

**Elaine  
Marshall**  
  
**U.S. SENATE**

SECRETARY OF THE SENATE

P.O. Box 27288 ★ Raleigh, North Carolina 27611  
1.800.565.0502 ★ www.elainemarshall.org

OCT 21 PM 1:50

October 15, 2003

Secretary of the Senate  
Office of Public Records  
232 Hart Senate Office Building  
Washington, DC 20510-7116

RE: Elaine Marshall for Senate - FEC ID#C00368191  
October 15th Quarterly Report

**TO WHOM IT MAY CONCERN:**

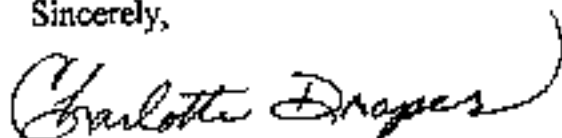
Enclosed is our report for the period July 1, 2003, to September 30, 2003. We have made our best effort to locate occupational information for each contributor over \$200.00 in the election cycle and have listed the information we were able to obtain.

Please note that all contributions received in this period were solicited and designated for Primary 2002 for debt retirement. Additionally, all expenditures in this period were for Primary 2002 obligations. Please be advised that Column B "Election Cycle-to-Date" totals on the Summary Page and Detailed Summary Pages represent transactions from the day after the General Election 11/06/2002 through the period end 9/30/2003.

We have, however, "forced itemization" in the FECFile 5.0 to itemize all contributors and vendors whose accumulated Primary 2002 election sum-to-dates were in excess of \$200, whether those transactions occurred before or after 11/5/2002. Please also note that the "Election Cycle-to-Date" totals for individuals itemized on Schedule A Itemized Receipts have been adjusted to reflect the accumulated election sum-to-date totals for the Primary 2002 election.

Should you have any questions with respect to this report, please contact me. Thank you.

Sincerely,



Charlotte Draper  
Assistant Treasurer

CMR#: 7002 0510 0003 0934 1001

Paid for by Elaine Marshall for Senate.

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

SECRETARY OF THE SENATE  
03 OCT 21 PM 12:34  
Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
ELAINE MARSHALL FOR SENATE

ADDRESS (number and street) **P.O. BOX 27288**  
 Check if different than previously reported. (ACC)  
RALEIGH NC 27611

2. FEC IDENTIFICATION NUMBER **CD036B191**  
CITY STATE ZIP CODE STATE DISTRICT  
RALEIGH NC 27611 NC

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on [ ] [ ] [ ] in the State of [ ]  
(c) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [ ] [ ] [ ] in the State of [ ]

5. Covering Period **07 01 2003** through **09 30 2003**

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer **Charlotte Draper, Asst. Treasurer**  
Signature of Treasurer *Charlotte Draper* Date **10 15 2003**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

ELAINE MARSHALL FOR SENATE

Report Covering the Period:

From:

MM DD YYYY  
07 01 2003

To:

MM DD YYYY  
09 30 2003

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(a))...	78720.00	128829.39
(b) Total Contribution Refunds (from Line 20(d))...	1300.00	1300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	77420.00	128829.39
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17)...	66877.08	118167.55
(b) Total Offsets to Operating Expenditures (from Line 14)...	1.72	2038.73
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	66875.36	116128.82
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)...</b>	6253.20	
<b>9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)...</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)...</b>	255000.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name  
**ELAINE MARSHALL FOR SENATE**

Report Covering the Period: From: 

M	M
07	01

Y	Y	Y	Y
2	0	0	3

 To: 

M	M
09	30

Y	Y	Y	Y
2	0	0	3

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)...	65950.00	
(ii) Unitemized.....	10670.00	
(iii) TOTAL of contributions from individuals... ▶	76620.00	122279.39
(b) Political Party Committees...	500.00	500.00
(c) Other Political Committees (such as PACS)...	1600.00	7150.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) [add Lines 11(a)(iii), (b), (c), and (d)]	78720.00	129929.39
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES...</b>	0.00	0.00
<b>13. LOANS</b>		
(a) Made or Guaranteed by the Candidate...	0.00	0.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS [add Lines 13(a) and (b)]...	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)...</b>	1.72	2038.73
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...</b> ▶	78721.72	131968.12

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	66877.08	118167.55
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES...	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	15000.00	15000.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	15000.00	15000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees...	1300.00	1300.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	1300.00	1300.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▷	83177.08	134467.55

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	10708.58
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)...	78721.72
25. SUBTOTAL (add Line 23 and Line 24)...	89430.28
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	83177.08
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	6253.20

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE 5 of 1	
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	11d
				<input type="checkbox"/>	14
				<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. Michael R. Abel</b>		Date of Receipt 09 / 03 / 2003	
Mailing Address <b>3103 Round Hill Road</b>		Transaction ID: SA11A1.23300	
City <b>Greensboro</b>	State <b>NC</b>	Zip Code <b>27408</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1)-(1))	
Name of Employer <b>Schell Gray Aycock Abel Wilmington</b>	Occupation <b>Attorney</b>	Election Cycle-to-Date <b>250.00</b>	
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼			

Full Name (Last, First, Middle Initial) <b>B. Marjorie C. Allen</b>		Date of Receipt 08 / 04 / 2003	
Mailing Address <b>3104 Chancery Place</b>		Transaction ID: SA11A1.23228	
City <b>Raleigh</b>	State <b>NC</b>	Zip Code <b>27607</b>	Amount of Each Receipt this Period <b>25.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1)-(1))	
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	Election Cycle-to-Date <b>225.00</b>	
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼			

Full Name (Last, First, Middle Initial) <b>C. William J. Amfeld, IV</b>		Date of Receipt 08 / 19 / 2003	
Mailing Address <b>300 N. Greene Street Suite 2190</b>		Transaction ID: SA11A1.23256	
City <b>Greensboro</b>	State <b>NC</b>	Zip Code <b>27401</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1)-(1))	
Name of Employer <b>Spotswood Capital LLC</b>	Occupation <b>Investments</b>	Election Cycle-to-Date <b>500.00</b>	
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼			

SUBTOTAL of Receipts This Page (optional) .....	<b>775.00</b>
TOTAL This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. Jane S. Atkins</b>		Date of Receipt 07 / 25 / 2003
Mailing Address <b>3325 Tall Tree Place</b>		Transaction ID: SA11A1.23205
City <b>Raleigh</b>	State <b>NC</b>	Zip Code <b>27607</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt (this Period) 100.00
Name of Employer <b>Jane S. Atkins &amp; Assoc. P.A.</b>	Occupation <b>Attorney</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1)-(1))
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Election Cycle-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. William P. Aycock, II</b>		Date of Receipt 08 / 25 / 2003
Mailing Address <b>P.O. Box 21847</b>		Transaction ID: SA11A1.23258
City <b>Greensboro</b>	State <b>NC</b>	Zip Code <b>27420</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt (this Period) 250.00
Name of Employer <b>Schell Bray Aycock Abel &amp; Livingston</b>	Occupation <b>Attorney</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1)-(1))
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Joseph W. Baggett</b>		Date of Receipt 07 / 09 / 2003
Mailing Address <b>365 Valley Road</b>		Transaction ID: SA11A1.23048
City <b>Fayetteville</b>	State <b>NC</b>	Zip Code <b>28305</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt (this Period) 100.00
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1)-(1))
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Election Cycle-to-Date ▼ 875.00	

SUBTOTAL of Receipts This Page (optional) .....	450.00
TOTAL This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(a)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 91

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

**A.** Full Name (Last, First, Middle Initial)  
Mary M. Barden

Mailing Address 4505 Tenella Road

City State Zip Code  
New Bern NC 28562

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
Retired Retired

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date ▼  
225.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2003

Transaction ID: SA11A1.23050

Amount of Each Receipt this Period  
25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**B.** Full Name (Last, First, Middle Initial)  
Henry G. Bamhal, Jr.

Mailing Address 3121 Robinhood Road

City State Zip Code  
Winston-Salem NC 27108

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
Womble Carlyle Sandridge & Rice Attorney

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 05 / 2003

Transaction ID: SA11A1.23228

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**C.** Full Name (Last, First, Middle Initial)  
Vance Barron, Jr.

Mailing Address 2204 Pinacrest Road

City State Zip Code  
Greensboro NC 27403

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
Barron & Barry LLP Lawyer

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
09 / 03 / 2003

Transaction ID: SA11A1.23302

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

SUBTOTAL of Receipts This Page (optional) .....

775.00

TOTAL This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 91  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (in Full)  
ELAINE MARSHALL FOR SENATE

**A.** Full Name (Last, First, Middle Initial)  
Thomas M. Bek, Jr.  
Mailing Address 444 Eastover Road  
City State Zip Code  
Charlotte NC 28207  
FEC ID number of contributing federal political committee. C  
Name of Employer  
Berk Stores Services Inc. Occupation  
President  
Receipt For: 2002  
 Primary  General  
 Other (specify) Election Cycle-to-Date  
500.00

Date of Receipt  
07 / 02 / 2003  
Transaction ID: SA11A1.22968  
Amount of Each Receipt this Period  
500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Frank M. Bell, Jr.  
Mailing Address 2920 Club Park Road  
City State Zip Code  
Winston-Salem NC 27104  
FEC ID number of contributing federal political committee. C  
Name of Employer  
Bell Davis & Pitt PA Occupation  
Attorney  
Receipt For: 2002  
 Primary  General  
 Other (specify) Election Cycle-to-Date  
500.00

Date of Receipt  
09 / 30 / 2003  
Transaction ID: SA11A1.23446  
Amount of Each Receipt this Period  
600.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Elizabeth M. Bennett  
Mailing Address 827 Old Greensboro Road  
City State Zip Code  
Chapel Hill NC 27516  
FEC ID number of contributing federal political committee. C  
Name of Employer  
State of NC Occupation  
Museum Director  
Receipt For: 2002  
 Primary  General  
 Other (specify) Election Cycle-to-Date  
600.00

Date of Receipt  
07 / 25 / 2003  
Transaction ID: SA11A1.23208  
Amount of Each Receipt this Period  
100.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 1100.00  
TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 91
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A. Full Name (Last, First, Middle Initial)**  
Richard V. Bennett

**Mailing Address** 3274 Nottingham Road

**City** Winston-Salem **State** NC **Zip Code** 27104

**FEC ID number of contributing federal political committee.** C

**Name of Employer** Bennett & Guthrie PLLC **Occupation** Attorney

**Receipt For:** 2002  
 Primary  General  
 Other (specify)▼

**Election Cycle-to-Date ▼** 500.00

**Date of Receipt** 09 / 23 / 2003

**Transaction ID:** SA11A1.23395

**Amount of Each Receipt this Period** 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1))

**B. Full Name (Last, First, Middle Initial)**  
Sarah Lambert Benson

**Mailing Address** 3920 Starmount Drive

**City** Greensboro **State** NC **Zip Code** 27410

**FEC ID number of contributing federal political committee.** C

**Name of Employer** Self-Employed **Occupation** Personnel Consultant

**Receipt For:** 2002  
 Primary  General  
 Other (specify)▼

**Election Cycle-to-Date ▼** 250.00

**Date of Receipt** 09 / 02 / 2003

**Transaction ID:** SA11A1.23304

**Amount of Each Receipt this Period** 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1))

**C. Full Name (Last, First, Middle Initial)**  
Delta M. Benton

**Mailing Address** P.O. Box 19707

**City** Charlotte **State** NC **Zip Code** 28219

**FEC ID number of contributing federal political committee.** C

**Name of Employer** P.J.D. Enterprises **Occupation** Restaurateur

**Receipt For:** 2002  
 Primary  General  
 Other (specify)▼

**Election Cycle-to-Date ▼** 250.00

**Date of Receipt** 07 / 10 / 2003

**Transaction ID:** SA11A1.23053

**Amount of Each Receipt this Period** 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1))

**SUBTOTAL of Receipts This Page (optional)** 750.00

**TOTAL This Period (last page this line number only)**

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 91  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
William G. Benton

Mailing Address: 915 West 4th Street

City: Winston-Salem State: NC Zip Code: 27101

FEC ID number of contributing federal political committee: **C**

Name of Employer: Salem Senior Housing Occupation: Real Estate

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 09 / 2003

Transaction ID: SA11A1.23306

Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

**B.** Full Name (Last, First, Middle Initial)  
Mark R. Bernstein

Mailing Address: 5300 Hardison Road

City: Charlotte State: NC Zip Code: 28226

FEC ID number of contributing federal political committee: **C**

Name of Employer: Parker Poe Adams Bernstein Occupation: Lawyer

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 10 / 2003

Transaction ID: SA11A1.23055

Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

**C.** Full Name (Last, First, Middle Initial)  
Al Bishop

Mailing Address: 47 Oak Island Drive

City: Oak Island State: NC Zip Code: 28455

FEC ID number of contributing federal political committee: **C**

Name of Employer: Brunswick County Schools Occupation: Teacher

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: 650.00

Date of Receipt: 07 / 07 / 2003

Transaction ID: SA11A1.22967

Amount of Each Receipt this Period: 200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional) ..... ➔ 850.00

TOTAL This Period (last page this line number only) ..... ➔

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
Marc D. Bishop

Mailing Address 4000 Westmount Drive

City Greensboro State NC Zip Code 27410

FEC ID number of contributing federal political committee. **C**

Name of Employer Brooks Pierce McLendon Occupation Attorney

Receipt For: 2002  
 Primary    General  
 Other (specify)▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
08 / 30 / 2003

Transaction ID: SA11A1.23308

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(441a-1))

**B.** Full Name (Last, First, Middle Initial)  
Janel Ward Black

Mailing Address 7104 Horseman Court

City Summerfield State NC Zip Code 27358

FEC ID number of contributing federal political committee. **C**

Name of Employer Donaldson & Black P.A. Occupation Attorney

Receipt For: 2002  
 Primary    General  
 Other (specify)▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
08 / 29 / 2003

Transaction ID: SA11A1.23310

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(441a-1))

**C.** Full Name (Last, First, Middle Initial)  
Hoby B. Blanton

Mailing Address 1918 SL Mary's Street

City Raleigh State NC Zip Code 27608

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2002  
 Primary    General  
 Other (specify)▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
08 / 09 / 2003

Transaction ID: SA11A1.23334

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(441a-1))

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1000.00

TOTAL This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

**A. Louis A. Bledsoe, Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1057 E. Morehead Street  
 City State Zip Code  
 Charlotte NC 28204  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Bledsoe & Bledsoe PLLC  
 Occupation Attorney  
 Receipt For: 2002  
 Primary  General  
 Other (specify)▼  
 Election Cycle-to-Date ▼ 250.00

Date of Receipt 07 / 07 / 2003  
 Transaction ID: SA11A1.23245  
 Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1))

**B. Arthur Blumenthal**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 9403  
 City State Zip Code  
 Greensboro NC 27429  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Retired  
 Occupation Retired  
 Receipt For: 2002  
 Primary  General  
 Other (specify)▼  
 Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 09 / 2003  
 Transaction ID: SA11A1.23336  
 Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1))

**C. Gretel M. Boyette**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 598  
 City State Zip Code  
 Kenly NC 27542  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Retired  
 Occupation Retired  
 Receipt For: 2002  
 Primary  General  
 Other (specify)▼  
 Election Cycle-to-Date ▼ 300.00

Date of Receipt 07 / 08 / 2003  
 Transaction ID: SA11A1.22974  
 Amount of Each Receipt this Period 100.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1))

SUBTOTAL of Receipts This Page (optional) ..... 600.00  
 TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A. Full Name (Last, First, Middle Initial)**  
Martin L. Brecken, Jr.

