Disclosure Report Cover



nendment	
] Yes	\boxtimes

No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information

1. Committee Inform	mation				
a. Full Name					c. ID Number
Re-Elect Gloria D. V	Whisenhunt				3CQCJ9
	ude City, State and Zip Code)				d. Date Filed
456 N. Hawthorne R Winston-Salem, N.C					2/11/2008
					e. Phone Number
					336-725-1072
2. Report Year	3. Period Start Date (mm/d	dd/yy) 4. Period (mm/dd/yy)	End Date	5. Treasurer Full I	
2008	10/19/2008	12/	/31/2008	Gloria D. Whisehu	int
6. Type of Committee		9. Type of Report	t (check or	nly one type of report f	from one category)
Candidate Campai		Municipal		County	Referendum
PAC Independent	Referendum	Organizationa	al 📗	Organizational	Organizational
Independent Expenditure Legal Expense Fun	Joint Fundraiser	Thirty-five da	ıy	Quarterly	Pre-referendum
7. Type of Fund	(if applicable, check one)	Pre-primary		First	Final
"Booster Fund"	(i) approximation	Pre-election	lΗ	Second	Supplemental Final
Building Fund	J	Pre-runoff	lΗ	Third	Annual
STATE OF THE PARTY	1	Semi-annual		Fourth	Special
	J	Mid Year		Semi-annual	
Other:	J	Year End		Mid Year	10. Special Report Name
ш	<u> </u>	Final	ĺĦ	Year End	To Opecial Report
8. Number of Fundra	gisers this Report	Special	١Ħ	Final	
Ot I I Manager	moero uno report			Special	
11. Account Informa	0				
a. Financial Institution Fu	A STATE OF THE PARTY OF THE PAR		11. Account 1	Information stitution Full Name	
First Citizen Bank	Плаше		a. Financiai insc	atunon Fun Paine	
b. Purpose	c. Account Code		b. Purpose		c. Account Code
Campaign	C. ACCOUNT COUC		D. Purpose		c. Account Code
Expenses	. 1				
Checking	d. Period Begin Balance		1		d. Period Begin Balance
	\$ 5,170.01				\$
CERTIFICATION				, 2000 - 10	
the NC General Statute is complete, true and co	es and that no funds are concorrect and that I have been	mmingled with proh	nibited or other i	non-disclosed funds. I	& 22D-22M of Chapter 163 of I further certify that this report
	D. Whisenhunt		tece 10.	//a //	1/08/2009
	Printed Name of Signer		Signature of Appoint	The thirt -	Date
FOR OFFICE USE ON				1	
Date Received:	1-8-09	Employee:	Judy	1 Speas [Delivery Method Normal Mail
Date Postmarked:	Medical Programme Assessment Assessment Assessment	Employee:		<u>[</u>	Registered Mail Hand Delivered
Date Scanned:		Employee:	<u>daviso</u>		Electronically Filed Signer has not received
Date Data Entered:	i	Employee:	1-8 M9 2:	NAL POOS	mandatory training
Please Note: This f	form cannot be used to ame	end committee infor	mation such as	the committee addres	ss, treasurer, assistant treasurer,

custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

Amendment

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

	Type of Report		ormation.	3. ID N	umber
	Quarter Report			3CQCJ9	
Start of Election Cycle: January 1,	2008		Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start		\$	5,170.01	\$	00.
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	00.	\$	00.
6) Contributions from Individuals	(CRO-1210)	\$	110.00	\$	10,685.00
7) Contributions from Political Party Committees	(CRO-1220)	\$	00.	\$	00.
8) Contributions from Other Political Committees	(CRO-1230)	\$	1,750.00	\$	4,087.33
9) Loan Proceeds	(CRO-1410)	\$	00.	\$	3,000.00
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	00.	\$	00.
11) Other Receipt Sources					
11a) Interest on Bank Accounts	(CRO-1250)	\$	00.	\$	00.
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$	00.	\$	00.
11c) Outside Sources of Income	(CRO-1250)	\$	00.	\$	00.
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	00.	\$	00.
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	00.	\$	00.
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11a	and 11e)	\$	1,860.00	\$	17,772.33
EXPENDITURES					
(3) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	4,612.18	\$	12,017.17
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	00.	\$	00.
13c) Coordinated Party Expenditures	(CRO-1310)	\$	00.	\$	00.
4) Aggregated Non-Media Expenditures	(CRO-1315)	\$	00.	\$	00.
5) Loan Repayments	(CRO-1420)	\$	00.	\$	3,000.00
6) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	00.	\$	00.
7) In-Kind Contributions	(CRO-1510)	\$	00.	\$	337.33
8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 a	and 17)	\$	4,612.18	\$	15,354.50
9) Cash on Hand at End (Add lines 4 and 12 together, then subtract li	ine 18)	\$	2,417.83	\$	2,417.83
ADDITIONAL INFORMATION					
0) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	00.		
1) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	00.		
2) Debts and Obligations owed By the Committee	(CRO-1610)	\$	00.		
B) Debts and Obligations owed To the Committee	(CRO-1620)	\$	00.		
4) Account Transfers Within the Committee	(CRO-1720)	\$	00.		
5) Administrative Support	(CRO-1710)	\$	00.	\$	00.
6) Forgiven Loans	(CRO-1440)	\$	00.	\$	00.
7) 48-Hour Notice Reports Sum	(CRO-2200)	\$	1,500.00	\$	3,500.00
Contributions to be Refunded	-	\$	00.		00.
, Contributions to be Actunited	(CRO-1215)	Ф	00.	\$	UU.

		om Individuals idividual contributions				of 2	Yes	\ \
THE RESERVE THE PARTY OF THE PA		e (and Fund if applic		of contributions t	inder \$50 ii form C	2. ID No		
INTER DECIDENCE	t Gloria D. Whise						3CQCJ9	
3. Contr	ributor Informa	tion	П	Add 🗍	Remove			
	me, Mailing Addres			b. Job Title/Profess		d. Comme	ents	
	e city, state, & zip)			Housewife		u. comm.	chts -	
Jordan N	l. Tabor							
5556 Lo	ng Walk Drive			c. Employer's Name	e/Specific Field			
Kernersv	ville, N.C. 27284			None				
						e. Election	Sum to Date	
336-993	-5536					\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/	уууу)	k. Amount	
	1	Check			10/20/	2008	\$	50.00
							\$	
							\$	
3. Contr	ibutor Informat	ion		Add F	Remove			
a. Full Nan	ne, Mailing Address	& Phone		b. Job Title/Professi		d. Comme	nts	
(include	city, state, & zip)			Retired		1	Section 1	
Steve Bla	ike							
2239 Kin	g George Court			c. Employer's Name	Specific Field			
Winston-	Salem, N.C. 2710	03		None				
						e. Election	Sum to Date	
336-659-	7890					\$	25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	1	Check			10/25/	2008	\$	25.00
							\$	
							\$	
. Contri	butor Informati	on		Add R	emove			
	e, Mailing Address	& Phone		b. Job Title/Profession	n	d. Commer	nts	A SALA
	city, state, & zip)			Retired				
Elmer Cop								
	ecock Ave.			c. Employer's Name/	Specific Field			
winston-S	Salem, N.C. 2710	14		None				
36-765-1	350					e. Election	Sum to Date	
30-703-1						\$	10.00	
Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	1	Check			11/01/2	2008	\$	10.00
							\$	
							\$	
. Total	only this Page	e				\$		85.00
. Total	of ALL CRO	-1210 Pages				•		

