

**Disclosure Report Cover**

**RECEIVED**

Amendment  
 Yes  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.

APR 22 2010

<b>1. Committee Information</b>				
a. Full Name <b>COMMITTEE TO RE-ELECT ARCHIE SMITH</b>			c. ID Number <b>94-3422486</b>	
b. Mailing Address (include City, State and Zip Code) <b>508 EVERETT PLACE DURHAM, N.C. 27701</b>			d. Date Filed	
			e. Phone Number <b>(919)688-8445</b>	
2. Report Year <b>2010</b>	3. Period Start Date (mm/dd/yy) <b>1-1-10</b>	4. Period End Date (mm/dd/yy) <b>4-20-2010</b>	5. Treasurer Full Name <b>E DUDLEY ROBINSON</b>	
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		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 type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
7. Type of Fund (if applicable, check one)		State/County		
<input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other		<input type="checkbox"/> Organizational <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <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		
8. Number of Fundraisers this Report <b>0</b>		10. Special Report Name		
11. Account Information		11. Account Information		
a. Financial Institution Full Name <b>RBC</b>		a. Financial Institution Full Name		
b. Purpose <b>CAMPAIGN CONTRIBUTIONS</b>	c. Account Code <b>070444 5729</b>	b. Purpose	c. Account Code	
	d. Period Begln Balance <b>\$ 9121.81</b>		d. Period Begln Balance <b>\$</b>	
<b>CERTIFICATION</b>				
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.				
<u>E Dudley Robinson</u> Printed Name of Signer		<u>E Dudley Robinson</u> Signature of Appointed Treasurer		<u>4-22-10</u> Date
<b>FOR OFFICE USE ONLY</b>				
Date Received:	<u>4-22-10</u>	Employee:	<u>apage</u>	
Date Postmarked:	_____	Employee:	_____	
Date Scanned:	_____	Employee:	_____	
Date Data Entered:	_____	Employee:	_____	
Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training				
<b>Please Note:</b> This form 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 committee changes.				

# Detailed Summary

Amendment

 Yes

 No

Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
COMMITTEE TO RE-ELECT ARCHIE SMITH	1/4	94-3422486
Start of Election Cycle: January 1, <u>2010</u>	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 9121.81	\$ 9121.81
<b>RECEIPTS</b>		
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 545.00	\$ 545.00
6) Contributions from Individuals (CRO-1210)	\$ 2,875.00	\$ 2875.00
7) Contributions from Political Party Committees (CRO-1220)	\$	\$
8) Contributions from Other Political Committees (CRO-1230)	\$	\$
9) Loan Proceeds (CRO-1410)	\$	\$
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$	\$
<b>11) Other Receipt Sources</b>		
11a) Interest on Bank Accounts (CRO-1250)	\$	\$
11b) Contributions from Not-For-Profit Organizations (CRO-1250)	\$	\$
11c) Outside Sources of Income (CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$	\$
11e) Exempt Purchase Price Sales (CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 3420.00	\$ 3,420.00
<b>EXPENDITURES</b>		
<b>13) Disbursements</b>		
13a) Operating Expenditures (CRO-1310)	\$ 1632.61	\$ 1632.61
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 150.00	\$ 150.00
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures (CRO-1315)	\$	\$
15) Loan Repayments (CRO-1420)	\$	\$
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$	\$
17) In-Kind Contributions (CRO-1510)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 1782.61	\$ 1782.61
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 10,759.20	\$ 10,759.20
<b>ADDITIONAL INFORMATION</b>		
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-2220)	\$	\$
28) Contributions to be Refunded (CRO-1215)	\$	\$

# Aggregated Contributions from Individuals

Page \_\_\_ of \_\_\_

Amendment  
 Yes  No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO RE-ELECT ARCHIE SMITH				94-3422486	
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		CHECK		02/18/10	\$25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		" "		02/24/10	\$25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		" "		02/24/10	\$50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		" "		02/24/10	\$25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		" "		02/24/10	\$50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		" "		02/24/10	\$50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		" "		02/24/10	\$50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		" "		3/01/10	\$25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		" "		" " "	\$50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		" "		3/04/10	\$25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		" "		3/10/10	\$50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		" "		3/29/10	\$25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		" "		3/29/10	\$25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		" "		4/08/10	\$50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		" "		4/20/10	\$20.00
<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					
<input type="checkbox"/> Add					\$
<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					
<b>4. Total only this Page</b>					\$ 545.00
<b>5. Total of ALL CRO-1205 Pages</b>					\$ 545.00
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					

