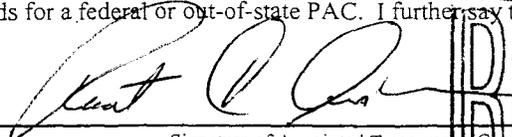


Disclosure Report Cover Sheet

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 <i>ANDERSON FOR MAYOR</i>				6. Date <i>1/30/04</i>	
2. Address <i>5706 Colleton Ct.</i>				7. ID Number <i>FOYTKR</i>	
3. City <i>FAY., N.C.</i>		4. State <i>NC</i>	5. Zip <i>28304</i>	8. Phone <i>910 850 6620</i>	
9. Type of Report <i>Semi Annual</i>				10. Period Covered Start <i>Oct 27-03</i> End <i>DEC 31-03</i>	
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"/> PAC		<input type="checkbox"/> Referendum		<input type="checkbox"/> "Booster Fund"	
<input type="checkbox"/> Other Fund:		<input type="checkbox"/> Soft Money Account		<input type="checkbox"/> Building Fund	
13. Treasurer Name <i>SEAN R ANDERSON</i>					
14. Assistant Treasurer Name(s)					
15. Custodian of Books Name <i>SEAN R ANDERSON</i>					
16. Bank/Depository/Credit Account Information					
a. Name <i>New Century Bank</i>		b. Purpose		c. Code	d. Period Begin Balance
		RECEIVE			\$
		JAN 30 2004			\$
					\$
		CUMBERLAND COUNTY			\$
		BOARD OF ELECTIONS			\$
		301 EAST RUSSELL STREET			\$
		FAYETTEVILLE, NC 28401			\$
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.					
 Signature of Appointed Treasurer or Candidate				<i>1/30/04</i> Date	

Detailed Summary

1. Name of Committee or Fund	2. Type of Report	3. ID Number
<i>ANDERSON FOR MAYOR</i>	<i>SEMI ANNUAL</i>	<i>FOY + CR</i>
Start of Election Cycle: January 1, 20____	Total this Period	Total this Election Cycle
4) Cash on Hand at Start of Election Cycle		\$
5) Cash on Hand at Start of Present Reporting Period	\$ <i>698</i>	
RECEIPTS		
6) Contributions from Individuals (CRO-1210)	\$ <i>100⁰⁰</i>	\$ <i>18,23³⁰</i>
7) Contributions from Political Party Committees (CRO-1220)	\$	\$
8) Contributions from Other Political Committees (CRO-1230)	\$	\$
9) Loan Proceeds (CRO-1410)	\$	\$ <i>2494⁰⁰</i>
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 <i>(Add lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 12, 13, and 14)</i>	\$ <i>100⁰⁰</i>	\$ <i>6317.30</i>
EXPENDITURES		
16) Disbursements (CRO-1310)		
16a) Operating Expenditures (CRO-1310)	\$ <i>10⁰⁰</i>	\$
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 <i>(Add lines 16a, 16b, 16c, 17, 18, 19, and 20)</i>	\$ <i>10⁰⁰</i>	\$ <i>5529³⁰</i>
22) Cash on Hand at End of Reporting Period <i>(For this Period, add lines 5 and 15 together, then subtract line 21)</i> <i>(For this Election Cycle, add lines 4 and 15 together, then subtract line 21)</i>	\$ <i>788⁰⁰</i>	\$ <i>788⁰⁰</i>
Additional Information		
23) Non-Monetary Gifts Given to Committees (CRO-1330)	\$	
24) Outstanding Loans (including ones from other campaigns) (CRO-1430)	\$ <i>4494⁰⁰</i>	
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)	\$	

Contributions from INDIVIDUALS

1. Name of Committee or Fund				2. ID Number <i>F-OTCR</i>			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	<i>LEONIS GOULD CLIFFDALE WEST FAY, NC 28314</i>		<i>CHEK</i>	<i>10/31/03</i>	<input type="checkbox"/>	<input type="checkbox"/>	<i>\$ 100.00</i>
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	<i>RETIRED</i>				<input type="checkbox"/>	<input type="checkbox"/>	\$
c. Employer's Name/Specific Field	j. If Amendment, choose change type:			k. Election Cycle Sum to Date			
<i>RETIRED</i>	<input type="checkbox"/> Add <input type="checkbox"/> Delete			\$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
					<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			\$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
					<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			\$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
					<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			\$			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
					<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							<i>\$ 100.00</i>
5. Total of ALL CRO-1210 Pages <small>(only show on last page)</small>							\$
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

Disbursements

1. Name of Committee or Fund ANDERSON FOR MAYOR					2. ID Number FOYTCR		
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursements.)</i>							
<input 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
	NEWCASTLE BANK RRE FORD ROAD FAYETTEVILLE, NC 28303		BK CH67			12/22/03	\$10 ⁰²
b. If Contribution to County Committee, specify:		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)		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: <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)		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: <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)		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: <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)		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: <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 <i>(only show on last page)</i>							\$10 ⁰²
<i>(This line goes in line 16a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>							
<i>(This line goes in line 16b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>							
<i>(This line goes in line 16c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							