(This line must be on line 6 of Detailed Summary Page CRO-1100) CRO-1210

NC State Board of Elections

April 2007

\$

					Amei	ndment		
Contributions from Individuals	Pg	2	of	2		Yes	\boxtimes	No
Use this form to report individual contributions over \$50 or contribu-	tions under	\$50 if for	m CRO	1205 is no	ot used			
1. Committee Full Name (and Fund if applicable)				2. ID Nur				

1. Com	mittee Full Name	e (and Fund if applic	able)				2. ID Nu	mber	
Re-Elec	ct Gloria D. Whise	enhunt						3CQCJ9	
	ributor Informat			Add	Ren	move			
	ame, Mailing Address	s & Phone		b. Job Title/Pi	ofession		d. Commen	its	
	le city, state, & zip)			Retired					
	L. Haire					70.00			
	eynolda Road n-Salem. N.C. 271	0.0		c. Employer's	Name/Sp	ecific Field			
W IIISTOI	1-5aleiii. N.C. 2/1	06		None			TH		
336-721	-1274						e. Election	Sum to Date	
721	1271						\$	25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Cind Description		j. Date (mm/dd/yy		k. Amount	
	1	Check				11/15/2		\$	25.00
								\$	
								\$	
3. Contr	ibutor Informati	ion		Add	Ren	nove			
	me, Mailing Address			b. Job Title/Pro	THE RESERVE OF THE PERSON OF T	nove	d. Commen	te	
	city, state, & zip)								
				c. Employer's N	Name/Sp	ecific Field			
							e. Election S	Sum to Date	
	T						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description		j. Date (mm/dd/yy	yy)	k. Amount	
								\$	
								\$	
								\$	
	butor Informatio			Add	Rem	iove			
	ne, Mailing Address	& Phone		b. Job Title/Pro	fession		d. Comment	s	
(include	city, state, & zip)								
			-						
			-	c. Employer's N	ame/Spe	citic Field			
						-	e. Election S	um to Date	
							\$	um to Date	
. Prior	g. Account Code	h. Form of Payment	i. In-Ki	nd Description		j. Date (mm/dd/yyy		k. Amount	
								\$	
								\$	
								\$	
. Total	only this Page	9	4				\$		25.00
	of ALL CRO-	-1210 Pages Detailed Summary Page Cl	00 1100				\$		110.00
(1 mis une	must be on tine o of L	retutieu Summary Page Ci	(0-1100)						

