

# Disclosure Report Cover

Amendment

Yes

X

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					
a. Full Name				c. ID Number	
Committee to Elect Tony Wood					
b. Mailing Address (include City, State and Zip Code)				d. Date Filed	
112 7th Avenue NE Hickory, NC 28601				9/24/2019	
				e. Phone Number	
				828 267-0799	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name		
2019	8/28/2019	9/23/2019	Michael Anthony Wood		
6. Type of Committee (Check One)			9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign Party <input type="checkbox"/> PAC Referendum <input type="checkbox"/> Independent Expenditure Joint Fundraiser <input type="checkbox"/> Legal Expense Fund			<input checked="" type="checkbox"/> Municipal <input type="checkbox"/> State/County <input type="checkbox"/> Referendum		
<b>7. Type of Fund (if applicable, check one)</b> <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:			<input checked="" type="checkbox"/> Pre-primary First Final <input type="checkbox"/> Pre-election Second Supplemental Final <input type="checkbox"/> Pre-runoff Third Annual <input type="checkbox"/> Semi-annual Fourth Special <input type="checkbox"/> Mid Year Semi-annual <input type="checkbox"/> Year End Mid Year <input type="checkbox"/> Final Year End <input type="checkbox"/> Special Final <input type="checkbox"/> Special Special		
<b>8. Number of Fundraisers this Report</b>			<b>10. Special Report Name</b>		
0					
11. Account Information			11. Account Information		
a. Financial Institution Full Name			a. Financial Institution Full Name		
Bank of America					
b. Purpose	c. Account Code		b. Purpose	c. Account Code	
Campaign Finance	513				

d. Period Begin Balance

\$ 2871.64

d. Period Begin Balance

\$

### CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

Michael Anthony Wood

Printed Name of Signer



Signature of Appointed Treasurer

9/24/2019

Date

### FOR OFFICE USE ONLY

Date Received:

\_\_\_\_\_

Employee:

\_\_\_\_\_

Delivery Method

Normal Mail

Date Postmarked:

\_\_\_\_\_

Employee:

\_\_\_\_\_

Registered Mail

Hand Delivered

Date Scanned:

\_\_\_\_\_

Employee:

\_\_\_\_\_

Electronically Filed

Date Data Entered:

\_\_\_\_\_

Employee:

\_\_\_\_\_

Signer has not received  
mandatory training

**Please Note:** This form 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 committee changes.

CRO-1000

NC State Board of Elections

August 2008

**Detailed Summary**

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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
Committee to Elect Tony Wood	Pre-Primary	
<b>Start of Election Cycle:</b> <b>January 1,</b> <b><u>2019</u></b>	<b>Total this Reporting Period</b>	<b>Total this Election Cycle</b>
<b>4) Cash on Hand at Start</b>	\$ 2,871.64	\$ 0
<b><u>RECEIPTS</u></b>		
<b>5) Aggregated Contributions from Individuals</b> (CRO-1205)	\$	\$
<b>6) Contributions from Individuals</b> (CRO-1210)	\$ 1,200	\$ 7,813
<b>7) Contributions from Political Party Committees</b> (CRO-1220)	\$	\$
<b>8) Contributions from Other Political Committees</b> (CRO-1230)	\$	\$
<b>9) Loan Proceeds</b> (CRO-1410)	\$	\$
<b>10) Refunds/Reimbursements To the Committee</b> (CRO-1240)	\$	\$
<b>11) Other Receipt Sources</b>		
<b>11a) Interest on Bank Accounts</b> (CRO-1250)	\$	\$
<b>11b) Contributions from Not-for-Profit Organizations</b> (CRO-1250)	\$	\$
<b>11c) Outside Sources of Income</b> (CRO-1250)	\$	\$
<b>11d) Legal Expense Fund – Other Sources</b> (CRO-1270)	\$	\$
<b>11 e) Exempt Purchase Price Sales</b> (CRO-1265)	\$	\$
<b>12) TOTAL RECEIPTS</b> (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 1,200	\$ 7,813
<b><u>EXPENDITURES</u></b>		
<b>13) Disbursements</b>		
<b>13a) Operating Expenditures</b> (CRO-1310)	\$ 771.26	\$ 1,799.62
<b>13b) Contributions to Candidates/Political Committees</b> (CRO-1310)	\$	\$
<b>13c) Coordinated Party Expenditures</b> (CRO-1310)	\$	\$
<b>14) Aggregated Non-Media Expenditures</b> (CRO-1315)	\$	\$
<b>15) Loan Repayments</b> (CRO-1420)	\$	\$
<b>16) Refunds/Reimbursements From the Committee</b> (CRO-1320)	\$ 500.00	\$ 500.00
<b>17) In-Kind Contributions</b> (CRO-1510)	\$ 0	\$ 2,713.00
<b>18) TOTAL EXPENDITURES</b> (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 1,271.26	\$ 5,012.62
<b>19) Cash on Hand at End</b> (Add lines 4 and 12 together, then subtract line 18)	\$ 2,800.38	\$ 2,800.38
<b><u>ADDITIONAL INFORMATION</u></b>		
<b>20) Non-Monetary Gifts Given to Other Committees</b> (CRO-1330)	\$	
<b>21) Outstanding Loans (incl. ones from other campaigns)</b> (CRO-1430)	\$	
<b>22) Debts and Obligations owed By the Committee</b> (CRO-1610)	\$	