# Contributions from Individuals

Pg \_\_\_\_ of \_\_\_\_ Amendment  Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO RE-ELECT ARCHIE SMITH					94-3422486	
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	
GEORGE W MILLER, JR PO BOX 51429 DURHAM, N. C. 27717			ATTORNEY			
			c. Employer's Name/Specific Field			
			SELF LAW		e. Election Sum to Date	
					\$500.00	
Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	5729	CHECK		02/22/2010	\$500.00	
<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	
MALVERN KING, JR 3606 OLD CHAPEL HILL ROAD DURHAM, NC 27707-3617			ATTORNEY			
			c. Employer's Name/Specific Field			
			SELF LAW		e. Election Sum to Date	
					\$125.00	
Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	5729	CHECK		02/22/2010	\$125.00	
<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	
JOHN THOMAS HULT 1115 DONNIC RD. DURHAM, NC 27712						
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$100.00	
Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	5729	CHECK		02/22/2010	\$100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 725.00	
5. Total of ALL CRO-1210 Pages					\$ 2,875.00	
<small>(This line must be an item on Detailed Summary Page CRO-1100)</small>						

# Contributions from Individuals

Pg \_\_\_\_ of \_\_\_\_

Amendment

Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
COMMITTEE TO RE-ELECT ARCHIE SMITH						94-3422486	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ROLAND W. LEARY 2618 INDIAN TRAIL DURHAM, NC 27705				RETIRED			
				<b>c. Employer's Name/Specific Field</b>			
						<b>e. Election Sum to Date</b>	
						\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	5729	CHECK		02/22/2010		\$ 200.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
TERRY D. FISHER 5 LOCHNESS CT. DURHAM, NC 27705				ATTORNEY			
				<b>c. Employer's Name/Specific Field</b>			
				REINHARDT, MILAM, FISHER & IDOL LLC LAW			
						<b>e. Election Sum to Date</b>	
						\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	5729	CHECK		02/22/2010		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JAMES B. CRAVEN III BOX 1364 349 WEST MAIN ST. DURHAM, N.C. 27702				ATTORNEY			
				<b>c. Employer's Name/Specific Field</b>			
				SELF LAW			
						<b>e. Election Sum to Date</b>	
						\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	5729	CHECK		02/22/2010		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$ 400.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$ 2,875.00	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

# Contributions from Individuals

Pg \_\_\_\_ of \_\_\_\_

Amendment  
 Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name and Fund (if applicable)						2. ID Number
COMMITTEE TO RE-ELECT ARCHIE SMITH						94-3422486
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		
BARKER FRELCH 1005 MOLMOUTH AVENUE DURHAM, NC 27701			RETIRED			
			c. Employer's Name/Specific Field	e. Election 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"/>	5729	CHECK		02/22/2010	\$ 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		
SAM D. VAUGHAN JR PO BOX 11677 DURHAM, NC 27703			PRESIDENT - VAUGHAN ELECTRIC CO.			
			c. Employer's Name/Specific Field	e. Election Sum to Date		
			VAUGHAN ELECTRIC CO. ELECTRICAL CONTRACTOR	\$ 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"/>	5729	CHECK		02/22/2010	\$ 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		
FRANK WARD 1511 WARD ST. DURHAM, NC 27707			REALTOR			
			c. Employer's Name/Specific Field	e. Election Sum to Date		
			FRANK WARD REALTORS	\$ 250.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	5729	CHECK		02/22/2010	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 450.00	
5. Total of ALL CRO-1210 Pages					\$ 2,875.00	
<small>(This line must be on line 6 of Enclosed Summary Page CRO-1100)</small>						

# Contributions from Individuals

Page \_\_\_\_\_ of \_\_\_\_\_

Amendment  
 Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEES TO RE-ELECT ARCHIE SMITH						94-322486	
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	
SAMUEL DELMUS VAUGHAN III PO BOX 11677 DURHAM, N.C. 27703				ELECTRICAL CONTRACTOR			
				c. Employer's Name/Specific Field			
				WAUSHAD ELECTRIC CO. ELECTRICAL CONTRACTOR			
						e. Election 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"/>	5729	CHECK		02/24/2010	\$ 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	
RICHARD L. SOLES 5607 RUSSELL ROAD DURHAM, N.C. 27712				RECTOR/PROPERTY MANAGEMENT			
				c. Employer's Name/Specific Field			
				SELF REAL ESTATE			
						e. Election 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"/>	5729	CHECK		03/01/2010	\$ 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	
RICHARD M. HUTSON 4517 CHESTER CT DURHAM, NC 27705				ATTORNEY			
				c. Employer's Name/Specific Field			
				SELF			
						e. Election Sum to Date	
						\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	5729	CHECK		03/01/2010	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 450.00	
5. Total of ALL CRO-1210 Pages						\$ 2,875.00	

