

Detailed Summary

1. Name of Committee or Fund		2. Type of Report		3. ID Number	
JACK TALBERT CFPS		SECOND QUARTER			
Start of Election Cycle: January 1, 2002		Total this Period	Total this Election Cycle	For Office Use Only	
4) Cash on Hand at Start of Election Cycle			\$ -		
5) Cash on Hand at Start of Present Reporting Period		\$ 446.03			
RECEIPTS					
6) Contributions from Individuals	(CRO-1210)	\$ 800.00	\$ 1575.00		
7) Contributions from Political Party Committees	(CRO-1220)	\$ -	\$ -		
8) Contributions from Other Political Committees	(CRO-1230)	\$ -	\$ -		
9) Loan Proceeds	(CRO-1410)	\$ -	\$ 5900.00		
10) Refunds & Reimbursements to Committee	(CRO-1240)	\$ -	\$ -		
11) Other Receipt Sources	(CRO-1250)				
11a) Interest on Bank Accounts REVERSAL OF BANK CHGS	(CRO-1250)	\$ 6.00	\$ -6.00		
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$ -	\$ -		
11c) Outside Sources of Income	(CRO-1250)	\$ -	\$ -		
12) TOTAL RECEIPTS (Add lines 6, 7, 8, 9, 10, 11a, 11b, and 11c)		\$ 800.00	\$ 7481.00		
EXPENDITURES					
13) Disbursements	(CRO-1310)				
13a) Operating Expenditures	(CRO-1310)	\$ 146.26	\$ 6381.23		
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ -	\$ -		
13c) Coordinated Party Expenditures	(CRO-1310)	\$ -	\$ -		
14) Loan Repayments	(CRO-1420)	\$ -	\$ -		
15) Refunds from Committee	(CRO-1320)	\$ -	\$ -		
16) In-Kind Contributions	(CRO-1510)	\$ -	\$ -		
17) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, and 16)		\$ 146.26	\$ 6381.23		
18) Cash on Hand at End of Reporting Period (For this Period, add lines 5 and 12 together, then subtract line 17) (For this Election Cycle, add lines 4 and 12 together, then subtract line 17)		\$ 1099.77	\$ 1099.77		
Additional Information					
19) Non-Monetary Gifts Given to Committees	(CRO-1330)	\$ -			
20) Outstanding Loans (including ones from other campaigns)	(CRO-1430)	\$ 5900.00			
21) Debts and Obligations owed BY the Committee	(CRO-1610)	\$ -			
22) Debts and Obligations owed TO the Committee	(CRO-1620)	\$ -			
23) Parent Entity's Administrative Support	(CRO-1710)	\$ -			

Contributions from INDIVIDUALS

1. Name of Committee or Fund				2. ID Number			
JACK TALBERT CFPS							
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	SHERY G. MEWBORN 320 ATKINSON RD HOLLYRIDGE, NC 28445 1-900-328-9911	CFPS	#2763 CHECK	5-28-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$
				j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$ 100.00	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Laurie M. Lefler 749 Cockle St. Surf City, NC 28445 1-910-328-1290	CFPS	#4793 CHECK	5-21-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$
				j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$ 100.00	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Wilma F. Lea 84 Country Club Dr. Hampstead, NC 28443 1-910-270-2588	CFPS	#2049 CHECK	6-8-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$
				j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$ 100.00	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Jean Talbert 668 Hughes Rd. Hampstead, NC 28443 1-910-270-3873	CFPS	#0506 CHECK	6-6-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 500.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$
				j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$ 500.00	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
					<input type="checkbox"/>	<input type="checkbox"/>	\$
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$
				j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		k. Election Cycle Sum to Date \$	
4. Total only this Page							\$ 800.00
5. Total of ALL CRO-1210 Pages (only show on last page)							\$
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