<b>23) Debts and Obligations owed To the Committee</b>	<i>(CRO-1620)</i>	\$	
<b>24) Account Transfers Within the Committee</b>	<i>(CRO-1720)</i>	\$	
<b>25) Administrative Support</b>	<i>(CRO-1710)</i>	\$	\$
<b>26) Forgiven Loans</b>	<i>(CRO-1440)</i>	\$	\$
<b>27) 48-Hour Notice Reports Sum</b>	<i>(CRO-2220)</i>	\$	\$
<b>28) Contributions to be Refunded</b>	<i>(CRO-1215)</i>	\$	\$

***CRO-1100***

NC State Board of Elections

August 2008

**Contributions from Individuals**Pg 1 of 4 Yes ☒ No

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 Number	
Committee to Elect Tony Wood						
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	
Landon Lane 1006 4th Avenue Drive NW Hickory, NC 28601			Retired			
			c. Employer's Name/Specific Field			
			Southern Motion			
			e. Election Sum to Date			
				\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
	513	Check		8/30/2019	\$ 100.00	
					\$	
					\$	
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	
Leroy Lail 2258 Hwy 70 SE Suite 101 Hickory, NC 28602			Businessman			
			c. Employer's Name/Specific Field			
			Hickory Furniture Mart			
			e. Election Sum to Date			
				\$ 300.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
	513	Check		8/30/2019	\$ 300.00	
					\$	

						\$
<b>3. Contributor Information</b>						
			X	Add	Remove	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Robert Vollinger 1977 12th Street NE Hickory, NC 28601			Retired			
			<b>c. Employer's Name/Specific Field</b>			
			General Electric		<b>e. Election Sum to Date</b>	
					\$ 25.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
	513	Check		9/3/2019	\$ 25.00	
					\$	
					\$	
<b>4. Total only this Page</b>					\$ 425.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1,200.00	

**Contributions from Individuals**

Pg 2 of 4

Yes X No

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 Number	
Committee to Elect Tony Wood						
3. Contributor Information					x Add Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Michael Johnson 4220 4th Street Lane NW Hickory, NC 28601			Self Employed			
			c. Employer's Name/Specific Field			
			Jami Enterprises			
			e. Election 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	
	513	Check		9/3/2019	\$ 250.00	
					\$	
					\$	
3. Contributor Information					x Add Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Bruce Meisner 4394 1st Street Drive NW Hickory, NC 28601			Real Estate Appraiser			
			c. Employer's Name/Specific Field			
			Peoples Bank			
			e. Election Sum to Date			
				\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
	513	Check		9/3/2019	\$ 100.00	
					\$	

						\$
<b>3. Contributor Information</b>						
<div style="display: flex; justify-content: space-between;"> <span>X</span> <span>Add</span> <span>Remove</span> </div>						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Charles Alberto, Jr. 580 20th Avenue NW Hickory, NC 28601			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
			Sales			
			<b>c. Employer's Name/Specific Field</b>			
			Hickory Springs		<b>e. Election Sum to Date</b>	
					\$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
	513	Check		9/3/2019	\$ 50.00	
					\$	
					\$	
<b>4. Total only this Page</b>					\$ 400.00	
<b>5. Total of ALL CRO-1210 Pages</b>					\$ 1,200.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						



