

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	
JOINES FOR MAYOR		2013 Pre-Primary		000-000000-0-000	
Start of Election Cycle: January 1, 2010			Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start			\$ 201,600.77		\$ 91,158.09
RECEIPTS					
5) Aggregated Contributions from Individuals		(CRO-1205)	\$ 37.35	\$ 985.35	
6) Contributions from Individuals		(CRO-1210)	\$ 1,399.00	\$ 148,682.01	
7) Contributions from Political Party Committees		(CRO-1220)	\$ 0.00	\$ 0.00	
8) Contributions from Other Political Committees		(CRO-1230)	\$ 0.00	\$ 1,700.00	
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	\$ 144.84	
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)			\$ 1,436.35	\$ 151,512.20	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures		(CRO-1310)	\$ 18,742.28	\$ 42,876.91	
13b) Contributions to Candidates/Political Committees		(CRO-1310)	\$ 0.00	\$ 10,850.00	
13c) Coordinated Party Expenditures		(CRO-1310)	\$ 0.00	\$ 0.00	
14) Aggregated Non-Media Expenditures		(CRO-1315)	\$ 324.59	\$ 653.91	
15) Loan Repayments		(CRO-1420)	\$ 0.00	\$ 0.00	
16) Refunds/Reimbursements from the Committee		(CRO-1320)	\$ 37.35	\$ 1,219.31	
17) In-Kind Contributions		(CRO-1510)	\$ 37.35	\$ 3,174.61	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)			\$ 19,141.57	\$ 58,774.74	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)			\$ 183,895.55	\$ 183,895.55	
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 1

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	
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	JFM001	In-Kind	CAMPAIGN REFRESHMENTS	08/12/2013	\$ 37.35	
<input type="checkbox"/> Remove						
4. Total only this Page					\$ 37.35	
5. Total of ALL CRO-1205 Pages					\$ 37.35	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

CRO-1205

NC State Board of Elections

April 2007

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	
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	
ANN BRENNER 13 GRAYLYN PLACE LANE WINSTON-SALEM, NC 27106				RETIREED			
				c. Employer's Name/Specific Field			
						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"/>	JFM001	Check		08/12/2013	\$ 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	
MIKE COE 533 TRADE STREET WINSTON-SALEM, NC 27101				SELF EMPLOYED			
				c. Employer's Name/Specific Field			
				Real Estate		e. Election Sum to Date	
						\$ 1,800.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	JFM001	Check		08/02/2013	\$ 900.00		
<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	
MATTIE RHODES 219 TAR BRANCH COURT WINSTON-SALEM, NC 27101				HOMEMAKER			
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 124.50	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	JFM001	Check		08/12/2013	\$ 124.50		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1,274.50	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 1,399.00	

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	
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
MILTON RHODES 219 TAR BRANCH COURT WINSTON-SALEM, NC 27101			EXECUTIVE DIRECTOR		
			W-S ARTS COUNCIL		e. Election Sum to Date \$ 373.50
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	JFM001	Check		08/12/2013	\$ 124.50
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 124.50
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 1,399.00

Disbursements

Amendment

Pg 6 of 17 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) JOINES FOR MAYOR						2. ID Number 000-000000-0-000	
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	
EUGENE GLADNEY 417-B HIGHLAND AVE 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:			
						\$ 85.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JFM001	Check	O	08/23/2013	\$ 85.50	VOTER CANVAS		
				\$	WORKER		
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	
DARVEZ HAIRSTON 118 CHARLESTON CT APT B WINSTON-SALEM, NC 27103							
				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:			
						\$ 85.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JFM001	Check	O	08/23/2013	\$ 85.50	VOTER CANVAS		
				\$	WORKER		
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	
ROLAND HARRIS 107 NORTH CLEVELAND AVE 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:			
						\$ 85.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JFM001	Check	O	08/23/2013	\$ 85.50	VOTER CANVAS		
				\$	WORKER		
5. Total only this Page						\$ 256.50	
6. Total of ALL CRO-1310 Pages						\$ 18,742.28	
<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