**Mailing Address** 101 N. Tryon Street  
Suite 1900

**City** Charlotte **State** NC **Zip Code** 28248

**FEC ID number of contributing federal political committee.** C

**Name of Employer** Robinson Bradshaw & Hinson **Occupation** Attorney

**Receipt For:** 2002  
 Primary  General  
 Other (specify)▼

**Election Cycle-to-Date** ▼  
500.00

**Date of Receipt**  
MM / DD / YYYY  
07 / 10 / 2003

**Transaction ID:** SA11A1.23057

**Amount of Each Receipt this Period**  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(A)-1)

**B. Full Name (Last, First, Middle Initial)**  
Charles Robin Bitt, Sr.

**Mailing Address** 600 N. Elam Avenue

**City** Greensboro **State** NC **Zip Code** 27408

**FEC ID number of contributing federal political committee.** C

**Name of Employer** United Child Development Services **Occupation** Executive Director

**Receipt For:** 2002  
 Primary  General  
 Other (specify)▼

**Election Cycle-to-Date** ▼  
250.00

**Date of Receipt**  
MM / DD / YYYY  
09 / 23 / 2003

**Transaction ID:** SA11A1.23397

**Amount of Each Receipt this Period**  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(A)-1)

**C. Full Name (Last, First, Middle Initial)**  
P. David Brown

**Mailing Address** 300 N. Church Street

**City** Greensboro **State** NC **Zip Code** 27420

**FEC ID number of contributing federal political committee.** C

**Name of Employer** Gate City Motor Co. Inc. **Occupation** Auto Dealer

**Receipt For:** 2002  
 Primary  General  
 Other (specify)▼

**Election Cycle-to-Date** ▼  
500.00

**Date of Receipt**  
MM / DD / YYYY  
08 / 19 / 2003

**Transaction ID:** SA11A1.23260

**Amount of Each Receipt this Period**  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(A)-1)

**SUBTOTAL of Receipts This Page (optional)** ..... ▶ 1250.00

**TOTAL This Period (last page this line number only)** ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
Joseph M. Bryan, Jr.

Mailing Address P.O. Box 9908

City Greensboro State NC Zip Code 27429

FEC ID number of contributing federal political committee. **C**

Name of Employer Jayamba Occupation Executive

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
08 / 22 / 2003

Transaction ID: SA11A1.23282

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(A)-1)

**B.** Full Name (Last, First, Middle Initial)  
Robert W. Bryan, Jr.

Mailing Address P.O. Box 309

City Selma State NC Zip Code 27578

FEC ID number of contributing federal political committee. **C**

Name of Employer Lucas Bryant Denning Occupation Attorney

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
225.00

Date of Receipt  
07 / 07 / 2003

Transaction ID: SA11A1.22880

Amount of Each Receipt this Period  
25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(A)-1)

**C.** Full Name (Last, First, Middle Initial)  
K. Isabelle Buckley

Mailing Address 2409 Stafford Avenue

City Raleigh State NC Zip Code 27807

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
07 / 10 / 2003

Transaction ID: SA11A1.23060

Amount of Each Receipt this Period  
150.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(A)-1)

SUBTOTAL of Receipts This Page (optional) ..... **1175.00**

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
Linda A. Carole

Mailing Address 5411 Rambling Road

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee: **C**

Name of Employer Retired Occupation Retired

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2003

Transaction ID: SA11A1.23399

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(441a-1))

**B.** Full Name (Last, First, Middle Initial)  
George E. Carr, III

Mailing Address 2100-V West Cornwallis Drive

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee: **C**

Name of Employer Carr Investments Occupation Management

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 23 / 2003

Transaction ID: SA11A1.23401

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(441a-1))

**C.** Full Name (Last, First, Middle Initial)  
George Watts Carr, III

Mailing Address 203 Country Club Drive

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee: **C**

Name of Employer Retired Occupation Retired

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼ 925.00

Date of Receipt 09 / 19 / 2003

Transaction ID: SA11A1.23263

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(441a-1))

SUBTOTAL of Receipts This Page (optional) ..... 1250.00

TOTAL This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

**A.** Full Name (Last, First, Middle Initial)  
Paul D. Carrington

Mailing Address 1618 Pinecrest Road

City Durham State NC Zip Code 27705

FEC ID number of contributing federal political committee. C

Name of Employer Duke University Occupation Professor

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt 07 / 28 / 2003

Transaction ID: SA11A1.23208

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**B.** Full Name (Last, First, Middle Initial)  
Thomas D. Carruthers

Mailing Address 3201 West Market Street

City Greensboro State NC Zip Code 27403

FEC ID number of contributing federal political committee. C

Name of Employer Alspaugh & Carruthers LLP Occupation Attorney

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 12 / 2003

Transaction ID: SA11A1.23380

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**C.** Full Name (Last, First, Middle Initial)  
Kate S. Cashon

Mailing Address 103 W. Greenway Drive North

City Greensboro State NC Zip Code 27403

FEC ID number of contributing federal political committee. C

Name of Employer Gashon's Furniture and Decorating Occupation Entrepreneur

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2003

Transaction ID: SA11A1.23403

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

SUBTOTAL of Receipts This Page (optional) 1500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. David M. Clark</b>		Date of Receipt 08 / 22 / 2003
Mailing Address: P.O. Box 1349		Transaction ID: SA11A1.23254
City: Greensboro	State: NC	Zip Code: 27402
FEC ID number of contributing federal political committee: C	Amount of Each Receipt this Period: 250.00	
Name of Employer: Clark Bloss & Wall PLLC	Occupation: Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Election Cycle-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) <b>B. Patricia Shore Clark</b>		Date of Receipt 09 / 09 / 2003
Mailing Address: 301 Settler's Run Drive		Transaction ID: SA11A1.23337
City: Winston-Salem	State: NC	Zip Code: 27101
FEC ID number of contributing federal political committee: C	Amount of Each Receipt this Period: 250.00	
Name of Employer: Retired	Occupation: Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Election Cycle-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C. George M. Cleland, III</b>		Date of Receipt 09 / 12 / 2003
Mailing Address: 214D Faculty Drive		Transaction ID: SA11A1.23362
City: Winston-Salem	State: NC	Zip Code: 27108
FEC ID number of contributing federal political committee: C	Amount of Each Receipt this Period: 250.00	
Name of Employer: Self-Employed	Occupation: Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) .....	750.00
TOTAL This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. Harold W. Cogdal, Jr.</b>		Date of Receipt 07 / 10 / 2003	
Mailing Address: 310 Arlington Avenue No. 218		Transaction ID: SA11A1.23073	
City: <b>Charlotte</b>	State: <b>NC</b>	Zip Code: <b>28203</b>	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee: <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)	
Name of Employer Self-Employed:		Occupation: <b>Attorney</b>	
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date: <b>600.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Sue Cole</b>		Date of Receipt 08 / 25 / 2003	
Mailing Address: 3803 Round Hill Road		Transaction ID: SA11A1.23268	
City: <b>Greensboro</b>	State: <b>NC</b>	Zip Code: <b>27408</b>	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee: <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)	
Name of Employer: <b>U.S. Trust Company</b>		Occupation: <b>President</b>	
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date: <b>250.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Wilton A. Coley</b>		Date of Receipt 07 / 09 / 2003	
Mailing Address: 1231 Wareham Court		Transaction ID: SA11A1.23086	
City: <b>Charlotte</b>	State: <b>NC</b>	Zip Code: <b>28207</b>	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee: <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)	
Name of Employer: <b>Retired</b>		Occupation: <b>Retired</b>	
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date: <b>1000.00</b>	

SUBTOTAL of Receipts This Page (optional)	1350.00
TOTAL This Period (last page this line number only)	_____

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A. James E. Compton**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2319 Danbury Road  
City Greensboro State NC Zip Code 27408  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Legg Mason Occupation Financial Advisor  
Receipt For: 2002  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date 250.00

Date of Receipt 08 / 22 / 2003  
Transaction ID: SA11A1.23288  
Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**B. Sally S. Cone**  
Full Name (Last, First, Middle Initial)  
Mailing Address 500 Country Club Drive  
City Greensboro State NC Zip Code 27408  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired/Volunteer Occupation Retired/Volunteer  
Receipt For: 2002  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date 750.00

Date of Receipt 07 / 10 / 2003  
Transaction ID: SA11A1.23074  
Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**C. Sally S. Cone**  
Full Name (Last, First, Middle Initial)  
Mailing Address 500 Country Club Drive  
City Greensboro State NC Zip Code 27408  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired/Volunteer Occupation Retired/Volunteer  
Receipt For: 2002  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date 1250.00

Date of Receipt 09 / 09 / 2003  
Transaction ID: SA11A1.23338  
Amount of Each Receipt this Period 500.00  
See Schedule B, Line 20(a)  
Refunded \$250  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... **1000.00**  
**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (ITEMIZED RECEIPTS) Form 3

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 91  
 (check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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Any information of for **SENATE**

Name (Last, First, Middle Initial)  
 P.O. Box 19827  
 State: NC Zip Code: 28219  
 Occupation: Executive  
 Election Cycle to Date: 750.00  
 Receipt For: 2002  
 Primary  General  
 Other (specify)

Date of Receipt: 07 / 10 / 2003  
 Transaction ID: SA11A1.23075  
 Amount of Each Receipt this Period: 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

B. Full Name (Last, First, Middle Initial)  
Robert B. Cordle  
Mailing Address: 508 Hermitage Court

City: Charlotte  
 State: NC Zip Code: 28207  
 Occupation: Attorney  
 Election Cycle to Date: 500.00  
 Name of Employer: Mayer Brown Rowe & Maw LLP  
 Receipt For: 2002  
 Primary  General  
 Other (specify)

Date of Receipt: 07 / 10 / 2003  
 Transaction ID: SA11A1.23077  
 Amount of Each Receipt this Period: 500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

C. Full Name (Last, First, Middle Initial)  
Paarla Colham  
Mailing Address: 1920 Kilmorack Lane

City: Charlotte  
 State: NC Zip Code: 28270  
 Occupation: Executive Recruiter  
 Election Cycle to Date: 1000.00  
 Name of Employer: Colham Search  
 Receipt For: 2002  
 Primary  General  
 Other (specify)

Date of Receipt: 07 / 21 / 2003  
 Transaction ID: SA11A1.23186  
 Amount of Each Receipt this Period: 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1750.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
of each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)  
**ELAINE MARSHALL FOR SENATE**

A. Full Name (Last, First, Middle Initial)  
**J. Donald Cowan, Jr.**

Mailing Address **400 Scotland Street**

City **Raleigh** State **NC** Zip Code **27608**

FEC ID number of contributing federal political committee: **C**

Name of Employer  
**Smith Moore LLP**

Occupation  
**Attorney**

Election Cycle-to-Date

Receipt For: 2002  
 Primary  General  
 Other (specify)

Amount of Each Receipt this Period  
**1000.00**

Date of Receipt

**09** / **03** / **2003**

Transaction ID: **SA11A1.23312**

Amount of Each Receipt this Period

**1000.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(B)-1)

B. Full Name (Last, First, Middle Initial)  
**Sarah L. Cowan**

Mailing Address **400 Scotland Street**

City **Raleigh** State **NC** Zip Code **27608**

FEC ID number of contributing federal political committee: **C**

Name of Employer  
**Self-Employed**

Occupation  
**Editor**

Election Cycle-to-Date

Receipt For: 2002  
 Primary  General  
 Other (specify)

Amount of Each Receipt this Period  
**1000.00**

Date of Receipt

**09** / **03** / **2003**

Transaction ID: **SA11A1.23314**

Amount of Each Receipt this Period

**1000.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(B)-1)

C. Full Name (Last, First, Middle Initial)  
**William S. Cross III**

Mailing Address **4400 Piedmont Parkway**

City **Greensboro** State **NC** Zip Code **27410**

FEC ID number of contributing federal political committee: **C**

Name of Employer  
**Cross Company**

Occupation  
**Business Management**

Election Cycle-to-Date

Receipt For: 2002  
 Primary  General  
 Other (specify)

Amount of Each Receipt this Period  
**1000.00**

Date of Receipt

**08** / **27** / **2003**

Transaction ID: **SA11A1.23316**

Amount of Each Receipt this Period

**1000.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(B)-1)

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this fine number only) .....

