

# COPY

## Disclosure Report Cover

Amendment  
 Yes  No

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

### 1. Committee Information

a. Full Name <u>Committee to Elect Debra Conrad-Shrader</u>		c. ID Number
b. Mailing Address (include City, State and Zip Code) <u>4004 Remberton Court Winston-Salem, NC. 27106</u>		d. Date Filed <u>4-18-06</u>
		e. Phone Number <u>336-760-9653</u>

2. Report Year <u>2006</u>	3. Period Start Date (mm/dd/yyyy) <u>1-1-06</u>	4. Period End Date (mm/dd/yyyy) <u>4-15-06</u>	5. Treasurer Full Name <u>Debra Conrad-Shrader</u>
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6. Type of Committee (Check one)		8. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Organizational	<input type="checkbox"/> State/County	<input type="checkbox"/> Referendum
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-election	<input checked="" type="checkbox"/> First Plus	<input type="checkbox"/> Final
<input type="checkbox"/> Soft Money Account		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Third Plus	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Political Party Financing Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Final	<input type="checkbox"/> Mid Year	
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Special	<input type="checkbox"/> Year End	
<input type="checkbox"/> Other:			<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	
9. Special Report Name				

10. Account Information		10. Account Information	
a. Financial Institution Full Name <u>BB+T</u>		a. Financial Institution Full Name	
b. Purpose <u>Campaign checking</u>	c. Code <u>1</u>	b. Purpose	c. Code
	d. Period Begin Balance <u>\$ 5707.95</u>		d. Period Begin Balance <u>\$</u>

### CERTIFICATION

I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct.

Debra Conrad-Shrader Debra Conrad-Shrader 4-18-06  
 Printed Name of Signer Signature of Appointed Treasurer Date

### FOR OFFICE USE ONLY

Date Received: 4-18-06  
 Date Postmarked: \_\_\_\_\_  
 Date Scanned: \_\_\_\_\_

Employee: Judy Spear  
 Employee: \_\_\_\_\_  
 Employee: \_\_\_\_\_

Delivery Method  
 Normal Mail  
 Registered Mail  
 Hand Delivered  
 Electronically Filed

# Detailed Summary

Amendment

Yes

No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
Committee to Elect Debra Conrad-Shrader	1st ofr Plus		
Start of Election Cycle: January 1, 2003		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start ends Dec 31, 2006		\$ 5707.95	\$ 6350.00
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 2070.00	\$ 3470.00
6) Contributions from Individuals (CRO-1210)		\$ 13200.00	\$ 18150.00
7) Contributions from Political Party Committees (CRO-1220)		\$	\$
8) Contributions from Other Political Committees (CRO-1230)		\$	\$
9) Loan Proceeds (CRO-1410)		\$	\$
10) Refunds/Reimbursements To the Committee (CRO-1240)		\$	\$
11) Other Receipt Sources (CRO-1250)			
11a) Interest on Bank Accounts (CRO-1250)		\$	\$
11b) Contributions from Not-for-Profit Organizations (CRO-1250)		\$	\$
11c) Outside Sources of Income (CRO-1250)		\$	\$
12) "Goods and Services" Contributions (CRO-1260)		\$	\$
13) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)		\$ 15,270.00	\$ 21,620.00
<b>EXPENDITURES</b>			
14) Disbursements (CRO-1310)			
14a) Operating Expenditures (CRO-1310)		\$ 4761.97	\$ 5329.02
14b) Contributions to Candidates/Political Committees (CRO-1310)		\$	\$
14c) Coordinated Party Expenditures (CRO-1310)		\$ 75.00	\$ 150.00
15) Loan Repayments (CRO-1420)		\$	\$
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$	\$
17) In-Kind Contributions (CRO-1510)		\$	\$
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)		\$ 4836.97	\$ 5479.02
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)		\$ 16140.98	\$ 16,140.98
<b>ADDITIONAL INFORMATION</b>			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$	
22) Debts and Obligations owed By the Committee (CRO-1610)		\$	
23) Debts and Obligations owed To the Committee (CRO-1620)		\$	
24) Account Transfers Within the Committee (CRO-1720)		\$	
25) Administrative Support (CRO-1710)		\$	\$
26) Forgiven Loans (CRO-1440)		\$	\$
27) 48-Hour Notice Reports Sum		\$	\$

