Disclosure Report Cov	er
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Amendment	. /
☐ Yes	No No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

1. Committee Information				第 位的表外被制度。
a. Full Name				c. ID Number
Committee to Re- 21	ect Al Jean	Bogle Clark of	Court	500305
b. Mailing Address (include City, Stat	te and Zip Code)	0		d. Date Filed
554 1st St, NW				7/13/10
Hickory, NC 2800	1		•	e. Phone Number
Ö				828.324.7060
2. Report Year 3. Period Start		eriod End Date (mm/dd/yy)	5. Treasurer	,
2010 4/18/2		1/30/2010	France	
6. Type of Committee (Check (And the leaders of the last of	of Report (check only one State/County	THE PERSON NAMED IN COLUMN 2 I	rt from one category) Referendum
☐ Candidate Campaign ☐ Par		nizational Organizat		Organizational
		y-five day Quarterly		Pre-referendum
Legal Expense Fund	☐ Pre-p	rimary		Final
		lection Seco	1	Supplemental Final
7. Type of Fund (if applicable, Booster Fund	PRODUCTION STREET, SANDY OF THE PROPERTY OF TH	unoff Third	1:	Annual Special
Building Fund		Mid Year Semi-annu		special
		Year End	Year 1	10. Special Report Name
Other:	Final	Year	End	
8. Number of Fundraisers this	Report Speci			
()		☐ Special		
11. Account Information a. Financial Institution Full Name		11. Account Inform a. Financial Institution	Columnia Serie Mestados estados estado	
di I munician impercuenti i din i imine				
0 0 0	.10			
Bank of Gran		h Purnose		Account Code
0 0 0	c. Account Code	b. Purpose		. Account Code
Bank of Gran		b. Purpose	c	
Bank of Gran	c. Account Code CSCII 7 d. Period Begin Balance		c	l. Period Begin Balance
Bank of Gran b. Purpose Umpaign	c. Account Code CSCII 7 d. Period Begin Balance		c	
Bank of Gran	c. Account Code CSCII 7 d. Period Begin Balance		c	l. Period Begin Balance
Bank of Gran b. Purpose Campaign CERTIFICATION I certify that the Committee or Fur	c. Account Code CSC 7 d. Period Begin Balance \$ 2529	all applicable provisions of Ar	d d ticle 22A, 22B	1. Period Begin Balance \$ & 22D-22M of Chapter 163
Bank of Gran b. Purpose Campaign CERTIFICATION I certify that the Committee or Fur of the NC General Statutes and the	c. Account Code CSC117 d. Period Begin Balance \$ 2529 and is in compliance with at no funds are commingly	all applicable provisions of Are	dicle 22A, 22B n-disclosed fun	1. Period Begin Balance \$ & 22D-22M of Chapter 163
Bank of Gran b. Purpose Campaign CERTIFICATION I certify that the Committee or Fur	c. Account Code CSC117 d. Period Begin Balance \$ 2529 and is in compliance with at no funds are commingly	all applicable provisions of Are	dicle 22A, 22B n-disclosed fun	1. Period Begin Balance \$ & 22D-22M of Chapter 163
Bank of Gran b. Purpose CERTIFICATION I certify that the Committee or Fur of the NC General Statutes and the report is complete, true and correct	c. Account Code CSC117 d. Period Begin Balance \$ 2529 and is in compliance with at no funds are commingly	all applicable provisions of Aried with prohibited or other not ined by the NC State Board of	ticle 22A, 22B n-disclosed fun Elections.	1. Period Begin Balance \$ & 22D-22M of Chapter 163
Bank of Grand b. Purpose Campaign CERTIFICATION I certify that the Committee or Fund of the NC General Statutes and the report is complete, true and correct forms of the Name of Sign	c. Account Code CSC117 d. Period Begin Balance \$ 2529 and is in compliance with at no funds are comming to and that I have been tra Bogle	all applicable provisions of Are	ticle 22A, 22B n-disclosed fun Elections.	1. Period Begin Balance \$ & 22D-22M of Chapter 163
Bank of Gran b. Purpose Campaign CERTIFICATION I certify that the Committee or Fur of the NC General Statutes and the report is complete, true and correct Frances Lee	c. Account Code CSC117 d. Period Begin Balance \$ 2529 and is in compliance with at no funds are comming to and that I have been tra Bogle	all applicable provisions of Aried with prohibited or other not ined by the NC State Board of	ticle 22A, 22B n-disclosed fun Elections.	& 22D-22M of Chapter 163 ds. I further certify that this