Amendment

Pg 7 of 17 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) JOINES FOR MAYOR						2. ID Number 000-000000-0-000
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) PATRICK HOWELL 432 HEMINGWAY ST WINSTON-SALEM, NC 27127				b. Coordinated Committee Name		d. Comments
				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 \$ 85.50
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
JFM001	Check	O	08/23/2013	\$ 85.50	VOTER CANVAS	
				\$	WORKER	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) JAMES JONES 2817 SHILOH CHURCH RD WINSTON-SALEM, NC 27105				b. Coordinated Committee Name		d. Comments
				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 \$ 100.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
JFM001	Check	K	08/12/2013	\$ 100.00	SIGNAGE	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) SYLVIA JONES 870 PITTS AVE WINSTON-SALEM, NC 27127				b. Coordinated Committee Name		d. Comments
				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 \$ 85.50
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
JFM001	Check	O	08/23/2013	\$ 85.50	VOTER CANVAS	
				\$	WORKER	
5. Total only this Page						\$ 271.00
6. Total of ALL CRO-1310 Pages (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)						\$ 18,742.28
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) JOINES FOR MAYOR	2. ID Number 000-000000-0-000
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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) MEENAL KHAJURIA 6809 ELM HILL DRIVE CLEMMONS, NC 27012			b. Coordinated Committee Name _____		d. Comments _____
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 \$ 500.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
JFM001	Check	O	08/12/2013	\$ 500.00	CAMPAIGN STAFF
				\$	

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) REGINALD LEAK 534 N LIBERTY ST WINSTON-SALEM, NC 27101			b. Coordinated Committee Name _____		d. Comments _____
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 \$ 85.50		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
JFM001	Check	O	08/23/2013	\$ 85.50	VOTER CANVAS
				\$	WORKER

4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) SHA'QUILLE LEWIS 534 N LIBERTY ST WINSTON-SALEM, NC 27101			b. Coordinated Committee Name _____		d. Comments _____
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 \$ 85.50		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
JFM001	Check	O	08/23/2013	\$ 85.50	VOTER CANVAS
				\$	WORKER

5. Total only this Page	\$ 671.00
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6. Total of ALL CRO-1310 Pages	\$ 18,742.28
(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)	

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 9 of 17 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)						2. ID Number	
JOINES FOR MAYOR						000-000000-0-000	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<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	
WILLIE MAE LYLES 3238 CRAVER ST WINSTON-SALEM, NC 27105							
				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	
						\$ 85.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JFM001	Check	O	08/23/2013	\$ 85.50	VOTER CANVAS		
				\$	WORKER		
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	
BRANDON MILLER 417 HIGHLAND AVE APT B 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	
						\$ 85.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JFM001	Check	O	08/23/2013	\$ 85.50	VOTER CANVAS		
				\$	WORKER		
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	
NEIGHBORS FOR BETTER NEIGHBORHOODS PO BOX 20473 WINSTON-SALEM, NC 27120							
				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	
						\$ 150.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JFM001	Check	O	08/22/2013	\$ 150.00	PROMOTION		
				\$			
5. Total only this Page						\$ 321.00	
6. Total of ALL CRO-1310 Pages						\$ 18,742.28	
<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	
JOINES FOR MAYOR						000-000000-0-000	
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	
JEROME NIXON 1243 N PATTERSON AVE 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:			
						\$ 85.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JFM001	Check	O	08/23/2013	\$ 85.50	VOTER CANVAS		
				\$	WORKER		
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	
BARRY OVERBY 306 PETERS CREEK PARKWAY APT 6 WINSTON-SALEM, NC 27106							
				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:			
						\$ 85.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JFM001	Check	O	08/23/2013	\$ 85.50	VOTER CANVAS		
				\$	WORKER		
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	
KEN PETTIGREW 534 N LIBERTY 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:			
						\$ 125.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JFM001	Check	O	08/23/2013	\$ 125.00	VOTER CANVAS		
				\$	WORKER		
5. Total only this Page						\$ 296.00	
6. Total of ALL CRO-1310 Pages						\$ 18,742.28	
<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	
JOINES FOR MAYOR						000-000000-0-000	
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	
ALBERT T. PORTER JR 1228 DUBLIN DRIVE WINSTON-SALEM, NC 27101-1619							
				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:			
						\$ 5,000.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JFM001	Check	O	08/22/2013	\$ 5,000.00	POLL WORKERS,		
				\$	TRANSPORTATION, AND		
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	
SHAKINAH SHABAZZ 534 N LIBERTY 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:			
						\$ 85.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JFM001	Check	O	08/23/2013	\$ 85.50	VOTER CANVAS		
				\$	WORKER		
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	
JAMES SLADE 534 N LIBERTY 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:			
						\$ 85.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JFM001	Check	O	08/23/2013	\$ 85.50	VOTER CANVAS		
				\$	WORKER		
5. Total only this Page						\$ 5,171.00	
6. Total of ALL CRO-1310 Pages						\$ 18,742.28	
<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) JOINES FOR MAYOR						2. ID Number 000-000000-0-000	
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	
VELA - STRATEGIC MARKETING AND PUBLIC RELATIONS 315 NORTH SPRUCE STREET SUITE 215 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:			
						\$ 11,235.14	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JFM001	Check	O	08/22/2013	\$ 1,827.51	CAMPAIGN PLANNING		
JFM001	Check	B	08/22/2013	\$ 4,813.20	AND CONSULTING BUMPER STICKERS, CONSULTING AND		

