

# Disclosure Report Cover

Amendment  
 Yes  No

Please note that this cover sheet cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.  
 You must amend the Statement of Organization (CRO-2100A-E) to make those kinds of committee changes.  
 Use the Addendum form (CRO-1010) if more entries are needed.

## 1. Committee Information

|   |                 |
|---|-----------------|
| a. Full Name  | c. ID Number    |
| Johnny Dankins Campaign Fund                          | 7CYC4R          |
| b. Mailing Address (include City, State and Zip Code) | d. Date Filed   |
| 122 Thorncliff Drive<br>Fayetteville, N.C. 28303      | 1-20-06         |
|   | e. Phone Number |
|   | 910-486-4444    |

|                |                                   |                                 |                        |
|----------------|-----------------------------------|---------------------------------|------------------------|
| 2. Report Year | 3. Period Start Date (mm/dd/yyyy) | 4. Period End Date (mm/dd/yyyy) | 5. Treasurer Full Name |
| 05             | 11-1-05                           | 12-31-05                        | Teri J. Henderson      |

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

|                                    |                         |                                    |                         |
|------------------------------------|-------------------------|------------------------------------|-------------------------|
| 10. Account Information            |                         | 10. Account Information            |                         |
| a. Financial Institution Full Name | b. Purpose              | a. Financial Institution Full Name | b. Purpose              |
| BB+T                               | Campaign Fund           |                                    |                         |
| c. Code                            | d. Period Begin Balance | c. Code                            | d. Period Begin Balance |
| 1                                  | \$ 691.53               |                                    | \$                      |

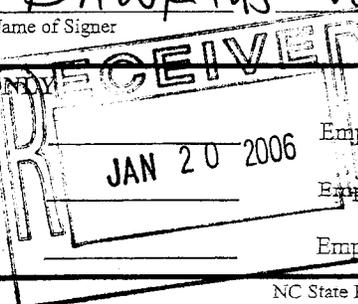
## CERTIFICATION

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.

Johnny Dankins      Johnny Dankins      1-20-06  
 Printed Name of Signer      Signature of Appointed Treasurer      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              |  |
|---|-----------------------------|---------------------------|--|
| Johnny Hawkins Campaign Fund Year End semi-annual                               |                             | 7CY24R                    |  |
| Start of Election Cycle: January 1, 2004  | Total this Reporting Period | Total this Election Cycle |  |
| 4) Cash on Hand at Start  | \$ 691.53                   | \$ 3312.08                |  |
| <b>RECEIPTS</b>   |                             |                           |  |
| 5) Aggregated Contributions from Individuals (CRO-1205)                         | \$ 1450.00                  | \$ 6860.00                |  |
| 6) Contributions from Individuals (CRO-1210)                                    | \$ 2850.00                  | \$ 16,450.00              |  |
| 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)                          | \$                          | \$                        |  |
| 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<br>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)      | \$ 4,300.00                 | \$ 23,310.00              |  |
| <b>EXPENDITURES</b>   |                             |                           |  |
| 14) Disbursements (CRO-1310)  |                             |                           |  |
| 14a) Operating Expenditures (CRO-1310)  | \$ 2962.62                  | \$ 23,543.17              |  |
| 14b) Contributions to Candidates/Political Committees (CRO-1310)                | \$                          | \$                        |  |
| 14c) Coordinated Party Expenditures (CRO-1310)                                  | \$                          | \$                        |  |
| 15) Loan Repayments (CRO-1420)  | \$ 2,000.00                 | \$ 2,000.00               |  |
| 16) Refunds/Reimbursements From the Committee (CRO-1320)                        | \$                          | \$                        |  |
| 17) In-Kind Contributions (CRO-1510)  | \$                          | \$ 1050.00                |  |
| 18) TOTAL EXPENDITURES<br>(Add lines 14a, 14b, 14c, 15, 16, and 17)             | \$ 4962.62                  | \$ 26,593.17              |  |
| 19) Cash on Hand at End<br>(Add lines 4 and 13 together, then subtract line 18) | \$ 28.91                    | \$ 28.91                  |  |
| <b>ADDITIONAL INFORMATION</b>   |                             |                           |  |
| 20) Non-Monetary Gifts Given to Other Committees (CRO-1330)                     | \$                          |                           |  |
| 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)              | \$ 0                        |                           |  |
| 22) Debts and Obligations owed By the Committee (CRO-1610)                      | \$                          |                           |  |
| 23) Debts and Obligations owed To the Committee (CRO-1620)                      | \$                          |                           |  |
| 24) Account Transfers Within the Committee (CRO-1720)                           | \$                          |                           |  |
| 25) Administrative Support (CRO-1710)   | \$                          | \$                        |  |
| 26) Forgiven Loans (CRO-1440)   | \$                          | \$                        |  |
| 27) 48-Hour Notice Reports Sum  | \$                          | \$                        |  |

