

**COPY**

**Disclosure Report Cover Sheet**

STATE BOARD OF ELECTIONS

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

1. Name of Committee or Fund <i>Tackabery For School Board</i>			6. Date <i>8/28/02</i>	
2. Address <i>3109 Gladstonbury Rd.</i>			7. ID Number <i>138865</i>	
3. City <i>Winston-Salem,</i>	4. State <i>NC</i>	5. Zip <i>27104</i>	8. Phone <i>336-768-254</i>	
9. Type of Report <i>2002 Interim Report</i>			10. Period Covered Start <i>7/1/02</i> End <i>8/24/02</i>	
11. Amendment <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
12. Type of Committee or Fund (Check one)				
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Soft Money Account <input type="checkbox"/> Building Fund <input type="checkbox"/> Other Fund: _____				
13. Treasurer Name <i>Marianne Bach</i>				
14. Assistant Treasurer Name(s) <i>Sheryll Strade</i>				
15. Custodian of Books Name <i>Marianne Bach</i>				
16. Bank/Depository/Credit Account Information				
a. Name	b. Purpose	c. Code	d. Period Begin Balance	
<i>Southern Community Bank</i>	<i>Fund raising/Expenses</i>		<i>\$ 10,805.82</i>	
			\$	
			\$	
			\$	
			\$	
			\$	

**CERTIFICATION**

I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct.

*Marianne Bach*  
Signature of Appointed Treasurer or Candidate

*8/28/02*  
Date

## Detailed Summary

1. Name of Committee or Fund	2. Type of Report	3. ID Number		
Tackabery For School Board	2002 Interim Report	<del>XXXXXXXXXX</del>		
Start of Election Cycle: January 1, 20 <u>02</u>	Total this Period	Total this Election Cycle	For Office Use Only	
4) Cash on Hand at Start of Election Cycle		\$ — 0 —		
5) Cash on Hand at Start of Present Reporting Period	\$ 10,805.82			
<b>RECEIPTS</b>				
6) Contributions from Individuals (CRO-1210)	\$ 1325.-	\$ 13,445.24		
7) Contributions from Political Party Committees (CRO-1220)	\$ —	\$ —		
8) Contributions from Other Political Committees (CRO-1230)	\$ —	\$ —		
9) Loan Proceeds (CRO-1410)	\$ —	\$ 3,909.49		
10) Refunds & Reimbursements to Committee (CRO-1240)	\$	\$		
11) Other Receipt Sources (CRO-1250)				
11a) Interest on Bank Accounts (CRO-1250)	\$ 8.35	\$ 16.15		
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)	\$ 1,333.35	\$ 17,370.88		
<b>EXPENDITURES</b>				
13) Disbursements (CRO-1310)				
13a) Operating Expenditures (CRO-1310)	\$ 5,442.55	\$ 10,674.26		
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ —	\$ —		
13c) Coordinated Party Expenditures (CRO-1310)	\$ —	\$ —		
14) Loan Repayments (CRO-1420)	\$ —	\$ —		
15) Refunds from Committee (CRO-1320)	\$ —	\$ —		
16) In-Kind Contributions (CRO-1510)	\$ —	\$ —		
17) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, and 16)	\$ 5,442.55	\$ 10,674.26		
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)	\$ 6,696.62	\$ 6,696.62		
<b>Additional Information</b>				
19) Non-Monetary Gifts Given to Committees (CRO-1330)	\$ —			
20) Outstanding Loans (including ones from other campaigns) (CRO-1430)	\$ 3,909.49			
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	
Tackabery for School Board						138865	
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
	Norma Goelst 5036 Marble Arch Rd. Winston-Salem, NC 27104 774-2007	<del>XXXXXXXXXX</del>	CR.	07/01/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
	b. Job Title/Profession Homemaker				<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
	Ran Bell 2920 Club Park Rd. Winston-Salem, NC 27104 768-0943	<del>XXXXXXXXXX</del>	CR.	07/09/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
	b. Job Title/Profession Lawyer				<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field Womble Carlyle		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
	C.D. Luckey 230 Ashton Winston-Salem, NC 27106 924-4956	<del>XXXXXXXXXX</del>	CR.	07/09/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.00
	b. Job Title/Profession Lawyer				<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field Blanco Tackabery		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
	Jean Adams 2514 Reynolds Dr. Winston-Salem, NC 27104 725-7134	<del>XXXXXXXXXX</del>	CR.	07/10/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
	b. Job Title/Profession Lawyer				<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field Womble Carlyle		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
	Phil Thomas 3875 Will Scarlet Rd. Winston-Salem, NC 27104 760-4287	<del>XXXXXXXXXX</del>	CR.	07/17/2002	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$ 50.00
	b. Job Title/Profession Stock Broker				<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field Deutsche Banc Alex Brown		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							\$ 400.00
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			
Tackabery for School Board				138865			
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
	Gary Tash 351 Hunt Valley Ct. Winston-Salem, NC 27104 768-0697	<del>XXXXXXXXXX</del>	CR	7/28/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.-
	b. Job Title/Profession Lawyer	j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$		<input type="checkbox"/>	\$
c. Employer's Name/Specific Field Tash LAW OFFICE							
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
	Shaida Garrahi Horner 94 Shadylawn Dr. Winston-Salem, NC 27104 768-6837	<del>XXXXXXXXXX</del>	CR	07/27/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.- 25.-
	b. Job Title/Profession Lawyer	j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$		<input type="checkbox"/>	\$
c. Employer's Name/Specific Field Blanco Tackabery							
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
	Dyeann Jordan 911 Partridge Ln. Winston-Salem, NC 27104 724-3383	<del>XXXXXXXXXX</del>	CR	07/27/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.-
	b. Job Title/Profession Homemaker	j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$		<input type="checkbox"/>	\$
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
	Mark Thompson 1117 Englewood Winston-Salem, NC 27106 773-0464	<del>XXXXXXXXXX</del>	CR	08/01/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 200.-
	b. Job Title/Profession wealth management	j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$		<input type="checkbox"/>	\$
c. Employer's Name/Specific Field Atlantic Trust / Bill Rudman							
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
	Rodney Brown 411 Briarlea Rd. Winston-Salem, NC 27104 768-5757	<del>XXXXXXXXXX</del>	CR	8/2/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 25.-
	b. Job Title/Profession retired	j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$		<input type="checkbox"/>	\$
c. Employer's Name/Specific Field RSR Tobacco							
4. Total only this Page							\$ 450
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			
Tackabery for School Board				138365			
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
	J. Paul Breitbach 320 Buckingham Rd. Winston-Salem, NC 27104 760-3985	<del>XXXXXXXXXX</del>	ck.	8/2/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.-
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	Executive				<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
Krispy Kreme Doughnut				<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
	Marilyn T. Cantley 610 Valleybrook Ln. Winston-Salem, NC 27104 765-3040	<del>XXXXXXXXXX</del>	ck.	8/12/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.-
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	Homemaker				<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
	Sheila Renaldo 4304 Allstair Rd. Winston-Salem, NC 27104 659-1340	<del>XXXXXXXXXX</del>	ck.	8/12/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.-
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	Homemaker				<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
	Victoria C. Robins 1028 Wessington Rd. Winston-Salem, NC 27104 760-0192	<del>XXXXXXXXXX</del>	ck.	8/12/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.-
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	Homemaker				<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
	Christopher D. Jones, III 176 Waddington Rd. Clemmons, NC 27012 766-5316	<del>XXXXXXXXXX</del>	ck.	08/13/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 25.-
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	Substitute Teacher				<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
WS/FC Schools				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$	
4. Total only this Page							\$ 325.-
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			
Tackabery for School Board				138865			
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
	Ann G. Pippitt 601 Carrier Ct. Winston-Salem, NC 27104 659-0403	<del>XXXXXXXXXX</del>	ck.	8/13/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.-
	b. Job Title/Profession Homemaker				<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
	Jane B. Harris 1331 Thornhill Ln. Winston-Salem, NC 27106 659-4409	<del>XXXXXXXXXX</del>	ck.	8/13/02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.-
	b. Job Title/Profession Homemaker				<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"/>	\$
	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"/>	\$
	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"/>	\$
	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							\$ 150.-
5. Total of ALL CRO-1210 Pages (only show on last page)							\$ 1325.-
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