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	
KEITH VENTO 3909 GRACEMONT DR WINSTON-SALEM, NC 27106							
				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:			
						\$ 85.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JFM001	Check	O	08/23/2013	\$ 85.50	VOTER CANVAS		
				\$	WORKER		

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	
WALMART 4550 KESTER MILL RD WINSTON-SALEM, NC 27103							
				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:			
						\$ 273.78	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JFM001	Cash	K	08/12/2013	\$ 123.24	OFFICE SUPPLIES		
				\$			

5. Total only this Page						\$ 6,849.45	
6. Total of ALL CRO-1310 Pages						\$ 18,742.28	
<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

Amendment

Pg 17 of 17 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) JOINES FOR MAYOR				2. ID Number 000-000000-0-000	
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) DAREY WRIGHT 534 N LIBERTY ST WINSTON-SALEM, NC 27101			b. Coordinated Committee Name		d. Comments
			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 \$ 85.50
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
JFM001	Check	O	08/23/2013	\$ 85.50	VOTER CANVAS
				\$	WORKER
5. Total only this Page					\$ 85.50
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>					\$ 18,742.28
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)					

Aggregated Non-Media Expenditures

Optional form used to report NC Non-Media Expenditures of \$50 or less.

1. Committee Full Name (and Fund if applicable) JOINES FOR MAYOR					2. ID Number 000-000000-0-000	
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JFM001	Cash	O	08/01/2013	\$ 20.50	TRANSPORTATION EXPENSE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JFM001	Cash	K	08/01/2013	\$ 38.97	REFRESHMENT SUPPLIES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JFM001	Cash	K	08/01/2013	\$ 3.74	SPARE KEYS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JFM001	Cash	K	08/01/2013	\$ 8.54	PARTY SUPPLIES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JFM001	Cash	K	08/01/2013	\$ 10.00	CLEANING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JFM001	Cash	K	08/01/2013	\$ 20.00	CLEANING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JFM001	Cash	K	08/01/2013	\$ 40.00	SUPPLIES FOR RODNEY
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JFM001	Check	K	08/01/2013	\$ 43.44	COPIER EXPENSE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JFM001	Cash	O	08/01/2013	\$ 21.88	CAMPAIGN REFRESHMENTS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JFM001	Check	K	08/12/2013	\$ 26.52	WATER
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JFM001	Cash	O	08/01/2013	\$ 18.00	TRANSPORTATION
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JFM001	Cash	K	08/01/2013	\$ 3.00	TRANSPORTATION
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JFM001	Cash	K	08/01/2013	\$ 20.00	CLEANING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JFM001	Check	O	08/22/2013	\$ 50.00	TRANSPORTATION COSTS
4. Total only this Page					\$	324.59
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$	324.59
6. Purpose Codes (List detailed expenditure code in (d) above)						
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		O* - Other		Q* - Donations to Legal Expense Fund		
* Codes require detailed explanation in required remarks field (g)						

Refunds/Reimbursements From the Committee Pg 1 of 1 Amendment Yes No

Use this form to report refunds/reimbursements, including contributions returned to the contributor

1. Committee Full Name (and Fund if applicable)			2. ID Number	
JOINES FOR MAYOR			000-000000-0-000	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		g. Comments
MEENAL KHAJURIA 6809 ELM HILL DR CLEMMONS, NC 27012		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered (Specify)		
		<input type="checkbox"/> Federal <input type="checkbox"/> County:		h. Original Receipt Date
		<input type="checkbox"/> State <input type="checkbox"/> Municipality:		08/12/2013
				i. Original Receipt Amount
				\$ 37.35
b. Job Title/Profession	c. Employer's Name/Specific Field	f. Purpose Code		j. Election Sum to Date
HOMEMAKER		P		\$ 0.00
k. Account Code	l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount
JFM001	Check	REIMBURSEMENT FOR CAMPAIGN REFRESHMENTS	08/12/2013	\$ 37.35
4. Total only this Page				\$ 37.35
5. Total of ALL CRO-1320 Pages (This line must be on line 15 of Detailed Summary Page CRO-1100)				\$ 37.35
6. Purpose Codes (List detailed disbursement code in (f) above)				
L - Returned to Contributor M - Overpayment for Service N - Exceeded Contribution Limit P* - Reimbursement of In-Kin O* Other				
* Codes require detailed explanation in required remarks field (m)				

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	
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. Type of Contributor	
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	
		c. Comments	
		d. Election Sum to Date	
		\$ 0.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
CAMPAIGN REFRESHMENTS PARTY TRAY		08/12/2013	\$ 37.35
			\$
			\$
4. Total only this Page			\$ 37.35
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>			\$ 37.35