Do not use this form to update information must be signed and submitted along with other detailed forms.									
1. Committee Information									
a. Full Name							c. ID Number		
Committee to Elect J	ames G. McClue III								
b. Mailing Address (inclu	d. Date Filed								
501 Grandview Graham, NC, 27253	1/29/2016								
Granam, 1, 0, 2, 200	e. Phone Number								
* * * * * * * * * * * * * * * * * * *	336-266-2802								
2. Report Year	l Name								
2015	10/20/2015		12/3	1/2015		James Griffin Mo	cClure III		
6. Type of Committe	e (Check One)	9. Typ	e of Report	(c	heck o	nly one type of repor	t from one category)		
Candidate Campaig	gn Party	Municip	pal		State/	County	Referendum		
PAC	Referendum		Organizational			Organizational	Organizational		
Independent Expenditure Legal Expense Fun	Joint Fundraiser		Thirty-five day	′		Quarterly	Pre-referendum		
7. Type of Fund	(if applicable, check one)		Pre-primary		П	First	Final		
"Booster Fund"	(y oppromoto, check one)		Pre-election		H	Second	Supplemental Final		
Building Fund			Pre-runoff		П	Third	Annual		
			Semi-annual			Fourth	Special		
			Mid Year			Semi-annual			
Other:		\boxtimes	Year End			Mid Year	10. Special Report Name		
			Final			Year End			
8. Number of Fundra	aisers this Report		Special			Final			
						Special			
11. Account Informa	tion			11. Ac	count	Information			
a. Financial Institution Fu	ıll Name					stitution Full Name			
Wells Fargo Bank	· ·								
b. Purpose	c. Account Code			b. Purp	ose		c. Account Code		
Campaign	1								
	d. Period Begin Balance	2					d. Period Begin Balance		
	\$ 2457.55						\$		
CERTIFICATION									
I certify that the Com							3, & 22D-22M of Chapter 163 of s. I further certify that this report		
	correct and that I have been						s. Francie certify that this report		
J. Griffin Mc							1/29/2016		
	Printed Name of Signer		Si	ignature o	of Appoi	nted Treasurer	Date		
FOR OFFICE USE ON	NLY / /				/	711			
Date Received:	1/29/16		Employee:				Delivery Method Normal Mail		
Date Postmarked			Employee:				Registered Mail Hand Delivered		
Date Scanned:	2/8/16		Employee:			1G	Electronically FiledSigner has not received		
Date Data Entere	d:		Employee:				mandatory training		
Please Note: This							ress, treasurer, assistant treasurer,		
2	custodia You must amend the Stater					t information. A-E) to make commit	ttee changes.		

Amendment

Disclosure Report Cover

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

1. Committee Full Name (and Fund if applicable)		3. ID	Number	
Committee to Elect James G. McClure	Year End Report			
Start of Election Cycle: January 1,	2012	Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start		\$ 2457.55	\$	0
RECEIPTS				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 30	\$	364
6) Contributions from Individuals	(CRO-1210)	\$ 675	\$	7050
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				
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$	
11b) Contributions from Not-for-Profit Organizat	ions <i>(CRO-1250)</i>	\$	\$	
11c) Outside Sources of Income	(CRO-1250)	\$	\$	
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$)	\$	
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$	79
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 1	1c, 11d and 11e)	\$ 705	\$	7414
<u>EXPENDITURES</u>				
13) Disbursements				
13a) Operating Expenditures	(CRO-1310)	\$ 3160.46	\$	7401.91
13b) Contributions to Candidates/Political Commi	ttees (CRO-1310)	\$	\$	
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$	
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$	
15) Loan Repayments	(CRO-1420)	\$	\$	
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$	
17) In-Kind Contributions	(CRO-1510)	\$	\$	10
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14,	15, 16 and 17)	\$ 3160.46	\$	7411.91
19) Cash on Hand at End (Add lines 4 and 12 together, then such	btract line 18)	\$ 2.09	\$	2.09
ADDITIONAL INFORMATION			NAME OF THE OWNER, WHEN	
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$		
21) Outstanding Loans (incl. ones from other campaig	ns) (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	(CRO-2200)	\$	\$	
28) Contributions to be Refunded	(CRO-1215)	\$	\$	

Amendment

Aggregated Contributions from Individuals

Page

of

Yes

Amendment

No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable) Committee to Elect James G. McClure III									
3. Co	ntributor Infor								
a. Amo		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount			
	Add	1	Check		11/13/2015	\$ 30			
	Remove				11/15/2015	Ψ 30			
ᆜ	Add					\$			
<u> </u>	Remove								
<u> </u>	Add Remove	\dashv				\$			
+	Add								
一	Remove	-				\$			
一	Add								
	Remove					\$			
	Add					\$			
	Remove					D			
	Add					\$			
<u> </u>	Remove		1.04						
<u> </u>	Add	_				\$			
<u> </u>	Remove Add					<u> </u>			
Η-	Remove	-				\$			
ᅢ	Add								
H	Remove	_				\$			
Ħ	Add				-				
Ħ	Remove					\$			
	Add					\$			
	Remove					3			
<u> </u>	Add	_				\$			
<u> </u>	Remove					Ψ			
<u> </u>	Add	_				\$			
井	Remove Add								
H -	Remove	\dashv				\$			
	Add					-			
H	Remove					\$			
Ħ	Add								
	Remove	7				\$			
	Add					\$			
	Remove					Φ			
<u></u>	Add	_				\$			
ᆜ	Remove					<u> </u>			
片	Add					\$			
<u>H</u>	Remove Add	 							
\dashv	Remove	-				\$			
H	Add								
	Remove					\$			
	otal only this				\$	30			
5. To	otal of ALL (CRO-1205 F	Pages		\$	30			
(This line must be on line 5 of Detailed Summary Page CRO-1100)									

		m Individuals	Φ.Ε.	Pg			Yes	No
The second second second second second second		(and Fund if applica		0 or contributions und	ier \$50 if form CF	2. ID Nui		
	ee to Elect James		<i>bic)</i>			2. 10 1(0)		
3. Contr	ibutor Informatio	on		Add Re	move			
a. Full Nar	ne, Mailing Address	& Phone		b. Job Title/Profession	d. Comments			
(include	city, state, & zip)			Teacher (Retired)				
Micki P.								
	nford Road			c. Employer's Name/S				
336-226-	NC, 27253			Graham Middle So	cnool	e Election	Sum to Date	
330-220-	0020							
						\$	500	
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	1	Check		10/31/2		2015	\$	300
							\$	
							\$	
3. Contr	ibutor Informatio	on		Add Re	move			
a. Full Nar	ne, Mailing Address	& Phone		b. Job Title/Profession	d. Commen	its		
	city, state, & zip)			Retired Educator				
Karen Jar 427 Gree				a Employaria Nama/Sr	nosific Field			
	NC, 27253			c. Employer's Name/Sp ABSS	pecific Field			
336-578-				ABSS		e. Election S	Sum to Date	
						\$	50	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Lind Description	j. Date (mm/dd/y		k. Amount	
	1	Check			10/21/2	/2015 \$		50
							\$	
							\$	
3 Contr	ibutor Informatio)n		Add Re	move			
A SECTION ASSESSMENT OF THE	ne, Mailing Address			b. Job Title/Profession		d. Commen	ıts	
	city, state, & zip)			Doctor				
Robert Ja								
427 Gree				c. Employer's Name/Sp				
	NC, 27253			Retired Private Pra	actice	a Flaction (Sum to Date	
336-578-	-84 / 0							
						\$	50	
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	1	Check			10/21/2	2015	\$	50
							\$	
				~			\$	
West Commercial Commer	l only this Pag					\$		400
5. Tota	l of ALL CRO	-1210 Pages				•		675

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

675

\$

Amendment

		n Individuals		Pg		the same of the sa	Amendment Ves	No No
Use this:	form to report indi	vidual contributions of	over \$50	0 or contributions und	ler \$50 if form CR	O 1205 is no	ot used	
1. Comn	nittee Full Name (and Fund if applica	ble)			2. ID Nun	nber	
Committ	ee to Elect James	G. McClure III					246-33-9770	
3. Contr	ibutor Informatio	on		Add Re	move			
a. Full Name, Mailing Address & Phone				b. Job Title/Profession		d. Commen	ts	
(include city, state, & zip)				Behavior Analyst				
Brenn Li	nens					11		
3119 Ma	ttie Florence Drive	e		c. Employer's Name/S	pecific Field			
	NC, 27253			Developmental Pa	thways			
919-360-	0827					e. Election S	Sum to Date	
					\$ 75			
	I	T	Т		T			
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/y	yyy)	k. Amount	
	1	Check			10/23/2	2015	\$	75
							\$	
							\$	
3. Contr	ibutor Informatio)n		Add Re	move			
a. Full Name, Mailing Address & Phone				b. Job Title/Profession		d. Commen	ts	
(include	city, state, & zip)			Attorney at Law				
Phillip M	loseley							
1442 Old Coach Road				c. Employer's Name/S	pecific Field			
	NC, 27253			Holt, Longest, Wa	ll, Blaetz &			
336-226-	4353			Moseley	e. Election S	Sum to Date		
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Description	j. Date (mm/dd/y	yyy)	k. Amount	
	1	Check			10/20/2	2015	\$	100
							\$	
							\$	
	ibutor Informatio				move			
	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Commen	ts	
	city, state, & zip)			President/Retail Sa	ales			
	iffin McClure III							
	dview Drive			c. Employer's Name/Sp				
	NC, 27253			Green & McClure	Furniture Co.	771 11 6		
336-266-	2802					e. Election S	Sum to Date	
						\$	410	
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Description	j. Date (mm/dd/y	yyy)	k. Amount	
	1	Check			10/21/2	2015	\$	100
							\$	
							\$	

4. Total only this Page

5. Total of ALL CRO-1210 Pages

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

275

675

\$

\$

	ents report expenditures coordinated party ex		ee for; operating exp	Pg enses,	1 of contributions to	<u>4</u> candidat	Amendment Yes e/political		No
	Full Name (and Fun	···	· · · · · · · · · · · · · · · · · · ·	-	·····		2. ID Number		
		<u></u>						-	
3. Type of Disb	ursement (Plea	se use separate C	RO-1310 forms for	each t	ype of Disburser	nent.)			
Operating I	Expenses	Contributions to Car	ndidates/Political Commit	tees		oordinated	Party Expenditures		
4. Payee Inform	nation		Add		Remove	,			
a. Full Name, Mail	ing Address & Phone		b. Coordinated Comm	ittee N	ame	d. Com	ments		
(include city, state,	, & zip)								
Catalyst Advert	•					_			
7484 Woodspri	_		c. Level Registered (S	pecify)					
Whitsett, NC, 2	:7377		Federal		County:				
			State		Municipality:	e. Elec	tion Sum to Date		
						\$ 24	185.35		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyy	/y)	j. Amount	k. Req	uired Remarks		
1	Check	Α	10/21/2015 \$99		\$99	Maile	r		
1	Clieck	A	10/21/2013		Design				
1	Check	A	10/21/2015		\$296.88	Palm	Card		
					Ψ270.00	Printi	ng		
4. Payee Inforn	nation		Add		Remove				
a. Full Name, Mail	ing Address & Phone		b. Coordinated Comm	ittee N	ame	d. Com	ments		
(include city, state,						İ			
Facebook Adve	•								
P.O. Box 1000:			c. Level Registered (S	pecify)					
Palo Alto, CA,	94303		Federal	Ц	County:				
			State		Municipality:	e. Elect	tion Sum to Date		
						\$ 37	74.58		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyy	/y)	j. Amount	k. Req	uired Remarks		=
1	Debit Card	A	10/12/2015		\$38.08	Onlin			
1	Deon Card	1	10/12/2015		Ψ30.00	Adve	tising	_	
					\$				
4. Payee Inforn	nation		Add		Remove				
a. Full Name, Mail	ing Address & Phone		b. Coordinated Comm	ittee N	ame	d. Com	ments		
(include city, state,	, & zip)								
Colonial Hardy									
104 E. Elm Stre	eet		c. Level Registered (S	pecify)					
Graham, NC 27	1253		Federal Federal		County:		· · · · · · · · · · · · · · · · · · ·		
			State		Municipality.	e. Elec	tion Sum to Date		
						\$ 20	0.36		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyy	/y)	j. Amount	k. Req	uired Remarks		
1	Dobit C1	A	10/22/2015		\$4.60	Sign			
1	Debit Card	A	10/23/2015		\$4.60	Mater	ials		
1	Debit Card	A	10/25/2015		\$10.23	Sign			
1	Doon Caru	1 4 2	10/23/2013		ΨΙΟ.Δ.	Matar	iala		

Materials 448.79 5. Total only this Page 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$ 3160.46 (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) 7. Purpose Codes (List detailed expenditure code in (h.) above) D - To Another Candidate A* - Media B* - Printing C* - Fundraising H* - Holding Public Office Expenses E - Salaries F* - Equipment G - Political Party I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund O* - Other * Codes require detailed explanation in required remarks field (k) CRO-1310 NC State Board of Elections December 2009

Disbursem	ents			Dα		2 of	4	Amendment Yes No	
		from the committe	e.	Pg for; operating expenses	s c	-	± :andid:		
	coordinated party ex			ior, operating expenses	٥, ٠	oner loudions to t	anara	ato, positions	
	full Name (and Fun							2. ID Number	
		,							
3. Type of Disb	ursement (Plea	se use separate C	RC	0-1310 forms for each	typ	ne of Disbursem	ent.)		
Operating I	Expenses	Contributions to Can	did	lates/Political Committees		Coo	ordinate	d Party Expenditures	
4. Payee Inforn	nation		A	Add 🔲		Remove			
a. Full Name, Mail	ing Address & Phone		b	. Coordinated Committee	Nan	ne	d. Co	mments	
(include city, state,	& zip)								
International M	inute Press								
1143-F St. Mar	ks Church Road		c.	. Level Registered (Specify))				
Burlington, NC	27215			Federal		County:			
				State		Municipality:	e. Ele	ection Sum to Date	
							\$	382.89	
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)		j. Amount	k. Re	quired Remarks	
1	Check	A		10/22/2015		\$882.89	Mail	er	
1	CHOCK	A		10/22/2015	\perp		Prin	ting	
						\$			
4. Payee Inforn	nation		A	\dd		Remove			
a. Full Name, Mail	ing Address & Phone		b. Coordinated Committee Name			ne	d. Comments		
(include city, state,	& zip)								
Tractor Supply									
3129 Garden R	oad		c. Level Registered (Specify)						
Burlington, NC	27215			Federal		County:			
				State		Municipality:	e. Ele	ection Sum to Date	
							\$ 2	29.30	
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)		j. Amount	k. Re	quired Remarks	
1	Debit Card	Α		10/23/2015		\$29.30	Sign		
	Debit Card	A		10/23/2013		Ψ27.50	Mate	erials	
						\$			
4. Payee Inforn	nation		A	\dd \		Remove	<u> </u>		
	ing Address & Phone		b	. Coordinated Committee N	Nan	ne	d. Co	mments	
(include city, state,	· ·								
Target									
_			\vdash				1		

1475 University Drive c. Level Registered (Specify) Burlington NC 27215 Federal County: e. Election Sum to Date State Municipality: \$ 48.04 h. Purpose Code k. Required Remarks f. Account Code g. Form of Payment i. Date (mm/dd/yyyy) j. Amount Vict. Party \$48.04 Debit Card 0 11/13/2015 Groceries \$ \$ 960.23 5. Total only this Page 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$ 3160.46 (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) 7. Purpose Codes (List detailed expenditure code in (h.) above) A* - Media D - To Another Candidate C* - Fundraising B* - Printing E - Salaries I - Postage F* - Equipment G - Political Party H* - Holding Public Office Expenses J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund O* - Other * Codes require detailed explanation in required remarks field (k) CRO-1310 NC State Board of Elections December 2009

				Pg <u>3</u> nses, contribution	Amendment of 4
1. Committee F	ull Name (and Fun	d if applicable)			2. ID Number
3. Type of Disb			RO-1310 forms for edidates/Political Committee		ursement.) Coordinated Party Expenditures
4. Payee Inform			Add	Remove	
a. Full Name, Maili (include city, state, Food Lion	ng Address & Phone & zip)		b. Coordinated Commit		d. Comments
921 South Main Graham , NC 27			c. Level Registered (Spe	County: Municipalit	y: e. Election Sum to Date \$ 94.03
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy	j. Amount	k. Required Remarks
1	Debit Card	0	10/22/2015	\$94.03	Vict. Party Groceries
				\$	
4. Payee Inform	ation		Add	Remove	d. Comments
a. Full Name, Mailing Address & Phone (include city, state, & zip) Bullzeye Sign & Graphics Co. 110 N. Main Street Burlington, NC 27217			c. Level Registered (Spe		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy	j. Amount	k. Required Remarks
1	Debit Card	A	10/23/2015	\$619.15	Sign Materials
				\$	
4. Payee Inform			Add	Remove	d. Comments
a. Full Name, Mailing Address & Phone (include city, state, & zip) USPS - Graham 112 S. Marshall Street Graham, NC 27253			c. Level Registered (Spe		
			State		\$ 1026.51
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy	j. Amount	k. Required Remarks
1	Check	A	10/26/2015	\$1026.51	Mailer Postage

(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) 7. Purpose Codes (List detailed expenditure code in (h.) above) A* - Media

B* - Printing C* - Fundraising

(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)

F* - Equipment G - Political Party K* - Office Expenses J - Penalties

D - To Another Candidate

\$

H* - Holding Public Office Expenses Q* - Donation to Legal Expense Fund

\$

\$

1739.69

3160.46

I - Postage O* - Other

* Codes require detailed explanation in required remarks field (k)

(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)

E - Salaries

5. Total only this Page

6. Total of ALL CRO-1310 Pages

					Amenament	
Disbursements	Pg	4	of	4	Yes Yes	No
(I - this form to remark armonditures from the committee for exercting of	vnoncoc	contrib	utions to	cond	didata/political	

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

1. Committee Full Name (and Fund if applicable) 2. 1D Number									
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)									
Operating E				lates/Political Committee			pordinated Party Expenditures		
4. Payee Inform				Add Remove					
	ng Address & Phone	_	_	. Coordinated Commit	tee Na		d. Comments		
(include city, state, & zip)									
Cruz Thru	<u></u>	Action 19							
814 S. Main Str	eet		c.	. Level Registered (Spe	cify)	******			
Graham, NC 27			T	Federal	Π	County:			
			ĺΓ	State	一	Municipality:	e. Election Sum to Date		
							\$ 6.41		
f. Account Code	g. Form of Payment	h. Purpose Code	<u> </u>	i. Date (mm/dd/yyyy))	j. Amount	k. Required Remarks		
1	Debit Card	О		11/17/2015		\$6.41	Vict. Party		
	Been eard			11/1//2010			Groceries		
						\$			
4. Payee Inform	ation		A	Add		Remove			
	ng Address & Phone		,	. Coordinated Commit	tee Na		d. Comments		
(include city, state,	~								
Bojangles									
804 S. Main Str	eet		c.	. Level Registered (Spe	cify)				
Graham, NC 27	253			Federal		County:			
,			١Ē	State		Municipality:	e. Election Sum to Date		
							\$ 5.34		
f. Account Code	g. Form of Payment	h. Purpose Code	L	i. Date (mm/dd/yyyy))	j. Amount	k. Required Remarks		
III I I I I I I I I I I I I I I I I I							Vict. Party		
1	Debit Card	О	11/17/2015			\$5.34	Groceries		
						\$			
4. Payee Inform	l		Δ	Add	\Box	Remove			
	ng Address & Phone	 	b. Coordinated Committee Name				d. Comments		
(include city, state,	-		F						
(include city, state,	& zip)								
			c. Level Registered (Specify)						
			Г	Federal	\Box	County:	-		
				State	Ħ	Municipality:	e. Election Sum to Date		
				_1			\$		
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy))	j. Amount	k. Required Remarks		
						\$			
						\$			
	: D	<u> </u>		<u> </u>		_	¢ 11.75		
5. Total only th							\$ 11.75		
	CRO-1310 Pages	D CDO 110	n :	On another Francisco					
	line 13a of Detailed Sur				Politi a	ral Comm)	\$ 3160.46		
	(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)								
·	es (List detailed ex				спиши	11 00/			
/. Purpose Cod A* - Media	B* - Printing	Penditure code in C* - Fund				D - To Anot	her Candidate		
A^ - Media E - Salaries	F* - Printing F* - Equipment						g Public Office Expenses		
I - Postage	J - Penalties	K* - Offi					on to Legal Expense Fund		
O* - Other				•		-	-		
* Codes require detailed explanation in required remarks field (k)									