Bank of Grand b. Purpose Campaign CERTIFICATION I certify that the Committee or Fund of the NC General Statutes and the report is complete, true and correct forms of the Name of Sign	c. Account Code CSC 1 7 d. Period Begin Balance \$ 2529 and is in compliance with at no funds are commingled and that I have been training to the compliance with a second comming the complete and the comming that I have been training to the complete and th	all applicable provisions of Aried with prohibited or other not ined by the NC State Board of	ticle 22A, 22B n-disclosed fun Elections.	& 22D-22M of Chapter 163 ds. I further certify that this 2//3//8 Date
Bank of Grand b. Purpose CERTIFICATION I certify that the Committee or Fund of the NC General Statutes and the report is complete, true and correct forms of the Name of Sign FOR OFFICE USE ONLY Date Received:	c. Account Code CSC117 d. Period Begin Balance \$ 2529 and is in compliance with at no funds are commingled and that I have been transport and the compliance with a compli	all applicable provisions of Arged with prohibited or other not ined by the NC State Board of Signature of Appointed Treas	ticle 22A, 22B n-disclosed fun Elections. Bog (e) Deliver	& 22D-22M of Chapter 163 ds. I further certify that this
Bank of Grand b. Purpose Campaign CERTIFICATION I certify that the Committee or Furof the NC General Statutes and the report is complete, true and correct frances Lee Printed Name of Sign FOR OFFICE USE ONLY	c. Account Code CSC117 d. Period Begin Balance \$ 2529 and is in compliance with at no funds are commingled and that I have been transport and the compliance with a compli	all applicable provisions of Article with prohibited or other not ined by the NC State Board of Signature of Appointed Treas	ticle 22A, 22B n-disclosed fun Elections. Bog (e) Urer Deliv	& 22D-22M of Chapter 163 ds. I further certify that this
Bank of Grand b. Purpose CERTIFICATION I certify that the Committee or Fund of the NC General Statutes and the report is complete, true and correct forms of the Name of Sign FOR OFFICE USE ONLY Date Received:	c. Account Code CSC117 d. Period Begin Balance \$ 2529 and is in compliance with at no funds are commingled and that I have been transport and the compliance with a compli	all applicable provisions of Arged with prohibited or other not ined by the NC State Board of Signature of Appointed Treas	ticle 22A, 22B n-disclosed fun Elections. Bog (e) Urer Deliv	& 22D-22M of Chapter 163 ds. I further certify that this
Bank of Gran b. Purpose Campaign CERTIFICATION I certify that the Committee or Fur of the NC General Statutes and the report is complete, true and correct Frances Lee Printed Name of Sign FOR OFFICE USE ONLY Date Received: Date Postmarked:	c. Account Code CSC117 d. Period Begin Balance \$ 2529 and is in compliance with at no funds are commingled and that I have been transport and the compliance with a compli	all applicable provisions of Arged with prohibited or other not ined by the NC State Board of Signature of Appointed Trease Employee:	ticle 22A, 22B n-disclosed fun Elections. Bog (e) Deliv I I I I I I I I I I I I I I I	& 22D-22M of Chapter 163 ds. I further certify that this
Bank of Gran b. Purpose Campaign CERTIFICATION I certify that the Committee or Fur of the NC General Statutes and the report is complete, true and correct Frances Lee Printed Name of Sign FOR OFFICE USE ONLY Date Received: Date Postmarked: Date Scanned:	c. Account Code CSC117 d. Period Begin Balance \$ 2529 and is in compliance with at no funds are comming at and that I have been transport and the I have been transport and	all applicable provisions of Arged with prohibited or other notined by the NC State Board of Signature of Appointed Trease Employee: Employee: Employee: Employee:	ticle 22A, 22B n-disclosed fun Elections. Bog (e) urer Deliver F F F F F F F F F	& 22D-22M of Chapter 163 ds. I further certify that this
Bank of Grand b. Purpose Campaign CERTIFICATION I certify that the Committee or Fund of the NC General Statutes and the report is complete, true and correct an	c. Account Code CSC117 d. Period Begin Balance \$ 2529 and is in compliance with at no funds are commingle and that I have been transport and the I have been transport and I have bee	all applicable provisions of Arged with prohibited or other notined by the NC State Board of Signature of Appointed Trease Employee: Employee: Employee: Employee:	bicle 22A, 22B n-disclosed fun Elections. Beg (e) P P P P P P P P P	& 22D-22M of Chapter 163 ds. I further certify that this 1/3 10 Date Da