Aggregated Contributions from Individuals

|  |                               |
|--|-------------------------------|
| 1. Committee Full Name (and Fund if applicable)<br><i>Johnny Hawkins Campaign Fund</i> | 2. ID Number<br><i>7CYL4R</i> |
|--|-------------------------------|

| 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    | <i>1</i>        | <i>Check</i>       |                        | <i>11-1-05</i>       | <i>\$ 25 00</i>  |
| <input type="checkbox"/> Remove |                 |                    |                        |                      |                  |
| <input type="checkbox"/> Add    | <i>1</i>        | <i>Check</i>       |                        | <i>11-1-05</i>       | <i>\$ 100 00</i> |
| <input type="checkbox"/> Remove |                 |                    |                        |                      |                  |
| <input type="checkbox"/> Add    | <i>1</i>        | <i>Check</i>       |                        | <i>11-1-05</i>       | <i>\$ 50 00</i>  |
| <input type="checkbox"/> Remove |                 |                    |                        |                      |                  |
| <input type="checkbox"/> Add    | <i>1</i>        | <i>check</i>       |                        | <i>11-1-05</i>       | <i>\$ 50 00</i>  |
| <input type="checkbox"/> Remove |                 |                    |                        |                      |                  |
| <input type="checkbox"/> Add    | <i>1</i>        | <i>Check</i>       |                        | <i>11-7-05</i>       | <i>\$ 100 00</i> |
| <input type="checkbox"/> Remove |                 |                    |                        |                      |                  |
| <input type="checkbox"/> Add    | <i>1</i>        | <i>Check</i>       |                        | <i>11-7-05</i>       | <i>\$ 100 00</i> |
| <input type="checkbox"/> Remove |                 |                    |                        |                      |                  |
| <input type="checkbox"/> Add    | <i>1</i>        | <i>Check</i>       |                        | <i>11-7-05</i>       | <i>\$ 100 00</i> |
| <input type="checkbox"/> Remove |                 |                    |                        |                      |                  |
| <input type="checkbox"/> Add    | <i>1</i>        | <i>Check</i>       |                        | <i>11-7-05</i>       | <i>\$ 100 00</i> |
| <input type="checkbox"/> Remove |                 |                    |                        |                      |                  |
| <input type="checkbox"/> Add    | <i>1</i>        | <i>Check</i>       |                        | <i>11-7-05</i>       | <i>\$ 100 00</i> |
| <input type="checkbox"/> Remove |                 |                    |                        |                      |                  |
| <input type="checkbox"/> Add    | <i>1</i>        | <i>Check</i>       |                        | <i>11-7-05</i>       | <i>\$ 25 00</i>  |
| <input type="checkbox"/> Remove |                 |                    |                        |                      |                  |
| <input type="checkbox"/> Add    | <i>1</i>        | <i>Check</i>       |                        | <i>11-7-05</i>       | <i>\$ 50 00</i>  |
| <input type="checkbox"/> Remove |                 |                    |                        |                      |                  |
| <input type="checkbox"/> Add    | <i>1</i>        | <i>Check</i>       |                        | <i>11-9-05</i>       | <i>\$ 100 00</i> |
| <input type="checkbox"/> Remove |                 |                    |                        |                      |                  |
| <input type="checkbox"/> Add    | <i>1</i>        | <i>Check</i>       |                        | <i>11-9-05</i>       | <i>\$ 50 00</i>  |
| <input type="checkbox"/> Remove |                 |                    |                        |                      |                  |
| <input type="checkbox"/> Add    | <i>1</i>        | <i>Check</i>       |                        | <i>11-9-05</i>       | <i>\$ 100 00</i> |
| <input type="checkbox"/> Remove |                 |                    |                        |                      |                  |
| <input type="checkbox"/> Add    | <i>1</i>        | <i>Cash</i>        |                        | <i>11-8-05</i>       | <i>\$ 100 00</i> |
| <input type="checkbox"/> Remove |                 |                    |                        |                      |                  |
| <input type="checkbox"/> Add    | <i>1</i>        | <i>Cash</i>        |                        | <i>11-8-05</i>       | <i>\$ 100 00</i> |
| <input type="checkbox"/> Remove |                 |                    |                        |                      |                  |
| <input type="checkbox"/> Add    | <i>1</i>        | <i>Cash</i>        |                        | <i>11-8-05</i>       | <i>\$ 100 00</i> |
| <input type="checkbox"/> Remove |                 |                    |                        |                      |                  |
| <input type="checkbox"/> Add    | <i>1</i>        | <i>Cash</i>        |                        | <i>11-7-05</i>       | <i>\$ 100 00</i> |
| <input type="checkbox"/> Remove |                 |                    |                        |                      |                  |
| <input type="checkbox"/> Add    |                 |                    |                        |                      | <i>\$</i>        |
| <input type="checkbox"/> Remove |                 |                    |                        |                      | <i>\$</i>        |
| <input type="checkbox"/> Add    |                 |                    |                        |                      | <i>\$</i>        |
| <input type="checkbox"/> Remove |                 |                    |                        |                      | <i>\$</i>        |
| <input type="checkbox"/> Add    |                 |                    |                        |                      | <i>\$</i>        |
| <input type="checkbox"/> Remove |                 |                    |                        |                      | <i>\$</i>        |
| <input type="checkbox"/> Add    |                 |                    |                        |                      | <i>\$</i>        |
| <input type="checkbox"/> Remove |                 |                    |                        |                      | <i>\$</i>        |
| <input type="checkbox"/> Add    |                 |                    |                        |                      | <i>\$</i>        |
| <input type="checkbox"/> Remove |                 |                    |                        |                      | <i>\$</i>        |

