

# Disclosure Report Cover

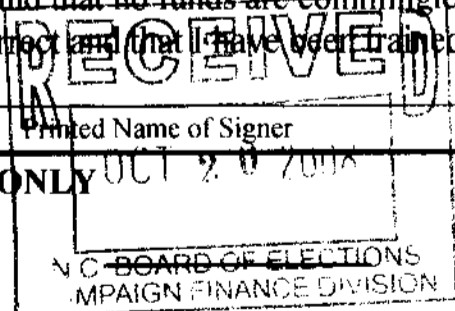
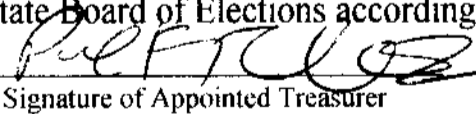
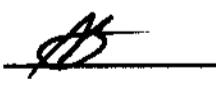

Amendment

Yes

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

|   |  |   |   |
|---|--|---|---|
| <b>1. Committee Information</b>   |  |   |   |
| <b>a. Full Name</b><br>Terrell III for State House  |  | <b>c. ID Number</b><br>STA-6WFO9-C-001  |   |
| <b>b. Mailing Address (include City, State and Zip Code)</b><br>4549 Tollington Dr<br>Raleigh, NC 27604-6161  |  | <b>d. Date Filed</b><br>10/20/08  |   |
|   |  | <b>e. Phone Number</b><br>919-212-3657  |   |
| <b>2. Report Year</b><br>2008   | <b>3. Period Start Date (mm/dd/yy)</b><br>01/01/08 | <b>4. Period End Date (mm/dd/yy)</b><br>04/19/08  | <b>5. Treasurer Full Name</b><br>Paul F. Terrell III                |
| <b>6. Type of Committee (Check One)</b>   |  | <b>9. Type of Report (check only one type of report from one category)</b>  |   |
| <input checked="" type="checkbox"/> Candidate Campaign<br><input type="checkbox"/> Joint Fundraiser<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Party<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Legal Expense Fund   |  | <b>Municipal</b><br><input type="checkbox"/> Organizational<br><input type="checkbox"/> Thirty-five day<br><input type="checkbox"/> Pre-primary<br><input type="checkbox"/> Pre-election<br><input type="checkbox"/> Pre-runoff<br><input type="checkbox"/> Semi-annual<br><input type="checkbox"/> Mid Year<br><input type="checkbox"/> Year End<br><input type="checkbox"/> Final<br><input type="checkbox"/> Special<br><b>State/County</b><br><input type="checkbox"/> Organizational<br><input type="checkbox"/> Quarterly<br><input checked="" type="checkbox"/> First<br><input type="checkbox"/> Second<br><input type="checkbox"/> Third<br><input type="checkbox"/> Fourth<br><input type="checkbox"/> Semi-annual<br><input type="checkbox"/> Mid Year<br><input type="checkbox"/> Year End<br><input type="checkbox"/> Final<br><input type="checkbox"/> Special<br><b>Referendum</b><br><input type="checkbox"/> Organizational<br><input type="checkbox"/> Pre-referendum<br><input type="checkbox"/> Final<br><input type="checkbox"/> Supplemental Final<br><input type="checkbox"/> Annual<br><input type="checkbox"/> Special |   |
| <b>7. Type of Fund (if applicable, check one)</b>   |  | <b>10. Special Report Name</b>  |   |
| <input type="checkbox"/> "Booster Fund"<br><input type="checkbox"/> Building Fund<br><input type="checkbox"/> Presidential Election Year Candidates Fund<br><input type="checkbox"/> NC Public Campaign Financing Fund<br><input type="checkbox"/> Other:   |  |   |   |
| <b>8. Number of Fundraisers this Report</b>   |  |   |   |
|   |  |   |   |
| <b>11. Account Information</b>  |  | <b>11. Account Information</b>  |   |
| <b>a. Financial Institution Full Name</b><br>Bank of America  |  | <b>a. Financial Institution Full Name</b>   |   |
| <b>b. Purpose</b><br>Checking   | <b>c. Account Code</b><br>-22                      | <b>b. Purpose</b>   | <b>c. Account Code</b>  |
|   | <b>d. Period Begin Balance</b><br>\$ 00.00         |   | <b>d. Period Begin Balance</b><br>\$ 00.00                          |
| <b>CERTIFICATION</b>  |  |   |   |
| I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 if 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 according to N.C.G.S. 163-278.7(f). |  |   |   |
|    |  |    |   |
| Printed Name of Signer  |  | Signature of Appointed Treasurer  |   |
|   |  | Date: 10/20/08  |   |
| <b>FOR OFFICE USE ONLY</b>  |  |   |   |
| Date Received:  | Date Postmarked:                                   | Employee:   | <b>Delivery Method</b>  |
|   |  |    | <input type="checkbox"/> Normal Mail                                |
| Date Scanned: 10-20-08  |  | Employee:    | <input type="checkbox"/> Registered Mail                            |
| Date Data Entered:  |  | Employee:   | <input checked="" type="checkbox"/> Hand Delivered                  |
|   |  |   | <input type="checkbox"/> Electronically Filed                       |
|   |  |   | <input type="checkbox"/> Signer has not received mandatory training |
| <b>Please Note:</b> 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.   |  |   |   |