Detailed Summary

Amendment

Yes No

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

1. Committee Full Name (and Fund if applicable)		3. ID Number	
Comm. to Re-Elect Al Jean Bogle Clerk of Sup Court	2010 2 nd Quarter		SDU3D5
Start of Election Cycle: January 1,	2010	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 2529.00	\$
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 185.00	\$ 275.00
6) Contributions from Individuals	(CRO-1210)	\$ 500.00	\$ 5025.00
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			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Organizat	ions (CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 1	\$ 685.00	\$ 5300.00	
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 3178.00	\$ 4239.00
13b) Contributions to Candidates/Political Commi	ittees (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)	\$	\$ 1025.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14,	15, 16 and 17)	\$ 3178.00	\$ 5264.00
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18)	\$ 36.00	\$ 36.00
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaig	gns) (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)	\$	\$

Aggregated Contributions from Individuals

Page

1

Amendment

res

No

 \boxtimes

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

1. Committee Full Name (and Fund if applicable) Committee to Re-Elect Al Jean BogleClerk of Court						2. ID Number			
		SDU3D5							
Cor	tributor Info								
Amer		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount			
	Add	CSC117	Check		4/28/10	\$ 50.00			
<u></u>	Remove								
1	Add	CSC117	Check		4/28/10	\$ 25.00			
<u> </u> 1	Remove								
	Add Remove	— CSC117	Check on Line		4/26/10	\$ 50.00			
<u> </u>	Add								
	Remove	CSC117	Check on Line		5/4/10	\$ 30.00			
	Add				412.11.0	—			
	Remove	CSC117	Check on Line		6/2/10	\$ 30.00			
	Add								
	Remove					\$			
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	Add					6			
	Remove					\$			
	Add					\$			
	Remove					Φ			
T-	tal only thi	s Page	and the second s		\$	185.00			

					Amen	ament		
Contributions from Individuals	Pg	1	of	1		Yes	\boxtimes	No
VI this forms to make the dividual contributions over \$50 or contributions		\$50 if for	m CDO	1205 is no	tucad			

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)							2. ID Nui	nber		
Committe	ee to Re-Elect Al.	Jean Bogle Clerk of St	aperior	Court					SDU3D5	
3. Contri	ibutor Informatio	on		Add Remove						
a. Full Nan	ne, Mailing Address	& Phone		b. Job Tit	tle/Prof	ession		d. Commen	ts	
(include	city, state, & zip)			Lawyer	•					
Robert G	rant									
P.O. Box	166			c. Employ	yer's Na	ame/Spec	ific Field			
Newton, NC 28658										
								e. Election S	Sum to Date	
								\$	200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Lind Descrip	ption		j. Date (mm/dd/yy	yyy)	k. Amount	
	CSC117	Check					04/28/2		\$	200.00
	CSCIII	Circui	-							
									\$	
									\$	
3. Contri	ibutor Informatio	on		Add		Remo	ve			
a. Full Nan	ne, Mailing Address	& Phone		b. Job Ti	tle/Prof	ession		d. Commen	ts	land the second
(include	city, state, & zip)			Lawyer	r					
Wayne B	ach									
4330 4 th 5	St Cir NW			c. Employ	yer's Na	ame/Spec	ific Field			
Hickory,	NC 28601			Morphi	is, Bac	h & Ta	ylor			
								e. Election Sum to Date		
								\$	300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Descrip	ption		j. Date (mm/dd/yy	/vv)	k. Amount	
	CSC117	Check					04/27/2		\$	300.00
									\$	
									\$	
3. Contri	ibutor Information	on		Add		Remo	ve	18 Block 5 5		
	ne, Mailing Address			b. Job Tit	tle/Prof	Mark Company of the C		d. Commen	ts	
	city, state, & zip)									
				1				,		
				c. Employ	yer's Na	ame/Spec	ific Field			
								a Flaction	Sum to Date	
								7	ouii to Date	
								\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Descrip	ption		j. Date (mm/dd/yy	уу)	k. Amount	
									\$	
									\$	
									\$	
4. Total	l only this Pag	e						\$		500.00
5. Total	of ALL CRO	1210 Pages						\$		500.00
(This line	e must be on line 6 of	Detailed Summary Page Co	RO-1100))				Ψ		200.00

