

Disclosure Report Cover

COPY

Amendment
 Yes No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
 Do not use this form to update information

1. Committee Information	
a. Full Name Re-Elect Gloria D Whisenhunt	c. ID Number 3CQCJ9
b. Mailing Address (include City, State and Zip Code) 456 N. Hawthorne Road Winston-Salem, N.C. 27104-3223	d. Date Filed 2/11/2008
	e. Phone Number 336-725-1072

2. Report Year 2008	3. Period Start Date (mm/dd/yy) 4/19/2008	4. Period End Date (mm/dd/yy) 6/30/2008	5. Treasurer Full Name Gloria D. Whisenhunt
-------------------------------	---	---	---

6. Type of Committee (Check One)		7. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	Municipal	State/County	Referendum
<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"/> Legal Expense Fund	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input checked="" type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Other:		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	10. Special Report Name
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	
8. Number of Fundraisers this Report 0				

11. Account Information		12. Account Information	
a. Financial Institution Full Name Fiest Citizen Bank		a. Financial Institution Full Name	
b. Purpose Campaign Expenses Checking	c. Account Code 1	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 1,533.71		d. Period Begin Balance \$

CERTIFICATION
 I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 if the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections according to N.C.G.S. 163-278.7(f).
Gloria D Whisenhunt Gloria D Whisenhunt 7/07/08
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: 7-7-08 Employee: Judy Speas Delivery Method: Normal Mail

Date Postmarked: _____ Employee: _____ Registered Mail

Date Scanned: _____ Employee: RECEIVED Hand Delivered

Date Data Entered: _____ Employee: ES:1 HL L 708 8007 Electronically Filed

_____ _____ Signer has not received mandatory training

Please Note: This form 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-F) to make committee changes.

Detailed Summary

Use this form to summarize all disclosure reporting forms and to total monetary information.

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
Re-Elect Gloria D. Whisenhunt		Second Quarter Repor		3CQCJ9	
Start of Election Cycle: January 1,		2008		Total this Reporting Period	
				Total this Election Cycle	
4) Cash on Hand at Start				\$ 1,531.71	\$ 0
5) Aggregated Contributions from Individuals		(CRO-1205)		\$ 0	\$ 0
6) Contributions from Individuals		(CRO-1210)		\$ 1,600.00	\$ 3,425.00
7) Contributions from Political Party Committees		(CRO-1220)		\$ 0	\$ 0
8) Contributions from Other Political Committees		(CRO-1230)		\$ 2,337.33	\$ 2,337.33
9) Loan Proceeds		(CRO-1410)		\$ 0	\$ 3,000.00
10) Refunds/Reimbursements To the Committee		(CRO-1240)		\$ 0	\$ 0
11) Other Receipt Sources					
11a) Interest on Bank Accounts		(CRO-1250)		\$ 0	\$ 0
11b) Contributions from Not-for-Profit Organizations		(CRO-1250)		\$ 0	\$ 0
11c) Outside Sources of Income		(CRO-1250)		\$ 0	\$ 0
11d) Legal Expense Fund - Other Sources		(CRO-1270)		\$ 0	\$ 0
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c and 11d)				\$ 3,937.33	\$ 8,762.33
13) Disbursements					
13a) Operating Expenditures		(CRO-1310)		\$ 313.95	\$ 3,605.24
13b) Contributions to Candidates/Political Committees		(CRO-1310)		\$ 0	\$ 0
13c) Coordinated Party Expenditures		(CRO-1310)		\$ 0	\$ 0
14) Aggregated Non-Media Expenditures		(CRO-1315)		\$ 0	\$ 0
15) Loan Repayments		(CRO-1420)		\$ 0	\$ 0
16) Refunds/Reimbursements From the Committee		(CRO-1320)		\$ 0	\$ 0
17) In-Kind Contributions		(CRO-1510)		\$ 337.33	\$ 337.33
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)				\$ 651.28	\$ 3,942.57
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)				\$ 4,819.76	\$ 4,819.76
20) Non-Monetary Gifts Given to Other Committees		(CRO-1330)		\$ 0	
21) Outstanding Loans (incl. ones from other campaigns)		(CRO-1430)		\$ 3,000.00	
22) Debts and Obligations owed By the Committee		(CRO-1610)		\$ 0	
23) Debts and Obligations owed To the Committee		(CRO-1620)		\$ 0	
24) Account Transfers Within the Committee		(CRO-1720)		\$ 0	
25) Administrative Support		(CRO-1710)		\$ 0	\$ 0
26) Forgiven Loans		(CRO-1440)		\$ 0	\$ 0
27) 48-Hour Notice Reports Sum		(CRO-2200)		\$ 2,000.00	\$ 2,000.00
27) Contributions to be refunded		(CRO-1215)		\$ 0	\$ 0