**Contributions from Individuals**Pg **3** of **4** Yes ☒ No

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 Number	
Committee to Elect Tony Wood						
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	
Chris Rendleman 1961 12th Street NE Hickory, NC 28601			CFO			
			c. Employer's Name/Specific Field			
			Vesco Toyota Lift			
			e. Election Sum to Date			
				\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
	513	Check		9/4/2019	\$ 100.00	
					\$	
					\$	
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	
Jonathan Mauser 1020 21st Avenue NE Hickory, NC 28601			Cattle Farmer			
			c. Employer's Name/Specific Field			
			Self Employed			
			e. Election Sum to Date			
				\$ 50.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
	513	Check		9/4/2019	\$ 50.00	
					\$	

						\$
<b>3. Contributor Information</b>						
			<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
George Moretz 1779 8th Street Drive NW Hickory, NC 28601			Retired			
			<b>c. Employer's Name/Specific Field</b>			
			Carolina Mills			
			<b>e. Election Sum to Date</b>			
					\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
	513	Check		9/5/2019	\$ 100.00	
					\$	
					\$	
<b>4. Total only this Page</b>					\$ 250.00	
<b>5. Total of ALL CRO-1210 Pages</b>					\$ 1,200.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

CRO-1210

NC State Board of Elections

April 2007

**Contributions from Individuals**Pg 4 of 4 Yes ☒ No

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 Number	
Committee to Elect Tony Wood						
3. Contributor Information						
<div style="display: flex; justify-content: space-between;"> <span><input checked="" type="checkbox"/> Add</span> <span><input type="checkbox"/> Remove</span> </div>						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
Jim Correll 546 19th Avenue Drive NW Hickory, NC 28601		Consultant				
		c. Employer's Name/Specific Field				
		JLC Consulting				
				e. Election Sum to Date		
				\$ 50.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
	513	Check		9/5/2019	\$ 50.00	
					\$	
					\$	
3. Contributor Information						
<div style="display: flex; justify-content: space-between;"> <span><input checked="" type="checkbox"/> Add</span> <span><input type="checkbox"/> Remove</span> </div>						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments		
Keith Binns 430 31st Avenue CT NE Hickory, NC 28601		Furniture Designer				
		c. Employer's Name/Specific Field				
		Berry & Clark Design Associates				
				e. Election Sum to Date		
				\$ 50.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
	513	Check		9/5/2019	\$ 50.00	
					\$	

						\$
<b>3. Contributor Information</b>						
			<b>x</b>	<b>Add</b>	<b>Remove</b>	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
William McBrayer 446 17th Avenue Drive NE Hickory, NC 28601			Human Resources			
			<b>c. Employer's Name/Specific Field</b>			
			Lexington Home Brands			
			<b>e. Election Sum to Date</b>			
					\$ 25.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
	513	Check		9/6/2019	\$ 25.00	
					\$	
					\$	
<b>4. Total only this Page</b>					\$ 125.00	
<b>5. Total of ALL CRO-1210 Pages</b>					\$ 1,200.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

CRO-1210

NC State Board of Elections

April 2007

**Disbursements**

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
Committee to Elect Tony Wood					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
X Operating Expenses		Contributions to Candidates/Political Committees		Coordinated Party Expenditures	
4. Payee Information					
X		Add		Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Facebook 1 Hacker Way Menlo Park, CA 94025					
		c. Level Registered (Specify)			
		Federal	County:		
		State	Municipality:		
				e. Election Sum to Date	
				\$ 86.98	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
513	Debit	a	8/29/2019	86.98	Advertising
				\$	
4. Payee Information					
X		Add		Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Custom Design Group 391 10th Avenue Dr NE Hickory, NC 28601					
		c. Level Registered (Specify)			
		Federal	County:		
		State	Municipality:		
				e. Election Sum to Date	
				\$ 1,040.59	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
513	Debit	b	9/16/2019	441.38	Screen printing

