

# 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
COMMITTEE TO ELECT FLOYD W. JOHNSON, JR.		L5YGIB
b. Mailing Address (include City, State and Zip Code)		d. Date Filed
716 AMBER DR FAYETTEVILLE, NC 28301		09/06/2005
		e. Phone Number
		910-822-2045

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name
12/31/2005	07/11/2005	08/31/2005	ALFRED JONES

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

10. Account Information		10. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
OMNI NATIONAL BANK			
b. Purpose	c. Code	b. Purpose	c. Code
CAMPAIGN DEPOSITS AND DISBURSEMENTS	1		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 579.98		\$

**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.

ALFRED JONES  
 Printed Name of Signer

*[Signature]*  
 Signature of Appointed Treasurer

9/6/2005  
 Date

**FOR OFFICE USE ONLY**

Date Received: \_\_\_\_\_ Employee: \_\_\_\_\_

Date Postmarked: \_\_\_\_\_ Employee: \_\_\_\_\_

Date Scanned: \_\_\_\_\_ Employee: \_\_\_\_\_

**RECEIVED**  
 SEP - 7 2005

Delivery Method  
 Normal Mail  
 Registered Mail  
 Hand Delivered  
 Electronically Filed

# Detailed Summary

Amendment	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
COMMITTEE TO ELECT FLOYD W. JOHNSON, JR.	35 DAY REPORT	L5YGIB	
Start of Election Cycle: January 1, 2005	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 787.00	\$	
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$ 90.00	
6) Contributions from Individuals (CRO-1210)	\$ 830.00	\$ 1,630.00	
7) Contributions from Political Party Committees (CRO-1220)	\$	\$	
8) Contributions from Other Political Committees (CRO-1230)	\$	\$	
9) Loan Proceeds (CRO-1410)	\$	\$ 207.12	
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 (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)	\$ 830.00	\$	
<b>EXPENDITURES</b>			
14) Disbursements (CRO-1310)			
14a) Operating Expenditures (CRO-1310)	\$ 1,038.00	\$ 1,348.12	
14b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$	
14c) Coordinated Party Expenditures (CRO-1310)	\$	\$	
15) Loan Repayments (CRO-1420)	\$ 107.12	\$ 107.12	
16) Refunds/Reimbursements From the Committee (CRO-1320)	\$	\$	
17) In-Kind Contributions (CRO-1510)	\$	\$	
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)	\$ 1145.12	\$ 1,455.24	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)	\$ 471.88	\$ 471.88	
<b>ADDITIONAL INFORMATION</b>			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ 100.00		
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	\$	\$	

# Contributions from Individuals

Amendment  
 Yes  No

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT FLOYD W. JOHNSON, JR	<b>2. ID Number</b> L5YGIB
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<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  PAUL B. LEWIS 3400 CRANDBROOK RD FAYETTEVILLE, NC 28301  910-822-4810	<b>b. Job Title/Profession</b> RETIRED	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> RETIRED	
		<b>e. Election Cycle Sum to Date</b> \$ 50.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		1 CHECK		08/12/2005	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input checked="" 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 Cycle Sum to Date</b> \$

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"/>					\$

<b>3. Contributor Information</b> <input checked="" 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 Cycle Sum to Date</b> \$

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"/>					\$

<b>4. Total only this Page</b>	\$ 50.00
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<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 830.00
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**Contributions from Individuals**

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

Amendment
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT FLOYD W. JOHNSON, JR	<b>2. ID Number</b> L5YGIB
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<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  JOHNNIE JOHNSON-JONES 139 BUIE RD LINDEN, NC 28356  910-822-1941	<b>b. Job Title/Profession</b> THERAPIST	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> SELF-EMPLOYED	
	<b>e. Election Cycle Sum to Date</b> \$ 30.00	

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	CHECK		08/12/2005	\$ 30.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  DEAN HAROLD MELCHER 3209 BOONETRAIL FAYETTEVILLE, NC 28306  910-425-1769	<b>b. Job Title/Profession</b> BUIDER	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> SELF EMPLOYED	
	<b>e. Election Cycle Sum to Date</b> \$ 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"/>	1	CHECK		08/19/2005	\$ 150.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  NATHAN TAYLOR 6819 MANGROVE DR FAYETTEVILLE, NC 28314  919-864-8742	<b>b. Job Title/Profession</b> RETIRED	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b>	
	<b>e. Election Cycle Sum to Date</b> \$ 50.00	