Other Receipt Sources

1. Name of Committee or Fund <b>Tackabery For School Board</b>		2. ID Number <b>138865</b>			
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>					
<input type="checkbox"/> Interest		<input type="checkbox"/> Contributions from Not-for-Profit Organizations		<input type="checkbox"/> Outside Sources of Income	
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
	Southern Community Bank P.O. Box 26134 Winston-Salem, NC 27114 336-768-8500	[REDACTED]	auto dep.	07/10/02	\$ 3.78
		[REDACTED]	auto dep.	08/10/02	\$ 4.57
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type:		h. If Not-for-Profit, list Fed ID #:	
		<input type="checkbox"/> Add <input type="checkbox"/> Delete			
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
					\$
					\$
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type:		h. If Not-for-Profit, list Fed ID #:	
		<input type="checkbox"/> Add <input type="checkbox"/> Delete			
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
					\$
					\$
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type:		h. If Not-for-Profit, list Fed ID #:	
		<input type="checkbox"/> Add <input type="checkbox"/> Delete			
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
					\$
					\$
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type:		h. If Not-for-Profit, list Fed ID #:	
		<input type="checkbox"/> Add <input type="checkbox"/> Delete			
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
					\$
					\$
					\$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type:		h. If Not-for-Profit, list Fed ID #:	
		<input type="checkbox"/> Add <input type="checkbox"/> Delete			
5. Total only this Page					\$ 8.35
6. Total of ALL CRO-1250 Related Pages <i>(only show on last page)</i>					\$ 8.35
<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>					