**Disbursements**

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee to Elect Debra Conrad-Shrader					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Forsyth County Board of Elections 201 N. Chestnut St. W-S N.C. 27101					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 146.80
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	check #1009	Filing fee	2-13-06	\$ 146.80	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
W-S Journal P.O. Box 85151 W-S, N.C. 27285					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 137.80
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	check #1010	newspaper	2-25-06	\$ 137.80	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
U.S. Post Office Mt. Tabor Station W-S, N.C. 27106					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Cycle Sum to Date
					\$ 269.87
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	check #1012	stamps	2-28-06	\$ 117.87	
1	check #1016	stamps	3-13-06	\$ 78.00	
5. Total only this Page				\$ 510.47	
6. Total of ALL CRO-1310 Pages				\$ 4761.97	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

**Disbursements**

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee to Elect Debra Conrad-Shroder					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Superior Photographics 122-B Griffith Plaza Dr. W-S, N.C. 27103					
		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 223.63	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	check 1014	photos + CD	3-10-06	\$ 223.63	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
All the Above inc 5028 Brookmere W-S NC 27106					
		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 2855.18	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	ck 1013	signs/magnets	3-10-06	\$ 2719.34	
1	ck 1019	t-shirts	3-25-06	\$ 135.84	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
All the Above inc 5028 Brookmere W-S NC 27106					
		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 3354.52	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	check	letters + printing envelopes	3-27-06	\$ 499.34	
				\$	
5. Total only this Page				\$ 3578.15	
6. Total of ALL CRO-1310 Pages				\$ 4761.97	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

# Disbursements

Amendment

Yes  No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <span style="float:right"><input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove</span>					
a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>			b. Coordinated Committee Name		d. Comments
Allison Hilliard 5028 Brookmere Lane W-S NC 27106			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 20.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	check 1028	labor - stapling signs	3-21-06	\$ 20.00	
				\$	
4. Payee Information <span style="float:right"><input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove</span>					
a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>			b. Coordinated Committee Name		d. Comments
AT&T Universal P.O. Box 44167 Jacksonville, FL 32231-4167			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 325.44
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	CR# 1011	digital camera	2-27-06	\$ 325.44	
				\$	
4. Payee Information <span style="float:right"><input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove</span>					
a. Full Name, Mailing Address & Phone <i>(include city, state, &amp; zip)</i>			b. Coordinated Committee Name		d. Comments
Best Buy 1980 Griffith Rd W-S NC 27103			c. Level Registered (Specify)		e. Election Cycle Sum to Date
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					\$ 106.99
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	check	office phone	4-1-06	\$ 106.99	
				\$	
5. Total only this Page				\$ 452.43	
6. Total of ALL CRO-1310 Pages				\$ 4761.97	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

**Disbursements**

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee to Elect Debra Conrad-Shrader					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Clemmons Courier Clemmons Road Clemmons, NC 27018					
		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 192.38	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	check 1022	news AD	4-14-06	\$ 192.38	
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
CVS 3325 Robinhood Rd. W-S, NC. 27104					
		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 28.54	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
1	ck 1023	candy - campaign event	4-14-06	\$ 28.54	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify)		e. Election Cycle Sum to Date	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
5. Total only this Page				\$ 220.92	
6. Total of ALL CRO-1310 Pages				\$ 4761.97	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

**Disbursements**

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
Commi Htee to Elect Debra Conrad Shradler					
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input checked="" type="checkbox"/> Coordinated Party Expenditures	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
Forsyth County Republican men's club 2110 Cloverdale Ave W-5, NC. 27103			<b>c. Level Registered (Specify)</b>		<b>e. Election Cycle Sum to Date</b> \$ 25.00
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	ek 1008	dues	1-17-06	\$ 25.00	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
Forsyth County Republican Party 2110 Cloverdale Ave. W-5, NC. 27103			<b>c. Level Registered (Specify)</b>		<b>e. Election Cycle Sum to Date</b> \$ 50.00
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
1	ek #1017	fundraiser	3-14-06	\$ 50.00	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
			<b>c. Level Registered (Specify)</b>		<b>e. Election Cycle Sum to Date</b> \$
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	
				\$	
				\$	
<b>5. Total only this Page</b>				\$ 75.00	
<b>6. Total of ALL CRO-1310 Pages</b>				\$ 45.00	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>					
<i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>					
<i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

