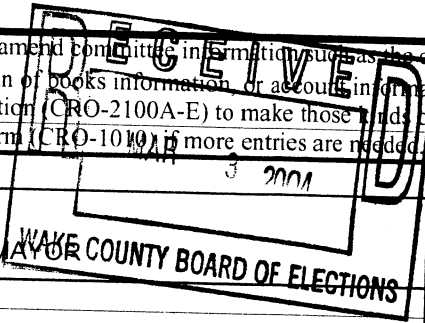


Disclosure Report Cover

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 COMMITTEE TO ELECT DAVID HAGWOOD MAYOR		c. ID Number
b. Mailing Address (include City, State and Zip Code) 1505 N GLENEAGLE DR GARNER NC 27529		d. Date Filed 3-1-04
		e. Phone Number 919-779-3199

2. Report Year 2003	3. Period Start Date (mm/dd/yyyy) 10/20/2003	4. Period End Date (mm/dd/yyyy) 12/31/2003	5. Treasurer Full Name JOHN M HODGES JR
------------------------	---	---	--

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

10. Account Information a. Financial Institution Full Name NORTH STATE BANK		10. Account Information a. Financial Institution Full Name	
b. Purpose RECEIPT & EXPENDITURE OF CAMPAIGN FUNDS	c. Code 1	b. Purpose	c. Code
d. Period Begin Balance \$ 1,757.93		d. Period Begin Balance \$	

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.

JOHN M HODGES JR
 Printed Name of Signer

Signature of Appointed Treasurer

3-1-04
 Date

FOR OFFICE USE ONLY

Date Received: _____ Employee: _____ Delivery Method
 Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed

Date Postmarked: _____ Employee: _____

Date Scanned: _____ Employee: _____

Detailed Summary

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)		2. Type of Report	3. ID Number	
COMMITTEE TO ELECT DAVID HAGWOOD MAYOR		2003 YR-END SEMI-ANNU.		
Start of Election Cycle: January 1, 2002		Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start		\$ 1,757.93	\$ 0.00	
RECEIPTS				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 424.00	\$ 4,078.00	
6) Contributions from Individuals	(CRO-1210)	\$ 200.00	\$ 3,400.00	
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$ 1,000.00	
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$	
9) Loan Proceeds	(CRO-1410)	\$	\$	
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$ 43.38	\$ 43.38	
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)	\$ 667.38	\$ 8,521.38	
EXPENDITURES				
14) Disbursements	(CRO-1310)			
14a) Operating Expenditures	(CRO-1310)	\$ 2,425.31	\$ 8,521.38	
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)	\$	\$	
17) In-Kind Contributions	(CRO-1510)	\$	\$	
18) TOTAL EXPENDITURES	(Add lines 14a, 14b, 14c, 15, 16, and 17)	\$ 2425.31	\$ 8,521.38	
19) Cash on Hand at End	(Add lines 4 and 13 together, then subtract line 18)	\$ 0.00	\$ 0.00	
ADDITIONAL INFORMATION				
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$		
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		\$	\$	

Disbursements

1. Committee Full Name (and Fund if applicable) <i>Comm Hec to Elect David Hayward Meyer</i>	2. ID Number
---	--------------

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Unforgettable Food Affairs, Inc. 5533 NC Hwy 42 Suite B-28 Garner, NC 27529 919-662-7678	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Cycle Sum to Date
		\$

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
1	Check	Catering	10/24/2003	\$ 300.00
1	Check	Catering	11/17/2003	\$ 268.63

NA

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Labels & Lists, Inc. 2500 - 116th Avenue, NE Bellvue, WA 98004 425-822-1984	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Cycle Sum to Date
		\$

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
1	Check	Voter information lists	10/24/2003	\$ 161.86
				\$

NA

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Conquest Communications Group 2812 Emerywood Pky Ste 103 Richmond, VA 23294-3718 <i>804-358-0560</i>	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Cycle Sum to Date
		\$

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
1	Check	Campaign Services	10/24/2003	\$ 338.76
				\$

5. Total only this Page \$ 1,069.25

6. Total of ALL CRO-1310 Pages

(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)

(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)