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	CHECK		08/19/2005	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 230.00
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<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$
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# Contributions from Individuals

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

Amendment	
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT FLOYD W. JOHNSON, JR						L5YGIB	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MELVIN L. HENDERSON 132 GREAT OAKS FAYETTEVILLE, NC 28303				MEDICAL DOCTOR			
				c. Employer's Name/Specific Field			
				SELF-EMPLOYED		e. Election Cycle Sum to Date	
						\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	1	CHECK		08/12/2005		\$ 200.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
RENE GARCIA HILBISH 751 PAXTON DR FAYETTEVILLE, NC 28303				ACCOUNTS CLERK			
				c. Employer's Name/Specific Field			
				FT BRAGG MUTUAL CREDIT UNION		e. Election Cycle Sum to Date	
						\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	1	CHECK		08/19/2005		\$ 50.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JAMES B. BENSON 1534 EDGECOMB AVE FAYETTEVILLE, NC 28301				RETIRED			
				c. Employer's Name/Specific Field			
						e. Election Cycle 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"/>	1	CHECK		08/19/2005		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 350.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$	

**Contributions from Individuals**

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

Amendment
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT FLOYD W. JOHNSON, JR	<b>2. ID Number</b> L5YGIB
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<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  LENDRA WISEMAN 431 CUMBERLAND ST FAYETTEVILLE, NC 28301  910-822-4810	<b>b. Job Title/Profession</b> FUNERAL DIRECTOR	<b>d. Comments</b>	
	<b>c. Employer's Name/Specific Field</b> SELF EMPLOYED		
	<b>e. Election Cycle Sum to Date</b> \$ 50.00		

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	CHECK		08/12/2005	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  MIKE W. CHOE 205 WEST LAKE RD FAYETTEVILLE, NC 28314  910864-2944	<b>b. Job Title/Profession</b> DENTIST	<b>d. Comments</b>	
	<b>c. Employer's Name/Specific Field</b> SELF EMPLOYED		
	<b>e. Election Cycle Sum to Date</b> \$ 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"/>	1	CHECK		08/19/2005	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  TRIPHINA WISEMAN 431 CUMBERLAND ST FAYETTEVILLE, NC 28301	<b>b. Job Title/Profession</b> FUNERAL DIRECTOR	<b>d. Comments</b>	
	<b>c. Employer's Name/Specific Field</b> SELF-EMPLOYED		
	<b>e. Election Cycle Sum to Date</b> \$ 50.00		

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	CHECK		08/19/2005	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 200.00
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<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$
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# Disbursements

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

Amendment
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
COMMITTEE TO ELECT FLOYD W. JOHNSON, JR.				L5YGIB	
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
<b>4. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
AMERICAN SIGN SHOP, INC 425 WEST RUSSEL ST FAYETTEVILLE, NC 28301  910-484-2313			<b>c. Level Registered (Specify)</b>		
			<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b>
					\$ 385.20
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	CHECKING	ADVERTISING	08/27/2005	\$ 385.20	
				\$	
<b>4. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b>
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
				\$	
				\$	
<b>4. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
			<b>c. Level Registered (Specify)</b>		
			<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b>
					\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
				\$	
				\$	
<b>5. Total only this Page</b>				\$ 385.20	
<b>6. Total of ALL CRO-1310 Pages</b>				\$ 1,038.00	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

# Disbursements

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

Amendment
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
COMMITTEE TO ELECT FLOYD W. JOHNSON, JR.				L5YGIB	
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
<b>4. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
NAACP BANQUET COMMITTEE 609 MURCHISON ROAD FAYETTEVILLE, NC 28301  910-484-6166					
			<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b> \$ 215.00
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	CHECKING	ADVERTISING	07/25/2005	\$ 215.00	
				\$	
<b>4. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
SPEEDIPRINT 201 FRANKLIN ST FAYETTEVILLE, NC 28301 910-483-2553					
			<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b> \$ 102.72
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	CHECKING	MEDIA	08/10/2005	\$ 85.60	
				\$	
<b>4. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
U.S.POSTMASTER FAYETTEVILLE MAIN FAYETTEVILLE, NC 28301					
			<b>c. Level Registered (Specify)</b> <input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b> \$ 148.00
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	CHECKING	STAMPS	08/10/2005	\$ 74.00	
				\$	
<b>5. Total only this Page</b>				\$ 374.60	
<b>6. Total of ALL CRO-1310 Pages</b> <i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>				\$	