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Re-Elect Gloria D. Whisenhunt					3CQCJ9	
3. Contributor Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
James E. Lowe 6585 Yadkinville Road pfafftown, N.C. 27040 336-945-5410			President			
			c. Employer's Name/Specific Field			
			Vianna Village Home			
			e. Election 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"/>	1	Check		5/1/2008	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
William D. Gardner 3109 Buena Vista Road Winston-Salem, N.C. 27106-5728 33-748-0292			Owner/Sales			
			c. Employer's Name/Specific Field			
			Meridan Arco Space Group			
			e. Election 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		4/21/2008	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
Michael B. Byrd 6460 Hedgerow Circle Clemmons, N.C. 27012 336-766-7058			Retired			
			c. Employer's Name/Specific Field			
			Retired			
			e. Election 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		4/21/2008	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 800.00	
5. Total of ALL CRO-1210 Pages					\$	

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						CRO Number	
Re-Elect Gloria D. Whisenhunt						3CQCJ9	
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	
Peter S. Brunstetter 3054 Panther Ridge Lane Lewisville, N.C. 27023 336-721-3600				Lawyer/Senator			
				c. Employer's Name/Specific Field			
				Womble Carlyle Firm			
				e. Election 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"/>	1	Check		5/1/2008		\$ 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)				b. Job Title/Profession		d. Comments	
James R O Neill 1405 Brookstown Ave Winston-Salem, N.C. 27101-1126 336-723-0662				Assistant District Attorney			
				c. Employer's Name/Specific Field			
				N.C. Forsyth Co District Attorney Office			
				e. Election 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		4/24/2008		\$ 100.00	
<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	
Donald L. Martin, Jr. 6307 Tobaccoville Road Tobaccoville, N.C. 27050 336-924-2906				Superintendent			
				c. Employer's Name/Specific Field			
				Forsyth County Schools Superintendent			
				e. Election 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		5/5/2008		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 450.00	
5. Total of ALL CRO-1210 Pages						\$	
<i>(This line must be on line 6 of all Summary Pages CRO-1210)</i>							

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Email if applicable)						2. ID Number	
Re-Elect Gloria D. Whisenhunt						3CQCJ9	
3. Contributor Information							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Paul S. McGill 1204 D Reynolda Road Winston-Salem, N.C. 27104 336-723-6677				b. Job Title/Profession Real Estate Sales		d. Comments e. Election Sum to Date \$ 250.00	
				c. Employer's Name/Specific Field McGill Real Estate co./Owner			
				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			5/1/2008	\$	250.00
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information							
a. Full Name, Mailing Address & Phone (include city, state, & zip) Pat S Bryan 137 Westmont Dr. Winston-Salem, N.C. 27104 336-768-1998				b. Job Title/Profession Manager		d. Comments e. Election Sum to Date \$ 100.00	
				c. Employer's Name/Specific Field Fairfield Hotel/Manage			
				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			5/21/2008	\$	100.00
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments e. Election Sum to Date \$	
				c. Employer's Name/Specific Field			
				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						\$ 350.00	
5. Total of ALL CRO-1210 Pages						\$ 1,600.00	