|                                |                   |
|--------------------------------|-------------------|
| 4. Total only this Page        | <i>\$ 1450 00</i> |
| 5. Total of ALL CRO-1205 Pages | <i>\$ 1450 00</i> |

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

Contributions from Individuals

|  |                 |                    |                        |                                   |                       |                               |  |
|--|-----------------|--------------------|------------------------|-----------------------------------|-----------------------|-------------------------------|--|
| 1. Committee Full Name (and Fund if applicable)  |                 |                    |                        |                                   |                       | 2. ID Number                  |  |
| Johnny Dunkins Campaign Fund   |                 |                    |                        |                                   |                       | 7CY44R                        |  |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove            |                 |                    |                        |                                   |                       |                               |  |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)                              |                 |                    |                        | b. Job Title/Profession           |                       | d. Comments                   |  |
| John Koenig<br>1763 Wilmington Rd.<br>Fayetteville, N.C. 28306                                     |                 |                    |                        | President                         |                       |                               |  |
|  |                 |                    |                        | c. Employer's Name/Specific Field |                       | e. Election Cycle Sum to Date |  |
|  |                 |                    |                        | Real Estate                       |                       | \$ 1250 <sup>00</sup>         |  |
| 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              |                        | 11-1-05                           | \$ 1000 <sup>00</sup> |                               |  |
| <input type="checkbox"/>   |                 |                    |                        |                                   | \$                    |                               |  |
| <input type="checkbox"/>   |                 |                    |                        |                                   | \$                    |                               |  |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove            |                 |                    |                        |                                   |                       |                               |  |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)                              |                 |                    |                        | b. Job Title/Profession           |                       | d. Comments                   |  |
| Ken Lancaster<br>303 Sylvan Road<br>Fayetteville, N.C. 28305                                       |                 |                    |                        | President                         |                       |                               |  |
|  |                 |                    |                        | c. Employer's Name/Specific Field |                       | e. Election Cycle Sum to Date |  |
|  |                 |                    |                        | Real Estate                       |                       | \$ 200 <sup>00</sup>          |  |
| 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              |                        | 11-1-05                           | \$ 200 <sup>00</sup>  |                               |  |
| <input type="checkbox"/>   |                 |                    |                        |                                   | \$                    |                               |  |
| <input type="checkbox"/>   |                 |                    |                        |                                   | \$                    |                               |  |
| 3. Contributor Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |                 |                    |                        |                                   |                       |                               |  |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)                              |                 |                    |                        | b. Job Title/Profession           |                       | d. Comments                   |  |
| Bill Vurnakes<br>2413 TORCROSS DR.<br>Fayetteville, N.C. 28304                                     |                 |                    |                        | Nurse Anesthetist                 |                       |                               |  |
|  |                 |                    |                        | c. Employer's Name/Specific Field |                       | e. Election Cycle Sum to Date |  |
|  |                 |                    |                        | Anesthesiology                    |                       | \$ 200 <sup>00</sup>          |  |
| 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              |                        | 11-1-05                           | \$ 200 <sup>00</sup>  |                               |  |
| <input type="checkbox"/>   |                 |                    |                        |                                   | \$                    |                               |  |
| <input type="checkbox"/>   |                 |                    |                        |                                   | \$                    |                               |  |
| 4. Total only this Page  |                 |                    |                        |                                   |                       | \$ 1400 <sup>00</sup>         |  |
| 5. Total of ALL CRO-1210 Pages   |                 |                    |                        |                                   |                       | \$ 2850 <sup>00</sup>         |  |
| (This line must be on line 6 of Detailed Summary Page CRO-1100)                                    |                 |                    |                        |                                   |                       |                               |  |