Contributions from Political Party Committees

				Amei	ndment		
Pg	1	of	1		Yes	\boxtimes	No

Use this form to report contributions from a political party

B. Comments		Full Name (and Fund i	if applicable)		2. II	0 Number	
1. Full Name, Mailing Address & Phone (include city, state, & zip) 1. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Mailing Address & Phone (include city, state, & zip) 2. Full Name, Zip Nam	Re-Elect Gioria	1 D. Whisennunt				3CQC	J 9
MC. Home Build=78 Association P.O. Box 990900 Raleigh, N.C. 27624	The Control of the Co	TO SHARE THE STATE OF THE STATE	☐ Add ☐	Remove			
N.C. Home Builders Association P.O. Box 99090 Raleigh, N.C. 27624 336-768-5942 d. Account Code e. Form of Payment f. In-Kind Description					b. Co	mments	
P.O. Box 90909 Raleigh, N.C. 27624 336-768-5942 4. Account Code	N.C. Home Bui	ilders Association			1		
S 250.00	P.O. Box 99090	0		1			
Account Code C. Form of Payment C. In-Kind Description S. Date (mai/dd/yyyy) h. Amount	Raleigh, N.C. 2	17624		1	c. Ele	ction Sum to	Date
1 Check 11/03/208 \$ 250.00	336-768-5942				\$	250.00	
1	d. Account Code	e. Form of Payment	f. In-Kind Description		y)	h. Amoun	t
3. Contributor Information Add Remove B. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) NC Realtors PAC 4511 Weybridge Lane Greensboro, N.C. 27407 C. Election Sum to Date (mm/dd/yyyy) h. Amount (mm/dd/yyyy) d. Account Code C. Form of Payment C. In-Kind Description Remove S. 3. Contributor Information Add Remove S. 3. Contributor Information Add Remove S. 4. Account Code C. Form of Payment C. In-Kind Description B. Comments 4. Account Code C. Form of Payment C. In-Kind Description B. Comments 4. Account Code C. Form of Payment C. In-Kind Description B. Comments 4. Account Code C. Form of Payment C. In-Kind Description B. Comments 5. Account Code C. Form of Payment C. In-Kind Description B. Comments 5. Total only this Page S. 1,750.00	1	Check				\$ 25	50.00
3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) 5. Contributor Information Check Ch						\$	
3. Contributor Information Add Remove b. Comments						\$	
S. Full Name, Mailing Address & Phone (include city, state, & zip) S. Check			Add	Remove			
NC Realtors PAC 4511 Weybridge Lane Greensboro, N.C. 27407					b. Cor	mments	
4511 Weybridge Lane Greensboro, N.C. 27407 336-768-5560 d. Account Code Code Co							
C. Election Sum to Date					ĺ		
S 2,500.00				+	c. Elec	ction Sum to I	Date
d. Account Code c. Form of Payment Check							
Check					7	2,500.00	1
3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) c. Election Sum to Date \$ 1. Account Code e. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount \$ \$ \$ 1. Total only this Page \$ 1,750.00	d. Account Code	e. Form of Payment	f. In-Kind Description		<i>i</i>)	h. Amount	į.
3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) c. Election Sum to Date \$ 1. Account Code e. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount \$ \$ 1. Total only this Page \$ 1. Total of ALL CRO-1220 Pages		Check		11/01/20	008	\$ 1,5	500.00
3. Contributor Information a. Full Name, Mailing Address & Phone (include city, state, & zip) c. Election Sum to Date \$ 1. Account Code e. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount \$ \$ \$ 4. Total only this Page 5. Total of ALL CRO-1220 Pages						\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip) c. Election Sum to Date s d. Account Code e. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount \$ \$ \$ Local Code of Account Code of the content of th						\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip) c. Election Sum to Date s d. Account Code e. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount \$ \$ \$ Local Code of the contents f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount \$ \$ \$ \$ \$ Local Code of the c	3. Contributor I	nformation	Add	Remove			
c. Election Sum to Date \$ 1. Account Code e. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ Total only this Page \$ 1,750.00					b. Con	aments	
S. Account Code e. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount \$ \$ 4. Total only this Page 5. Total of ALL CRO-1220 Pages	(include city, state,	, & zip)					
S. Account Code e. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount \$ \$ 4. Total only this Page 5. Total of ALL CRO-1220 Pages							
S. Account Code e. Form of Payment f. In-Kind Description g. Date (mm/dd/yyyy) h. Amount \$ \$ 4. Total only this Page 5. Total of ALL CRO-1220 Pages				Į.	c. Elec	tion Sum to D	ate
\$ \$ Total only this Page \$ 1,750.00 Total of ALL CRO-1220 Pages							
\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	d. Account Code	e. Form of Payment	f. In-Kind Description)	h. Amount	
I. Total only this Page \$ 1,750.00 5. Total of ALL CRO-1220 Pages						\$	
5. Total of ALL CRO-1220 Pages						\$	
5. Total of ALL CRO-1220 Pages						\$	
5. Total of ALL CRO-1220 Pages	. Total only tl	his Page			\$	1,750.00	
\$ 1,750.00	. Total of AL	L CRO-1220 Page	S		4.0		-