4. Payee Information						X	Add	Remove
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Premier Planning Group 219 1st Avenue SW Hickory, NC 28602			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>			
			<b>c. Level Registered (Specify)</b>					
			Federal	County:				
			State	Municipality:				
					<b>e. Election Sum to Date</b>			
					\$ 125.00			
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>			
513	Check	o	9/18/2019	125.00	Office Space Rental			
				\$				
<b>5. Total only this Page</b>						\$ 653.36		
<b>6. Total of ALL CRO-1310 Pages</b>								
(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)						\$ 771.26		
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)								
<b>A* - Media</b>		<b>B* - Printing</b>		<b>C* - Fundraising</b>		<b>D - To Another Candidate</b>		
<b>E - Salaries</b>		<b>F* - Equipment</b>		<b>G - Political Party</b>		<b>H* - Holding Public Office Expenses</b>		
<b>I - Postage</b>		<b>J - Penalties</b>		<b>K* - Office Expenses</b>		<b>Q* - Donation to Legal Expense Fund</b>		
<b>O* - Other</b>								
* Codes require detailed explanation in required remarks field (k)								

## Disbursements

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	
Committee to Elect Tony Wood						
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
X Operating Expenses		Contributions to Candidates/Political Committees		Coordinated Party Expenditures		
4. Payee Information						
X Add			Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
USPS 231 Government Avenue SW Hickory, NC 28602						
			Federal County:		e. Election Sum to Date	
			State Municipality:			
					\$ 282.90	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
513	Debit	I	9/3/2019	7.90		
513	Debit	I	9/16/2019	110.00		
4. Payee Information						
X Add			Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
			Federal County:		e. Election Sum to Date	
			State Municipality:			
					\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		

4. Payee Information				Add	Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
		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 this Page					\$ 117.90
6. Total of ALL CRO-1310 Pages					
(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)					\$ 771.26
(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	D - To Another Candidate		
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses		
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund		
O* - Other					
* Codes require detailed explanation in required remarks field (k)					



## Refunds/Reimbursements From the Committee

Pg 1 of 1

Yes X No

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

1. Committee Full Name (and Fund if applicable)			2. ID Number	
Committee to Elect Tony Wood				
3. Payee Information			Add	Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
Michael Anthony Wood PO Box 3843 Hickory, NC 28603		X Candidate PAC		7/23/2019
		Referendum Party		
		e. Level Registered (Specify)		i. Original Receipt Amount
		Federal County:		\$ 500.00
		State X Municipality:		
f. Purpose Code		j. Election Sum to Date		
L		\$ 2,863.00		
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code
Executive Recruiter	Anthony, Paige & Blake, Inc.			513
i. Form of Payment	m. Required Remarks		n. Date (mm/dd/yyyy)	o. Amount
Draft			9/16/2019	\$ 500.00
3. Payee Information			Add	Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		h. Original Receipt Date
		Candidate PAC		
		Referendum Party		
		e. Level Registered (Specify)		i. Original Receipt Amount
		Federal County:		\$
		State Municipality:		
f. Purpose Code		j. Election Sum to Date		
		\$		
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code

<b>l. Form of Payment</b>	<b>m. Required Remarks</b>				<b>n. Date (mm/dd/yyyy)</b>		<b>o. Amount</b>		
							\$		
<b>3. Payee Information</b> <div style="float: right; text-align: right;"> Add      Remove </div>									
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>d. Type of Committee</b>		<b>h. Original Receipt Date</b>			
				Candidate      PAC					
				Referendum      Party					
				<b>e. Level Registered (Specify)</b>				<b>i. Original Receipt Amount</b>	
				Federal      County:		\$			
				State      Municipality:					
<b>f. Purpose Code</b>				<b>j. Election Sum to Date</b>					
						\$			
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>		<b>g. Comments</b>		<b>k. Account Code</b>			
<b>l. Form of Payment</b>	<b>m. Required Remarks</b>				<b>n. Date (mm/dd/yyyy)</b>		<b>o. Amount</b>		
							\$		
<b>4. Total only this Page</b>							\$ 500.00		
<b>5. Total of ALL CRO-1320 Pages</b> <i>(This line must be on line 16 of Detailed Summary Page CRO-1100)</i>							\$ 500.00		
L - Returned to Contributor		M - Overpayment for Service		N - Exceeded Contribution Limit					
P* - Reimbursement of In-Kind		O* Other							
* Codes require detailed explanation in required remarks field (m)									