Contributions from Individuals

|   |                 |                    |                        |                                   |                      |                               |  |
|---|-----------------|--------------------|------------------------|-----------------------------------|----------------------|-------------------------------|--|
| 1. Committee Full Name (and Fund if applicable)   |                 |                    |                        |                                   |                      | 2. ID Number                  |  |
| Johnny Hankins Campaign Fund  |                 |                    |                        |                                   |                      | 7CYL4R                        |  |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove |                 |                    |                        |                                   |                      |                               |  |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)                   |                 |                    |                        | b. Job Title/Profession           |                      | d. Comments                   |  |
| Tom Keith<br>121 S. Cool Spring St.<br>Fayetteville, N.C. 28301                         |                 |                    |                        | President                         |                      |                               |  |
|   |                 |                    |                        | c. Employer's Name/Specific Field |                      |                               |  |
|   |                 |                    |                        | Appraiser                         |                      | e. Election Cycle Sum to Date |  |
|   |                 |                    |                        |                                   |                      | \$ 500 <sup>00</sup>          |  |
| 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              |                        | 11-1-05                           | \$ 250 <sup>00</sup> |                               |  |
| <input type="checkbox"/>  |                 |                    |                        |                                   | \$                   |                               |  |
| <input type="checkbox"/>  |                 |                    |                        |                                   | \$                   |                               |  |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove |                 |                    |                        |                                   |                      |                               |  |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)                   |                 |                    |                        | b. Job Title/Profession           |                      | d. Comments                   |  |
| LARRY Tinney<br>305 White Oak Ct.<br>Fayetteville, N.C. 28303                           |                 |                    |                        | Owner                             |                      |                               |  |
|   |                 |                    |                        | c. Employer's Name/Specific Field |                      |                               |  |
|   |                 |                    |                        | Royal Crown Leasing               |                      | e. Election Cycle Sum to Date |  |
|   |                 |                    |                        |                                   |                      | \$ 200 <sup>00</sup>          |  |
| 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              |                        | 11-1-05                           | \$ 200 <sup>00</sup> |                               |  |
| <input type="checkbox"/>  |                 |                    |                        |                                   | \$                   |                               |  |
| <input type="checkbox"/>  |                 |                    |                        |                                   | \$                   |                               |  |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove |                 |                    |                        |                                   |                      |                               |  |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)                   |                 |                    |                        | b. Job Title/Profession           |                      | d. Comments                   |  |
| Graham Blanton<br>1804 Pugh Street<br>Fayetteville, N.C. 28305                          |                 |                    |                        | President                         |                      |                               |  |
|   |                 |                    |                        | c. Employer's Name/Specific Field |                      |                               |  |
|   |                 |                    |                        | Health Insurance                  |                      | e. Election Cycle Sum to Date |  |
|   |                 |                    |                        |                                   |                      | \$ 400 <sup>00</sup>          |  |
| 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              |                        | 11-7-05                           | \$ 200 <sup>00</sup> |                               |  |
| <input type="checkbox"/>  |                 |                    |                        |                                   | \$                   |                               |  |
| <input type="checkbox"/>  |                 |                    |                        |                                   | \$                   |                               |  |
| 4. Total only this Page   |                 |                    |                        |                                   |                      | \$ 650 <sup>00</sup>          |  |
| 5. Total of ALL CRO-1210 Pages  |                 |                    |                        |                                   |                      | \$ 2850 <sup>00</sup>         |  |
| (This line must be on line 6 of Detailed Summary Page CRO-1100)                         |                 |                    |                        |                                   |                      |                               |  |