**3000.00**

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE 22 / 81	
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
Dwight M. Davidson, III

Mailing Address: 310 Wentworth Drive

City: Greensboro State: NC Zip Code: 27408

FEC ID number of contributing federal political committee: C

Name of Employer: Engineering Plastics Occupation: President

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼: 250.00

Date of Receipt: 09 / 23 / 2003

Transaction ID: SA11A1.23405

Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

**B.** Full Name (Last, First, Middle Initial)  
John W. Davis, III

Mailing Address: 2815 Bartram Road

City: Winston-Salem State: NC Zip Code: 27106

FEC ID number of contributing federal political committee: C

Name of Employer: Deutsche Bank Alex Brown Occupation: Finance

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼: 500.00

Date of Receipt: 09 / 09 / 2003

Transaction ID: SA11A1.23340

Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

**C.** Full Name (Last, First, Middle Initial)  
Michael A. DeMayo

Mailing Address: 4412 Cameron Oaks Drive

City: Charlotte State: NC Zip Code: 28211

FEC ID number of contributing federal political committee: C

Name of Employer: Law Ofc. of Michael DeMayo Occupation: Lawyer

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼: 1000.00

Date of Receipt: 07 / 28 / 2003

Transaction ID: SA11A1.23211

Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

SUBTOTAL of Receipts This Page (optional) ..... **1750.00**

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 91			
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
12	13a	13b	14	15

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A. Full Name (Last, First, Middle Initial)**  
Daphne G. Demetriades

**Mailing Address** P.O. Box 18311

**City** Greensboro **State** NC **Zip Code** 27419

**FEC ID number of contributing federal political committee.** C

**Name of Employer** Zeta Inc. **Occupation** Business Owner

**Receipt For:** 2002  
 Primary  General  
 Other (specify) ▼

**Election Cycle-to-Date** ▼ 850.00

**Date of Receipt**  
09 / 30 / 2003

**Transaction ID:** SA11A1.23451

**Amount of Each Receipt this Period**  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(A)-1)

**B. Full Name (Last, First, Middle Initial)**  
Nancy W. Dunn

**Mailing Address** 3800 Ryan Way

**City** Winston-Salem **State** NC **Zip Code** 27106

**FEC ID number of contributing federal political committee.** C

**Name of Employer** Aladdin Travel **Occupation** Business Owner

**Receipt For:** 2002  
 Primary  General  
 Other (specify) ▼

**Election Cycle-to-Date** ▼ 250.00

**Date of Receipt**  
09 / 03 / 2003

**Transaction ID:** SA11A1.23320

**Amount of Each Receipt this Period**  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(A)-1)

**C. Full Name (Last, First, Middle Initial)**  
Tom D. Efrid

**Mailing Address** P.O. Box 68

**City** Gastonia **State** NC **Zip Code** 28053

**FEC ID number of contributing federal political committee.** C

**Name of Employer** Standard Distributors Inc. **Occupation** Beer Wholesaler

**Receipt For:** 2002  
 Primary  General  
 Other (specify) ▼

**Election Cycle-to-Date** ▼ 500.00

**Date of Receipt**  
07 / 09 / 2003

**Transaction ID:** SA11A1.23088

**Amount of Each Receipt this Period**  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(A)-1)

**SUBTOTAL of Receipts This Page (optional)** ..... 850.00

**TOTAL This Period (last page this line number only)** .....



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 91  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (in Full)  
ELAINE MARSHALL FOR SENATE

**A.** Full Name (Last, First, Middle Initial)  
Michael A. Felt  
Mailing Address 814 Pebble Drive  
City Greensboro State NC Zip Code 27410  
FEC ID number of contributing federal political committee. C  
Name of Employer Falcon Management Corp. Occupation Executive  
Receipt For: 2002  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date 500.00  
Date of Receipt 09 / 12 / 2003  
Transaction ID: SA11A1.23384  
Amount of Each Receipt this Period 500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)

**B.** Full Name (Last, First, Middle Initial)  
Ray S. Farris  
Mailing Address 3095 Belvedere Avenue  
City Charlotte State NC Zip Code 28205  
FEC ID number of contributing federal political committee. C  
Name of Employer Johnston Allison & Hord Occupation Attorney  
Receipt For: 2002  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date 250.00  
Date of Receipt 07 / 11 / 2003  
Transaction ID: SA11A1.23082  
Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)

**C.** Full Name (Last, First, Middle Initial)  
Cristin G. Fyfe  
Mailing Address 205 Country Club Drive  
City Greensboro State NC Zip Code 27406  
FEC ID number of contributing federal political committee. C  
Name of Employer Center for Creative Leadership Occupation Program Coordinator  
Receipt For: 2002  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date 250.00  
Date of Receipt 09 / 12 / 2003  
Transaction ID: SA11A1.23366  
Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)

SUBTOTAL of Receipts This Page (optional) 1000.00  
TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A. Richard C. Forman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address **1118 Westridge Road**  
 City **Greensboro** State **NC** Zip Code **27410**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **Forman Rosasbl Black** Occupation **Lawyer**  
 Receipt For: 2002  
 Primary  General  
 Other (specify) **\***  
 Election Cycle-to-Date **500.00**

Date of Receipt  
**08 / 19 / 2003**  
 Transaction ID: SA11A1.23272  
 Amount of Each Receipt this Period  
**500.00**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)441a-1)

**B. James R. Fox**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address **P.O. Box 21029**  
 City **Winston-Salem** State **NC** Zip Code **27129**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **Bell Davis & Pitt PA** Occupation **Attorney**  
 Receipt For: 2002  
 Primary  General  
 Other (specify) **\***  
 Election Cycle-to-Date **500.00**

Date of Receipt  
**09 / 30 / 2003**  
 Transaction ID: SA11A1.23455  
 Amount of Each Receipt this Period  
**500.00**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)441a-1)

**C. William H. Freeman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address **701 Roslyn Road**  
 City **Winston-Salem** State **NC** Zip Code **27104**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **Retired** Occupation **Retired**  
 Receipt For: 2002  
 Primary  General  
 Other (specify) **\***  
 Election Cycle-to-Date **500.00**

Date of Receipt  
**09 / 30 / 2003**  
 Transaction ID: SA11A1.23467  
 Amount of Each Receipt this Period  
**500.00**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)441a-1)

**SUBTOTAL of Receipts This Page (optional)** ..... **1500.00**  
**TOTAL This Period (last page this line number only)** .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A. Henry E. Fye**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address **1401 South Benbow Road**  
 City **Greensboro** State **NC** Zip Code **27408**  
 FEC ID number of contributing federal political committee: **C**  
 Name of Employer **Brooks Pierce McLendon** Occupation **Attorney**  
 Receipt For: 2002  
 Primary  General  
 Other (specify) **▼**  
 Election Cycle-to-Date **250.00**

Date of Receipt  
 MM / DD / YYYY  
**09 / 09 / 2003**  
 Transaction ID: SA11A1.23342  
 Amount of Each Receipt this Period  
**250.00**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)/441a-1)

**B. James A. Gelfner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address **1001 Greenhurst Road**  
 City **Winston-Salem** State **NC** Zip Code **27104**  
 FEC ID number of contributing federal political committee: **C**  
 Name of Employer **Wachovia Bank** Occupation **Charitable Advisor**  
 Receipt For: 2002  
 Primary  General  
 Other (specify) **▼**  
 Election Cycle-to-Date **500.00**

Date of Receipt  
 MM / DD / YYYY  
**09 / 09 / 2003**  
 Transaction ID: SA11A1.23344  
 Amount of Each Receipt this Period  
**500.00**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)/441a-1)

**C. J. Douglas Geryon, Sr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address **P.O. Box 26969**  
 City **Greensboro** State **NC** Zip Code **27418**  
 FEC ID number of contributing federal political committee: **C**  
 Name of Employer **Guilford Mills Inc.** Occupation **Consultant**  
 Receipt For: 2002  
 Primary  General  
 Other (specify) **▼**  
 Election Cycle-to-Date **1000.00**

Date of Receipt  
 MM / DD / YYYY  
**09 / 09 / 2003**  
 Transaction ID: SA11A1.23346  
 Amount of Each Receipt this Period  
**1000.00**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....	<b>1750.00</b>
TOTAL This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
Harvey B. Genit

Mailing Address 517 N. Poplar Street

City Charlotte State NC Zip Code 28202

FEC ID number of contributing federal political committee. **C**

Name of Employer Genit Huberman Architects PLLC Occupation Architect

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **500.00**

Date of Receipt  
**07 / 11 / 2003**

Transaction ID: SA11A1.23086

Amount of Each Receipt this Period  
**500.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**B.** Full Name (Last, First, Middle Initial)  
Betty Gilmore

Mailing Address P.O. Box 8

City Julian State NC Zip Code 27263

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **750.00**

Date of Receipt  
**09 / 30 / 2003**

Transaction ID: SA11A1.23464

Amount of Each Receipt this Period  
**250.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**C.** Full Name (Last, First, Middle Initial)  
Joseph W. Grier, Jr.

Mailing Address 3738 Cypress Club Drive No. D-107

City Charlotte State NC Zip Code 28210

FEC ID number of contributing federal political committee. **C**

Name of Employer Grier & Furr PA Occupation Lawyer

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **550.00**

Date of Receipt  
**07 / 08 / 2003**

Transaction ID: SA11A1.22891

Amount of Each Receipt this Period  
**100.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

SUBTOTAL of Receipts This Page (optional) **850.00**

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
**Charles T. Hagan, III**

Mailing Address **305 Meadowbrook Terrace**

City **Greensboro** State **NC** Zip Code **27408**

FEC ID number of contributing federal political committee: **C**

Name of Employer **Adams Klemmer Hagan** Occupation **Attorney**

Receipt For: 2002  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**500.00**

Date of Receipt  
**09 / 19 / 2003**

Transaction ID: SA11A1.23276

Amount of Each Receipt This Period  
**500.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**B.** Full Name (Last, First, Middle Initial)  
**Charles T. Hagan, Jr.**

Mailing Address **4100 Wellspring Drive  
Apartment 2216**

City **Greensboro** State **NC** Zip Code **27410**

FEC ID number of contributing federal political committee: **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2002  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**500.00**

Date of Receipt  
**09 / 30 / 2003**

Transaction ID: SA11A1.23466

Amount of Each Receipt This Period  
**500.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**C.** Full Name (Last, First, Middle Initial)  
**Irene V. Hill**

Mailing Address **5 Ashton Square**

City **Greensboro** State **NC** Zip Code **27408**

FEC ID number of contributing federal political committee: **C**

Name of Employer **Homemaker** Occupation **Homemaker**

Receipt For: 2002  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**500.00**

Date of Receipt  
**09 / 23 / 2003**

Transaction ID: SA11A1.23407

Amount of Each Receipt This Period  
**500.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... **1500.00**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 91  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
Stanley F. Hamner

Mailing Address: 3301 Madison Avenue

City: Greensboro State: NC Zip Code: 27403

FEC ID number of contributing federal political committee: **C**

Name of Employer: Wylst Early Harris Wheeler Occupation: Attorney

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: 1050.00

Date of Receipt: 09 / 25 / 2003

Transaction ID: SA11A1.23408

Amount of Each Receipt this Period: 350.00

See Schedule B, Line 20(a)  
Refunded \$50  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

**B.** Full Name (Last, First, Middle Initial)  
Eldridge C. Hanes

Mailing Address: 111 Cloverleaf Drive

City: Winston-Salem State: NC Zip Code: 27103

FEC ID number of contributing federal political committee: **C**

Name of Employer: The Encore Group Occupation: Executive

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 30 / 2003

Transaction ID: SA11A1.23488

Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

**C.** Full Name (Last, First, Middle Initial)  
R. Douglas Hamon

Mailing Address: 401 S. Tryon Street Suite 3000

City: Charlotte State: NC Zip Code: 28202

FEC ID number of contributing federal political committee: **C**

Name of Employer: Parker Poe Adams Bernstein Occupation: Attorney

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 10 / 2003

Transaction ID: SA11A1.23101

Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

SUBTOTAL of Receipts This Page (optional) ..... **1100.00**

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. Celeste M. Harris</b>		Date of Receipt 09 / 30 / 2003
Mailing Address <b>1500 Carters Grove Road</b>		Transaction ID: SA11A1.23469
City <b>Clemmons</b>	State <b>NC</b>	Zip Code <b>27012</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>Maynard &amp; Harris</b>	Occupation <b>Attorney</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)41a-1)
Receipt For: <b>2002</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Election Cycle-to-Date ▼ <b>600.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Stephen C. Hassenleh</b>		Date of Receipt 09 / 19 / 2003
Mailing Address <b>2000 Granville Road</b>		Transaction ID: SA11A1.23278
City <b>Greensboro</b>	State <b>NC</b>	Zip Code <b>27408</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>Investment Banker</b>	Occupation <b>Granville Capital Inc.</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)41a-1)
Receipt For: <b>2002</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Election Cycle-to-Date ▼ <b>250.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Stephen C. Hassenleh</b>		Date of Receipt 09 / 12 / 2003
Mailing Address <b>2000 Granville Road</b>		Transaction ID: SA11A1.23387
City <b>Greensboro</b>	State <b>NC</b>	Zip Code <b>27408</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>Investment Banker</b>	Occupation <b>Granville Capital Inc.</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)41a-1)
Receipt For: <b>2002</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Election Cycle-to-Date ▼ <b>500.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>1000.00</b>
TOTAL This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
David Charles Hayes