				Ame	ndment		
Disbursements	Pg	1	of <u>3</u>		Yes	\boxtimes	No
				,			

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political

committees and coordinated party exper	enditures.
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1. Committee I	Full Name (and Fun	nd if applicable)			2. ID Number
Comm. to ReE	lect Al Jean Bogle C				SDU3D5
3. Type of Dish		THE RESERVE AND ADDRESS OF THE PERSON NAMED IN	CRO-1310 forms for each		
Operating I		Contributions to Ca	andidates/Political Committees		Coordinated Party Expenditures
4. Payee Inform			Add	Remove	d Comments
	ling Address & Phone		b. Coordinated Committee N	ame	d. Comments
(include city, state	ver NewsEnterprise		-		
P.O. Box 48	rei NewsEnterprise		c. Level Registered (Specify)		
Newton, NC 2	8658		Federal 🖂	County:	2.3
110111111111111111111111111111111111111			State	Municipality:	e. Election Sum to Date
					\$ 300.00
	T	h Downer Code		T	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
CSC117	Check	A	04/18/2010	\$300.00	Ad
				\$	
4. Payee Inform			Add	Remove	1 Comments
	ling Address & Phone		b. Coordinated Committee N	ame	d. Comments
(include city, state, WNNC	, & zip)				
1666 Radio Sta	ation Road		c. Level Registered (Specify)		
Newton, NC 2			Federal 🖂	County:	
110111111111111111111111111111111111111	0020		State	Municipality:	e. Election Sum to Date
					\$ 800.00
	T	h Boomer Code			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
CSC117	Check	A	04/19/2010	\$800.00	Ad for Radio
				6	
				\$	
4. Payee Inform			Add	Remove	
	ing Address & Phone		b. Coordinated Committee N	ame	d. Comments
(include city, state, Humane Societ					
P.O. Box 63	У		c. Level Registered (Specify)		
Hickory, NC 2	8603		Federal 🖂	County:	
			State	Municipality:	e. Election Sum to Date
					\$ 25.00
	T = 45	h Dunness Code		Ι	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
CSC117	Check	0	04/16/2010	\$25.00	Dinner
				6	
				\$	
5. Total only th					\$ 1125.00
The state of the s	CRO-1310 Pages	nmary Page CRO-110	00 if Operating Expenses)	Production by	and the second s
	-	-	00 if Contrib to Candidates/Politic	cal Comm)	\$ 3178.00
	-		0 if Coordinated Party Expenditu	,	
	les (List detailed ex				The second was the second second
A* - Media	B* - Printing	C* - Fun	draising		ther Candidate
E - Salaries	F* - Equipment J - Penalties				ng Public Office Expenses
I - Postage O* - Other	J - Penalues	K* - OIII	ce Expenses	Q" - Donat	ion to Legal Expense Fund
	e detailed explanat	ion in required r	emarks field (k)		