# 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)                              |  | 2. Type of Report                            |  | 3. ID Number                |  |
|--|--|--|--|-----------------------------|--|
| Terrell III for State House  |  | Candidate Finance<br>1 <sup>st</sup> quarter |  | STA-6WFO9-C-001             |  |
| Start of Election Cycle: <b>January 1,</b>                                   |  | <b>2008</b>                                  |  | Total this Reporting Period |  |
| 4) Cash on Hand at Start   |  |  |  | \$ 00.00                    |  |
| 5) Aggregated Contributions from Individuals                                 |  | (CRO-1205)                                   |  | \$ 85.00                    |  |
| 6) Contributions from Individuals  |  | (CRO-1210)                                   |  | \$ 200.00                   |  |
| 7) Contributions from Political Party Committees                             |  | (CRO-1220)                                   |  | \$                          |  |
| 8) Contributions from Other Political Committees                             |  | (CRO-1230)                                   |  | \$                          |  |
| 9) Loan Proceeds   |  | (CRO-1410)                                   |  | \$ 500.00                   |  |
| 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 Organizations                         |  | (CRO-1250)                                   |  | \$                          |  |
| 11c) Outside Sources of Income   |  | (CRO-1250)                                   |  | \$                          |  |
| 11d) Legal Expense Fund – Other Sources                                      |  | (CRO-1270)                                   |  | \$                          |  |
| 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c and 11d)      |  |  |  | \$ 805.00                   |  |
| 13) Disbursements  |  |  |  |                             |  |
| 13a) Operating Expenditures  |  | (CRO-1310)                                   |  | \$ 455.16                   |  |
| 13b) Contributions to Candidates/Political Committees                        |  | (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)                                   |  | \$                          |  |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)          |  |  |  | \$ 455.16                   |  |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) |  |  |  | \$ 329.84                   |  |
| 20) Non-Monetary Gifts Given to Other Committees                             |  | (CRO-1330)                                   |  | \$                          |  |
| 21) Outstanding Loans (incl. ones from other campaigns)                      |  | (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)                                   |  | \$                          |  |
| 27) Contributions to be refunded   |  | (CRO-1215)                                   |  | \$                          |  |



# Contributions from Individuals

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

|   |                        |                           |   |                             |                                |                  |
|---|------------------------|---------------------------|---|-----------------------------|--------------------------------|------------------|
| <b>1. Committee Full Name (and Fund if applicable)</b>  |                        |                           |   |                             | <b>2. ID Number</b>            |                  |
| Terrell III for State House   |                        |                           |   |                             | STA-6WFO9-C-001                |                  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove       |                        |                           |   |                             |                                |                  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                |                        |                           | <b>b. Job Title/Profession</b>            |                             | <b>d. Comments</b>             |                  |
| Frederick J. and Marie E. Grasso<br>4620 Tollington Dr.<br>Raleigh, NC 27604<br><i>919-326-4774</i>             |                        |                           | Retired                                   |                             | Contribution 3/10/2008         |                  |
|   |                        |                           | <b>c. Employer's Name/Specific Field</b>  |                             |                                |                  |
|   |                        |                           | Retired                                   |                             | <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> |
| <input type="checkbox"/>  | -22                    | Check                     |   | 03/10/2008                  |                                | \$ 100.00        |
| <input type="checkbox"/>  |                        |                           |   |                             |                                | \$               |
| <input type="checkbox"/>  |                        |                           |   |                             |                                | \$               |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                  |                        |                           |   |                             |                                |                  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                |                        |                           | <b>b. Job Title/Profession</b>            |                             | <b>d. Comments</b>             |                  |
| F. Sophia Myers<br>214 W. Millbrook Rd.<br>Raleigh, NC 27609<br><i>919-849-6183</i>                             |                        |                           | Chiropractor                              |                             | Donation 4/02/2008             |                  |
|   |                        |                           | <b>c. Employer's Name/Specific Field</b>  |                             |                                |                  |
|   |                        |                           | Care Chiropractic Center/<br>Chiropractor |                             | <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> |
| <input type="checkbox"/>  | -22                    | Check                     |   | 04/02/2008                  |                                | \$ 100.00        |
| <input type="checkbox"/>  |                        |                           |   |                             |                                | \$               |
| <input type="checkbox"/>  |                        |                           |   |                             |                                | \$               |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                  |                        |                           |   |                             |                                |                  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                |                        |                           | <b>b. Job Title/Profession</b>            |                             | <b>d. Comments</b>             |                  |
|   |                        |                           |   |                             |                                |                  |
|   |                        |                           | <b>c. Employer's Name/Specific Field</b>  |                             |                                |                  |
|   |                        |                           |   |                             | <b>e. Election Sum to Date</b> |                  |
|   |                        |                           |   |                             | \$                             |                  |
| <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> |
| <input type="checkbox"/>  |                        |                           |   |                             |                                | \$               |
| <input type="checkbox"/>  |                        |                           |   |                             |                                | \$               |
| <input type="checkbox"/>  |                        |                           |   |                             |                                | \$               |
| <b>4. Total only this Page</b>  |                        |                           |   |                             | \$ 200.00                      |                  |
| <b>5. Total of ALL CRO-1210 Pages</b><br><i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> |                        |                           |   |                             | \$ 200.00                      |                  |