Mailing Address 733 S. Chimney Rock Road

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C**

Name of Employer Western Carolina Forklift Occupation GEO

Receipt For: 2002  
 Primary    General  
 Other (specify)▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
08 / 25 / 2003

Transaction ID: SA11A1.23280

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**B.** Full Name (Last, First, Middle Initial)  
W. L. Hemphill

Mailing Address 7 Saint Augustine Square

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2002  
 Primary    General  
 Other (specify)▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
07 / 28 / 2003

Transaction ID: SA11A1.23214

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**C.** Full Name (Last, First, Middle Initial)  
Kendall Hill

Mailing Address 2574 Hugo Road

City Grifton State NC Zip Code 28530

FEC ID number of contributing federal political committee. **C**

Name of Employer Tull Hill Farms Inc. Occupation Co-Owner/Farmer

Receipt For: 2002  
 Primary    General  
 Other (specify)▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
07 / 08 / 2003

Transaction ID: SA11A1.22998

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**SUBTOTAL** of Receipts This Page (optional) ▶ 2100.00

**TOTAL** This Period (last page this line number only) ▶



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 81  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
Robert S. Hodgman

Mailing Address 2 Alwood Court

City Greensboro State NC Zip Code 27410

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 12 / 2003  
Transaction ID: SA11A1.23371  
Amount of Each Receipt This Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(l)(4)41a-1)

**B.** Full Name (Last, First, Middle Initial)  
Walter G. Holton

Mailing Address 5033 Meadow Hill Court

City Winston-Salem State NC Zip Code 27108

FEC ID number of contributing federal political committee. **C**

Name of Employer Grace Holton Tidale and Clifton Occupation Attorney

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2003  
Transaction ID: SA11A1.23471  
Amount of Each Receipt This Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(l)(4)41a-1)

**C.** Full Name (Last, First, Middle Initial)  
Frances L. Huffman

Mailing Address 2400 Hoyt Street

City Winston-Salem State NC Zip Code 27103

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼ 320.00

Date of Receipt 09 / 23 / 2003  
Transaction ID: SA11A1.23413  
Amount of Each Receipt This Period 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(l)(4)41a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 550.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (in Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
C. David Hughes, Jr.  
Mailing Address **14317 Sledge Road**

City **Charlotte** State **NC** Zip Code **28278**

FEC ID number of contributing federal political committee. **C**

Name of Employer **First Charter Bank** Occupation **Banker**

Receipt For: 2002  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**500.00**

Date of Receipt  
**07 / 10 / 2003**

Transaction ID: SA11A1.23112

Amount of Each Receipt This Period  
**500.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)1a-1)

**B.** Full Name (Last, First, Middle Initial)  
James E.S. Hynes  
Mailing Address **5400 Gorham Drive**

City **Charlotte** State **NC** Zip Code **28228**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Hynes Inc.** Occupation **Executive**

Receipt For: 2002  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**1000.00**

Date of Receipt  
**07 / 28 / 2003**

Transaction ID: SA11A1.23216

Amount of Each Receipt This Period  
**1000.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)1a-1)

**C.** Full Name (Last, First, Middle Initial)  
Gary D. Jobs  
Mailing Address **8 Loch Ridge Drive**

City **Greensboro** State **NC** Zip Code **27408**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **General Contractor**

Receipt For: 2002  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**500.00**

Date of Receipt  
**09 / 12 / 2003**

Transaction ID: SA11A1.23373

Amount of Each Receipt This Period  
**500.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)1a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2000.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
Walter L. Jones

Mailing Address **4413 Indian Wells Drive**

City **Greensboro** State **NC** Zip Code **27408**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Clifford Clendenin O'Hale & Jones** Occupation **Attorney**

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **500.00**

Date of Receipt  
**09 / 12 / 2003**

Transaction ID: **SA11A1.23376**

Amount of Each Receipt this Period  
**500.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)41a-1)

**B.** Full Name (Last, First, Middle Initial)  
Robert B. Jordan, III

Mailing Address **P.O. Box 88**

City **Mount Gilead** State **NC** Zip Code **27308**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Jordan Lumber** Occupation **Lumber Executive**

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1000.00**

Date of Receipt  
**07 / 09 / 2003**

Transaction ID: **SA11A1.23122**

Amount of Each Receipt this Period  
**1000.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)41a-1)

**C.** Full Name (Last, First, Middle Initial)  
William W. Jordan

Mailing Address **3 Parkmont Court**

City **Greensboro** State **NC** Zip Code **27408**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Hill Evans Duncan Jordan & Beatty** Occupation **Attorney**

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **600.00**

Date of Receipt  
**09 / 12 / 2003**

Transaction ID: **SA11A1.23499**

Amount of Each Receipt this Period  
**500.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)41a-1)

SUBTOTAL of Receipts This Page (optional) ..... **2000.00**

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
Leonard J. Kaplan

Mailing Address 7 Monmouth Court

City Greensboro State NC Zip Code 27410

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2002  
 Primary    General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
09 / 17 / 2003

Transaction ID: SA11A1.23377

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Annie Brown Kennedy

Mailing Address 3727 Spaulding Drive

City Winston-Salem State NC Zip Code 27105

FEC ID number of contributing federal political committee. C

Name of Employer Kennedy Kennedy Kennedy & Kennedy Occupation Attorney

Receipt For: 2002  
 Primary    General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
09 / 30 / 2003

Transaction ID: SA11A1.23473

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Harold L. Kennedy, Jr.

Mailing Address 3727 Spaulding Drive

City Winston-Salem State NC Zip Code 27105

FEC ID number of contributing federal political committee. C

Name of Employer Kennedy Kennedy Kennedy & Kennedy Occupation Attorney

Receipt For: 2002  
 Primary    General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
09 / 30 / 2003

Transaction ID: SA11A1.23475

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 1500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 / 91	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (in Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
Robert H. Klutz

Mailing Address **822 Oaklawn Avenue**

City **Winston-Salem** State **NC** Zip Code **27104**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Mimosa Investment Mgmt.** Occupation **Regional Investment Advisor**

Receipt For: **2002**  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
**500.00**

Date of Receipt  
**09 / 23 / 2003**

Transaction ID: SA11A1.23421

Amount of Each Receipt this Period  
**500.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a-1))

**B.** Full Name (Last, First, Middle Initial)  
Christopher H. Kouri

Mailing Address **3201 Commonwealth Avenue**

City **Charlotte** State **NC** Zip Code **28205**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Helms Mulliss Wicker** Occupation **Attorney**

Receipt For: **2002**  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
**250.00**

Date of Receipt  
**07 / 26 / 2003**

Transaction ID: SA11A1.23218

Amount of Each Receipt this Period  
**250.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a-1))

**C.** Full Name (Last, First, Middle Initial)  
J. Gilmour Lake

Mailing Address **One Graylyn Place**

City **Winston-Salem** State **NC** Zip Code **27108**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Computer Credit Inc.** Occupation **Corporate Executive**

Receipt For: **2002**  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
**1000.00**

Date of Receipt  
**09 / 23 / 2003**

Transaction ID: SA11A1.23423

Amount of Each Receipt this Period  
**1000.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a-1))

SUBTOTAL of Receipts This Page (optional) ..... **1750.00**

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
T. W. Lambeth

Mailing Address 700 Yorkshire Road

City State Zip Code  
Winston-Salem NC 27106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
09 / 30 / 2003

Transaction ID: SA11A1.23477

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Sally A. Lewing

Mailing Address 6925 Summerfield Road

City State Zip Code  
Summerfield NC 27358

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Law Offices of Wade Byrd Attorney

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
09 / 19 / 2003

Transaction ID: SA11A1.23297

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Michael J. Lewis

Mailing Address 2809 Gatashead Drive

City State Zip Code  
Winston-Salem NC 27106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Lewis & Daggett Attorney

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
09 / 09 / 2003

Transaction ID: SA11A1.23356

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1250.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 / 81	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. Stephen B. Mackler</b>		Date of Receipt MM / DD / YYYY <b>08 / 22 / 2003</b>
Mailing Address <b>108 Kemp Road West</b>		Transaction ID: <b>SA11A1.23298</b>
City <b>Greensboro</b>	State <b>NC</b>	Zip Code <b>27410</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer Self-Employed	Occupation <b>Dentist</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)/441a-1)
Receipt For: <b>2002</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	Election Cycle-to-Date ▼ <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Bernard Mann</b>		Date of Receipt MM / DD / YYYY <b>08 / 27 / 2003</b>
Mailing Address <b>34 Kemp Road East</b>		Transaction ID: <b>SA11A1.23322</b>
City <b>Greensboro</b>	State <b>NC</b>	Zip Code <b>27410</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>Our State Magazine</b>	Occupation <b>Publisher</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)/441a-1)
Receipt For: <b>2002</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	Election Cycle-to-Date ▼ <b>600.00</b>	

Full Name (Last, First, Middle Initial) <b>C. David G. Merin, Jr.</b>		Date of Receipt MM / DD / YYYY <b>07 / 07 / 2003</b>
Mailing Address <b>313 Country Club Road</b>		Transaction ID: <b>SA11A1.23008</b>
City <b>Chapel Hill</b>	State <b>NC</b>	Zip Code <b>27514</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)/441a-1)
Receipt For: <b>2002</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	Election Cycle-to-Date ▼ <b>250.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>1250.00</b>
TOTAL This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 81  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
Ann B. McCormick

Mailing Address 900 W. Short Street

City State Zip Code  
Raleigh NC 27646

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Harratt Co. Schools Educator

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
07 / 08 / 2003

Transaction ID: SA11A1.23009

Amount of Each Receipt this Period  
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

**B.** Full Name (Last, First, Middle Initial)  
John F. McHair, III

Mailing Address 1244 Arbor Road #236

City State Zip Code  
Winston-Salem NC 27104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
09 / 17 / 2003

Transaction ID: SA11A1.23378

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

**C.** Full Name (Last, First, Middle Initial)  
John G. Madlin, Jr.

Mailing Address 1058 Kenleigh Circle

City State Zip Code  
Winston-Salem NC 27108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
09 / 08 / 2003

Transaction ID: SA11A1.23348

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

SUBTOTAL of Receipts This Page (optional) ..... **800.00**

TOTAL This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
Gene A. Miller

Mailing Address P.O. Box 668307

City State Zip Code  
Charlotte NC 28265

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Self-Employed

Occupation  
CPA

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
07 / 11 / 2003

Transaction ID: SA11A1.23138

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Stephen P. Millin

Mailing Address 33 Land's End Drive

City State Zip Code  
Greensboro NC 27408

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Smith Moore

Occupation  
Attorney

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
09 / 23 / 2003

Transaction ID: SA11A1.23427

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Betsy H. Mock

Mailing Address 1926 Wellington Road

City State Zip Code  
Burlington NC 27217

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Women's Resource Center

Occupation  
Program Director

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
07 / 25 / 2003

Transaction ID: SA11A1.23246

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)/441a-1)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **600.00**

TOTAL This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
James B. Morgan, Jr.  
Mailing Address P.O. Box 2331  
City State Zip Code  
Carolina Beach NC 28428  
FEC ID number of contributing federal political committee: **C**  
Name of Employer  
Legal Aid of NC Occupation  
Attorney  
Receipt For: 2002  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date   
225.00

Date of Receipt  
07 / 15 / 2003  
Transaction ID: SA11A1.23139  
Amount of Each Receipt this Period  
25.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(l)(4)441a-1)

**B.** Full Name (Last, First, Middle Initial)  
James F. Morgan  
Mailing Address P.O. Box 2756  
City State Zip Code  
High Point NC 27261  
FEC ID number of contributing federal political committee: **C**  
Name of Employer  
Morgan Herring et al Occupation  
Attorney  
Receipt For: 2002  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date   
500.00

Date of Receipt  
09 / 23 / 2003  
Transaction ID: SA11A1.23428  
Amount of Each Receipt this Period  
500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(l)(4)441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Barbara R. Morganstern  
Mailing Address 5802 Fleming Terrace Road  
City State Zip Code  
Greensboro NC 27410  
FEC ID number of contributing federal political committee: **C**  
Name of Employer  
Morganstern & Bonuomo PLLC Occupation  
Attorney  
Receipt For: 2002  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date   
500.00

Date of Receipt  
09 / 12 / 2003  
Transaction ID: SA11A1.23381  
Amount of Each Receipt this Period  
500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(l)(4)441a-1)

SUBTOTAL of Receipts This Page (optional) ..... **1025.00**  
TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
Darrel D. Mosca

Mailing Address P.O. Box 415

City State Zip Code  
Brown Summit NC 27214

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation  
Investor

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
09 / 12 / 2003

Transaction ID: SA11A1.23383

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**B.** Full Name (Last, First, Middle Initial)  
M. Jackson Nichols

Mailing Address 2501 Kenmore Drive

City State Zip Code  
Raleigh NC 27608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Allen & Pinnick Attorney

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
07 / 07 / 2003

Transaction ID: SA11A1.23018

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**C.** Full Name (Last, First, Middle Initial)  
Robert L. Page

Mailing Address 105 Willoughby Boulevard

City State Zip Code  
Greensboro NC 27408

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Replacements Ltd. CPA

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
03 / 19 / 2003

Transaction ID: SA11A1.23285

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

SUBTOTAL of Receipts This Page (optional) .....▶ **1000.00**

TOTAL This Period (last page this line number only) .....▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 91  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial)  
**A. Peter A. Pappas**

