

FEB 05 2003

Disclosure Report Cover Sheet

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

1. Name of Committee or Fund <u>Campaign to Elect Corbett for Sheriff</u>			6. Date <u>1-27-03</u>	
2. Address <u>P.O. Box 21</u>			7. ID Number	
3. City <u>Willard</u>	4. State <u>NC</u>	5. Zip <u>28478</u>	8. Phone <u>910-285-8829</u>	
9. Type of Report <u>4th Quarter + Final Report</u>			10. Period Covered Start: <u>10-26-02</u> End: <u>12-31-02</u>	
			11. Amendment <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

12. Type of Committee or Fund (Check one)

<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> "Booster Fund"
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Soft Money Account	<input type="checkbox"/> Building Fund
<input type="checkbox"/> Other Fund: _____			

13. Treasurer Name
Bennie L. Corbett

14. Assistant Treasurer Name(s)

15. Custodian of Books Name
Bennie L. Corbett

16. Bank/Depository/Credit Account Information

a. Name	b. Purpose	c. Code	d. Period Begin Balance
<u>BR+T Bank in Wallace</u>	<u>Corbett for Sheriff</u>	<u>BC</u>	<u>\$ 20.00</u> <u>955.00</u>
			\$
			\$
			\$
			\$
			\$

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.

Bennie Corbett
Signature of Appointed Treasurer or Candidate

1-27-03
Date

Detailed Summary

FEB 05 2003

1. Name of Committee or Fund	2. Type of Report	3. ID Number
Corbett for Sheriff	Final Report + 4th Quarter	
Start of Election Cycle: January 1, 2002	Total this Period	Total this Election Cycle
4) Cash on Hand at Start of Election Cycle		\$ 0
5) Cash on Hand at Start of Present Reporting Period	\$ 955.00	
RECEIPTS		
6) Contributions from Individuals (CRO-1210)	\$	\$
7) Contributions from Political Party Committees (CRO-1220)	\$	\$
8) Contributions from Other Political Committees (CRO-1230)	\$	\$
9) Loan Proceeds (CRO-1410)	\$	\$
10) Refunds and 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) Contributions based on Forgiven Loans (CRO-1440)	\$	\$
14) 48-Hour Notice Reports Sum	\$	\$
15) TOTAL RECEIPTS (Add lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 12, 13, and 14)	\$	\$
EXPENDITURES		
16) Disbursements (CRO-1310)		
16a) Operating Expenditures (CRO-1310)	\$ 1234.48	\$
16b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$
16c) Coordinated Party Expenditures (CRO-1310)	\$	\$
17) Loan Repayments (CRO-1420)	\$	\$
18) Forgiven Loans (CRO-1440)	\$	\$
19) Refunds and Reimbursements FROM the Committee (CRO-1320)	\$	\$
20) In-Kind Contributions (CRO-1510)	\$	\$
21) TOTAL EXPENDITURES (Add lines 16a, 16b, 16c, 17, 18, 19, and 20)	\$ 1234.48	\$
22) Cash on Hand at End of Reporting Period (For this Period, add lines 5 and 15 together, then subtract line 21) (For this Election Cycle, add lines 4 and 15 together, then subtract line 21)	\$ -279.48	\$ -0-
Additional Information		
23) Non-Monetary Gifts Given to Committees (CRO-1330)	\$	
24) Outstanding Loans (including ones from other campaigns) (CRO-1430)	\$	
25) Debts and Obligations owed BY the Committee (CRO-1610)	\$	
26) Debts and Obligations owed TO the Committee (CRO-1620)	\$	
27) Parent Entity's Administrative Support (CRO-1710)	\$	
28) Account Transfers (CRO-1720)	\$	