# Contributions from Individuals

Page \_\_\_\_ of \_\_\_\_

Amendment  
 Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO RE-ELECT ARCHIE SMITH					94-3422486	
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	
ELTON F. EARP 5623 BOUNIE DRIVE DURHAM, NC 27712			RETIRED			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			N/A		\$ 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"/>	5729	CHECK		03/04/2010	\$ 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	
BILL SHORE 28 CUCKWATER DRIVE DURHAM, NC 27707			COMMUNITY RELATIONS			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			GLAXO-SMITH KLINE DRUG. CO.		\$ 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"/>	5729	CHECK		03/04/2010	\$ 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	
CATHY WRENN 1008 RIVERFOREST DR. HILLSBOROUGH, NC 27278			RETIRED			
			c. Employer's Name/Specific Field		e. Election 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"/>	5729	CHECK		03/04/2010	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 300.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 2,875.00	



# Contributions from Individuals

Pg \_\_\_\_ of \_\_\_\_

Amendment

Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO RE-ELECT ARCHIE SMITH					94-3422486	
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	
SAMUEL ROBERTI 3774 ST. MARKS RD DURHAM, NC 27707				ATTORNEY		
				c. Employer's Name/Specific Field	e. Election Sum to Date	
				ROBERT, WITTEBERG + LAUFFER	\$ 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"/>	5729	CHECK		03/10/2010	\$ 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	
GEORGE D. BEISCHER 34 APPLETON PLACE DURHAM, NC 27705				BUSINESSMAN		
				c. Employer's Name/Specific Field	e. Election Sum to Date	
				GARDEP VIEW REALTY	\$ 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"/>	5729	CHECK		03/29/2010	\$ 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	
ROBERT A. IDOL 504 BALLARD CREEK CT. CARY, N.C. 27519				ATTORNEY		
				c. Employer's Name/Specific Field	e. Election Sum to Date	
				BEINHARDT, MILAM LAW FIRM	\$ 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"/>	5729	CHECK		04/08/2010	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 450.00	
5. Total of ALL CRO-1210 Pages					\$ 2,875.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
COMMITTEE TO RE-ELECT ARCHIE SMITH					94-3422486	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
CLAUD ROBERT WHITEHEAD III 2501 TOWNEDGE CT. RALEIGH, N.C. 27612			ATTORNEY			
			<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
			STATE OF N.C.		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	5729	CHECK		04/20/2010	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
			<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
					\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
			<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
					\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 100.00	
<b>5. Total of ALL CRO-1210 Pages</b>					\$ 2,875.00	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>						

# Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)						2. ID Number
COMMITTEE TO RE-ELECT ARCHIE SMITH						94-3422486
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
DURHAM CO. BOARD OF ELECTIONS						FILING FEE
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 1,126.07
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
5729	CHECK	H	2/05/2010	\$1,126.07		
				\$		
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
GRAPEVINE PRINTING & DESIGN 2544 DURHAM-CHAPEL HILL BLVD DURHAM, NC 27707						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 418.54
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
5729	CHECK	B	2-15-2010	\$418.54	printing	
				\$		
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 POST OFFICE DURHAM, N.C.						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
5729	CHECK	I	2-16-2010	\$ 88.00	postage	
				\$		
5. Total only this Page						\$ 1632.61
6. Total of ALL CRO-1310 Pages						\$ 1782.61
7. Purpose Codes (List detailed expenditure code in (h.) above)						
A* - Media                      B* - Printing                      C* - Fundraising                      D - To Another Candidate E - Salaries                      F* - Equipment                      G - Political Party                      H* - Holding Public Office Expenses I - Postage                      J - Penalties                      K* - Office Expenses                      Q* - Donation to Legal Expense Fund O* Other						
* Codes require detailed explanation in required remarks field (k.)						

# Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
COMMITTEE TO RE-ELECT ARCHIE SMITH						94-3422486	
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input type="checkbox"/> Operating Expenses		<input checked="" type="checkbox"/> Contributions to Candidates/Political Committees			<input type="checkbox"/> Coordinated Party Expenditures		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
PEOPLE'S ALLIANCE POLITICAL ACTION COMMITTEE PO. Box 3221 DURHAM, NC 27715-3221				PA-PAC			
				<b>e. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 150.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
5729	CHECK	D	4-08-2010	\$ 150.00			
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
				<b>e. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
				\$			
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
				<b>e. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
				\$			
				\$			
<b>5. Total only this Page</b>						\$ 150.00	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 1782.61	
<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>							
<b>7. Purpose Codes</b> <i>(List detailed expenditure code in (h.) above)</i>							
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate				
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses				
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund				
O* Other							
* Codes require detailed explanation in required remarks field (k)							