Mailing Address **7020 Ballentyme Court**

City **Charlotte** State **NC** Zip Code **28210**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Pappas Properties LLC** Occupation **Real Estate Developer**

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
**250.00**

Date of Receipt  
**07 / 07 / 2003**

Transaction ID: **SA11A1.23022**

Amount of Each Receipt this Period  
**250.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)  
**B. Peter G. Pappas**

Mailing Address **1707 Dunleith Way**

City **Greensboro** State **NC** Zip Code **27456**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Adams Kiserfer Hagan** Occupation **Attorney**

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
**500.00**

Date of Receipt  
**08 / 19 / 2003**

Transaction ID: **SA11A1.23287**

Amount of Each Receipt this Period  
**500.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)  
**C. Violette K. Phillips**

Mailing Address **P.O. Box 720**

City **Kernersville** State **NC** Zip Code **28349**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Phillips & Phillips** Occupation **Secretary**

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
**300.00**

Date of Receipt  
**07 / 16 / 2003**

Transaction ID: **SA11A1.23191**

Amount of Each Receipt this Period  
**100.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... **850.00**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
Susan H. Politt

Mailing Address: 407 N. Bloodworth Street

City: Raleigh State: NC Zip Code: 27604

FEC ID number of contributing federal political committee: **C**

Name of Employer: NC Prisoner Legal Service Occupation: Attorney

Receipt For: 2002  
 Primary  General  
 Other (specify):

Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 25 / 2003

Transaction ID: SA11A1.23224

Amount of Each Receipt this Period: 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1))

**B.** Full Name (Last, First, Middle Initial)  
Louis E. Puelko

Mailing Address: 301 Yadkin Drive

City: Raleigh State: NC Zip Code: 27609

FEC ID number of contributing federal political committee: **C**

Name of Employer: Retired Occupation: Retired

Receipt For: 2002  
 Primary  General  
 Other (specify):

Election Cycle-to-Date: 300.00

Date of Receipt: 07 / 10 / 2003

Transaction ID: SA11A1.23143

Amount of Each Receipt this Period: 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1))

**C.** Full Name (Last, First, Middle Initial)  
William R. Rand

Mailing Address: 5435 Adrian Road

City: Wilson State: NC Zip Code: 27896

FEC ID number of contributing federal political committee: **C**

Name of Employer: Retired Occupation: Retired

Receipt For: 2002  
 Primary  General  
 Other (specify):

Election Cycle-to-Date: 400.00

Date of Receipt: 07 / 08 / 2003

Transaction ID: SA11A1.23023

Amount of Each Receipt this Period: 200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1))

SUBTOTAL of Receipts This Page (optional) ▶

400.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (in Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
Paul A. Raiche

Mailing Address 1818 Craigmore Drive

City Charlotte State NC Zip Code 28228

FEC ID number of contributing federal political committee. **C**

Name of Employer Cozan & O'Connor Occupation Attorney

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 07 / 10 / 2003  
Transaction ID: SA11A1.23146  
Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
William L. Rihard, Jr.

Mailing Address 2408 Hobart Court

City Charlotte State NC Zip Code 28208

FEC ID number of contributing federal political committee. **C**

Name of Employer Parker Poe Adams Bernstein Occupation Attorney

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 07 / 11 / 2003  
Transaction ID: SA11A1.23148  
Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
T. Lamar Robinson, Jr.

Mailing Address 1310 Park Lane

City Gastonia State NC Zip Code 28052

FEC ID number of contributing federal political committee. **C**

Name of Employer Robinson & Wilson Occupation Attorney

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 07 / 14 / 2003  
Transaction ID: SA11A1.23151  
Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)/441a-1)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1250.00

TOTAL This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
Bradford K. Root

Mailing Address 3906 Starmount Drive

City State Zip Code  
Greensboro NC 27410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Dixon Odom PLLC CPA

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
08 / 19 / 2003

Transaction ID: SA11A1.23289

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Thomas W. Ross

Mailing Address 805 Wellington Road

City State Zip Code  
Winston-Salem NC 27106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Z. Smith Reynolds Foundation CEO

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 03 / 2003

Transaction ID: SA11A1.23324

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Amiel J. Rossabi

Mailing Address 108 Kemp Road East

City State Zip Code  
Greensboro NC 27410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Forman Rossabi Black P.A. Attorney

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 09 / 2003

Transaction ID: SA11A1.23350

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2000.00

TOTAL This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
Daton D. Ruffin

Mailing Address 2841 Galsworthy Drive

City Winston-Salem State NC Zip Code 27106

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 05 / 2003  
Transaction ID: SA11A1.23431  
Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**B.** Full Name (Last, First, Middle Initial)  
Hugh Sater

Mailing Address 202 North Avenue

City Beaufort State NC Zip Code 28516

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 07 / 02 / 2003  
Transaction ID: SA11A1.23028  
Amount of Each Receipt this Period 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**C.** Full Name (Last, First, Middle Initial)  
Paul Saperstein

Mailing Address 1001 Country Club Drive

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C**

Name of Employer Concept Plastics Inc. Occupation Business Owner

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 09 / 2003  
Transaction ID: SA11A1.23362  
Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**SUBTOTAL** of Receipts This Page (optional) .....▶ 1300.00

**TOTAL** This Period (last page this line number only) .....▶



**SCHEDULE A (FEC Form 3 )**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

A. Full Name (Last, First, Middle Initial)  
Michael A. Savitt  
Mailing Address 4505 Wilkes Street

City Raleigh State NC Zip Code 27609

FEC ID number of contributing federal political committee. C

Name of Employer Worldtek Travel Occupation Marketing/Sales Director

Receipt For: 2002  
 Primary  General  
 Other (specify) Election Cycle-to-Date 230.00

Date of Receipt 07 / 08 / 2003

Transaction ID: SA11A1.23027

Amount of Each Receipt this Period 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(A)-1)

B. Full Name (Last, First, Middle Initial)  
Arch K. Schoch, IV  
Mailing Address P.O. Box 1893

City High Point State NC Zip Code 27281

FEC ID number of contributing federal political committee. C

Name of Employer Schoch & Schoch Occupation Lawyer

Receipt For: 2002  
 Primary  General  
 Other (specify) Election Cycle-to-Date 500.00

Date of Receipt 08 / 27 / 2003

Transaction ID: SA11A1.23328

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(A)-1)

C. Full Name (Last, First, Middle Initial)  
Nelson Schwab, III  
Mailing Address 201 N. Tryon Street  
Suite 2450

City Charlotte State NC Zip Code 28202

FEC ID number of contributing federal political committee. C

Name of Employer Carousel Capital Occupation Partner

Receipt For: 2002  
 Primary  General  
 Other (specify) Election Cycle-to-Date 500.00

Date of Receipt 07 / 02 / 2003

Transaction ID: SA11A1.23029

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(A)-1)

SUBTOTAL of Receipts This Page (optional)

1060.00

TOTAL This Period (last page the line number only)

**SCHEDULE A (FEC Form 3 )**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. Carl Seager</b>		Date of Receipt 09 / 30 / 2003
Mailing Address: 70 Park Village Lane		Transaction ID: SA11A1.23487
City: Greensboro	State: NC Zip Code: 27455	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1)-(1))
Name of Employer: Seager Waterproofing Inc.	Occupation: Owner/President	
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B. Sarah S. Selfert</b>		Date of Receipt 07 / 08 / 2003
Mailing Address: 9511 McDougald Road		Transaction ID: SA11A1.23030
City: Broadway	State: NC Zip Code: 27605	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1)-(1))
Name of Employer: NC Court of Appeals	Occupation: Executive Assistant	
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>C. Stephen E. Shvitz</b>		Date of Receipt 08 / 19 / 2003
Mailing Address: 209 Manchester Place		Transaction ID: SA11A1.23295
City: Greensboro	State: NC Zip Code: 27410	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1)-(1))
Name of Employer: Triad Commercial Properties	Occupation: Real Estate	
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	1700.00
TOTAL This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 91  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

**A.** Full Name (Last, First, Middle Initial)  
George Cabell Shield, Sr.  
Mailing Address 5400 Meadow Haven Lane  
City State Zip Code  
Charlotte NC 28270  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Shield Property Company Real Estate  
Receipt For: 2002  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date 250.00  
Date of Receipt 07 / 10 / 2003  
Transaction ID: SA11A1.23155  
Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Martin L. Shatzberger  
Mailing Address 206 Pinedale Drive  
City State Zip Code  
Elon College NC 27244  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Retired Retired  
Receipt For: 2002  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date 250.00  
Date of Receipt 07 / 10 / 2003  
Transaction ID: SA11A1.23155  
Amount of Each Receipt this Period 60.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
G. Dee Smith  
Mailing Address 317 Sherwood Forest Road  
City State Zip Code  
Winston-Salem NC 27104  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Novant President/Forsyth Medical Center  
Receipt For: 2002  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date 750.00  
Date of Receipt 09 / 23 / 2003  
Transaction ID: SA11A1.23435  
Amount of Each Receipt this Period 750.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 1050.00  
TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3 )**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 81  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

**A.** Full Name (Last, First, Middle Initial)  
Shirley P. Spears

Mailing Address 506 Willoughby Boulevard

City Greensboro State NC Zip Code 27406

FEC ID number of contributing federal political committee.

Name of Employer Retired Occupation Retired

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date

Date of Receipt 09 / 02 / 2003  
Transaction ID: SA11A1.23328  
Amount of Each Receipt this Period   
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Douglas L. Stafford

Mailing Address 77 Bridlewood Place

City Concord State NC Zip Code 28025

FEC ID number of contributing federal political committee.

Name of Employer Lowe's Motor Speedway Occupation Executive VP

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date

Date of Receipt 07 / 10 / 2003  
Transaction ID: SA11A1.23160  
Amount of Each Receipt this Period   
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Carl J. Stewart Jr.

Mailing Address 283 West Main Street

City Gastonia State NC Zip Code 28052

FEC ID number of contributing federal political committee.

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date

Date of Receipt 09 / 23 / 2003  
Transaction ID: SA11A1.23437  
Amount of Each Receipt this Period   
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3 )**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 81

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial)

A. **Robert H. Stolz**

Mailing Address **2623 Sherwood Avenue**

City **Charlotte** State **NC** Zip Code **28207**

FEC ID number of contributing federal political committee. **C**

Name of Employer **The Hardwood Group Inc.** Occupation **Business Executive**

Receipt For: 2002  
 Primary  General  
 Other (specify) **500.00**

Date of Receipt

**07 / 15 / 2003**

Transaction ID: SA11A1.23182

Amount of Each Receipt this Period

**500.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)

Full Name (Last, First, Middle Initial)

B. **Alan W. Sutton**

Mailing Address **5400 Tory Hill**

City **Greensboro** State **NC** Zip Code **27410**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Hammond Electronics** Occupation **General Manager**

Receipt For: 2002  
 Primary  General  
 Other (specify) **500.00**

Date of Receipt

**09 / 12 / 2003**

Transaction ID: SA11A1.23386

Amount of Each Receipt this Period

**500.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)

Full Name (Last, First, Middle Initial)

C. **John Laker Tart**

Mailing Address **4264 US Highway 13 South**

City **Goldsboro** State **NC** Zip Code **27530**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2002  
 Primary  General  
 Other (specify) **250.00**

Date of Receipt

**07 / 10 / 2003**

Transaction ID: SA11A1.23183

Amount of Each Receipt this Period

**50.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)

SUBTOTAL of Receipts This Page (optional)

**1050.00**

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 91

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

**A.** Full Name (Last, First, Middle Initial)  
Emeline T. Taylor

Mailing Address 404 Quicksilver Court

City Greensboro State NC Zip Code 27455

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Consultant

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date 1000.00

Date of Receipt 09 / 03 / 2003

Transaction ID: SA11A1.23330

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
John A. Taylor

Mailing Address 811 Lankashire Road

City Winston-Salem State NC Zip Code 27108

FEC ID number of contributing federal political committee. C

Name of Employer Taylor Oil Company Occupation CEO

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date 500.00

Date of Receipt 09 / 30 / 2003

Transaction ID: SA11A1.23489

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Evelyn G. Teague

Mailing Address P.O. Box 10548

City Southport State NC Zip Code 28461

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date 250.00

Date of Receipt 07 / 07 / 2003

Transaction ID: SA11A1.23037

Amount of Each Receipt this Period 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

1600.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. William H. Terry</b>		Date of Receipt <b>07 / 10 / 2003</b>
Mailing Address <b>P.O. Box 67</b>		Transaction ID: <b>SA11A1.23165</b>
City <b>Davidson</b>	State <b>NC</b>	Zip Code <b>28036</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))
Receipt For: <b>2002</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	Election Cycle-to-Date <b>250.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Donald R. Vaughan</b>		Date of Receipt <b>09 / 23 / 2003</b>
Mailing Address <b>612 W. Friendly Avenue</b>		Transaction ID: <b>SA11A1.23439</b>
City <b>Greensboro</b>	State <b>NC</b>	Zip Code <b>27401</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>Self-Employed</b>	Occupation <b>Attorney</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))
Receipt For: <b>2002</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	Election Cycle-to-Date <b>250.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Clarence W. Walker</b>		Date of Receipt <b>07 / 07 / 2003</b>
Mailing Address <b>1047 Ardsley Road</b>		Transaction ID: <b>SA11A1.23042</b>
City <b>Charlotte</b>	State <b>NC</b>	Zip Code <b>28207</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>Kennedy Covington Lotbello Hickman</b>	Occupation <b>Attorney</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))
Receipt For: <b>2002</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	Election Cycle-to-Date <b>500.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>1000.00</b>
TOTAL This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

A. Full Name (Last, First, Middle Initial)  
Marvin Ward  
Mailing Address 641 Yorkshire Road

City State Zip Code  
Winston-Salem NC 27106

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired  
Receipt For: 2002  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date 250.00

Date of Receipt  
09 / 17 / 2003

Transaction ID: SA11A1.23388  
Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)

B. Full Name (Last, First, Middle Initial)  
Joseph E. Warner, III  
Mailing Address P.O. Box 10345

City State Zip Code  
Greensboro NC 27404

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Breslow Sterling Frost and Warner CPA/Attorney  
Receipt For: 2002  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date 1000.00

Date of Receipt  
09 / 17 / 2003

Transaction ID: SA11A1.23392  
Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)

C. Full Name (Last, First, Middle Initial)  
James B. Weeks  
Mailing Address 119 N. Greens Street  
Suite 100

City State Zip Code  
Greensboro NC 27401

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Law Ofc. of James B. Weeks Attorney  
Receipt For: 2002  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date 500.00

Date of Receipt  
09 / 17 / 2003

Transaction ID: SA11A1.23390  
Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)

SUBTOTAL of Receipts This Page (optional) 1750.00

TOTAL This Period (last page this line number only)



**SCHEDULE A (FEC Form 3 )**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 81

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

A. Full Name (Last, First, Middle Initial)

Edward I. Welger, Jr.  
Mailing Address P.O. Box 1095

City State Zip Code  
Charlotte NC 28201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Carolina Tractor Manager

Receipt For: 2002  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date  500.00

Date of Receipt

MM / DD / YYYY  
07 / 10 / 2003

Transaction ID: SA11A1.23170

Amount of Each Receipt this Period

500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

B. Full Name (Last, First, Middle Initial)

H. A. Wheeler  
Mailing Address P.O. Box 600

City State Zip Code  
Concord NC 28026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Lowe's Motor Speedway President & General Manager

Receipt For: 2002  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date  500.00

Date of Receipt

MM / DD / YYYY  
07 / 10 / 2003

Transaction ID: SA11A1.23172

Amount of Each Receipt this Period

500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

C. Full Name (Last, First, Middle Initial)

Gary B. Whitaker  
Mailing Address 840 Nokomis Court

City State Zip Code  
Winston-Salem NC 27106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Gary Whitaker PC Attorney

Receipt For: 2002  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date  500.00

Date of Receipt

MM / DD / YYYY  
08 / 30 / 2003

Transaction ID: SA11A1.23493

Amount of Each Receipt this Period

500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

SUBTOTAL of Receipts This Page (optional) ▶

1500.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 91

(check only one)

11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Barbara H. White

Mailing Address 7211 Windy Rush Road

City State Zip Code  
Charlotte NC 28226

FEC ID number of contributing federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date ▼  
250.00

Date of Receipt

MM / DD / YYYY  
07 / 21 / 2003

Transaction ID: SA11A1.23204

Amount of Each Receipt this Period

50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)441a-1)

Full Name (Last, First, Middle Initial)

B. Sue Donathan White

Mailing Address 1107 Sunset Drive

City State Zip Code  
Greensboro NC 27408

FEC ID number of contributing federal political committee.

C

Name of Employer  
Donathan Properties Inc.

Occupation  
Apartment Developer

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date ▼  
500.00

Date of Receipt

MM / DD / YYYY  
08 / 19 / 2003

Transaction ID: SA11A1.23293

Amount of Each Receipt this Period

500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)441a-1)

Full Name (Last, First, Middle Initial)

C. William H. White, Jr.

Mailing Address 1418 Gormly Circle

City State Zip Code  
Sanford NC 27330

FEC ID number of contributing federal political committee.

C

Name of Employer  
Carolina Women's Health Center

Occupation  
Physician

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date ▼  
300.00

Date of Receipt

MM / DD / YYYY  
07 / 11 / 2003

Transaction ID: SA11A1.23175

Amount of Each Receipt this Period

100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)441a-1)

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3 )**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 91	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A.** Full Name (Last, First, Middle Initial)  
**Roy H. Wiggins**

Mailing Address **4511 Croft Mill Lane**

City **Charlotte** State **NC** Zip Code **28226**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Attorney**

Receipt For: 2002  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**250.00**

Date of Receipt  
**07 / 10 / 2003**

Transaction ID: SA11A1.23177

Amount of Each Receipt this Period  
**250.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(441a-1))

**B.** Full Name (Last, First, Middle Initial)  
**Jane Butler Wilson**

Mailing Address **1068 East Kent Road**

City **Winston-Salem** State **NC** Zip Code **27104**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Excellbur** Occupation **Business Owner**

Receipt For: 2002  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**250.00**

Date of Receipt  
**09 / 30 / 2003**

Transaction ID: SA11A1.23495

Amount of Each Receipt this Period  
**250.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(441a-1))

SUBTOTAL of Receipts This Page (optional) .....	<b>500.00</b>
TOTAL This Period (last page this line number only) .....	<b>85950.00</b>

**SCHEDULE A (FEC Form 3 )**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 91	
	(check only one)	
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (in Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial)  
**A. Pender Co. Democratic Party**

Mailing Address **185 Raccoon Road**

City **Willard** State **NC** Zip Code **28478**

FEC ID number of contributing federal political committee. **C**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2002  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date ▼  
**500.00**

Date of Receipt  
**07 / 07 / 2003**

Transaction ID: SA11B.23503

Amount of Each Receipt this Period  
**500.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(441a-1))

SUBTOTAL of Receipts This Page (optional) .....	<b>500.00</b>
TOTAL This Period (last page this line number only) .....	<b>500.00</b>

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE 60/91	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

**A. Duke Energy Corporation PAC-Federal**

Full Name (Last, First, Middle Initial)  
Mailing Address **422 South Church Street  
PBD5D**

City **Charlotte** State **NC** Zip Code **28202**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
**1000.00**

Date of Receipt  
**07 / 28 / 2003**

Transaction ID: SA11C.23509

Amount of Each Receipt this Period  
**1000.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)

**B. Jefferson-Pilot Federal Good Government Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address **P.O. Box 21008**

City **Greensboro** State **NC** Zip Code **27420**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
**1250.00**

Date of Receipt  
**09 / 23 / 2003**

Transaction ID: SA11C.23510

Amount of Each Receipt this Period  
**250.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)

**C. Kinsey Campaign Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address **2334 Greenway Avenue**

City **Charlotte** State **NC** Zip Code **28204**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
**100.00**

Date of Receipt  
**07 / 10 / 2003**

Transaction ID: SA11C.23505

Amount of Each Receipt this Period  
**100.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)

**SUBTOTAL of Receipts This Page (optional)** ..... ▶ **1350.00**

**TOTAL This Period (last page this line number only)** ..... ▶

**SCHEDULE A (FEC Form 3 )**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE 61 / 91	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15			

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NAME OF COMMITTEE (in Full)  
**ELAINE MARSHALL FOR SENATE**

A. Full Name (Last, First, Middle Initial)  
**Patrick Cannon Campaign Fund**

Mailing Address **5435 Fernhill Road**

City **Charlotte** State **NC** Zip Code **28217**

FEC ID number of contributing federal political committee: **C**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: **2002**  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **250.00**

Date of Receipt  
**07 / 21 / 2003**

Transaction ID: **SA11C.23507**

Amount of Each Receipt this Period  
**250.00**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(B-1))

SUBTOTAL of Receipts This Page (optional) .....	<b>250.00</b>
TOTAL This Period (last page this line number only) .....	<b>1600.00</b>

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 / 91
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input checked="" type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial) A. <b>BedSouth</b>		Date of Receipt MM / DD / YYYY <b>08 / 08 / 2003</b>	
Mailing Address <b>P.O. Box 33009</b>		Transaction ID: SA14.23577	
City <b>Charlotte</b>	State <b>NC</b>	Zip Code <b>28243</b>	Amount of Each Receipt this Period <b>1.72</b>
FEC ID number of contributing federal political committee. <b>C</b>		Telephone Refund <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)/441a-1)	
Name of Employer	Occupation	Election Cycle-To-Date <b>898.92</b>	
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____			

SUBTOTAL of Receipts This Page (optional) .....	<b>1.72</b>
TOTAL This Period (last page this line number only) .....	<b>1.72</b>

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 63 / 91
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (in Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. ALLTEL</b>		Transaction ID: SB17.23512	
Mailing Address <b>P.O. Box 96019</b>		Date of Disbursement MM / DD / YYYY <b>07 / 09 / 2003</b>	
City <b>Charlotte</b>	State <b>NC</b>	Zip Code <b>28298</b>	Amount of Each Disbursement this Period <b>347.88</b>
Purpose of Disbursement Telephone Expense		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Transaction ID: SB17.23515	
Mailing Address <b>P.O. Box 9001310</b>		Date of Disbursement MM / DD / YYYY <b>07 / 24 / 2003</b>	
City <b>Louisville</b>	State <b>KY</b>	Zip Code <b>40290</b>	Amount of Each Disbursement this Period <b>12.12</b>
Purpose of Disbursement Telephone Expense		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Transaction ID: SB17.23516	
Mailing Address <b>P.O. Box 9001310</b>		Date of Disbursement MM / DD / YYYY <b>07 / 24 / 2003</b>	
City <b>Louisville</b>	State <b>KY</b>	Zip Code <b>40290</b>	Amount of Each Disbursement this Period <b>241.37</b>
Purpose of Disbursement Telephone Expense		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional) .....	<b>601.15</b>
TOTAL This Period (last page this line number only) .....	



**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 64 / 81
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

Full Name (Last, First, Middle Initial) A. AT&T		Transaction ID: SB17.23523	
Mailing Address P.O. Box 9001310		Date of Disbursement MM / DD / YYYY 08 / 29 / 2003	
City Louisville	State KY	Zip Code 40290	Amount of Each Disbursement this Period 250.11
Purpose of Disbursement Telephone Expense		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.63
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Full Name (Last, First, Middle Initial) B. AT&T		Transaction ID: SB17.23524	
Mailing Address P.O. Box 9001310		Date of Disbursement MM / DD / YYYY 08 / 29 / 2003	
City Louisville	State KY	Zip Code 40290	Amount of Each Disbursement this Period 12.19
Purpose of Disbursement Telephone Expense		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.63
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Full Name (Last, First, Middle Initial) C. AT&T		Transaction ID: SB17.23530	
Mailing Address P.O. Box 9001310		Date of Disbursement MM / DD / YYYY 09 / 22 / 2003	
City Louisville	State KY	Zip Code 40290	Amount of Each Disbursement this Period 12.19
Purpose of Disbursement Telephone Expense		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.63
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

SUBTOTAL of Disbursements This Page (optional) .....	274.49
TOTAL This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 65 / 91
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

**A. AT&T**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 9001310

City Louisville State KY Zip Code 40290

Purpose of Disbursement Telephone Expense  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2002  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB17.23532  
Date of Disbursement  
09 / 30 / 2003

Amount of Each Disbursement this Period  
308.31

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B. BB&T**

Full Name (Last, First, Middle Initial)  
Mailing Address 611 Oberlin Road

City Raleigh State NC Zip Code 27605

Purpose of Disbursement Bankcard Fee  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2002  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB17.23534  
Date of Disbursement  
07 / 15 / 2003

Amount of Each Disbursement this Period  
5.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C. BB&T**

Full Name (Last, First, Middle Initial)  
Mailing Address 611 Oberlin Road

City Raleigh State NC Zip Code 27605

Purpose of Disbursement Bankcard Fee  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2002  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB17.23535  
Date of Disbursement  
07 / 15 / 2003

Amount of Each Disbursement this Period  
5.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... 318.31

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 66 / 91
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

A. Full Name (Last, First, Middle Initial) BB&T		Transaction ID: SB17.23536 Date of Disbursement 07 / 21 / 2003	
Mailing Address 611 Oberlin Road		Amount of Each Disbursement this Period 5.00	
City Raleigh	State NC	Zip Code 27605	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Bank Service Charge		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

B. Full Name (Last, First, Middle Initial) BB&T		Transaction ID: SB17.23537 Date of Disbursement 08 / 15 / 2003	
Mailing Address 611 Oberlin Road		Amount of Each Disbursement this Period 17.38	
City Raleigh	State NC	Zip Code 27605	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Bankcard Fee		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

C. Full Name (Last, First, Middle Initial) BB&T		Transaction ID: SB17.23538 Date of Disbursement 08 / 15 / 2003	
Mailing Address 611 Oberlin Road		Amount of Each Disbursement this Period 7.45	
City Raleigh	State NC	Zip Code 27605	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Bankcard Fee		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	29.83
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 67 / 81
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T</b>		Transaction ID: SB17.23538 Date of Disbursement <b>08 / 21 / 2003</b>	
Mailing Address <b>611 Oberlin Road</b>		Amount of Each Disbursement this Period <b>19.80</b>	
City <b>Raleigh</b>	State <b>NC</b>	Zip Code <b>27605</b>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Bank Service Charge	Category/Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T</b>		Transaction ID: SB17.23540 Date of Disbursement <b>09 / 15 / 2003</b>	
Mailing Address <b>611 Oberlin Road</b>		Amount of Each Disbursement this Period <b>54.50</b>	
City <b>Raleigh</b>	State <b>NC</b>	Zip Code <b>27605</b>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Bankcard Fee	Category/Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T</b>		Transaction ID: SB17.23541 Date of Disbursement <b>09 / 15 / 2003</b>	
Mailing Address <b>611 Oberlin Road</b>		Amount of Each Disbursement this Period <b>5.00</b>	
City <b>Raleigh</b>	State <b>NC</b>	Zip Code <b>27605</b>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Bankcard Fee	Category/Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL of Disbursements This Page (optional)</b> .....	<b>79.30</b>
<b>TOTAL This Period (last page this line number only)</b> .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 68 / 91
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