D' I				Amendme	nt
Disbursements	Pg	1	of <u>3</u>	Yes	\boxtimes

Use this form		es from the commit	Pg tee for; operating expense	1 of	3 Yes No		
committees ar	nd coordinated party	expenditures	tee for, operating expense	s, contributions to	o candidate/political		
Company of the Compan	Full Name (and Fu				2. ID Number		
	ria D. Whisenhunt				CQCJ9		
3. Type of Dis		ease use separate (CRO-1310 forms for each	type of Disburse			
Operating	g Expenses		andidates/Political Committees		Coordinated Party Expenditures		
4. Payee Info	rmation		Add	Remove			
a. Full Name, Ma	ailing Address & Phone		b. Coordinated Committee	Name	d. Comments		
(include city, stat	te, & zip)						
WSJS Radio							
875 West 5 th 5			c. Level Registered (Specify)			
Winston-Sale	m, N.C. 27101		Federal	County:			
226 777 2000			State	Municipality:	e. Election Sum to Date		
336-777-3900	1				\$ 1,880.00		
f. Account Code	g. Form of Payment	h. Purpose Code	: P-4: ((11/)	T			
1. Account Code	g. Form of Fayment	n. r ur pose coue	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	A	10/29/2008	\$680.00	Radio Adv.		
1	Check	A	11/20/2008	\$1,200.00	Radio Adv.		
4. Payee Infor	mation		Add	Remove			
a. Full Name, Ma	iling Address & Phone		b. Coordinated Committee N	Name	d. Comments		
(include city, state	e, & zip)						
BP Oil Co.							
P.O.Box 1532:			c. Level Registered (Specify)				
Wilmington, D	e 19886-5325		Federal County:				
			State	Municipality:	e. Election Sum to Date		
800-445-6106					\$ 394.02		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	0	10/20/2008	\$204.02	Fuel To Put		
•	CHECK		10/20/2008	\$394.02	Up Signs		
				\$			
4. Payee Inform	nation		Add	Remove			
	ling Address & Phone		b. Coordinated Committee N		d. Comments		
(include city, state,			or contained committee is	· · · · · · · · · · · · · · · · · · ·	u. comments		
Winston-Salem							
P.O. Box 3159			c. Level Registered (Specify)				
Winston-Salem	, N.C. 27101		Federal	County:			
			State	Municipality:	e. Election Sum to Date		
336-727-7211					\$ 4,053.20		
. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Check	A	10/20/2008	\$993.60	News Paper Adv.		
				4,,,,,,,			
				\$			
. Total only th					\$ 3,267.62		
	CRO-1310 Pages						
	line 13a of Detailed Sum				\$		
(This line goes in	line 13a of Detailed Sum	mary Page CRO-1100	if Contrib to Candidates/Politic	cal Comm)			
			if Coordinated Party Expenditu	ires)			
. Purpose Code A* - Media	es (List detailed exp						
C - Salaries	B* - Printing F* - Equipmen	C* - Fund t G - Politic			her Candidate		
- Postage	J - Penalties		ee Expenses	H* - Holdin O* - Other	g Public Office Expenses		
THE RESERVE AND ADDRESS OF THE PARTY OF THE		IL OIN	- Dapenses	o - Other			

O* - Other

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political

committees and	l coordinated	party expenditures
----------------	---------------	--------------------

	Full Name (and Fu	nd if applicable)			2. ID Number
	a D. Whisenhunt				CQCJ9
3. Type of Disl		ease use separate	CRO-1310 forms for eac		
Operating		Contributions to C	andidates/Political Committees		Coordinated Party Expenditures
4. Payee Inform			Add	Remove	
	ling Address & Phone		b. Coordinated Committe	e Name	d. Comments
include city, state					
City Of Winsto					
P.O. Box 2756			c. Level Registered (Speci	fy)	
Winston-Salem	n, N.C. 27102-2756		Federal	County:	
226 727 2620			State	Municipality:	e. Election Sum to Date
336-727-2628					\$ 150.00
. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	J	10/23/2008	\$50.00	Sign Penalties
1	Check	J	11/13/2008	\$100.00	Sign Penalties
. Payee Inform	nation		Add	Remove	
	ing Address & Phone		b. Coordinated Committee		d. Comments
nclude city, state,					
Kernersville Ne					
P.O.Box 337			c. Level Registered (Specif	v)	
Kernersville, N.	.C. 27285		Federal	County:	_
			State	Municipality:	e. Election Sum to Date
36-993-2161				1	\$ 1,277.00
Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
8			N 10 10 10 10 10 10 10 10 10 10 10 10 10		News Paper Adv
	Check	A	12/23/2008	\$146.00	Tiews raper riav
				\$	
Payee Inform	ation		Add	Remove	
Full Name, Mailii	ng Address & Phone		b. Coordinated Committee	Name	d. Comments
clude city, state, è					
mith Phillips L					
03 East 17 th St			c. Level Registered (Specify	()	
inston-Salem,	N.C. 27105		Federal	County:	
			State	Municipality:	e. Election Sum to Date
36-722-8167					\$ 346.95
Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	Check	F	10/31/2008	\$69.39	Sign Stakes
				\$	
Total only this	Page				\$ 365.39
	CRO-1310 Pages				Ψ 505.57
This line goes in li	ine 13a of Detailed Sum) if Operating Expenses)		0
This line goes in li	ne 13b of Detailed Sum	mary Page CRO-1100) if Contrib to Candidates/Polit		\$
			if Coordinated Party Expendi		
Purpose Codes	(List detailed exp				
- Media	B* - Printing	C* - Fun		D - To Ano	ther Candidate
- Salaries	F* - Equipment		0		ng Public Office Expenses
Postage	J - Penalties	K* - Offi	ce Expenses	O* - Other	
Codes require	detailed explanation	n in required re	marks field (k)		

No

committees an	to report expenditure ad coordinated party	expenditures	Pg ttee for; operating expenses	3 of s, contributions to	Amendment 3 Yes No o candidate/political
1. Committee	Full Name (and Fu	ind if applicable)			2. ID Number
Re-Elect Glor	ria D. Whisenhunt				CQCJ9
3. Type of Dis	Awar .	ease use separate (CRO-1310 forms for each type of Disbursen		
Constitution of the last of th	g Expenses	Contributions to Ca	andidates/Political Committees		Coordinated Party Expenditures
4. Payee Infor	mation		Add	Remove	
a. Full Name, Ma	iling Address & Phone		b. Coordinated Committee N		d. Comments
(include city, state					
Byron Nelson					
4825 Commercial Place Apt # 27			c. Level Registered (Specify)		
Winston-Salem, N.C. 27104			Federal County:		
			State	Municipality:	e. Election Sum to Date
336-778-1788					A 250.00
		2000			\$ 250.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	Е	11/03/2008	\$150.00	Putting UpSign
				\$	
4. Payee Inform	mation		Add	Remove	
a. Full Name, Mail	ling Address & Phone		b. Coordinated Committee N		d. Comments
(include city, state,		1			
Office Depot					
1235 Silas Creek Pkwy			c. Level Registered (Specify)		1
Winston-Salem, N.C. 27127			Federal	County:	
		!	State	Municipality:	e. Election Sum to Date
336-773-1080					\$ 363.49
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	D			PrintingSupplies
1	Спеск	В	11/07/2008	\$363.49	Timmgoupping
				\$	
4. Payee Inform	nation		Add	Remove	
a. Full Name, Maili	ing Address & Phone		b. Coordinated Committee Name		d. Comments
(include city, state, & zip)					
Ryan's Restaurant					
719 Coliseum Drive			c. Level Registered (Specify)		1
Winston-Salem,	, N.C. 27105		Federal	County:	1 !
336-724-6132			State	Municipality:	e. Election Sum to Date
				•	\$ 465.65
. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	G	11/13/2008	\$465.68	Volunteer Thank You
				ď.	Thank Tou

5. Total only this Page \$ 979.17 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$ 4,612.18 (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

O* - Other

J - Penalties

K* - Office Expenses