Contributions from Other Political Committees

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name and Committee Number				2. ID Number	
Re-Elect Gloria D. Whisenhunt				3CQCJ9	
3. Contributor Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
North Carolina Association of Educators Political Action Comm. For Education 700 S. Salisbury street., Suite 228 NCAE Center, P.O. Box 25788 Raleigh, N.C. 27611 800-662-7924			<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum		
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 1,000.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
1	Check		4/26/2008	\$ 1,000.00	
				\$	
				\$	
3. Contributor Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
North Carolina Realtors PAC 4511 Weybridge Lane Greensboro, N.C. 27407 336-768-5560			<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum		
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 1,000.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
1	Check		5/3/2008	\$ 1,000.00	
				\$	
				\$	
3. Contributor Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Type of Committee		d. Comments
GOP Mens Club Attn: Rick Clemmons P.O. Box 20605 Winston-Salem, N.C. 27120 336-722-4394			<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum		
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 337.33
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
1	In Kind	W-S Journal Advertisement	5/2,3,4,5/2008	\$ 337-33	
				\$	
				\$	
4. Total only this Page				\$ 2,337.33	
5. Total of ALL (GRO-1234) Pages				\$ 2,337.33	

Disbursements

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and fund if applicable)					2. ID Number
Re-Elect Gloria D. Whisenhunt					3CQCJ9
3. Type of Disbursement (Please use separate CRO-1100 forms for each type of disbursement)					
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
4. Payer Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip) First Citizen Bank P.O. Box 27131 Raleigh, N.C. 27611-7131 888-323-4732		b. Coordinated Committee Name _____		d. Comments Check Printing	
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 12.25	
l. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Drafted	B	5/2/2008	\$12.25	Check Printing
				\$	
4. Payer Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Davie County Publishing P.O. Box 4639 Salisbury, N.C. 28145 336-751-2120		b. Coordinated Committee Name _____		d. Comments Advertisement	
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 243.50	
l. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	A	6/3/2008	\$41.00	Advertisements
				\$	
4. Payer Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Bryon Nelson 4825 Commercial Place Apt 27 Winston-Salem, N.C. 27104 336-778-1788		b. Coordinated Committee Name _____		d. Comments _____	
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 100.00	
l. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	E	5/5/2008	\$100.00	Sign Installing
				\$	
5. Total only this Page					\$ 153.25
6. Total of ALL CRO-1100 Pages					\$
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					
7. Purpose Codes (List detailed expenditure code(s) above)					
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate		
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses		
I - Postage	J - Penalties	K* - Office Expenses	O* - Other		
* Codes require detailed explanation in required remarks field (k)					

Disbursements

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Committee Number)						D. Summary
Re-Elect Gloria D. Whisenhunt						3CQCJ9
2. Type of Disbursement <i>(Please use separate CRO-1100 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						
3. Payee Information <i>(Add or Remove)</i>						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments	
Invitations Only 3301 Healy Drive Winston-Salem, N.C. 27103 336-768-9909					Printing	
			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 42.70	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	B	6/30/2008	\$42.70	Mailing Cards	
				\$		
3. Payee Information <i>(Add or Remove)</i>						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments	
Kernersville News P.O. Box 337 Kernersville, N.C. 27285 336-993-2161					Advertisement	
			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 418.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Check	A	6/30/2008	\$118.00	Advertisements	
				\$		
3. Payee Information <i>(Add or Remove)</i>						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
5. Total only this Page					\$ 160.70	
6. Total of ALL CRO-1100 Pages					\$ 313.95	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						
7. Purpose Codes <i>(Use included expenditure code number above)</i>						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		O* - Other
* Codes require detailed explanation in required remarks field (k)						

In-Kind Contributions

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
 Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (include fund or committee)		2. ID Number	
Re-Elect Gloria D. Whisenhunt		3CQCJ9	
3. Contributor Information			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
GOP Mens Club Attn: Rick Clemmons P.O. Box 20605 Winston-Salem, N.C. 27120 336-722-4394		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 337.33	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
W-S Journal Advertisement		5/2,3,4,5/2008	\$ 337.33
			\$
			\$
3. Contributor Information			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
3. Contributor Information			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
			\$
			\$
			\$
4. Total on this Page		\$ 337.33	
5. Total on ALL CRO-1215 Pages		\$ 337.33	