Contributions from Individuals

|  |                               |
|--|-------------------------------|
| 1. Committee Full Name (and Fund if applicable)<br><b>Johnny Dankins Campaign Fund</b> | 2. ID Number<br><b>7CYL4R</b> |
|--|-------------------------------|

|   |                 |   |                        |   |                            |
|---|-----------------|---|------------------------|---|----------------------------|
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove |                 |   |                        |   |                            |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)                   |                 | b. Job Title/Profession                                   |                        | d. Comments   |                            |
| <b>Bruce Janfmann<br/>1816 Sunnyside Circle<br/>Fayetteville, N.C. 28305</b>            |                 | <b>Physician</b>  |                        |   |                            |
|   |                 | c. Employer's Name/Specific Field<br><b>Neuro-Surgeon</b> |                        |   |                            |
|   |                 |   |                        | e. Election Cycle Sum to Date<br>\$ <b>250<sup>00</sup></b> |                            |
| f. Prior  | g. Account Code | h. Form of Payment  | i. In-Kind Description | j. Date (mm/dd/yyyy)  | k. Amount                  |
| <input type="checkbox"/>  | <b>1</b>        | <b>check</b>  |                        | <b>11-7-05</b>  | \$ <b>250<sup>00</sup></b> |
| <input type="checkbox"/>  |                 |   |                        |   | \$                         |
| <input type="checkbox"/>  |                 |   |                        |   | \$                         |

|   |                 |   |                        |   |                            |
|---|-----------------|---|------------------------|---|----------------------------|
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove |                 |   |                        |   |                            |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)                   |                 | b. Job Title/Profession                                 |                        | d. Comments   |                            |
| <b>Glenn Jernigan<br/>2414 Rolling Hill Road<br/>Fayetteville, N.C. 28304</b>           |                 | <b>President</b>  |                        |   |                            |
|   |                 | c. Employer's Name/Specific Field<br><b>Investments</b> |                        |   |                            |
|   |                 |   |                        | e. Election Cycle Sum to Date<br>\$ <b>200<sup>00</sup></b> |                            |
| f. Prior  | g. Account Code | h. Form of Payment                                      | i. In-Kind Description | j. Date (mm/dd/yyyy)  | k. Amount                  |
| <input type="checkbox"/>  | <b>1</b>        | <b>check</b>  |                        | <b>11-7-05</b>  | \$ <b>200<sup>00</sup></b> |
| <input type="checkbox"/>  |                 |   |                        |   | \$                         |
| <input type="checkbox"/>  |                 |   |                        |   | \$                         |

|   |                 |   |                        |   |                            |
|---|-----------------|---|------------------------|---|----------------------------|
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove |                 |   |                        |   |                            |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)                   |                 | b. Job Title/Profession   |                        | d. Comments   |                            |
| <b>Robert D. DeGaetano<br/>113 Devane Street<br/>Fayetteville, N.C. 28305</b>           |                 | <b>President</b>  |                        |   |                            |
|   |                 | c. Employer's Name/Specific Field<br><b>Commercial Building</b> |                        |   |                            |
|   |                 |   |                        | e. Election Cycle Sum to Date<br>\$ <b>200<sup>00</sup></b> |                            |
| f. Prior  | g. Account Code | h. Form of Payment  | i. In-Kind Description | j. Date (mm/dd/yyyy)  | k. Amount                  |
| <input type="checkbox"/>  | <b>1</b>        | <b>check</b>  |                        | <b>11-7-05</b>  | \$ <b>200<sup>00</sup></b> |
| <input type="checkbox"/>  |                 |   |                        |   | \$                         |
| <input type="checkbox"/>  |                 |   |                        |   | \$                         |

|  |                             |
|--|-----------------------------|
| 4. Total only this Page  | \$ <b>650<sup>00</sup></b>  |
| 5. Total of ALL CRO-1210 Pages<br><small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small> | \$ <b>2850<sup>00</sup></b> |

Contributions from Individuals

|  |                               |
|--|-------------------------------|
| 1. Committee Full Name (and Fund if applicable)<br><b>Johnny Dankins Campaign Fund</b> | 2. ID Number<br><b>7CYL4R</b> |
|--|-------------------------------|

|   |                 |  |                        |   |                  |
|---|-----------------|--|------------------------|---|------------------|
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove |                 |  |                        |   |                  |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)                   |                 | b. Job Title/Profession                                  |                        | d. Comments                                       |                  |
| <b>Carolyn Armstrong<br/>1806 Winterlochen Rd.<br/>Fayetteville, N.C. 28305</b>         |                 | <b>President</b>   |                        |   |                  |
|   |                 | c. Employer's Name/Specific Field<br><b>CRA Builders</b> |                        |   |                  |
|   |                 |  |                        | e. Election Cycle Sum to Date<br><b>\$ 150.00</b> |                  |
| f. Prior  | g. Account Code | h. Form of Payment                                       | i. In-Kind Description | j. Date (mm/dd/yyyy)                              | k. Amount        |
| <input type="checkbox"/>  | <b>1</b>        | <b>Check</b>   |                        | <b>11-7-05</b>                                    | <b>\$ 150.00</b> |
| <input type="checkbox"/>  |                 |  |                        |   | \$               |
| <input type="checkbox"/>  |                 |  |                        |   | \$               |

|   |                 |                                   |                        |                                     |           |
|---|-----------------|-----------------------------------|------------------------|-------------------------------------|-----------|
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove |                 |                                   |                        |                                     |           |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)                   |                 | b. Job Title/Profession           |                        | d. Comments                         |           |
|   |                 |                                   |                        |                                     |           |
|   |                 | c. Employer's Name/Specific Field |                        |                                     |           |
|   |                 |                                   |                        | e. Election Cycle Sum to Date<br>\$ |           |
| 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<br>(include city, state, & zip)                   |                 | b. Job Title/Profession           |                        | d. Comments                         |           |
|   |                 |                                   |                        |                                     |           |
|   |                 | c. Employer's Name/Specific Field |                        |                                     |           |
|   |                 |                                   |                        | e. Election Cycle Sum to Date<br>\$ |           |
| 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  | \$ <b>150.00</b>  |
| 5. Total of ALL CRO-1210 Pages<br><i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | \$ <b>2850.00</b> |

Disbursements

|   |                    |  |                      |                               |  |
|---|--------------------|--|----------------------|-------------------------------|--|
| 1. Committee Full Name (and Fund if applicable)   |                    |  |                      | 2. ID Number                  |  |
| Johnny Dawkins Campaign Fund  |                    |  |                      | 7CYL4R                        |  |
| 3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>  |                    |  |                      |                               |  |
| <input 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<br><i>(include city, state, &amp; zip)</i>  |                    | b. Coordinated Committee Name  |                      | d. Comments                   |  |
| Rise Newspaper<br>Box 1311<br>Fayetteville, N.C. 28302  |                    | c. Level Registered (Specify)  |                      | e. Election Cycle Sum to Date |  |
|   |                    | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                      |                               |  |
|   |                    |  |                      | \$ 600 <sup>00</sup>          |  |
| f. Account Code   | g. Form of Payment | h. Purpose   | i. Date (mm/dd/yyyy) | j. Amount                     |  |
| 1   | check              | Ad   | 11-1-05              | \$ 250 <sup>00</sup>          |  |
|   |                    |  |                      | \$                            |  |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                    |  |                      |                               |  |
| a. Full Name, Mailing Address & Phone<br><i>(include city, state, &amp; zip)</i>  |                    | b. Coordinated Committee Name  |                      | d. Comments                   |  |
| Time Warner Cable Media<br>1333 Morganton Road<br>Suite C<br>Fayetteville, N.C. 28305   |                    | c. Level Registered (Specify)  |                      | e. Election Cycle Sum to Date |  |
|   |                    | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                      |                               |  |
|   |                    |  |                      | \$ 2843 <sup>00</sup>         |  |
| f. Account Code   | g. Form of Payment | h. Purpose   | i. Date (mm/dd/yyyy) | j. Amount                     |  |
| 1   | check              | TV Ad  | 11-1-05              | \$ 828 <sup>00</sup>          |  |
|   |                    |  |                      | \$                            |  |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                    |  |                      |                               |  |
| a. Full Name, Mailing Address & Phone<br><i>(include city, state, &amp; zip)</i>  |                    | b. Coordinated Committee Name  |                      | d. Comments                   |  |
| WIDU Broadcasting<br>Box 2247<br>Fayetteville, N.C. 28302   |                    | c. Level Registered (Specify)  |                      | e. Election Cycle Sum to Date |  |
|   |                    | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                      |                               |  |
|   |                    |  |                      | \$ 480 <sup>00</sup>          |  |
| f. Account Code   | g. Form of Payment | h. Purpose   | i. Date (mm/dd/yyyy) | j. Amount                     |  |
| 1   | check              | Radio Ad   | 11-1-05              | \$ 480 <sup>00</sup>          |  |
|   |                    |  |                      | \$                            |  |
| 5. Total only this Page   |                    |  |                      | \$ 1558 <sup>00</sup>         |  |
| 6. Total of ALL CRO-1310 Pages  |                    |  |                      | \$ 2962.62                    |  |
| <i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i><br><i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i><br><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)   |                    | 2. ID Number   |                                   |
| Johnny Dawkins Campaign Fund  |                    | 7CYLR  |                                   |
| 3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)  |                    |  |                                   |
| <input 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<br>(include city, state, & zip)   |                    | b. Coordinated Committee Name  | d. Comments                       |
| American Express<br>3 World Financial Center<br>New York, New York  |                    |  |                                   |
|   |                    | c. Level Registered (Specify)  | e. Election Cycle Sum to Date     |
|   |                    | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: | \$ 1055.39                        |
| f. Account Code   | g. Form of Payment | h. Purpose   | i. Date (mm/dd/yyyy)    j. Amount |
| 1   | check              | Stationery, Lodging<br>Stamp   | 11-2-05    \$ 546.99              |
| 1   | check              | Dinner for<br>committee  | 11-29-05    \$ 508.40             |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                    |  |                                   |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)   |                    | b. Coordinated Committee Name  | d. Comments                       |
| BB+T Bankcard<br>Box 580362<br>Charlotte, N.C. 28258  |                    |  |                                   |
|   |                    | c. Level Registered (Specify)  | e. Election Cycle Sum to Date     |
|   |                    | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: | \$ 2025.95                        |
| f. Account Code   | g. Form of Payment | h. Purpose   | i. Date (mm/dd/yyyy)    j. Amount |
| 1   | check              | Hol Inn Bordeaux<br>Lodging  | 11-20-05    \$ 169.50             |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                    |  |                                   |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)   |                    | b. Coordinated Committee Name  | d. Comments                       |
| K & W Cafeteria<br>3187 Village Drive<br>Fayetteville, N.C. 28304   |                    |  |                                   |
|   |                    | c. Level Registered (Specify)  | e. Election Cycle Sum to Date     |
|   |                    | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: | \$ 111.79                         |
| f. Account Code   | g. Form of Payment | h. Purpose   | i. Date (mm/dd/yyyy)    j. Amount |
|   | Cash               | Breakfast for<br>committee   | 11-5-05    \$ 111.79              |
| 5. Total only this Page   |                    |  | \$ 1336.68                        |
| 6. Total of ALL CRO-1310 Pages<br><small>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)<br/>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)<br/>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</small> |                    |  | \$ 2962.62                        |