Other Receipt Sources

1. Name of Committee or Fund				2. ID Number	
JACK TALBERT CFPC					
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>					
Interest		Contributions from Not-for-Profit Organizations		Outside Sources of Income	
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
	FIRST CITIZENS BANK US HWY 17 N. HAMPS TEAD, N.C. 28443	CFPS	STAFF CRO-17	6-6-02	\$ 6.00 \$ \$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>		h. If Not-for-Profit, list Fed ID #:	
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
					\$ \$ \$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>		h. If Not-for-Profit, list Fed ID #:	
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
					\$ \$ \$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>		h. If Not-for-Profit, list Fed ID #:	
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
					\$ \$ \$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>		h. If Not-for-Profit, list Fed ID #:	
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
					\$ \$ \$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>		h. If Not-for-Profit, list Fed ID #:	
4. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. Amount
					\$ \$ \$
f. If Outside Source of Income, explain:		g. If Amendment, choose change type: Add <input type="checkbox"/> Delete <input type="checkbox"/>		h. If Not-for-Profit, list Fed ID #:	
5. Total only this Page					\$ 6.00
6. Total of ALL CRO-1250 Related Pages <i>(only show on last page)</i>					\$
<i>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</i>					
<i>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</i>					
<i>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</i>					

Disbursements

1. Name of Committee or Fund						2. ID Number		
JACK TALBERT CFPS								
3. Type of Disbursement (Please use separate CRO-1330 forms for each type of Disbursements.)								
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures				
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	ALPHA GRAPHICS 120 RACINE DRIVE WILMINGTON, NC 28403 1-910-392-0800			200 HANDOUTS	#1011	CHECK	4-24-02	\$ 40.81
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date		\$
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	BENS ADVERTISING SPECIALTIES 1171 OLD MAPLE HILL RD. N. MAPLE HILL, NC 28454 1-910-259-2423			250 BALLONS	#1012	CHECK	5-13-02	\$ 91.45
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date		\$
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	FIRST CITIZENS BANK & TRUST CO 15340 US HWY. 17. N HAMPSTEAD, N.C. 28443 1-910-270-4407			BANK CHARGES		ACCT. DRAFT	5-31-02	\$ 6.00
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date		\$
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
								\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date		\$
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
								\$
b. If Contribution to County Committee, specify:		c. If Coordinated Party Expense, list office:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date		\$
5. Total only this Page						\$ 138.26		
6. Total of ALL CRO-1310 Related Pages (only show on last page)						\$		
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)								
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)								
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)								

Outstanding Loans

1. Name of Committee or Fund		2. ID Number		
JACK TALBERT CFPS				
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate
	JACK TALBERT 668 HUGHES RD HAMPSTEAD, NC 28443 1-900-270-3510	4-22-02	6-30-02	6 %
		e. Job Title/Profession	f. Employer's Name/Specific Field	
		CANADATE		
		g. Security Pledged		
			\$ 5900 ⁰⁰	
i. Loan Balance				
\$ 5900 ⁰⁰				
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate
				%
	e. Job Title/Profession	f. Employer's Name/Specific Field		h. Original Loan Amount
	g. Security Pledged			\$
				i. Loan Balance
\$				
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate
				%
	e. Job Title/Profession	f. Employer's Name/Specific Field		h. Original Loan Amount
	g. Security Pledged			\$
				i. Loan Balance
\$				
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate
				%
	e. Job Title/Profession	f. Employer's Name/Specific Field		h. Original Loan Amount
	g. Security Pledged			\$
				i. Loan Balance
\$				
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				
3. Lender	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Start Date (mm/dd/yyyy)	c. End Date (mm/dd/yyyy)	d. Interest Rate
				%
	e. Job Title/Profession	f. Employer's Name/Specific Field		h. Original Loan Amount
	g. Security Pledged			\$
				i. Loan Balance
\$				
j. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete				
4. Total only this Page				\$ 5900 ⁰⁰
5. Total of ALL CRO-1430 Pages <small>(only show on last page)</small>				\$
<small>(This line must be on line 20 of Detailed Summary Page CRO-1100)</small>				