# Disbursements

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

Amendment
<input type="checkbox"/> Yes <input type="checkbox"/> No

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
COMMITTEE TO ELECT FLOYD W. JOHNSON, JR.				L5YGIB	
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
<b>4. Payee Information</b> <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
UMOJA GROUP, INC 4513 RUBY ROAD FAYETTEVILLE, NC 28311 910-483-6152			<b>c. Level Registered (Specify)</b>		
			<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b>
					\$ 50.00
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	CHECKING	ADVERTISING	08/27/2005	\$ 50.00	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
SPEEDIPRINT 201 FRANKLIN ST FAYETTEVILLE, NC 28301 910-483-2553			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b>
					\$ 188.32
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	CHECKING	MEDIA	08/10/2005	\$ 71.30	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
SPEEDIPRINT 201 FRANKLIN ST FAYETTEVILLE, NC 28301 910-483-2553			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b>
					\$ 345.22
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	CHECKING	MEDIA	08/10/2005	\$ 156.90	
				\$	
<b>5. Total only this Page</b>				\$ 278.20	
<b>6. Total of ALL CRO-1310 Pages</b>				\$	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

# Loan Repayments

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
COMMITTEE TO ELECT FLOYD W. JOHNSON, JR.				L5YGIB	
<b>3. Lender 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. Comments</b>	
FLOYD W JOHNSON, JR. CANDIDATE 716 AMBER DRIVE FAYETTEVILLE, NC 28311				<b>c. Original Loan Date</b>	
				07/01/2005	
				<b>d. Original Loan Amount</b>	
\$		207.12			
<b>e. Remaining Loan Balance</b>	<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Date (mm/dd/yyyy)</b>	<b>i. Repayment Amount</b>	
\$ 207.12	1	CHECKING	07/25/2005	\$ 90.00	
\$ 107.12	1	CHECKING	08/22/2005	\$ 17.12	
<b>3. Lender 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. Comments</b>	
				<b>c. Original Loan Date</b>	
				<b>d. Original Loan Amount</b>	
\$					
<b>e. Remaining Loan Balance</b>	<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Date (mm/dd/yyyy)</b>	<b>i. Repayment Amount</b>	
\$				\$	
\$				\$	
<b>3. Lender 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. Comments</b>	
				<b>c. Original Loan Date</b>	
				<b>d. Original Loan Amount</b>	
\$					
<b>e. Remaining Loan Balance</b>	<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Date (mm/dd/yyyy)</b>	<b>i. Repayment Amount</b>	
\$				\$	
\$				\$	
<b>4. Total only this Page</b>				\$ 107.12	
<b>5. Total of ALL CRO-1420 Pages</b> <i>(This line must be on line 15 of Detailed Summary Page CRO-1100)</i>				\$ 107.12	

# Outstanding Loans

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

Amendment	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

1. Committee Full Name (and Fund if applicable)			2. ID Number	
COMMITTEE TO ELECT FLOYD W. JOHNSON, JR.			L5YGIB	
3. Lender Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments	
FLOYD W. JOHNSON, JR 716 AMBER DRIVE FAYETTEVILLE, NC 28301		MINISTER	CANDIDATE	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)	
		CHURCH	07/01/2005	
			f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance	
0 %	NONE	\$ 207.12	\$ 100.00	
k. Full Name of Lending Institution			l. Loan Number	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)	
			f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance	
%		\$	\$	
k. Full Name of Lending Institution			l. Loan Number	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)	
			f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance	
%		\$	\$	
k. Full Name of Lending Institution			l. Loan Number	
4. Total only this Page			\$ 100.00	
5. Total of ALL CRO-1430 Pages			\$ 100.00	
<i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>				