSTON-SALEM, NC 27103		REAL ESTATE DEVELOPER			
		c. Employer's Name/Specific Field			
		Real Estate			
				e. Election Cycle 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"/>	JFM	Check		07/29/2005	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 500.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 7,850.00

CRO-1210

NC State Board of Elections

March 2003

Other Receipt Sources

Pg 1 of 1

Amendment

☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
JOINES FOR MAYOR				000-000000-0-000	
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>					
<input checked="" type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input type="checkbox"/> Outside Sources of Income					
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #		d. Comments
LEXINGTON STATE BANK 161 S STRATFORD ROAD WINSTON-SALEM, NC 27104			c. Outside Source Explanation		
			e. Election Cycle Sum to Date		
			\$		17.11
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
JFM	Check		07/29/2005	\$ 9.90	
				\$	
5. Total only this Page					\$ 9.90
6. Total of ALL CRO-1250 Pages					
<i>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</i> <i>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</i> <i>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</i>					\$ 9.90

CRO-1250

NC State Board of Elections

March 2003