

To be Used by Committees to Report Contributions of \$1,000 or more

1. Committee Information

a. Full Name		c. ID Number	
Baldwin for Commissioner Committee		3712764	
b. Mailing Address (include City, State and Zip Code)		d. Report Date	
2217 Westover Drive Winston-Salem, NC 27103		7/20/2004	
		e. Phone Number	
		336-724-5869	

2. Contribution Information

a. Full Name, Mailing Address & Phone (include city, state, and zip)		<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	a. Full Name, Mailing Address & Phone (include city, state, and zip)		<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Don Angell 3819 Country Club Road Winston-Salem, NC 27104					

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b. Type of Contributor

Individual (if checked, must specify b2 and b3)
 Political Party
 Other Political Committee (if checked, must specify b1)
 Not-for-Profit (if checked, must specify b4)
 Other Source: _____

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Individual (if checked, must specify b2 and b3)
 Political Party
 Other Political Committee (if checked, must specify b1)
 Not-for-Profit (if checked, must specify b4)
 Other Source: _____

b1. Type of Committee

Federal County: Forsyth
 State Municipality: _____

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Federal County: _____
 State Municipality: _____

b2. Job Title/Profession	b4. Federal ID Number	b2. Job Title/Profession	b4. Federal ID Number
Owner	N/A		
b3. Employer's Name/Specific Field	c. Form of Payment	b3. Employer's Name/Specific Field	c. Form of Payment
Angell Group	Check		
d. Date (mm/dd/yyyy)	f. Amount	d. Date (mm/dd/yyyy)	f. Amount
7/19/2004	\$ 1,000.00		\$
e. Account Code	g. Election Cycle Sum to Date	e. Account Code	g. Election Cycle Sum to Date
1	\$ 1,000.00		\$

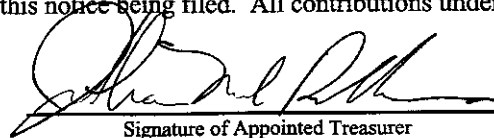
3. Total Contributions THIS Page (sum all the '2f' entries on this page)	\$ 1,000.00
4. Total Contributions ALL Pages (if multi-page, only list on page 1)	\$ 1,000.00

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, correct, and the contributions were received no more than 48 hours prior to this notice being filed. All contributions under \$1,000 will be reported on the next scheduled filing report.

Jonathan Neal Robbins

Printed Name of Signer



Signature of Appointed Treasurer

7/20/2004

Date