A. Full Name (Last, First, Middle Initial) City of Raleigh		Transaction ID: SB17.23533 Date of Disbursement 09 / 30 / 2003	
Mailing Address P.O. Box 86057		Amount of Each Disbursement this Period 20.00	
City Charlotte	State NC	Zip Code 28296	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Fire Inspection Permit		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

B. Full Name (Last, First, Middle Initial) Mary Paul Craft		Transaction ID: SB17.23548 Date of Disbursement 07 / 18 / 2003	
Mailing Address 4658 Lakeland Road		Amount of Each Disbursement this Period 1828.83	
City Dublin	State VA	Zip Code 24084	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Fundraising Consulting		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

C. Full Name (Last, First, Middle Initial) Mary Paul Craft		Transaction ID: SB17.23554 Date of Disbursement 09 / 05 / 2003	
Mailing Address 4658 Lakeland Road		Amount of Each Disbursement this Period 1117.62	
City Dublin	State VA	Zip Code 24084	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Fundraising Consulting		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

SUBTOTAL of Disbursements This Page (optional) .....	2986.45
TOTAL This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 69 / 91
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. Mary Paul Craft</b>		Transaction ID: SB17.23580 Date of Disbursement <b>09 / 25 / 2003</b>	
Mailing Address <b>4658 Lakeland Road</b>		Amount of Each Disbursement This Period <b>1117.81</b>	
City <b>Dublin</b>	State <b>VA</b>	Zip Code <b>24084</b>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement <b>Fundraising Consulting</b>		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2002</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. dwd Software Development Corp.</b>		Transaction ID: SB17.23542 Date of Disbursement <b>07 / 18 / 2003</b>	
Mailing Address <b>P.O. Box 28629</b>		Amount of Each Disbursement This Period <b>4084.05</b>	
City <b>Raleigh</b>	State <b>NC</b>	Zip Code <b>27611</b>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement <b>Acct. Mgmt./Computer Services</b>		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2002</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>G. dwd Software Development Corp.</b>		Transaction ID: SB17.23517 Date of Disbursement <b>07 / 24 / 2003</b>	
Mailing Address <b>P.O. Box 28629</b>		Amount of Each Disbursement This Period <b>2950.00</b>	
City <b>Raleigh</b>	State <b>NC</b>	Zip Code <b>27611</b>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement <b>Acct. Mgmt./Computer Services</b>		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2002</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) .....	<b>8131.66</b>
TOTAL This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 70 / 91
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

A	Full Name (Last, First, Middle Initial) dwd Software Development Corp.	Transaction ID: SB17.23552
	Mailing Address P.O. Box 28629	Date of Disbursement MM / DD / YYYY 09 / 05 / 2003
City Raleigh	State NC	Zip Code 27611
Purpose of Disbursement Acct. Mgmt./Computer Services		Amount of Each Disbursement this Period 2483.60
Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B	Full Name (Last, First, Middle Initial) dwd Software Development Corp.	Transaction ID: SB17.23528
	Mailing Address P.O. Box 28629	Date of Disbursement MM / DD / YYYY 09 / 22 / 2003
City Raleigh	State NC	Zip Code 27611
Purpose of Disbursement Acct. Mgmt./Computer Services		Amount of Each Disbursement this Period 2510.00
Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C	Full Name (Last, First, Middle Initial) dwd Software Development Corp.	Transaction ID: SB17.23557
	Mailing Address P.O. Box 28629	Date of Disbursement MM / DD / YYYY 09 / 25 / 2003
City Raleigh	State NC	Zip Code 27611
Purpose of Disbursement Acct. Mgmt./Computer Services		Amount of Each Disbursement this Period 2483.60
Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	7477.20
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 71 / 81
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. Elaine F. Marshall</b>		Transaction ID: SB17.23547	
Mailing Address <b>1000 Keith Hills Road</b>		Date of Disbursement MM / DD / YYYY <b>07 / 18 / 2003</b>	
City <b>Lillington</b>	State <b>NC</b>	Zip Code <b>27546</b>	Amount of Each Disbursement this Period <b>1418.46</b>
Purpose of Disbursement Travel Exp.Reimb.	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: <b>NC</b>	District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Elaine F. Marshall</b>		Transaction ID: SB17.23518	
Mailing Address <b>1000 Keith Hills Road</b>		Date of Disbursement MM / DD / YYYY <b>07 / 24 / 2003</b>	
City <b>Lillington</b>	State <b>NC</b>	Zip Code <b>27546</b>	Amount of Each Disbursement this Period <b>138.97</b>
Purpose of Disbursement Travel Exp.Reimb.	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: <b>NC</b>	District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Hayden &amp; Associates</b>		Transaction ID: SB17.23513	
Mailing Address <b>3210 Cannon Street</b>		Date of Disbursement MM / DD / YYYY <b>07 / 18 / 2003</b>	
City <b>Columbia</b>	State <b>SC</b>	Zip Code <b>29205</b>	Amount of Each Disbursement this Period <b>8000.00</b>
Purpose of Disbursement Fundraising Consulting	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional) .....	<b>7558.42</b>
TOTAL This Period (last page this line number only) .....	



**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 72 / 81
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. Hayden &amp; Associates</b>		Transaction ID: SB17.23522	
Mailing Address <b>3210 Cannon Street</b>		Date of Disbursement <b>08 / 15 / 2003</b>	
City <b>Columbia</b>	State <b>SC</b>	Zip Code <b>29205</b>	Amount of Each Disbursement this Period <b>6000.00</b>
Purpose of Disbursement <b>Fundraising Consulting</b>	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2002</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Category/Type		

Full Name (Last, First, Middle Initial) <b>B. Hayden &amp; Associates</b>		Transaction ID: SB17.23527	
Mailing Address <b>3210 Cannon Street</b>		Date of Disbursement <b>09 / 22 / 2003</b>	
City <b>Columbia</b>	State <b>SC</b>	Zip Code <b>29205</b>	Amount of Each Disbursement this Period <b>6000.00</b>
Purpose of Disbursement <b>Fundraising Consulting</b>	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2002</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Category/Type		

Full Name (Last, First, Middle Initial) <b>C. Lasting Printing &amp; Graphics</b>		Transaction ID: SB17.23529	
Mailing Address <b>733 W. Johnson Street Lower Level</b>		Date of Disbursement <b>09 / 22 / 2003</b>	
City <b>Raleigh</b>	State <b>NC</b>	Zip Code <b>27603</b>	Amount of Each Disbursement this Period <b>927.37</b>
Purpose of Disbursement <b>Printing Expense</b>	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2002</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Category/Type		

SUBTOTAL of Disbursements This Page (optional) .....	<b>12927.37</b>
TOTAL This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 73 / 91
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. Richard T. McKay</b>		Transaction ID: SB17.23544	
Mailing Address (Fmr. Mountain Top Communications) PO Box 1727		Date of Disbursement 07 / 18 / 2003	
City Wilmington	State VT	Zip Code 05363	Amount of Each Disbursement this Period 2255.00
Purpose of Disbursement General Campaign Consulting	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Category/Type		

Full Name (Last, First, Middle Initial) <b>B. Richard T. McKay</b>		Transaction ID: SB17.23546	
Mailing Address (Fmr. Mountain Top Communications) PO Box 1727		Date of Disbursement 07 / 18 / 2003	
City Wilmington	State VT	Zip Code 05363	Amount of Each Disbursement this Period 5509.75
Purpose of Disbursement Media Consulting	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Category/Type		

Full Name (Last, First, Middle Initial) <b>C. Richard T. McKay</b>		Transaction ID: SB17.23551	
Mailing Address (Fmr. Mountain Top Communications) PO Box 1727		Date of Disbursement 09 / 05 / 2003	
City Wilmington	State VT	Zip Code 05363	Amount of Each Disbursement this Period 4746.13
Purpose of Disbursement Media Consulting	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Category/Type		

SUBTOTAL of Disbursements This Page (optional) .....	12509.88
TOTAL This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 74 / 91
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 18a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

Full Name (Last, First, Middle Initial) A. Richard T. McKay		Transaction ID: SB17.23558	
Mailing Address (Fmr. MountainTop Communications) PO Box 1727		Date of Disbursement 09 / 25 / 2003	
City Wilmington	State VT	Zip Code 05363	Amount of Each Disbursement this Period 4745.12
Purpose of Disbursement Media Consulting	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.63
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Category/Type		

Full Name (Last, First, Middle Initial) B. McKay Consulting Associates Inc.		Transaction ID: SB17.23548	
Mailing Address 123 Montclair Circle		Date of Disbursement 07 / 18 / 2003	
City Durham	State NC	Zip Code 27713	Amount of Each Disbursement this Period 487.70
Purpose of Disbursement Consulting/Voter Contact	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.63
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Category/Type		

Full Name (Last, First, Middle Initial) C. McKay Consulting Associates Inc.		Transaction ID: SB17.23553	
Mailing Address 123 Montclair Circle		Date of Disbursement 09 / 05 / 2003	
City Durham	State NC	Zip Code 27713	Amount of Each Disbursement this Period 598.05
Purpose of Disbursement Consulting/Voter Contact	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.63
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Category/Type		

SUBTOTAL of Disbursements This Page (optional) .....	5828.87
TOTAL This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 75 / 81
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. MurrayCom</b>		Transaction ID: SB17.23521	
Mailing Address <b>1124 Coatedale Road</b>		Date of Disbursement <b>08 / 15 / 2003</b>	
City <b>Columbia</b>	State <b>SC</b>	Zip Code <b>29209</b>	Amount of Each Disbursement this Period <b>2000.00</b>
Purpose of Disbursement <b>Computer Software Expense</b>		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Sprint</b>		Transaction ID: SB17.23519	
Mailing Address <b>P.O. Box 530503</b>		Date of Disbursement <b>08 / 08 / 2003</b>	
City <b>Atlanta</b>	State <b>GA</b>	Zip Code <b>30353</b>	Amount of Each Disbursement this Period <b>6.07</b>
Purpose of Disbursement <b>Telephone Expense</b>		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Sprint</b>		Transaction ID: SB17.23525	
Mailing Address <b>P.O. Box 530503</b>		Date of Disbursement <b>08 / 29 / 2003</b>	
City <b>Atlanta</b>	State <b>GA</b>	Zip Code <b>30353</b>	Amount of Each Disbursement this Period <b>6.08</b>
Purpose of Disbursement <b>Telephone Expense</b>		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) .....	<b>2012.15</b>
TOTAL This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 78 / 81
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (in Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. Carol Lee F. Strickler</b>		Transaction ID: SB17.23550 Date of Disbursement <b>07 / 18 / 2003</b>	
Mailing Address <b>667 E. Mountain Drive</b>		Amount of Each Disbursement this Period <b>2340.00</b>	
City <b>Fayetteville</b>	State <b>NC</b>	Zip Code <b>28306</b>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement <b>Management Consulting</b>	Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2002</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	
State: <b>District:</b>			

Full Name (Last, First, Middle Initial) <b>B. Carol Lee F. Strickler</b>		Transaction ID: SB17.23555 Date of Disbursement <b>09 / 05 / 2003</b>	
Mailing Address <b>667 E. Mountain Drive</b>		Amount of Each Disbursement this Period <b>1430.55</b>	
City <b>Fayetteville</b>	State <b>NC</b>	Zip Code <b>28306</b>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement <b>Management Consulting</b>	Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2002</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	
State: <b>District:</b>			

Full Name (Last, First, Middle Initial) <b>C. Carol Lee F. Strickler</b>		Transaction ID: SB17.23558 Date of Disbursement <b>09 / 25 / 2003</b>	
Mailing Address <b>667 E. Mountain Drive</b>		Amount of Each Disbursement this Period <b>1200.00</b>	
City <b>Fayetteville</b>	State <b>NC</b>	Zip Code <b>28306</b>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement <b>Management Consulting</b>	Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2002</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	
State: <b>District:</b>			

SUBTOTAL of Disbursements This Page (optional) .....	<b>4971.45</b>
TOTAL This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 77 / 91
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

Full Name (Last, First, Middle Initial) A. Carol Lee F. Strickler		Transaction ID: SB17.23550 Date of Disbursement 09 / 25 / 2003	
Mailing Address 667 E. Mountain Drive		Amount of Each Disbursement this Period 230.55	
City Fayetteville	State NC	Zip Code 28306	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Management Consulting	Category/Type		
Candidate Name	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. US Postmaster		Transaction ID: SB17.23511 Date of Disbursement 07 / 02 / 2003	
Mailing Address 311 New Bern Avenue		Amount of Each Disbursement this Period 100.00	
City Raleigh	State NC	Zip Code 27611	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Postage	Category/Type		
Candidate Name	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. US Postmaster		Transaction ID: SB17.23514 Date of Disbursement 07 / 24 / 2003	
Mailing Address 311 New Bern Avenue		Amount of Each Disbursement this Period 118.00	
City Raleigh	State NC	Zip Code 27611	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Box Rental	Category/Type		
Candidate Name	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional)	448.55
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 78 / 81
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. US Postmaster</b>		Transaction ID: SB17.23528	
Mailing Address <b>311 New Bern Avenue</b>		Date of Disbursement	
City <b>Raleigh</b>	State <b>NC</b>	Zip Code <b>27811</b>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement <b>Postage</b>	Category/Type		Amount of Each Disbursement this Period <b>592.00</b>
Candidate Name	Disbursement For: <b>2002</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. US Postmaster</b>		Transaction ID: SB17.23531	
Mailing Address <b>311 New Bern Avenue</b>		Date of Disbursement	
City <b>Raleigh</b>	State <b>NC</b>	Zip Code <b>27811</b>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement <b>BRM Permit Fee</b>	Category/Type		Amount of Each Disbursement this Period <b>150.00</b>
Candidate Name	Disbursement For: <b>2002</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) .....	<b>742.00</b>
TOTAL This Period (last page this line number only) .....	<b>66877.08</b>