# Aggregated Contributions from Individuals

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable) Committee to Elect Debra Conrad-Shrader 2. ID Number

3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		1-9-06	\$ 25.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		1-9-06	\$ 20.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		2-7-06	\$ 50.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		3-17-06	\$ 50.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		3-17-06	\$ 25.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		3-17-06	\$ 25.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		3-17-06	\$ 50.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		3-23-06	\$ 100.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		3-23-06	\$ 50.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		3-23-06	\$ 100.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		3-23-06	\$ 100.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		3-23-06	\$ 50.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		3-23-06	\$ 100.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		3-23-06	\$ 100.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		3-24-06	\$ 50.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		3-27-06	\$ 100.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		3-27-06	\$ 50.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		3-27-06	\$ 100.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		3-27-06	\$ 25.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		3-28-06	\$ 100.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		3-28-06	\$ 25.00
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	1	check		3-29-06	\$ 75.00

4. Total only this Page \$ 1470

5. Total of ALL CRO-1205 Pages \$ 2070

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





# Contributions from Individuals

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Committee to Elect Debra Conrad-Shrader							
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Gerald Long 7631 Lasater Road Clemmons, N.C. 27012				owner			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				L.A. Reynolds Garden Showcase		\$ 2,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	check		1-25-06	\$ 1,000.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Michael Long 396 Hollinswood Winston-Salem, NC 27103				VP			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				L.A. Reynolds		\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	check		1-25-06	\$ 1,000.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Ken Long 1545 Double Creek Drive Lewisville, NC 27023				VP			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				L.A. Reynolds		\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	check		1-25-06	\$ 1,000.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 3,000.00	
5. Total of ALL CRO-1210 Pages						\$	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

**Contributions from Individuals**

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable) <i>Committee to Elect Debra Conrad-Shrader</i>						2. ID Number
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>John Cockleweese 2308 Robinhood Winston-Salem NC 27104</i>				b. Job Title/Profession <i>attorney</i>		d. Comments
				c. Employer's Name/Specific Field <i>Bell, Davis &amp; Pitt</i>		
				e. Election Cycle Sum to Date \$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	check		2-8-06	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Steve Williams 450 Sheffield Dr. W-S, NC - 27104</i>				b. Job Title/Profession <i>president</i>		d. Comments
				c. Employer's Name/Specific Field <i>Wilco Hess</i>		
				e. Election Cycle Sum to Date \$ 500.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	check		3-14-06	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>William Ayres 2865 Westeyan Lane W-S NC 27104</i>				b. Job Title/Profession <i>consultant</i>		d. Comments
				c. Employer's Name/Specific Field <i>Marietta Stone</i>		
				e. Election Cycle Sum to Date \$ 200.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	check		3-14-06	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 850.00	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					\$	

**Contributions from Individuals**

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable) Committee to Elect Debra Conrad-Shrader					2. ID Number	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Sheldon Storer 7961 Lasley Forest Rd Lewisville, NC 27023			b. Job Title/Profession owner		d. Comments	
			c. Employer's Name/Specific Field Topsider Homes		e. Election Cycle Sum to Date \$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	check		3-23-06	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Melvin Seales 1021 Brookmeade Dr. W.S. NC 27106			b. Job Title/Profession consultant		d. Comments	
			c. Employer's Name/Specific Field Right MGT.		e. Election Cycle Sum to Date \$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	check		3-23-06	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Jack Renner 341 Arboe Road Winston-Salem, NC 27104			b. Job Title/Profession Retired		d. Comments	
			c. Employer's Name/Specific Field		e. Election Cycle Sum to Date \$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	check		3-23-06	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 700.	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$	

**Contributions from Individuals**

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Committee to Elect Debra Conrad-Shrader							
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Adrienne Livengood-Baker 605 Spring Tree Ct. W-S NC 27104				housewife			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
						\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	check		3-23-06	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Mike Berry 217 Greenlawn Kernersville NC 27284				diesel mechanic			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				RJR		\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	check		3-23-06	\$ 1,000.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Barbara Berry 217 Greenlawn Kernersville, NC 27284				Sr. exec asst			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				RJR		\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	check		3-23-06	\$ 1,000.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 2250.00	
5. Total of ALL CRO-1210 Pages						\$	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