Outstanding Loans

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and ballot number)		ID Number	
Re-Elect Gloria D. Whisenhunt		3CQCJ9	
2. Lender Information			
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments	
Curtis E. Whisenhunt 456 N. Hawthorne Road Winston-Salem, N.C. 27104 336-777-0005	Owner Real Estate Investor		
	c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)	3/20/2008
	CEW Properties/Real Estate Investing	f. End Date (mm/dd/yyyy)	On Demand
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
0 %	None	\$ 3,000.00	\$ 3,000.00
k. Full Name of Lending Institution			l. Loan Number
3. Lender Information			
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			
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 on this Page			\$ 3,000.00
5. Total of ALL CRO (150) Pages			\$ 3,000.00

**CAMPAIGN REPORT DISCREPANCIES
REPLY REQUIRED**

TO: Gloria D. Whisenhunt
Re-Elect Gloria D. Whisenhunt
456 N. Hawthorne Road
Winston-Salem, NC 27104

FROM: Campaign Finance Office

REPORT IN QUESTION:
Second Quarter

DATE: July 8, 2008

A recent preliminary audit of reports filed revealed the following discrepancies. Please supply this office with the missing or corrected information in order to complete the reports. A more detailed audit of the reports listed will be conducted after the following information is provided.

This is your first notice. You must respond within thirty days of receipt of this notice.

Failure to respond will result in noncompliance. In order to comply with the required information, the forms to amend are provided for completion. Amend only the forms required.

- The depository information was not listed on the Political Committee Disclosure Report.
- Addresses were either missing or incomplete. Contributions received without the contributor's complete name and mailing address that remain incomplete for forty-five (45) days are considered anonymous and must be paid over to the State Board of Elections for deposit to the general fund of the State. All disbursements must be listed by name and complete mailing address of the payee.
- Joint contributions, which are prohibited, were listed on the Report of Contributions. You must determine the individual amount of contribution for each contributor.
- Some or no dates were shown on the reports. A date is required for each entry.
- Details were not provided for the sums listed on the Detailed Summary Page
- Method of payment not provided.
- Contributions over \$50 are listed with "cash" being the method of payment.
- Contributions over \$50 are listed as "aggregated individual contribution" (AIC).
- The ending balance is negative. The Committee cannot operate on a negative balance.

- Some of the occupation information was incomplete or incorrect on the Itemized Receipts page(s).
Name of contributor(s):

- A contribution from a business entity/non-registered committee was listed. The contribution must be paid to the Civil Penalty and Forfeiture Fund and reported as a disbursement on the next report.
- The purpose of expenditure was not listed on the Itemized Disbursements page.
- Disbursements for media expenses are paid with cash.
- Disbursements over \$50 that are not for postage are paid with cash.
- "Sum to date" information not provided.
- We are in receipt of a Final Report, but are unable to close the Committee because there is a remaining balance of \$_____.
- No matching "In Kind" entry. "In Kind" contributions must be disclosed in the Itemized Receipts and Disbursements pages. You will also need to amend your "Detailed Summary Page" to reflect these changes.
- Contributions from the following contributors exceed the \$4,000 per election limit:

The contribution amount exceeding \$4,000 must be returned to the contributor, a copy of the refund check sent to this office, and the refund reported on the next scheduled report. If the contributor is the spouse, sibling, or parent of the candidate, please advise in writing.

- OTHER__CRO-1100 – Line 4, Cash on Hand at Start –correct to amount of 1st Quarter Report Cash on Hand at End. Amend with the CRO-1000 and 1100. Thank you.

Please send your reply to : Judy J. Speas
Forsyth County Board of Elections
201 N. Chestnut Street
Winston-Salem, NC 27101

If you have any questions please refer to the Campaign Finance section on the SBOE website, www.sboe.state.nc.us, or call (919)733-7173.
FOR THE CAMPAIGN FINANCE OFFICE: