

COPY

Disclosure Report Cover

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
COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF		
b. Mailing Address (include City, State and Zip Code)		d. Date Filed
404 CARPENTER AVE WINSTON-SALEM, NC 27107		04/16/2006
		e. Phone Number
		336-785-0696

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name
	01/01/2006	04/15/2006	MARK WILLIAMS

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 type="checkbox"/> Thirty-five day	Quarterly	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input checked="" 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	
BB&T			
b. Purpose	c. Code	b. Purpose	c. Code
CAMPAIGN RECEIPTS AND DISBURSEMENTS	bbt		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 22,399.20		\$

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.

MARK WILLIAMS

Printed Name of Signer



Signature of Appointed Treasurer

04/16/2006

Date

FOR OFFICE USE ONLY

Date Received: 4-17-06 Employee: Judy Spears
 Date Postmarked: 4-15-06 Employee: Judy Spears
 Date Scanned: 22:11:14 Employee: 9007

Delivery Method
 Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed

Detailed Summary

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF		FIRST QUARTER PLUS			
Start of Election Cycle: January 1, 2005		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 22,399.20		\$ 22,399.20	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 678.00		\$ 703.00	
6) Contributions from Individuals (CRO-1210)		\$ 750.00		\$ 3,150.00	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$		\$ 20,000.00	
10) Refunds/Reimbursements To the Committee (CRO-1240)		\$		\$	
11) Other Receipt Sources (CRO-1250)					
11a) Interest on Bank Accounts (CRO-1250)		\$		\$	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$	
12) "Goods and Services" Contributions (CRO-1260)		\$		\$	
13) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)		\$ 1,428.00		\$ 23,853.20	
EXPENDITURES					
14) Disbursements (CRO-1310)					
14a) Operating Expenditures (CRO-1310)		\$ 9,084.83		\$ 9,110.63	
14b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
14c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
15) Loan Repayments (CRO-1420)		\$		\$	
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$ 721.97		\$ 721.97	
17) In-Kind Contributions (CRO-1510)		\$		\$	
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)		\$ 9806.80		\$ 9,832.60	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)		\$ 14,020.40		\$ 14,020.40	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 20,000.00			
22) Debts and Obligations owed By the Committee (CRO-1610)		\$			
23) Debts and Obligations owed To the Committee (CRO-1620)		\$			
24) Account Transfers Within the Committee (CRO-1720)		\$			
25) Administrative Support (CRO-1710)		\$		\$	
26) Forgiven Loans (CRO-1440)		\$		\$	
27) 48-Hour Notice Reports Sum		\$		\$	

Aggregated Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)					2. ID Number
COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF					
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	bbt	CASH		03/31/2006	\$
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		FUND RAISER			\$ 678.00
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
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<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
4. Total only this Page					\$ 678.00
5. Total of ALL CRO-1205 Pages					\$ 678.00
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					

Contributions from Individuals

Amendment

Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF							
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	
MICHEAL DUFFIELD 4770 COUNTRY BOY LANE CLEMMONS, NC 27012				PASTOR			
				c. Employer's Name/Specific Field			
				VICTORY BAPTIST CHURCH		e. Election Cycle Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	bbt	CHECK		03/31/2006	\$ 100.00		
<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	
SHELBY BLACKBURN 2828 OLD SALISBURY ROAD WINSTON-SALEM, NC 27127				HOMEMAKER			
				c. Employer's Name/Specific Field			
						e. Election Cycle Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	bbt	CHECK		03/31/2006	\$ 100.00		
<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	
LINDA SHELL 1620 GILFORD DRIVE WINSTON-SALEM, NC 27127				CLERK			
				c. Employer's Name/Specific Field			
				FORSYTH COUNTY		e. Election Cycle Sum to Date	
						\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	bbt	CHECK		03/31/2006	\$ 50.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 250.00	
5. Total of ALL CRO-1210 Pages						\$ 750.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF							
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	
CALVIN WEATHERMAN 4306 OLD BELLEWS CREEK RD WINSTON-SALEM, NC 27101				SELF-EMPLOYED			
				c. Employer's Name/Specific Field			
				OSHA MOBILE TESTING			
						e. Election Cycle Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	bbt	CHECK			03/31/2006	\$ 100.00	
<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 940 WALKERTOWN RD WINSTON-SALEM, NC 27101				RETIRED			
				c. Employer's Name/Specific Field			
						e. Election Cycle Sum to Date	
						\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	bbt	CHECK			03/31/2006	\$ 150.00	
<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	
CANDICE DILLON 940 WALKERTOWN RD WINSTON-SALEM, NC 27101				HOMEMAKER			
				c. Employer's Name/Specific Field			
						e. Election Cycle Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	bbt	CHECK			03/31/2006	\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 350.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 750.00	

Contributions from Individuals

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF							
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	
BILLY REAVIS 3320 BURKE MILL RD WINSTON-SALEM, NC				SELF-EMPLOYED			
				c. Employer's Name/Specific Field			
				BILLY REAVIS BONDING CO.		e. Election Cycle Sum to Date	
						\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	bbt	CHECK		03/31/2006	\$ 150.00		
<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	
				c. Employer's Name/Specific Field			
						e. Election Cycle Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>					\$		
<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	
				c. Employer's Name/Specific Field			
						e. Election Cycle Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 150.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 750.00	

Disbursements

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF					
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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
POSTMARK 390 CASSELL ST WINSTON-SALEM, NC 27127			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 1,623.66
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
bbt	CHECK	MAILING & POSTAGE	03/17/2006	\$ 1,623.66	
				\$	
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
AC PHOENIX NEWS 2523 N PATTERSON AVE. WINSTON-SALEM, NC 27105			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 600.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
bbt	CHECK	ADVERTISING	03/21/2006	\$ 600.00	
				\$	
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
CLEMMONS HARDWOODS INC P.O. BOX 1728 CLEMMONS, NC 27012			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 300.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
bbt	CHECK	ADVERTISING SUPPLIES	03/31/2006	\$ 300.00	
				\$	
5. Total only this Page					\$ 2,523.66
6. Total of ALL CRO-1310 Pages					\$ 9,084.83
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>					
<i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>					
<i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

Disbursements

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF					
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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
FAIRWAY OUTDOOR ADVERTISING 1920 W LEE ST GREENSBORO, NC 27403					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:		
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 2,636.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
bbt	CHECK	ADVERTISEMENT	03/17/2006	\$ 2,636.00	
				\$	
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
WATERMARKED GRAPHICS 8385 N NC HWY 150 CLEMMONS, NC 27012					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:		
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 300.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
bbt	CHECK	SIGNS	04/10/2006	\$ 300.00	
				\$	
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
THE SOUTHERNER P.O. BOX 1381 WELCOME, NC 27374					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:		
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 249.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
bbt	CHECK	NEWSPAPER AD	04/04/2006	\$ 249.00	
				\$	
5. Total only this Page				\$ 3,185.00	
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>				\$ 9,084.83	

Disbursements

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF					
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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
SARTIN ADVERTISING 860 W 4 1/2 ST WINSTON-SALEM, NC 27101			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 3,334.17
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
bbt	CHECK	BROCHURES	04/05/2006	\$ 3,334.17	
				\$	
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
US POSTMASTER WINSTON-SALEM, NC			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 42.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
bbt	CHECK	P.O. BOX RENTAL	04/10/2006	\$ 42.00	
				\$	
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
			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
5. Total only this Page				\$ 3,376.17	
6. Total of ALL CRO-1310 Pages				\$ 9,084.83	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

Refunds/Reimbursements From the Committee

Pg 1 of 1

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF					
3. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee		g. Comments
LONNIE M MAINES, JR 404 CARPENTER AVE. WINSTON-SALEM, NC			<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			e. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:		h. Original Receipt Date
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		02/13/2006
					i. Original Receipt Amt
					\$ 721.97
b. Job Title/Profession		c. Employer's Name/Specific Field		f. Purpose	
RETIRED POLICE		RETIRED		FILING FEE	
				j. Election Cycle Sum to Date	
				\$ 721.97	
k. Account Code	l. Form of Payment	m. In-Kind Description		n. Date (mm/dd/yyyy)	o. Amount
					\$
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
			<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:		
					i. Original Receipt Amt
					\$
b. Job Title/Profession		c. Employer's Name/Specific Field		f. Purpose	
				j. Election Cycle Sum to Date	
				\$	
k. Account Code	l. Form of Payment	m. In-Kind Description		n. Date (mm/dd/yyyy)	o. Amount
					\$
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
			<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:		
					i. Original Receipt Amt
					\$
b. Job Title/Profession		c. Employer's Name/Specific Field		f. Purpose	
				j. Election Cycle Sum to Date	
				\$	
k. Account Code	l. Form of Payment	m. In-Kind Description		n. Date (mm/dd/yyyy)	o. Amount
					\$
4. Total only this Page				\$ 721.97	
5. Total of ALL CRO-1320 Pages (This line must be on line 16 of Detailed Summary Page CRO-1100)				\$ 721.97	

Outstanding Loans

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)		2. ID Number	
COMMITTEE TO ELECT LONNIE MAINES FOR SHERIFF			
3. Lender 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
LONNIE M MAINES, JR 404 CARPENTER AVE. WINSTON-SALEM, NC 27107		RETIRED POLICE	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		RETIRED	07/01/2005
			f. End Date (mm/dd/yyyy)
			12/31/2006
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
5 %	N/A	\$ 20,000.00	\$ 20,000.00
k. Full Name of Lending Institution			l. Loan Number
N/A			N/A
3. Lender 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
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$	\$
k. Full Name of Lending Institution			l. Loan Number
3. Lender 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
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$	\$
k. Full Name of Lending Institution			l. Loan Number
4. Total only this Page		\$ 20,000.00	
5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>		\$ 20,000.00	