# Disbursements

<b>1. Name of Committee or Fund</b> <i>Tackabery for School Board</i>						<b>2. ID Number</b> <i>138865</i>		
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1330 forms for each type of Disbursements.)</i>								
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures				
<b>4. Payee</b>	<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, and zip)			<b>d. Purpose</b>	<b>e. Account Number/Code</b>	<b>f. Form of Payment</b>	<b>g. Date</b> (mm/dd/yyyy)	<b>h. Amount</b>
	<i>Joellen Parks P.O. Box 386 Kernersville, NC (336) 993-3252</i>			<i>lunches for meeting</i>	<del>XXXXXXXXXX</del>	<i>ck.</i>	<i>07/10/2002</i>	<i>\$ 44.73</i>
<b>b. If Contribution to County Committee, specify:</b>		<b>c. If Coordinated Party Expense, list office:</b>		<b>i. If Amendment, choose change type:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete			<b>j. Election Cycle Sum To Date</b> \$	
<b>4. Payee</b>	<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, and zip)			<b>d. Purpose</b>	<b>e. Account Number/Code</b>	<b>f. Form of Payment</b>	<b>g. Date</b> (mm/dd/yyyy)	<b>h. Amount</b>
	<i>Blanco Tackabery et al P.O. Drawer 25008 Winston-Salem, NC 336-761-1250 27114</i>			<i>postage</i>	<del>XXXXXXXXXX</del>	<i>ck.</i>	<i>7/31/2002</i>	<i>\$ 55.13</i>
<b>b. If Contribution to County Committee, specify:</b>		<b>c. If Coordinated Party Expense, list office:</b>		<b>i. If Amendment, choose change type:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete			<b>j. Election Cycle Sum To Date</b> \$	
<b>4. Payee</b>	<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, and zip)			<b>d. Purpose</b>	<b>e. Account Number/Code</b>	<b>f. Form of Payment</b>	<b>g. Date</b> (mm/dd/yyyy)	<b>h. Amount</b>
	<i>Wooden Graphics P.O. Box 819 WELCOME, NC 27374 (336) 731-4650</i>			<i>sign stands</i>	<del>XXXXXXXXXX</del>	<i>check</i>		<i>\$ 314.54</i>
<b>b. If Contribution to County Committee, specify:</b>		<b>c. If Coordinated Party Expense, list office:</b>		<b>i. If Amendment, choose change type:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete			<b>j. Election Cycle Sum To Date</b> \$	
<b>4. Payee</b>	<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, and zip)			<b>d. Purpose</b>	<b>e. Account Number/Code</b>	<b>f. Form of Payment</b>	<b>g. Date</b> (mm/dd/yyyy)	<b>h. Amount</b>
	<i>Horn &amp; Stronach 315 N. Spruce St. Winston-Salem, NC 721-2992 27101</i>			<i>direct mail + newspaper ads</i>	<del>XXXXXXXXXX</del>	<i>ck.</i>	<i>08/22/02</i>	<i>\$ 5,028.13</i>
<b>b. If Contribution to County Committee, specify:</b>		<b>c. If Coordinated Party Expense, list office:</b>		<b>i. If Amendment, choose change type:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete			<b>j. Election Cycle Sum To Date</b> \$	
<b>4. Payee</b>	<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, and zip)			<b>d. Purpose</b>	<b>e. Account Number/Code</b>	<b>f. Form of Payment</b>	<b>g. Date</b> (mm/dd/yyyy)	<b>h. Amount</b>
					<del>XXXXXXXXXX</del>			\$
<b>b. If Contribution to County Committee, specify:</b>		<b>c. If Coordinated Party Expense, list office:</b>		<b>i. If Amendment, choose change type:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete			<b>j. Election Cycle Sum To Date</b> \$	
<b>5. Total only this Page</b>							<b>\$ 5442.55</b>	
<b>6. Total of ALL CRO-1310 Related Pages</b> <i>(only show on last page)</i>							<b>\$ 5442.55</b>	
<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>								

# Outstanding Loans

1. Name of Committee or Fund			2. ID Number		
Tackabery For School Board			<del>XXXXXXXXXX</del>		
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate	h. Original Loan Amount
	Jill A. Tackabery 3109 Gladstonbury Winston-Salem, NC 27104 336-760-3248	03/07/2002		0%	\$3,909.49
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
		candidate			\$3,909.49
		g. Security Pledged			
		none			
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete					
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate	h. Original Loan Amount
				%	\$
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
					\$
		g. Security Pledged			
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete					
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate	h. Original Loan Amount
				%	\$
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
					\$
		g. Security Pledged			
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete					
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate	h. Original Loan Amount
				%	\$
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
					\$
		g. Security Pledged			
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete					
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate	h. Original Loan Amount
				%	\$
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
					\$
		g. Security Pledged			
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete					
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate	h. Original Loan Amount
				%	\$
		e. Job Title/Profession	f. Employer's Name/Specific Field		i. Loan Balance
					\$
		g. Security Pledged			
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete					
4. Total only this Page					\$3,909.49
5. Total of ALL CRO-1430 Pages (only show on last page)					\$3,909.49
(This line must be on line 24 of Detailed Summary Page CRO-1100)					