Disbursements

|   |                    |   |  |  |           |                               |  |
|---|--------------------|---|--|--|-----------|-------------------------------|--|
| 1. Committee Full Name (and Fund if applicable)   |                    |   |  |  |           | 2. ID Number                  |  |
| Johnny Hawkins Campaign Fund  |                    |   |  |  |           | 7CYL4R                        |  |
| 3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>  |                    |   |  |  |           |                               |  |
| <input 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<br>(include city, state, & zip)   |                    |   |  | b. Coordinated Committee Name  |           | d. Comments                   |  |
| Williams Printing & Office Supply<br>1033 BRAGG Blvd.<br>Fayetteville, N.C. 28301   |                    |   |  |  |           |                               |  |
|   |                    |   |  | c. Level Registered (Specify)  |           | e. Election Cycle Sum to Date |  |
|   |                    |   |  | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |           | \$ 57.62                      |  |
| f. Account Code   | g. Form of Payment | h. Purpose  |  | i. Date (mm/dd/yyyy)   | j. Amount |                               |  |
|   | Cash               | Hand Stamps   |  | 11-2-05  | \$ 57.62  |                               |  |
|   |                    |   |  |  | \$        |                               |  |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                    |   |  |  |           |                               |  |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)   |                    |   |  | b. Coordinated Committee Name  |           | d. Comments                   |  |
| Bojangles Restaurant<br>4554 Raeford Road<br>Fayetteville, N.C. 28306   |                    |   |  |  |           |                               |  |
|   |                    |   |  | c. Level Registered (Specify)  |           | e. Election Cycle Sum to Date |  |
|   |                    |   |  | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |           | \$ 10.32                      |  |
| f. Account Code   | g. Form of Payment | h. Purpose  |  | i. Date (mm/dd/yyyy)   | j. Amount |                               |  |
|   | Cash               | lunch for workers   |  | 11-8-05  | \$ 10.32  |                               |  |
|   |                    |   |  |  | \$        |                               |  |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                    |   |  |  |           |                               |  |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)   |                    |   |  | b. Coordinated Committee Name  |           | d. Comments                   |  |
|   |                    |   |  |  |           |                               |  |
|   |                    |   |  | c. Level Registered (Specify)  |           | e. Election Cycle Sum to Date |  |
|   |                    |   |  | <input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |           | \$                            |  |
| f. Account Code   | g. Form of Payment | h. Purpose  |  | i. Date (mm/dd/yyyy)   | j. Amount |                               |  |
|   |                    |   |  |  | \$        |                               |  |
|   |                    |   |  |  | \$        |                               |  |
| 5. Total only this Page   |                    |   |  |  |           | \$ 67.94                      |  |
| 6. Total of ALL CRO-1310 Pages<br><i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i><br><i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i><br><i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> |                    |   |  |  |           | \$ 2962.62                    |  |

Loan Repayments

|  |                 |                    |                      |                         |  |
|--|-----------------|--------------------|----------------------|-------------------------|--|
| 1. Committee Full Name (and Fund if applicable)                                    |                 |                    |                      | 2. ID Number            |  |
| Johnny Dawkins Campaign Fund   |                 |                    |                      | 7CYL4R                  |  |
| 3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove |                 |                    |                      |                         |  |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)              |                 |                    |                      | b. Comments             |  |
| Johnny Dawkins<br>122 THORNCLEIFF DRIVE<br>FAYETTEVILLE, N.C. 28303                |                 |                    |                      | c. Original Loan Date   |  |
|  |                 |                    |                      | 7-31-01                 |  |
|  |                 |                    |                      | d. Original Loan Amount |  |
| \$ 2000 <sup>00</sup>  |                 |                    |                      |                         |  |
| e. Remaining Loan Balance  | f. Account Code | g. Form of Payment | h. Date (mm/dd/yyyy) | i. Repayment Amount     |  |
| \$   | 1               | check              | 11-9-05              | \$ 2000 <sup>00</sup>   |  |
| \$   |                 |                    |                      | \$                      |  |
| 3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove |                 |                    |                      |                         |  |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)              |                 |                    |                      | b. Comments             |  |
|  |                 |                    |                      | c. Original Loan Date   |  |
|  |                 |                    |                      |                         |  |
|  |                 |                    |                      | d. Original Loan Amount |  |
| \$   |                 |                    |                      |                         |  |
| e. Remaining Loan Balance  | f. Account Code | g. Form of Payment | h. Date (mm/dd/yyyy) | i. Repayment Amount     |  |
| \$   |                 |                    |                      | \$                      |  |
| \$   |                 |                    |                      | \$                      |  |
| 3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove |                 |                    |                      |                         |  |
| a. Full Name, Mailing Address & Phone<br>(include city, state, & zip)              |                 |                    |                      | b. Comments             |  |
|  |                 |                    |                      | c. Original Loan Date   |  |
|  |                 |                    |                      |                         |  |
|  |                 |                    |                      | d. Original Loan Amount |  |
| \$   |                 |                    |                      |                         |  |
| e. Remaining Loan Balance  | f. Account Code | g. Form of Payment | h. Date (mm/dd/yyyy) | i. Repayment Amount     |  |
| \$   |                 |                    |                      | \$                      |  |
| \$   |                 |                    |                      | \$                      |  |
| 4. Total only this Page  |                 |                    |                      | \$                      |  |
| 5. Total of ALL CRO-1420 Pages   |                 |                    |                      | \$                      |  |
| <i>(This line must be on line 15 of Detailed Summary Page CRO-1100)</i>            |                 |                    |                      |                         |  |