

# Disclosure Report Cover

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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.

<b>1. Committee Information</b>	
a. Full Name	c. ID Number
John T. Henley, Jr. For County Commission, Dist #2	0000000
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
PO Box 87167, Fayetteville, NC 28304	10/25/2004
	e. Phone Number
	910-323-1040

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name
12/31/2004	07/01/2004	10/16/2004	A. Johnson Chestnutt

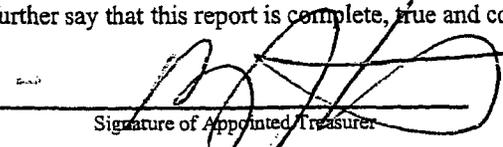
<b>6. Type of Committee (Check one)</b>		<b>8. Type of Report (check only one type of report from one category)</b>		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<b>Municipal</b>	<b>State/County</b>	<b>Referendum</b>
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum		<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<b>7. Type of Fund (if applicable, check one)</b>		<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 checked="" type="checkbox"/> Third Plus	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Political Party Financing Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	<b>9. Special Report Name</b>
<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	

<b>10. Account Information</b>		<b>10. Account Information</b>	
a. Financial Institution Full Name		a. Financial Institution Full Name	
Wachovia			
b. Purpose	c. Code	b. Purpose	c. Code
For all campaign expenses/receipts			
	d. Period Begin Balance		d. Period Begin Balance
	\$ 1,721.29		\$

**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.

A. Johnson Chestnutt  
 Printed Name of Signer

  
 Signature of Appointed Treasurer

10/25/04  
 Date

FOR OFFICE USE ONLY	<b>RECEIVED</b>	Employee: _____	<b>Delivery Method</b>
Date Received: _____	OCT 25 2004	Employee: _____	<input type="checkbox"/> Normal Mail
Date Posted: _____		Employee: _____	<input type="checkbox"/> Registered Mail
Date Scanned: _____		Employee: _____	<input type="checkbox"/> Hand Delivered
			<input type="checkbox"/> Electronically Filed

# Detailed Summary

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

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
John T. Henley, Jr. For County Commission Dist #2		3rd Quarter Plus		0000000	
Start of Election Cycle: January 1, <u>2001</u>		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 1,721.29		\$ 3,246.63	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 2,747.00		\$ 2,747.00	
6) Contributions from Individuals (CRO-1210)		\$ 8,825.00		\$ 9,325.00	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$ 2,500.00		\$ 2,500.00	
10) Refunds/Reimbursements To the Committee (CRO-1240)		\$		\$ 3,664.00	
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)		\$ 14,072.00		\$ 18,236.00	
<b>EXPENDITURES</b>					
14) Disbursements (CRO-1310)					
14a) Operating Expenditures (CRO-1310)		\$ 15,619.44		\$ 19,308.78	
14b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$ 2,000.00	
14c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
15) Loan Repayments (CRO-1420)		\$		\$	
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)		\$ 15,619.14		\$ 21,308.78	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)		\$ 173.85		\$ 173.85	
<b>ADDITIONAL INFORMATION</b>					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$			
22) Debts and Obligations owed By the Committee (CRO-1610)		\$			
23) Debts and Obligations owed To the Committee (CRO-1620)		\$			
24) Account Transfers Within the Committee (CRO-1720)		\$			
25) Administrative Support (CRO-1710)		\$		\$	
26) Forgiven Loans (CRO-1440)		\$		\$	
27) 48-Hour Notice Reports Sum		\$		\$	

# Aggregated Contributions from Individuals

Amendment

Yes  No

<b>1. Committee Full Name (and Fund if applicable)</b> John T. Henley, Jr. For County Commission Dist. #2	<b>2. ID Number</b> 0000000
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<b>3. Contributor Information</b>					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		07/19/2004	\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		07/19/2004	\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		07/19/2004	\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		07/19/2004	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		07/19/2004	\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		07/19/2004	\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		07/19/2004	\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		07/19/2004	\$ 99.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		07/19/2004	\$ 99.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		07/19/2004	\$ 99.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		07/19/2004	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		07/19/2004	\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		07/19/2004	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		07/19/2004	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		07/19/2004	\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		07/19/2004	\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		07/19/2004	\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		07/19/2004	\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		07/19/2004	\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		08/12/2004	\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		08/12/2004	\$ 100.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Check		08/12/2004	\$ 100.00

<b>4. Total only this Page</b>	\$ 2,047.00
<b>5. Total of ALL CRO-1205 Pages</b> <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>	\$



# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b> John T. Henley, Jr. For County Commission Dist #2						<b>2. ID Number</b> 0000000	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Franklin S. Clark PO Box 53394 Fayetteville, NC 28305				<b>b. Job Title/Profession</b> Doctor		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b> Health Care			
				<b>e. Election Cycle Sum to Date</b>		\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		07/19/2004	\$ 500.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Dan Kinlaw Box 9099 Fayetteville, NC 28311				<b>b. Job Title/Profession</b> Business Owner		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b> Fay. Moving & Storage			
				<b>e. Election Cycle Sum to Date</b>		\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		07/19/2004	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Ralph White PO Drawer 53067 Fayetteville, NC 28305				<b>b. Job Title/Profession</b> Insurance		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b> Agency			
				<b>e. Election Cycle Sum to Date</b>		\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		07/19/2004	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 900.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$	

# Contributions from Individuals

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable) John T. Henley, Jr. For County Commission Dist #2						2. ID Number 0000000	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) W. Lyndo Tippett 509 Valley Rd. Fayetteville, NC 28305				b. Job Title/Profession Accountant		d. Comments	
				c. Employer's Name/Specific Field Tippett, Padrick & Bryan		e. Election Cycle Sum to Date \$ 125.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		Check		07/19/2004	\$	125.00	
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) George Binder, M.D. 401 Lakeshore Dr. Fayetteville, NC 28305				b. Job Title/Profession Doctor		d. Comments	
				c. Employer's Name/Specific Field Health Care		e. Election Cycle Sum to Date \$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		Check		07/19/2004	\$	250.00	
<input type="checkbox"/>				10/01/2004	\$	250.00	
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) William Thames 1326 Longleaf Dr. Fayetteville, NC 28305				b. Job Title/Profession Retired		d. Comments	
				c. Employer's Name/Specific Field		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"/>		Check		07/19/2004	\$	200.00	
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 825.00	
5. Total of ALL CRO-1210 Pages						\$	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

# Contributions from Individuals

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
John T. Henley, Jr. For County Commission Dist #2						0000000	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
John Lennon PO Box 53557 Fayetteville, NC 28305				Business Owner			
				<b>c. Employer's Name/Specific Field</b>			
				Lennon Oil Co.			
						<b>e. Election Cycle Sum to Date</b>	
						\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		10/01/2004	\$	250.00	
<input checked="" type="checkbox"/>		Check		7/19/2004	\$	250.00	
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Charles B. C. Holt PO Box 53157 Fayetteville, NC 28305				Business Owner			
				<b>c. Employer's Name/Specific Field</b>			
				Holt Oil Co.			
						<b>e. Election Cycle Sum to Date</b>	
						\$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		07/19/2004	\$	250.00	
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Jack Justice, Jr. 3517 Birkdale Ct. Fayetteville, NC 28303				Administrator			
				<b>c. Employer's Name/Specific Field</b>			
				Health Care			
						<b>e. Election Cycle Sum to Date</b>	
						\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		07/19/2004	\$	200.00	
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 950.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b> John T. Henley, Jr. For County Commission Dist #2						<b>2. ID Number</b> 0000000	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Frederick B. Payne, Jr. M.D. 1431 Raeford Rd. Fayetteville, NC 28305				<b>b. Job Title/Profession</b> Doctor		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b> Health Care		<b>e. Election Cycle Sum to Date</b> \$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		07/19/2004	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Gary T. Smith 2847 Skye Dr. Fayetteville, NC 28305				<b>b. Job Title/Profession</b> Business Owner		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b> Advertising		<b>e. Election Cycle Sum to Date</b> \$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		07/19/2004	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Nitin Desai, MD 1139 Offshore Dr. Fayetteville, NC 28305				<b>b. Job Title/Profession</b> Doctor		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b> Health Care		<b>e. Election Cycle Sum to Date</b> \$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		07/19/2004	\$ 500.00		
<input checked="" type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 900.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$	

# Contributions from Individuals

Amendment  
 Yes  No

<b>1. Committee Full Name (and Fund if applicable)</b> John T. Henley, Jr. For County Commission Dist #2						<b>2. ID Number</b> 0000000	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) G. T. Keeney, M.D.. 244 Summertime Rd. Fayetteville, NC 28303				<b>b. Job Title/Profession</b> Doctor		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b> Health Care		<b>e. Election Cycle Sum to Date</b> \$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		07/19/2004	\$	200.00	
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Michael S. Bryant, M.D.. 630 Hay St.. Fayetteville, NC 28301				<b>b. Job Title/Profession</b> Doctor		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b> Health Care		<b>e. Election Cycle Sum to Date</b> \$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		07/19/2004	\$	250.00	
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Hank Debnam 705 Woodstonre Ct. Fayetteville, NC 28311				<b>b. Job Title/Profession</b> Administrator		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b> Health Care		<b>e. Election Cycle Sum to Date</b> \$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		08/12/2004	\$	200.00	
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 650.00	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$	

# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b> John T. Henley, Jr. For County Commission Dist #2						<b>2. ID Number</b> 0000000	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) F. R. Loyd, Jr. 211 Forest Creek Dr. Fayetteville, NC 28303				<b>b. Job Title/Profession</b> Finance		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b> Bank		<b>e. Election Cycle Sum to Date</b> \$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		08/12/2004	\$	250.00	
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Dr. Douglas McFarlane 2534 N. Edgewater Dr. Fayetteville, NC 28303				<b>b. Job Title/Profession</b> Doctor		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b> Health Care		<b>e. Election Cycle Sum to Date</b> \$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		08/12/2004	\$	200.00	
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) James F. Nolan, M.D. 3515 Edgeside Ct. Fayetteville, NC 28303				<b>b. Job Title/Profession</b> Doctor		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b> Health Care		<b>e. Election Cycle Sum to Date</b> \$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		08/12/2004	\$	200.00	
<input checked="" type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 650.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$	

# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b> John T. Henly, Jr. For County Commission Dist. #2						<b>2. ID Number</b> 0000000	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) A. Dwayne Aaron 410 Edinburgh Dr. Fayetteville, NC 28303				<b>b. Job Title/Profession</b> Retired		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b> Military			
						<b>e. Election Cycle Sum to Date</b> \$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		08/12/2004	\$ 200.00		
<input checked="" type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) H. Terry Hutchens 2031 Raeford Rd. Fayetteville, NC 28305				<b>b. Job Title/Profession</b> Lawyer		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b> Services			
						<b>e. Election Cycle Sum to Date</b> \$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		08/12/2004	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Caro Lee Stapleton 1111 Offshore Dr. Fayetteville, NC 28305				<b>b. Job Title/Profession</b> Housewife		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b>			
						<b>e. Election Cycle Sum to Date</b> \$ 150.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		08/12/2004	\$ 150.00		
<input checked="" type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 600.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$	

# Contributions from Individuals

Amendment

Yes  No

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
John T. Henley, Jr. For County Commission Dist. #2						0000000	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Janene Allison Aul 565 Keith Hill Rd. Fayetteville, NC 27546				Student			
				<b>c. Employer's Name/Specific Field</b>			
						<b>e. Election Cycle Sum to Date</b>	
						\$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		09/21/2004	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
D. Keith Allison PO Box 36158 Fayetteville, NC 28303				Business Owner			
				<b>c. Employer's Name/Specific Field</b>			
				Systel			
						<b>e. Election Cycle Sum to Date</b>	
						\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		09/21/2004	\$ 500.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Watson Caviness 559 Executive Place, Suite 101 Fayetteville, NC 28303				Developer			
				<b>c. Employer's Name/Specific Field</b>			
				Real Estate			
						<b>e. Election Cycle Sum to Date</b>	
						\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		10/01/2004	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 950.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

# Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable) John T. Henley, Jr. For County Commission Dist #2						2. ID Number 0000000	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Dr. Frank Stout PO Box 35068 Fayetteville, NC 28303				b. Job Title/Profession Doctor		d. Comments	
				c. Employer's Name/Specific Field Health Care		e. Election Cycle Sum to Date \$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		Check		09/03/2004	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) William R. Jordan 2909 Skye Dr. Fayetteville, NC 28303				b. Job Title/Profession Doctor		d. Comments	
				c. Employer's Name/Specific Field Health Care		e. Election Cycle Sum to Date \$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		Check		09/10/2004	\$ 500.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Ed Melvin 723 Emeline Ave. Fayetteville, NC 28303				b. Job Title/Profession Business Owner		d. Comments	
				c. Employer's Name/Specific Field Tire Sales		e. Election Cycle Sum to Date \$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		Check		09/10/2004	\$ 300.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1,050.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$	

# Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
John T. Henley, Jr. For County Commission Dist #2						0000000	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
D. Ralph Huff, III 1127 Offshore Dr. Fayetteville, NC 28305				Developer			
				c. Employer's Name/Specific Field			
				Real Estate		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"/>		Check		10/01/2004	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
G. Michael Pleasant PO Drawer 969 Fayetteville, NC 28302				Business Owner			
				c. Employer's Name/Specific Field			
				Ready Mix Concrete		e. Election Cycle Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		Check		10/01/2004	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Thomas Bradford 460 Willow Bend Lane Fayetteville, NC 28303				Developer			
				c. Employer's Name/Specific Field			
				Real Estate		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"/>		Check		10/01/2004	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 600.00	
5. Total of ALL CRO-1210 Pages						\$	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