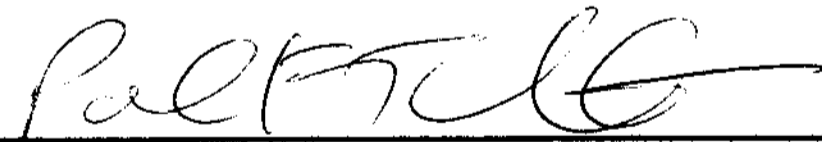
## Loan Proceeds Statement

The individual making a loan to the committee must provide the following information. Failure to provide all of the information requested could be a violation of campaign reporting disclosure laws.

|  |                               |
|--|-------------------------------|
| <b>Name of committee to receive loan:</b>                                | Terrell III for State House   |
| <b>Person lending money to committee (Lender):</b>                       | Paul F. Terrell III           |
| <b>Date of loan to committee:</b>  | 02/07/2008                    |
| <b>Name of lending institution and account number (source):</b>          | Bank of America<br>[REDACTED] |
| <b>Amount of loan:</b>   |                               |
| <b>Names of all parties responsible for payment of loan (guarantor):</b> | Paul F. Terrell III           |
| <b>Period of loan:</b>   | Indefinite                    |
| <b>Rate of interest of loan:</b>   | 0%                            |
| <b>Security pledged for loan:</b>  | None                          |

I, Paul F. Terrell III acknowledge that all of the  
(Person lending money to committee)

Information provided is complete, true, and accurate. I further understand I may not forgive a loan that has an outstanding balance to any source.

  
 \_\_\_\_\_  
**Signature of Lender**

  
 \_\_\_\_\_  
**Signature of Treasurer of Committee**

This form must be submitted with the disclosure report for which the loan is initially disclosed.

# Disbursements

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

|  |                           |   |  |   |                                |                                     |
|--|---------------------------|---|--|---|--------------------------------|-------------------------------------|
| <b>1. Committee Full Name (and Fund if applicable)</b>   |                           |   |  |   | <b>2. ID Number</b>            |                                     |
| Terrell III for State House  |                           |   |  |   | STA-6WFO9-C-001                |                                     |
| <b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>  |                           |   |  |   |                                |                                     |
| <input checked="" type="checkbox"/> Operating Expenses   |                           | <input type="checkbox"/> Contributions to Candidates/Political Committees |  | <input type="checkbox"/> Coordinated Party Expenditures |                                |                                     |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                           |   |  |   |                                |                                     |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)   |                           |   | <b>b. Coordinated Committee Name</b>   |   | <b>d. Comments</b>             |                                     |
| ACCUSIGN, INCORPORATED<br>2940-14 Trawick Road<br>Raleigh, NC 27604<br>919-872-2008  |                           |   |  |   | Name badges                    |                                     |
|  |                           |   | <b>c. Level Registered (Specify)</b>   |   | <b>e. Election Sum to Date</b> |                                     |
|  |                           |   | <input type="checkbox"/> Federal <input type="checkbox"/> County:                |   |                                |                                     |
|  |                           |   | <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality: |   |                                |                                     |
|  |                           |   |  |   | \$ 27.76                       |                                     |
| <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>     |                                     |
| -22  | Check #0991               | B   | 2/08/2008  | \$27.76   | Name badges                    |                                     |
|  |                           |   |  | \$  |                                |                                     |
| <b>4. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove  |                           |   |  |   |                                |                                     |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)   |                           |   | <b>b. Coordinated Committee Name</b>   |   | <b>d. Comments</b>             |                                     |
| Graphic Master<br>3141-103 Capital Boulevard<br>Raleigh, NC 27604<br>919 872-0688  |                           |   |  |   | Business cards                 |                                     |
|  |                           |   | <b>c. Level Registered (Specify)</b>   |   | <b>e. Election Sum to Date</b> |                                     |
|  |                           |   | <input type="checkbox"/> Federal <input type="checkbox"/> County:                |   |                                |                                     |
|  |                           |   | <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality: |   |                                |                                     |
|  |                           |   |  |   | \$ 125.97                      |                                     |
| <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>     |                                     |
| -22  | Check #0992               | B   | 02/07/2008   | \$59.78   | Business cards                 |                                     |
| -22  | Check #0994               | B   | 04/01/2008   | \$66.19   | Business cards                 |                                     |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                           |   |  |   |                                |                                     |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)   |                           |   | <b>b. Coordinated Committee Name</b>   |   | <b>d. Comments</b>             |                                     |
| Wake County Board of Elections   |                           |   |  |   | Filing fee                     |                                     |
|  |                           |   | <b>c. Level Registered (Specify)</b>   |   | <b>e. Election Sum to Date</b> |                                     |
|  |                           |   | <input type="checkbox"/> Federal <input type="checkbox"/> County:                |   |                                |                                     |
|  |                           |   | <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality: |   |                                |                                     |
|  |                           |   |  |   | \$ 207.00                      |                                     |
| <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>     |                                     |
| -22  | Check #0993               | O   | 2/11/2008  | \$207.00  | Filing fee                     |                                     |
|  |                           |   |  | \$  |                                |                                     |
| <b>5. Total only this Page</b>   |                           |   |  |   | \$ 360.73                      |                                     |
| <b>6. Total of ALL CRO-1310 Pages</b><br><i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i><br><i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i><br><i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> |                           |   |  |   | \$                             |                                     |
| <b>7. Purpose Codes</b> (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                                    |                                | O* - Other                          |
| * 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