(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

\$ 2,425.31

Disbursements

1. Committee Full Name (and Fund if applicable) <i>Comm Hec to Elect David Hayward Meyer</i>					2. ID Number	
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
Unforgettable Food Affairs, Inc. 5533 NC Hwy 42 Suite B-28 Garner, NC 27529 919-662-7678				c. Level Registered (Specify)		e. Election Cycle Sum to Date
				<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
				f. Amount		
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount		
1	Check	Catering	10/24/2003	\$ 300.00		
1	Check	Catering	11/17/2003	\$ 268.63		
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
Labels & Lists, Inc. 2500 - 116th Avenue, NE Bellvue, WA 98004 425-822-1984				c. Level Registered (Specify)		e. Election Cycle Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
				f. Amount		
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount		
1	Check	Voter information lists	10/24/2003	\$ 161.86		
				\$		
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
Conquest Communications Group 2812 Emerywood Pky Ste 103 Richmond, VA 23294-3718 <i>804-358-0560</i>				c. Level Registered (Specify)		e. Election Cycle Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
				f. Amount		
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount		
1	Check	Campaign Services - telephone <i>polling.</i>	10/24/2003	\$ 338.76		
				\$		
5. Total only this Page				\$ 1,069.25		
6. Total of ALL CRO-1310 Pages				\$ 2,425.31		
<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>						

NA

NA

Disbursements

1. Committee Full Name (and Fund if applicable) <i>Comm Acc to Elect David Hargwood Mayor</i>	2. ID Number
--	--------------

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*
 Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Garner Times 905-C Fifth Avenue Garner, NC 27529 919-772-7751	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Cycle Sum to Date \$

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
1	Check	Campaign Advertisement	10/24/2003	\$ 122.51
				\$

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Postal Plus Forest Hills Shopping Center Garner, NC 27529 919-772-0151	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Cycle Sum to Date \$

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
1	Check	Postage	10/28/2003	\$ 600.00
1	Check	Postage	10/28/2003	\$ 80.00

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Sam's Club 2537 S Saunders Street Raleigh, NC 27603 919-839-1700	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Cycle Sum to Date \$

f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
1	Check	Office Supplies	11/04/2003	\$ 53.62
				\$

5. Total only this Page \$ 856.13

6. Total of ALL CRO-1310 Pages
(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)
(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)
(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)
 \$ 2,425.31

NA

NA

Disbursements

1. Committee Full Name (and Fund if applicable) <i>Comm Hec to Elect David Hayward Mayor</i>				2. ID Number	
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
Garner Times 905-C Fifth Avenue Garner, NC 27529 919-772-7751			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input checked="" type="checkbox"/> Federal <input 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	
1	Check	Campaign Advertisement	10/24/2003	\$ 122.51	
				\$	
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
Postal Plus Forest Hills Shopping Center Garner, NC 27529 919-772-0151			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input 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	
1	Check	Postage	10/28/2003	\$ 600.00	
1	Check	Postage	10/28/2003	\$ 80.00	
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
Sam's Club 2537 S Saunders Street Raleigh, NC 27603 919-839-1700			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input 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	
1	Check	Office Supplies - <i>paper and envelopes</i>	11/04/2003	\$ 53.62	
				\$	
5. Total only this Page				\$ 856.13	
6. Total of ALL CRO-1310 Pages				\$ 2,425.31	
<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>					

NA

NA



North Carolina
State Board of Elections
506 N Harrington Street
Raleigh, NC 27603

Kimberly Westbrook
Deputy Director - Campaign Reporting

Mailing Address
PO Box 27255
Raleigh, NC 27611-7255
(919) 733-7173
Fax: (919) 715-8047

Certification to Close Committee

FILED BY:

Committee Name: Committee to Elect David Hargwood Mayor
 Treasurer Name: John M. Hodges Jr.
 Treasurer Address: 510 Grail Place
 (include city, state, & zip) Garner NC 27529

 Treasurer Phone: 919-772-5642

I certify that the above mentioned Committee intends to close and cease existence. Upon signing this certification, I declare that all funds have been distributed and reported (if required). In addition, no contributions will be accepted or disbursements made after the "Final Report" is filed or this form is signed. If the Committee at any future time intends to accept or spend funds in support or opposition of any candidate or ballot issue, a new political committee must be formed and registered with the Board of Elections before such activities may commence.