Disbursements

Final Report / 4th Quarter

FEB 6 2003

1. Name of Committee or Fund Corbett for Sheriff						2. ID Number		
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursements.)								
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures				
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip) Bursaw NC 28425			d. Purpose Pol. Ad	e. Account Number/Code 1001	f. Form of Payment check	g. Date (mm/dd/yyyy) 10-7-02	h. Amount \$ 200.00
	b. If Contribution to County Committee, specify: Pender Post		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date \$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip) Bursaw NC 28425			d. Purpose Pol. Ad	e. Account Number/Code 1002	f. Form of Payment check	g. Date (mm/dd/yyyy) 10-7-02	h. Amount \$ 105.00
	b. If Contribution to County Committee, specify: Pender Chronicle		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date \$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip) Bursaw NC 28425			d. Purpose Pol. Ad	e. Account Number/Code 1003	f. Form of Payment check	g. Date (mm/dd/yyyy) 10-21-02	h. Amount \$ 100.00
	b. If Contribution to County Committee, specify: Pender Post		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date \$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip) Bursaw NC 28425			d. Purpose Pol. Ad	e. Account Number/Code 1004	f. Form of Payment check	g. Date (mm/dd/yyyy) 10-21-02	h. Amount \$ 210.00
	b. If Contribution to County Committee, specify: Pender Chronicle		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date \$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip) Wallace, 28476			d. Purpose Stamps	e. Account Number/Code 1005	f. Form of Payment check	g. Date (mm/dd/yyyy) 10-25-02	h. Amount \$ 1098.16
	b. If Contribution to County Committee, specify: United Postal Service		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date \$	
5. Total only this Page								\$
6. Total of ALL CRO-1310 Related Pages (only show on last page)								\$
(This line goes in line 16a of Detailed Summary Page CRO-1100 if Operating Expenses)								\$
(This line goes in line 16b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)								\$
(This line goes in line 16c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)								\$

Disbursements

Final Report / 4th Quarter

1. Name of Committee or Fund <i>Carbett for Sheriff</i>						2. ID Number		
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursements.)								
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures				
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Wallace NC 28476			CARDS	1606	check	10-28-02	\$ 58.58
b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type:			j. Election Cycle Sum To Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Rose Hill NC House of Raeford Farms			Box of Chicken Campaign Dinner	1007	check	11-1-02	\$ 47.74
b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type:			j. Election Cycle Sum To Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	P. Lgrim OR Wilmington NC 28401 Dorothy Carbett			Catering food	1008	check	11-15-02	\$ 50.00
b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type:			j. Election Cycle Sum To Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
								\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type:			j. Election Cycle Sum To Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
								\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type:			j. Election Cycle Sum To Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$	
5. Total only this Page							\$	
6. Total of ALL CRO-1310 Related Pages (only show on last page)							\$	
(This line goes in line 16a of Detailed Summary Page CRO-1100 if Operating Expenses)							\$	
(This line goes in line 16b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)							\$	
(This line goes in line 16c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							\$	

Contributions from INDIVIDUALS

Final Report / 4th Quarter

1. Name of Committee or Fund		2. ID Number					
BENNIE CORBETT For Sheriff		FEB 05 2003					
3. Contributor		d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
a. Full Name, Mailing Address & Phone (include city, state, & zip)					<input type="checkbox"/>	<input type="checkbox"/>	\$
Denver C. Brown 11736 Ashton Rd. Burgaw, NC 28425 910-259-9612		3414	Check	9-27-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
b. Job Title/Profession					<input type="checkbox"/>	<input type="checkbox"/>	\$
SOCIAL WORKER					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
Southeastern Mental Health		<input type="checkbox"/> Add	<input type="checkbox"/> Delete	\$ 100.00			
3. Contributor		d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
a. Full Name, Mailing Address & Phone (include city, state, & zip)					<input type="checkbox"/>	<input type="checkbox"/>	\$
JUDY C. HICKS 1605 Highsmith Rd Burgaw, NC 28425		3437	Check	9-27-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
b. Job Title/Profession					<input type="checkbox"/>	<input type="checkbox"/>	\$
LEGAL ASSISTANT					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
DISTRICT ATTORNEY		<input type="checkbox"/> Add	<input type="checkbox"/> Delete	\$ 100.00			
3. Contributor		d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
a. Full Name, Mailing Address & Phone (include city, state, & zip)					<input type="checkbox"/>	<input type="checkbox"/>	\$
James Robbins 185 Raccoon Rd Willard, NC 28478			CASH	9-27-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 250.00
b. Job Title/Profession					<input type="checkbox"/>	<input type="checkbox"/>	\$
OWNER					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
ROBBINS NURSERY		<input type="checkbox"/> Add	<input type="checkbox"/> Delete	\$ 250.00			
3. Contributor		d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
a. Full Name, Mailing Address & Phone (include city, state, & zip)					<input type="checkbox"/>	<input type="checkbox"/>	\$
Thurman & Tonga Turner P.O. Box 521 BURGAW, NC 28425		4359	Check	10-8-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
b. Job Title/Profession					<input type="checkbox"/>	<input type="checkbox"/>	\$
ATTORNEY					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
PRACTICE LAW		<input type="checkbox"/> Add	<input type="checkbox"/> Delete	\$			
3. Contributor		d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
a. Full Name, Mailing Address & Phone (include city, state, & zip)					<input type="checkbox"/>	<input type="checkbox"/>	\$
R.C. SOLES, Jr. Live OAKS ST. LABOR CITY, NC 28463		1110	Check	10-7-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 1,000.00
b. Job Title/Profession					<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field		j. If Amendment, choose change type:		k. Election Cycle Sum to Date			
		<input type="checkbox"/> Add	<input type="checkbox"/> Delete	\$			