|  |                           |   |   |   |  |
|--|---------------------------|---|---|---|--|
| <b>1. Committee Full Name (and Fund if applicable)</b>   |                           |   |   |   | <b>2. ID Number</b>  |
| Terrell III for State House  |                           |   |   |   | STA-6WFO9-C-001  |
| <b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>  |                           |   |   |   |  |
| <input checked="" type="checkbox"/> Operating Expenses   |                           | <input type="checkbox"/> Contributions to Candidates/Political Committees |   | <input type="checkbox"/> Coordinated Party Expenditures |  |
| <b>4. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove  |                           |   |   |   |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br>Office Max #1303<br>Shoppes at Midway Plantation<br>Knightdale, NC 27545<br>919-261-0743   |                           |   | <b>b. Coordinated Committee Name</b>  |   | <b>d. Comments</b><br>Office Supplies<br>Inkjet paper<br>Address stamp |
|  |                           |   | <b>c. Level Registered (Specify)</b><br><input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality: |   | <b>e. Election Sum to Date</b><br>\$ 73.09                             |
| <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>   |
| -22  | Debit                     | K   | 02/16/2008  | \$29.34   | inkjet paper<br>address stamp  |
| -22  | Debit                     | K   | 03/17/2008  | \$43.75   | 400 copies<br>1000paper clips  |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                           |   |   |   |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br>Office Max<br>Shoppes at Midway Plantation<br>Knightdale, NC 27545<br>919-261-0743   |                           |   | <b>b. Coordinated Committee Name</b>  |   | <b>d. Comments</b><br>campaign stamp                                   |
|  |                           |   | <b>c. Level Registered (Specify)</b><br><input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality: |   | <b>e. Election Sum to Date</b><br>\$ 21.34                             |
| <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>   |
| -22  | Debit                     | K   | 04/03/2008  | \$21.34   | Stamp  |
|  |                           |   |   | \$  |  |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                           |   |   |   |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)   |                           |   | <b>b. Coordinated Committee Name</b>  |   | <b>d. Comments</b>   |
|  |                           |   | <b>c. Level Registered (Specify)</b><br><input type="checkbox"/> Federal <input type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality:            |   | <b>e. Election Sum to Date</b><br>\$                                   |
| <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>   |
|  |                           |   |   | \$  |  |
|  |                           |   |   | \$  |  |
| <b>5. Total only this Page</b>   |                           |   |   |   | \$ 94.43   |
| <b>6. Total of ALL CRO-1310 Pages</b><br><i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i><br><i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i><br><i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> |                           |   |   |   | \$ 455.16  |
| <b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)   |                           |   |   |   |  |
| A* - Media   |                           | B* - Printing   |   | C* - Fundraising  |  |
| E - Salaries   |                           | F* - Equipment  |   | G - Political Party                                     |  |
| I - Postage  |                           | J - Penalties   |   | K* - Office Expenses                                    |  |
|  |                           |   |   | D - To Another Candidate                                |  |
|  |                           |   |   | H* - Holding Public Office Expenses                     |  |
|  |                           |   |   | O* - Other  |  |
| * Codes require detailed explanation in required remarks field (k)   |                           |   |   |   |  |