Committees that have filed under the \$3,000 threshold will only be required to sign this Certification. No "Final Report" will be required for committees meeting this criterion. Any Committee that did not file under the \$3,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

1-30-04
Date Signed

[Signature]
Signature

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.

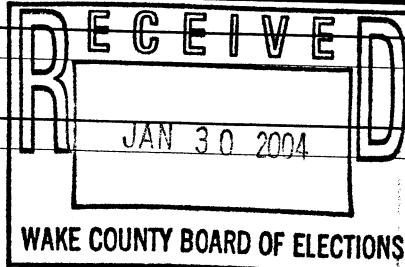
1. Committee Information

a. Full Name

Committee to Elect David Hagwood Mayor

b. Mailing Address (include City, State and Zip Code)

1505 North Gleneagle Drive
 Garner, NC 27529



c. ID Number

d. Date Filed

01/30/2004

e. Phone Number

919-779-3199

2. Report Year

2003

3. Period Start Date (mm/dd/yyyy)

10/20/2003

4. Period End Date (mm/dd/yyyy)

12/31/2003

5. Treasurer Full Name

John M. Hodges, Jr.

6. Type of Committee (Check one)

- Candidate Campaign Party
 Joint Fundraiser PAC
 Referendum

8. Type of Report (check only one type of report from one category)

Municipal

- Organizational
 Thirty-five day
 Pre-primary
 Pre-election
 Pre-runoff
 Semi-annual
 Mid Year
 Year End
 Final
 Special

State/County

- Organizational
 Quarterly
 First Plus
 Second
 Third Plus
 Fourth
 Semi-annual
 Mid Year
 Year End
 Final
 Special

Referendum

- Organizational
 Pre-referendum
 Final
 Supplemental Final
 Annual
 Special

7. Type of Fund (if applicable, check one)

- Soft Money Account
 "Booster Fund"
 Building Fund
 NC Political Party Financing Fund
 Presidential Election Year Candidates Fund
 NC Public Campaign Financing Fund
 Other:

9. Special Report Name

10. Account Information

a. Financial Institution Full Name

North State Bank

b. Purpose

Receipt and expenditures of campaign funds

c. Code

1

d. Period Begin Balance

\$ 1,757.93

10. Account Information

a. Financial Institution Full Name

b. Purpose

c. Code

d. Period Begin Balance

\$

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.

John M. Hodges, Jr.

Printed Name of Signer

Signature of Appointed Treasurer

1-30-2004

Date

FOR OFFICE USE ONLY

Date Received: _____

Employee: _____

Date Postmarked: _____

Employee: _____

Date Scanned: _____

Employee: _____

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 David Hagwood Mayor		Year End & Final	
Start of Election Cycle: January 1, 2002		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1,757.93	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 424.00	\$ 4,078.00
6) Contributions from Individuals	(CRO-1210)	\$ 200.00	\$ 3,400.00
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$ 1,000.00
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$ 43.38	\$ 43.38
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)	\$ 667.38	\$ 8,521.38
EXPENDITURES			
14) Disbursements	(CRO-1310)		
14a) Operating Expenditures	(CRO-1310)	\$ 2,425.31	\$ 8,522.02
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)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$	\$
18) TOTAL EXPENDITURES	(Add lines 14a, 14b, 14c, 15, 16, and 17)	\$ 2425.31	\$ 8,521.38
19) Cash on Hand at End	(Add lines 4 and 13 together, then subtract line 18)	\$ 0.00	\$ 0.00
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	\$
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	\$
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		\$	\$

CRO-1100

Contributions from Individuals

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Committee to Elect David Hagwood Mayor							
3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Charles Hagwood 1005 Meadowbrook Drive Garner, NC 27529 919-772-0723				Retired			
				c. Employer's Name/Specific Field			
						e. Election Cycle Sum to Date	
						\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	CHECK		11/24/2003	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input checked="" 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						\$ 200.00	
5. Total of ALL CRO-1210 Pages						\$ 200.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