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 79 / 91
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

A Full Name (Last, First, Middle Initial) Elaina F. Marshall	Transaction ID: SB19A,23581	
	Date of Disbursement MM / DD / YYYY 09 / 30 / 2003	
Mailing Address 1000 Keith Hills Road	Amount of Each Disbursement this Period 15000.00	
City Lillington State NC Zip Code 27548	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Loan Repayment	Category/ Type	<input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC District:		

SUBTOTAL of Disbursements This Page (optional) .....	15000.00
TOTAL This Period (last page this line number only) .....	15000.00



**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 80 / 81
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. Sally S. Cone</b>		Transaction ID: SB20A.23575 Date of Disbursement 09 / 17 / 2003	
Mailing Address 500 Country Club Drive		Amount of Each Disbursement this Period 250.00	
City Greensboro	State NC	Zip Code 27408	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Contribution Refund	Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Stanley F. Hammer</b>		Transaction ID: SB20A.23576 Date of Disbursement 09 / 30 / 2003	
Mailing Address 3301 Madison Avenue		Amount of Each Disbursement this Period 50.00	
City Greensboro	State NC	Zip Code 27403	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Contribution Refund	Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. David Schwartz</b>		Transaction ID: SB20A.23574 Date of Disbursement 07 / 24 / 2003	
Mailing Address 880 Highway 33		Amount of Each Disbursement this Period 150.00	
City Freehold	State NJ	Zip Code 07728	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Contribution Refund	Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	450.00
TOTAL This Period (last page this line number only)	450.00

**SCHEDULE C (FEC Form 3 )**  
**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

13a  
 13b

**NAME OF COMMITTEE (In Full)**  
ELAINE MARSHALL FOR SENATE

**Transaction ID:** SC/10.7868

**LOAN SOURCE Full Name (Last, First, Middle Initial)**  
Elaine F. Marshall, - Personal funds

**Election:**  
 Primary  
 General  
 Other (specify) ▼

**Mailing Address** 1000 Keith Hills Road

**City** Lenoir **State** NC **ZIP Code** 27548

<b>Original Amount of Loan</b>	<b>Cumulative Payment To Date</b>	<b>Balance Outstanding at Close of This Period</b>
16000.00	15000.00	1000.00

**TERMS**

**Date Incurred** MM/DD/YYYY: 08/08/2001

**Date Due** MM/DD/YYYY: / /

**Interest Rate** 0.00 % (apr)

**Secured:**  Yes  No

**List All Endorsers or Guarantors (if any) to Loan Source**

<b>Full Name (Last, First, Middle Initial)</b>	<b>Name of Employer</b>
<b>Mailing Address</b>	<b>Occupation</b>
<b>City</b> <b>State</b> <b>ZIP Code</b>	<b>Amount Guaranteed Outstanding:</b>
<b>Full Name (Last, First, Middle Initial)</b>	<b>Name of Employer</b>
<b>Mailing Address</b>	<b>Occupation</b>
<b>City</b> <b>State</b> <b>ZIP Code</b>	<b>Amount Guaranteed Outstanding:</b>
<b>Full Name (Last, First, Middle Initial)</b>	<b>Name of Employer</b>
<b>Mailing Address</b>	<b>Occupation</b>
<b>City</b> <b>State</b> <b>ZIP Code</b>	<b>Amount Guaranteed Outstanding:</b>
<b>Full Name (Last, First, Middle Initial)</b>	<b>Name of Employer</b>
<b>Mailing Address</b>	<b>Occupation</b>
<b>City</b> <b>State</b> <b>ZIP Code</b>	<b>Amount Guaranteed Outstanding:</b>

**SUBTOTALS This Period This Page (optional)** ▶ 1000.00

**TOTALS This Period (last page in this line only)** ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3 )**  
**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 82 / 91

FOR LINE NUMBER: (check only one)  13a  13b

NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

Transaction ID: SC/10.7869

LOAN SOURCE Full Name (Last, First, Middle Initial)  
Elaine F. Marshall, - Personal funds

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address 1000 Keith Hills Road

City Lillington State NC ZIP Code 27648

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	0.00	20000.00

TERMS

Date Incurred: MM/DD/YYYY (08/29/2001)

Date Due: MM/DD/YYYY

Interest Rate: 0.00 % (apr)

Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source		
Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Code	Amount Guaranteed Outstanding:	
Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Code	Amount Guaranteed Outstanding:	
Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Code	Amount Guaranteed Outstanding:	
Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Code	Amount Guaranteed Outstanding:	

SUBTOTALS This Period This Page (optional) ▶ 20000.00

TOTALS This Period (last page in this fine only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3 )**  
**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)  13a  
 13b

NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

Transaction ID: SC/10.7870

LOAN SOURCE Full Name (Last, First, Middle Initial)  
Elaine F. Marshall, - Personal funds

Mailing Address 1000 Keith Hills Road

City Lillington State NC ZIP Code 27548

Election:  
 Primary  
 General  
 Other (specify) ▼

Original Amount of Loan 20000.00  
Cumulative Payment To Date 0.00  
Balance Outstanding at Close of This Period 20000.00

TERMS

Date Incurred: MM/YY 09/12/2001  
Date Due: MM/DD/YYYY  
Interest Rate: 0.00 % (apr)  
Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source			Loan Source
Full Name (Last, First, Middle Initial)			Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)			Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)			Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)			Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding: [ ]

SUBTOTALS This Period This Page (optional) ..... ▶ 20000.00

TOTALS This Period (last page in this line only)... ▶ [ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3 )**  
**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)  13a  
 13b

NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

Transaction ID: SC/10.21301

LOAN SOURCE Full Name (Last, First, Middle Initial)  
Elaine F. Marshall, - Personal funds

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address 1000 Keith Hills Road

City Lenoir State NC ZIP Code 27548

Original Amount of Loan 34000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 34000.00
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TERMS

Date Incurred MM / DD / YYYY 07 / 08 / 2002	Date Due MM / DD / YYYY	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input type="checkbox"/> No
---	----------------------------	-------------------------------	--

List All Endorsers or Guarantors (if any) to Loan Source		Loan Source	
Full Name (Last, First, Middle Initial)	Mailing Address	Name of Employer	Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:	
Full Name (Last, First, Middle Initial)	Mailing Address	Name of Employer	Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:	
Full Name (Last, First, Middle Initial)	Mailing Address	Name of Employer	Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:	
Full Name (Last, First, Middle Initial)	Mailing Address	Name of Employer	Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:	

SUBTOTALS This Period This Page (optional) ..... 34000.00

TOTALS This Period (last page in this line only) ...

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3 )**

**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)  13a  
 13b

NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE** Transaction ID: SC/10.21286

LOAN SOURCE Full Name (Last, First, Middle Initial) Elaine F. Marshall, - Personal funds	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1000 Keith Hills Road	
City <u>Durham</u> State <u>NC</u> ZIP Code <u>27546</u>	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	0.00	50000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 08 / 21 / 2002	MM / DD / YYYY /   /	.00 % (apr)	<input type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional) .....	50000.00
TOTALS This Period (last page in this line only)...	<input style="width: 100%;" type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3 )**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

Transaction ID: SC10.22201

LOAN SOURCE Full Name (Last, First, Middle Initial)

Elaine F. Marshall, - Personal funds

Election:

Primary  
 General  
 Other (specify) ♥

Mailing Address 1000 Keith Hills Road

City Lillington State NC ZIP Code 27546

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000.00	0.00	30000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

MM/YY 08/29 2002 MM/DD/YYYY 0.0 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

SUBTOTALS This Period This Page (optional).....

30000.00

TOTALS This Period (last page in this line only)...

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3 )**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 67 / 91
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 13a <input checked="" type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)  
**ELAINE MARSHALL FOR SENATE**

Transaction ID: SC/10.22202

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Elaine F. Marshall, - Personal funds  Mailing Address 1000 Keith Hills Road  City Lillington State NC ZIP Code 27546	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
--	--

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	0.00	50000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 09 / 03 / 2002	MM / DD / YYYY	0.0 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ [ ] 50000.00

**TOTALS** This Period (last page in this line only)... ▶ [ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3 )**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)  13a  13b

NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

Transaction ID: SC/10.22203

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Elaine F. Marshall, - Personal funds

Mailing Address 1000 Keith Hills Road

City Lillington State NC ZIP Code 27546

Election:  
 Primary  
 General  
Other (specify) ▾

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	0.00	50000.00

**TERMS**

Date Incurred: MM/DD/YYYY 09/04/2002  
 Date Due: MM/DD/YYYY  
 Interest Rate: 0.0 % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....	50000.00
<b>TOTALS</b> This Period (last page in this line only)...	266000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3 )  
DEBTS AND OBLIGATIONS**

(Use separate  
schedule(s)  
for each  
numbered line)

FOR LINE NUMBER:  
(check only one)

8  
 10

**Excluding Loans**

NAME OF COMMITTEE (In Full)  
ELAINE MARSHALL FOR SENATE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Mary Paul Craft

Nature of Debt (Purpose):  
Fundraising Consulting

Mailing Address 4658 Lakeland Road

City State ZIP Code  
Dublin VA 24084

Outstanding Balance Beginning This Period

Transaction ID: SD10.22209

4064.06

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

0.00

4064.06

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
dwd Software Development Corp.

Nature of Debt (Purpose):  
Acct. Mgmt./Computer Services

Mailing Address P.O. Box 28829

City State ZIP Code  
Raleigh NC 27811

Outstanding Balance Beginning This Period

Transaction ID: SD10.22204

9031.25

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

0.00

9031.25

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Elaine F. Marshall

Nature of Debt (Purpose):  
Travel Exp. Reimb.

Mailing Address 1000 Keith Hills Road

City State ZIP Code  
Lillington NC 27548

Outstanding Balance Beginning This Period

Transaction ID: SD10.22205

1418.45

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

0.00

1418.45

0.00

1) SUBTOTALS This Period This Page (optional).....

0.00

2) TOTALS This Period (last page this line number only).....

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)...

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3 )**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate  
schedule(s)  
for each  
numbered line)

FOR LINE NUMBER:  
(check only one)  9  
 10

NAME OF COMMITTEE (in Full)  
ELAINE MARSHALL FOR SENATE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Richard T. McKay		Nature of Debt (Purpose): General Campaign Consulti- ng	
Mailing Address (Fmr. MountainTop Communications) PO Box 1727			
City	State	ZIP Code	
Wilmington	VT	05363	
Outstanding Balance Beginning This Period 2255.00		Transaction ID: SD10.22207	
Amount Incurred This Period 0.00	Payment This Period 2255.00	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Richard T. McKay		Nature of Debt (Purpose): Media Consulting	
Mailing Address (Fmr. MountainTop Communications) PO Box 1727			
City	State	ZIP Code	
Wilmington	VT	05363	
Outstanding Balance Beginning This Period 15000.00		Transaction ID: SD10.22208	
Amount Incurred This Period 0.00	Payment This Period 15000.00	Outstanding Balance at Close of This Period 0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor McKay Consulting Associates Inc.		Nature of Debt (Purpose): Consulting/Voter Contact	
Mailing Address: 123 Montclair Circle			
City	State	ZIP Code	
Durham	NC	27713	
Outstanding Balance Beginning This Period 1083.75		Transaction ID: SD10.22208	
Amount Incurred This Period 0.00	Payment This Period 1083.75	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)...	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE D (FEC Form 3 )**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate  
schedule(s)  
for each  
numbered line)

FOR LINE NUMBER:  
(check only one)  9  
 10

NAME OF COMMITTEE (in Full)  
ELAINE MARSHALL FOR SENATE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Carol Lee F. Strickler

Nature of Debt (Purpose):  
Management Consulting

Mailing Address 667 E. Mountain Drive

City State ZIP Code  
Fayetteville NC 28306

Outstanding Balance Beginning This Period

Transaction ID: SD10.22211

5202.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

0.00

5202.00

0.00

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	0.00
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)...	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

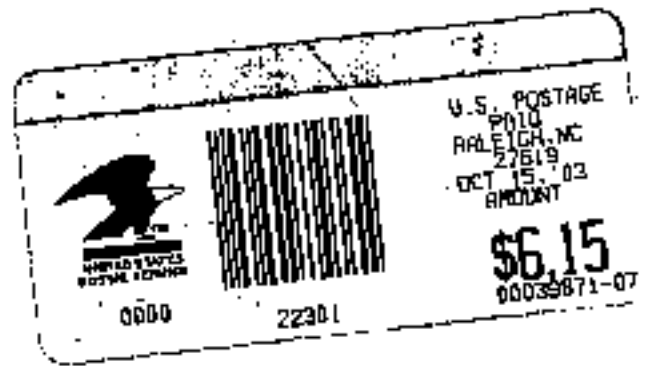
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SUPERINTENDENT  
HART BUILDING  
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# United States Senate

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          COMMISSION          

Date of Receipt

          OTHER (Specify):          

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          EXPRESS MAIL          

          FEDERAL EXPRESS          

          UPS          

          AIRBORNE EXPRESS          

Postmark and/or Date of Receipt

          FIRST CLASS MAIL          

Postmarked

          FAX (48-HOUR NOTICES)          

          FAX (FEC FORM #10 )          

          FAX (CAMPAIGN REPORT)          

Date of Receipt

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          RECEIVED FROM THE LEGISLATIVE RESOURCE  
          CENTER          

Date of Receipt

**RD**

Preparer

**10-21-03**

Date Prepared

23020430922  
~~23020430922~~