Disbursements

Pg

2

of <u>3</u>

Amendment
Yes

 \boxtimes

No

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

1. Committee F	ull Name (and Fun	d if applicable)				国际发展的	2. ID Number	
Comm. to ReEl		SDU3D5						
3. Type of Disb	ursement (Plea	ise use separate (CRO-1310 forms fo	r each t	vpe of Disburse	ment.)		
Operating E	Control of the Contro	THE RESIDENCE OF THE PARTY OF T	ndidates/Political Comr			Party Expenditures		
4. Pavee Inform			Add	第四日		1000分别,以为自己的		
· ·	ing Address & Phone		b. Coordinated Con	mittee N	Remove	d. Con	nments	
(include city, state,	& zip)		1					
Party City			c. Level Registered	(Specify)				
1942 Catawba Valley Blvd			Federal		County:			
Hickory, NC 2	8002		State		Municipality:	a Flac	tion Sum to Date	77.5
			State		Municipanty.	c. Elec	tion Sum to Date	2.5555
						\$ 28	8.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/y	уууу)	j. Amount		uired Remarks	
CSC117	Check	0	04/24/2010		\$28.00		ons for	
CSCIII	Check		0 1/2 1/2010		420.00	Festiv	val	
					\$			
4. Payee Inform	ation		Add		Remove			(4.5)
	ing Address & Phone		b. Coordinated Con	nmittee N	ame	d. Con	nments	
(include city, state,								
Jeff Bogle	& zip)		1					
1777 12 th St			c. Level Registered	(Specify)				
Hickory, NC 2	8601		Federal	\boxtimes	County:			
Hickory, NC 2	8001		State		Municipality:	e Elec	ction Sum to Date	1499
			State		Within Cipanty.	C. Elec	tion Sum to Date	
						\$ 50	00.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/y	уууу)	j. Amount	k. Req	uired Remarks	
CSC117	Check	Е	05/04/2010		\$500.00	Photo	ographer/	
CSC117	Check	E	03/04/2010		\$300.00	Webs	site	
					\$			
4 Danie Inform	4:		A 4.4					0.7 2.0
4. Payee Inform			Add Remove b. Coordinated Committee Name			d Con		
	ing Address & Phone		b. Coordinated Con	imittee N	ame	d. Con	nments	
(include city, state,	& zip)							
Brian Bogle								
554 1st St NW			c. Level Registered (Specify)					
Hickory, NC 2	8601		Federal County:					
			State		Municipality:	e. Elec	tion Sum to Date	
						\$ 50	00.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/y	vvv)	j. Amount	k. Rea	uired Remarks	
1. Account Code	g. Form of rayment		i. Date (iiiii/dd/)	3331	j. Amount	Advis		
CSC117	Check	E	05/04/2010		\$500.00	Advis	, or	
					\$			
5. Total only th		Jan Harla				\$	1028.00	
6. Total of ALL	CRO-1310 Pages	持有性性的人。 在1000年						
(This line goes in	line 13a of Detailed Sun	nmary Page CRO-110	0 if Operating Expense	es)		\$	3178.00	
(This line goes in	line 13b of Detailed Sun	nmary Page CRO-110	0 if Contrib to Candida	tes/Politic	cal Comm)	Φ	3170.00	
(This line goes in	line 13c of Detailed Sun	nmary Page CRO-110	0 if Coordinated Party	Expenditu	ures)			
7. Purpose Cod	es (List detailed ex	penditure code in	(h.) above)		是 情知 [18] - 18 · 10 年 年	March Street		
A* - Media	B* - Printing	C* - Fun	draising		D - To Ano			0.100
E - Salaries	F* - Equipment		A DESCRIPTION AND RECOGNIZED AND APPROXIMATE OF A PROXIMATE AND APPROXIMATE AN				Office Expenses	
I - Postage	J - Penalties	K* - Offi	ce Expenses		Q* - Donat	ion to Leg	gal Expense Fund	
O* - Other	a detailed avalage t	ion in vocation i	omonks fold (la)	CHICAGO CONTRACTOR				N. Selfe
Codes requir	e detailed explanat	ion in required r	emarks field (K)					

Disbursements

Pg

of $\underline{3}$

Amendment Yes

 \boxtimes

<u>3</u> 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. ID Number
Comm. to ReElect Al Jean Bogle Clerk of Sup. Court					SDU3D5
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disburse					
Operating E	Expenses	Contributions to Car	ndidates/Political Committees		Coordinated Party Expenditures
4. Payee Information			Add Remove		
a. Full Name, Mailing Address & Phone			b. Coordinated Committee N	ame	d. Comments
(include city, state, & zip) Al Jean Bogle 1777 12 th St NE Hickory, NC 28601			c. Level Registered (Specify) Federal County: State Municipality:		
					e. Election Sum to Date
					\$ 1025.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
CSC117	Check	О	05/04/2010	\$1025.00	Reimbursement of filing fee
				\$	
4. Payee Inform	nation		Add	Remove	
	ing Address & Phone		b. Coordinated Committee Name		d. Comments
(include city, state,					
	•		c. Level Registered (Specify)	Country	
			Federal State	County: Municipality:	e. Election Sum to Date
			State	Municipanty.	e. Election Sum to Date
					\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1. Account Cour	g. I or m or I my mem	1			-
				\$	
				\$	
4. Payee Inform	nation		Add	Remove	
a. Full Name, Mailing Address & Phone			b. Coordinated Committee Name		d. Comments
(include city, state,					
			c. Level Registered (Specify)		
			Federal	County:	
			State	Municipality:	e. Election Sum to Date
					\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
5. Total only th	is Page		The second of the second		\$ 1025.00
6. Total of ALL CRO-1310 Pages					
(This line goes in (This line goes in	ı line 13a of Detailed Sur ı line 13b of Detailed Sur	nmary Page CRO-110	00 if Operating Expenses) 00 if Contrib to Candidates/Politi 00 if Coordinated Party Expenditi		\$ 3178.00
7. Purpose Cod	les (List detailed ex				
A*- Media B*- Printing C*- Fundraising D - To Another Candidate E - Salaries F* - Equipment G - Political Party H*- Holding Public Office Exp I - Postage J - Penalties K*- Office Expenses Q*- Donation to Legal Expense O*- Other					ng Public Office Expenses
* Codes requir	re detailed explanat	ion in required r	emarks field (k)		