Disbursements

1. Committee Full Name (and Fund if applicable) <i>Comm Hec to Elect David Hayward Mayor</i>				2. ID Number	
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
Unforgettable Food Affairs, Inc. 5533 NC Hwy 42 Suite B-28 Garner, NC 27529 919-662-7678			c. Level Registered (Specify)		
			<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date \$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	Check	Catering	10/24/2003	\$ 300.00	
1	Check	Catering	11/17/2003	\$ 268.63	
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
Labels & Lists, Inc. 2500 - 116th Avenue, NE Bellvue, WA 98004 425-822-1984			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date \$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	Check	Voter information lists	10/24/2003	\$ 161.86	
				\$	
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
Conquest Communications Group 2812 Emerywood Pky Ste 103 Richmond, VA 23294-3718 <i>804-358-0560</i>			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date \$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	Check	Campaign Services	10/24/2003	\$ 338.76	
				\$	
5. Total only this Page				\$ 1,069.25	
6. Total of ALL CRO-1310 Pages				\$ 2,425.31	
<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

1. Committee Full Name (and Fund if applicable) <i>Comm Hec to Elect David Hayward Mayor</i>				2. ID Number	
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
Garner Times 905-C Fifth Avenue Garner, NC 27529 919-772-7751			c. Level Registered (Specify)		
			<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date \$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	Check	Campaign Advertisement	10/24/2003	\$ 122.51	
				\$	
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
Postal Plus Forest Hills Shopping Center Garner, NC 27529 919-772-0151			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date \$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	Check	Postage	10/28/2003	\$ 600.00	
1	Check	Postage	10/28/2003	\$ 80.00	
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
Sam's Club 2537 S Saunders Street Raleigh, NC 27603 919-839-1700			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date \$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	Check	Office Supplies	11/04/2003	\$ 53.62	
				\$	
5. Total only this Page				\$ 856.13	
6. Total of ALL CRO-1310 Pages				\$ 2,425.31	
<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

1. Committee Full Name (and Fund if applicable) <i>Committee to Elect David Hagwood Mayor</i>				2. ID Number	
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
Target 2700 Timber Drive Garner, NC 27529 919-772-9065			c. Level Registered (Specify)		
			<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
			e. Election Cycle Sum to Date		\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	Check	Materials for signs	11/04/2003	\$	34.86
				\$	
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
Garner News 503-L Hwy 70 Est Garner, NC 27529 919-772-1166			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
			e. Election Cycle Sum to Date		\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	Check	Advertising	10/23/2003	\$	181.13
				\$	
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
David Hagwood 1505 North Gleneagle Drive Garner, NC 27529 919-779-3199			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
			e. Election Cycle Sum to Date		\$
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	Check	Close campaign account	12/04/2003	\$	283.94
				\$	
5. Total only this Page				\$	499.93
6. Total of ALL CRO-1310 Pages				\$	2,425.31
<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 To the Committee

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee to Elect David hagwood Mayor					
3. Contributor 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
Conquest Communications Group 2812 Emerywood Pky Ste 103 Richmond, VA 23294-3718 804-358-0560			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		Overpayment
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			e. Level Registered (Specify)		h. Original Expenditure Date
<input type="checkbox"/> Federal <input type="checkbox"/> County:		10/24/2003			
<input type="checkbox"/> State <input type="checkbox"/> Municipality:		i. Original Expenditure Amt			
		\$ 338.76			
b. Job Title/Profession		c. Employer's Name/Specific Field	f. Purpose		j. Election Cycle Sum to Date
NA		NA	Refund of overpayment		\$
k. Account Code	l. Form of Payment	m. In-Kind Description		n. Date (mm/dd/yyyy)	o. Amount
1	Check	NA		11/24/2003	\$ 43.38
3. Contributor 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)		h. Original Expenditure Date
<input type="checkbox"/> Federal <input type="checkbox"/> County:					
<input type="checkbox"/> State <input type="checkbox"/> Municipality:		i. Original Expenditure 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. Contributor 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)		h. Original Expenditure Date
<input type="checkbox"/> Federal <input type="checkbox"/> County:					
<input type="checkbox"/> State <input type="checkbox"/> Municipality:		i. Original Expenditure 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					\$ 43.38
5. Total of ALL CRO-1240 Pages					\$ 43.38
(This line must be on line 10 of Detailed Summary Page CRO-1100)					