# Contributions from Individuals

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
John T. Henley, Jr. For County Commission Dist. #2						0000000	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Rakesh Gupta Medical Dr. Fayetteville, NC 28304				Doctor			
				<b>c. Employer's Name/Specific Field</b>			
				Health Care			
				<b>e. Election Cycle Sum to Date</b>			
						\$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		10/12/2004	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Joseph Gillis 9010 Stoney Point Rd. Fayetteville, NC 28304				Developer			
				<b>c. Employer's Name/Specific Field</b>			
				Real Estate			
				<b>e. Election Cycle Sum to Date</b>			
						\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>		Check		10/15/2004	\$ 500.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b>			
				<b>e. Election Cycle Sum to Date</b>			
						\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 750.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$ 8,825.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

# Loan Proceeds

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>	
John T. Henley, Jr. For County Commission Dist #2				0000000	
<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. Job Title/Profession</b>		<b>d. Comments</b>	
John T. Henley, Jr. 2004 Raeford Rd. Fayetteville, NC 28305		Doctor		<b>e. Start Date (mm/dd/yyyy)</b>	
		<b>c. Employer's Name/Specific Field</b>		10/14/2004	
		Health Care		<b>f. End Date (mm/dd/yyyy)</b>	
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Account Code</b>	<b>j. Form of Payment</b>	<b>k. Amount</b>	
%			Check	\$ 2,500.00	
<b>l. Full Name of Lending Institution</b>				<b>m. Loan Number</b>	
<b>4. Endorsers/Makers</b> <i>(The people who guarantee the loan.)</i>					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
				<b>d. Percentage</b>	
				% \$	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
				<b>d. Percentage</b>	
				% \$	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
				<b>d. Percentage</b>	
				% \$	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
				<b>d. Percentage</b>	
				% \$	
<b>5. Total of ALL CRO-1410 Pages</b>				\$ 2,500.00	
<i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i>					

# Disbursements

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
John T. Henley, Jr. For County Commission Dist. #2				0000000	
3. Type of Disbursement <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	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Fayetteville Publishing 458 Whitfield St. Fayetteville, NC 28306					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:		
			<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 16,139.94
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	Check	Advertising	07/13/2004	\$ 1,662.74	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Wayne Wampler 2922 Hybart St. Fayetteville, NC 28303					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:		
			<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 2,085.99
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	Check	Reimbursement/	07/26/2004	\$ 225.45	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Rise Newspaper FAYETTEVILLE, NC 28311 P.O. Box 9202					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:		
			<input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 400.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	Check	Advertising	09/01/2004	\$ 400.00	
				\$	
5. Total only this Page				\$ 2,288.19	
6. Total of ALL CRO-1310 Pages				\$	
<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

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
John T. Henley, Jr. For County Commission Dist. #2				0000000	
3. Type of Disbursement <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					
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
International Minute Press 327 Robeson St. Fayetteville, NC 28305					
		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 969.31	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	Check	Signs	10/07/2004	\$ 969.31	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
WFLB 508 Person St. Fayetteville, NC 28301					
		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 1,580.15	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	Check	Advertising	10/12/2004	\$ 1,580.15	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Council on Older Adults 339 Devers St. Fayetteville, NC 28303					
		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 250.00	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
	Check	Contribution	10/12/2004	\$ 250.00	
				\$	
5. Total only this Page				\$ 2,799.46	
6. Total of ALL CRO-1310 Pages				\$	
<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**

Amendment  
 Yes  No

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
John T. Henley, Jr. For County Commission Dist. #2				0000000	
<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>
Fayetteville Press P.O. Box 9166 Fayetteville, NC 28311			<b>c. Level Registered (Specify)</b>		
			<input checked="" type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b>
					\$ 1,130.00
<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>	
	Check	Advertising	10/12/2004	\$ 630.00	
				\$	
<b>4. Payee 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. Coordinated Committee Name</b>		<b>d. Comments</b>
Fayetteville Observer     458 Whitfield St. Fayetteville, NC 28306			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b>
					\$ 21,067.99
<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>	
	Check	Advertising	10/13/2004	\$ 6,590.79	
				\$	
<b>4. Payee 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. Coordinated Committee Name</b>		<b>d. Comments</b>
WUKS 508 Person St. Fayetteville, NC 28301			<b>c. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>e. Election Cycle Sum to Date</b>
					\$ 1,575.00
<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>	
	Check	Advertising	10/13/2004	\$ 1,575.00	
				\$	
<b>5. Total only this Page</b>				\$ 8,795.79	
<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>					