**Contributions from Individuals**

Pg 5 of 8

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable) <b>Committee to Elect Debra Conrad-Shrader</b>						2. ID Number
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Grover Shugart Jr 221 Jonestown Rd - W-S, N.C. 27104				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date
				Shugart Enterprises		
						\$ 2,000.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	check		3-24-06	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Don Angell 6000 Meadowbrook Mall Ct. Clemmons, NC 27012				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date
				Angell Group		
						\$ 1,000.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	personal check		3-24-06	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Vic How 2755 Old Town Club Rd. W-S, N.C.				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date
				How Lexus		
						\$
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	check		3-26-06	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 2500.00
5. Total of ALL CRO-1210 Pages						\$
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

**Contributions from Individuals**

Pg 6 of 8

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable) Committee to Elect Debra Conrad-Shrader 2. ID Number

3. Contributor Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)  
Lewis Hubbard  
2100 Clowdale Suite  
W-S, NC 27103

b. Job Title/Profession  
real estate

c. Employer's Name/Specific Field  
Hubbard Realty

d. Comments

e. Election Cycle Sum to Date  
 \$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	<u>1</u>	<u>personal check</u>		<u>3-28-06</u>	<u>\$ 100.00</u>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)  
Karen Carey  
1528 W. NW Blvd  
W-S, NC - 27104

b. Job Title/Profession  
lawyer

c. Employer's Name/Specific Field  
Womble Carlyle

d. Comments

e. Election Cycle Sum to Date  
 \$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	<u>1</u>	<u>check</u>		<u>3-28-06</u>	<u>\$ 500.00</u>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)  
Lida Hayes-Calvert  
957 Bryans Place Rd.  
W-S, N.C. - 27104

b. Job Title/Profession  
owner

c. Employer's Name/Specific Field  
S+L PAINTING

d. Comments

e. Election Cycle Sum to Date  
 \$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	<u>1</u>	<u>check</u>		<u>3-29-06</u>	<u>\$ 250.00</u>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page \$ 850.00

5. Total of ALL CRO-1210 Pages \$

(This line must be on line 6 of Detailed Summary Page CRO-1100)

**Contributions from Individuals**

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Committee to Elect Debra Conrad-Shrader							
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
John Fagg 403 Arbor Rd. W-S NC 27104				doctor			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				self Torsyth Plastic Surgeon		\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	check		3-29-06	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
David Shannon P.O. Box 1395 W-S NC. 27102				developer			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				DDL CASTLE		\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	personal check		4-1-06	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Richard Nash 1809 Virginia Rd. W-S NC 27104				retired			
				c. Employer's Name/Specific Field		e. Election Cycle Sum to Date	
				dentist		\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	check		4-5-06	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 600.00	
5. Total of ALL CRO-1210 Pages						\$	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							



**Contributions from Individuals**

Pg 8 of 8

Amendment  
 Yes  No

1. Committee Full Name (and Fund if applicable) Committee to Elect Debra Connor-Shrader 2. ID Number

3. Contributor Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)  
Tom Keith  
3450 Fraternity Church Rd.  
W-S, NC. 27127

b. Job Title/Profession  
DA

c. Employer's Name/Specific Field  
Yoesyth Co

d. Comments

e. Election Cycle Sum to Date  
\$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	<u>1</u>	<u>check</u>		<u>4-11-06</u>	<u>\$ 250.00</u>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)  
Hudnall Christopher  
2837 Reynolds Drive  
W-S NC. 27104

b. Job Title/Profession  
retired

c. Employer's Name/Specific Field

d. Comments

e. Election Cycle Sum to Date  
\$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	<u>1</u>	<u>check</u>		<u>4-11-06</u>	<u>\$ 200.00</u>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)  
Ed Broyhill  
525 N. Hawthorne Rd  
W-S, NC. 27104

b. Job Title/Profession  
self/owner

c. Employer's Name/Specific Field  
Broyhill Capital

d. Comments

e. Election Cycle Sum to Date  
\$ 2000.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	<u>1</u>	<u>check</u>		<u>4-14-06</u>	<u>\$ 2000.00</u>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page \$ 2450.00

5. Total of ALL CRO-1210 Pages \$

(This line must be on line 6 of Detailed Summary Page CRO-1100)