4. Total only this Page \$

5. Total of ALL CRO-1210 Pages (only show on last page) \$

(This line must be on line 5 of Detailed Summary Page CRO-1100)

UNIT 1A 20

Disclosure Report Cover Sheet

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

1. Name of Committee or Fund				6. Date	
Campaign to Elect Corbett for Sheriff				1-27-03	
2. Address				7. ID Number	
P.O. Box 21					
3. City		4. State	5. Zip	8. Phone	
Willard NC		NC	28478	910-255-8829	
9. Type of Report			10. Period Covered		11. Amendment
4th Quarter & Final Report			Start	8-25-02	<input type="checkbox"/> Yes
			End	12-31-02	<input checked="" type="checkbox"/> No
12. Type of Committee or Fund (Check one)					
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> "Booster Fund"		
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Soft Money Account	<input type="checkbox"/> Building Fund		
<input type="checkbox"/> Other Fund: _____					
13. Treasurer Name					
Bennie L. Corbett					
14. Assistant Treasurer Name(s)					
15. Custodian of Books Name					
Bennie L. Corbett					
16. Bank/Depository/Credit Account Information					
a. Name	b. Purpose	c. Code	d. Period Begin Balance		
BB&T Bank in Wallace	Corbett for Sheriff	BC	\$ 20.00		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		

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.

Bennie Corbett

Signature of Appointed Treasurer or Candidate

1-27-03

Date

Detailed Summary

FEB 05 2003

1. Name of Committee or Fund	2. Type of Report	3. ID Number
Crockett for Sheriff	Final Report + 4th Quarter	
Start of Election Cycle: January 1, 2002	Total this Period	Total this Election Cycle
4) Cash on Hand at Start of Election Cycle		\$ 0
5) Cash on Hand at Start of Present Reporting Period	\$ 20.00	
RECEIPTS		
6) Contributions from Individuals	(CRO-1210)	\$ 2269.48
7) Contributions from Political Party Committees	(CRO-1220)	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$
9) Loan Proceeds	(CRO-1410)	\$
10) Refunds and 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) Contributions based on Forgiven Loans	(CRO-1440)	\$
14) 48-Hour Notice Reports Sum		\$
15) TOTAL RECEIPTS		\$
(Add lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 12, 13, and 14)		
EXPENDITURES		
16) Disbursements	(CRO-1370)	
16a) Operating Expenditures	(CRO-1310)	\$ 2269.48
16b) Contributions to Candidates/Political Committees	(CRO-1310)	\$
16c) Coordinated Party Expenditures	(CRO-1310)	\$
17) Loan Repayments	(CRO-1420)	\$
18) Forgiven Loans	(CRO-1440)	\$
19) Refunds and Reimbursements FROM the Committee	(CRO-1320)	\$
20) In-Kind Contributions	(CRO-1510)	\$
21) TOTAL EXPENDITURES		\$
(Add lines 16a, 16b, 16c, 17, 18, 19, and 20)		\$ 2269.48
22) Cash on Hand at End of Reporting Period		\$
(For this Period, add lines 5 and 15 together, then subtract line 21)		\$ -0-
(For this Election Cycle, add lines 4 and 15 together, then subtract line 21)		\$ -0-
Additional Information		
23) Non-Monetary Gifts Given to Committees	(CRO-1330)	\$
24) Outstanding Loans (including ones from other campaigns)	(CRO-1430)	\$
25) Debts and Obligations owed BY the Committee	(CRO-1610)	\$
26) Debts and Obligations owed TO the Committee	(CRO-1620)	\$
27) Parent Entity's Administrative Support	(CRO-1710)	\$
28) Account Transfers	(CRO-1720)	\$