| Disclosure Re | eport Cover | | | | Amendment |
|--------------------------|---|-----------------------------|---------------------|--|--|
| Use this form for go | eneral report and committee | information, must be | e signed and sul | omitted along wit | h other detailed forms |
| Do not use this form | n to update information | and the second | e signed and suc | omitted along wit | n other detailed forms. |
| 1. Committee Info | rmation | | | | |
| a. Full Name | | | | | c. ID Number |
| Crawford Campaig | gn | | | A COMPANIE OF STREET | GRA-C1290N-C002 |
| | | activities and the second | | | GRA 6125014-6002 |
| | clude City, State and Zip Code) | | Luine com | | d. Date Filed |
| 509 College St. | | | | | 0 200 |
| Oxford NC 27565 | | | | | 7-29-15 |
| | | | | | e. Phone Number |
| | | | | | 919/492-0185 |
| XEXECULA SE CONTRACTOR | | A Days | P. I.D. | | 3137.132.0103 |
| 2. Report Year | 3. Period Start Date (mm/ | dd/yy) 4. Period (mm/dd/yy) | End Date | 5. Treasurer F | 'ull Name |
| 2012 | 10/22/13 | | /21/12 | Alice Jean Har | ris |
| 2012 | 10/22/13 | 12 | /31/13 | | |
| 6. Type of Commit | tee (Check One) | 9. Type of Report | t (check on | ly one type of rep | ort from one category) |
| Candidate Camp | = | Municipal | State/C | | Referendum |
| PAC Independent | Referendum | Organizationa | 1 🗆 | Organizational | Organizational |
| Expenditure | Joint Fundraiser | Thirty-five da | y | Quarterly | Pre-referendum |
| Legal Expense F | und | | | | |
| 7. Type of Fund | (if applicable, check one) | Pre-primary | | First | Final |
| Booster Fund" | | Pre-election | | Second | Supplemental Final |
| Building Fund | | Pre-runoff | | Third | Annual |
| | | Semi-annual Mid Yea | . 🗆 . | Fourth | Special |
| Other: | | Year End | | Semi-annual Mid Year | 10 Cassial Danaut Name |
| outer. | | Final | ' IH | Year End | 10. Special Report Name |
| 8. Number of Fund | raisers this Report | Special | lH i | Final | |
| | 0 | | | Special | |
| 11. Account Inform | | | 11. Account 1 | | |
| a. Financial Institution | | | | itution Full Name | |
| Capital Bank | | | | 10 Million Charles Lade Strong Control (Charles V. 72. | |
| b. Purpose | c. Account Code | | b. Purpose | | c. Account Code |
| checking | 2 | | | | |
| | | | | | |
| | d. Period Begin Balance | | | | d. Period Begin Balance |
| | \$ 26,966.89 | | | | s |
| | | | | | |
| CERTIFICATION | | | | | |
| I certify that the Cor | nmittee or Fund is in compli | ance with all applica | ble provisions | of Article 22A, 22 | 2B, & 22D-22M of Chapter 163 of |
| is complete true and | l correct and that I have beer | mmingled with pron | State Board of E | non-disclosed fun | ds. I further certify that this report |
| Alice Jean | | i damed by the ive i | Michoa | 21 | 7-29-15 |
| | Printed Name of Signer | | ignature of Appoint | ted Freasurer | Date |
| FOR OFFICE USE C | | | 0 | | |
| Date Received: | 7 / 2930. | Employee: | CIM | # 1 /1. h. | Obelivery Method |
| | 100 | Zimpioyee. | Caru- | nern | Normal Mail |
| Date Postmarke | d: 18 18 18 18 18 18 18 18 18 18 18 18 18 | Employee: | | | Registered Mail Hand Delivered |
| | /N JUL 201 | 5 6 | | | Electronically Filed |
| Date Scanned: | GRANVILLE CO | . Employee: | | A STATE OF THE STA | Signer has not received |
| Date Data Enter | 00100 00 | | | | mandatory training |
| Date Data Effet | ELECTIONS | | | | |
| Please Note: Thi | is form cannot be used to am | end committee infor | mation such as | the committee ad | dress, treasurer, assistant treasurer, |
| | Sibole is | n of books informat | ion, or account | information. | ,, noordant ir vidual of, |
| | Vou must amend the States | | | | vittae changes |

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

Amendment \boxtimes Yes No

| 1. Committee Full Name (and Fund if applicable) 2. T | ype of Report | | | 3. ID N | umber |
|---|---------------|-------|--|---------|------------------------------|
| C . C 10 : | r end | | | | 1290N-C002 |
| | 012 | | Total this Reporting Period | | Total this Election Cycle |
| 4) Cash on Hand at Start | | \$ | 26,966.89 | \$ | 0 |
| RECEIPTS | | | na de la | | |
| 5) Aggregated Contributions from Individuals | (CRO-1205) | \$ | | \$ | |
| 6) Contributions from Individuals | (CRO-1210) | \$ | 200.00 | \$ | 500.00 |
| 7) Contributions from Political Party Committees | (CRO-1220) | \$ | | \$ | 10.00 |
| 8) Contributions from Other Political Committees | (CRO-1230) | \$ | 207.00 | \$ | 34,409.09 |
| 9) Loan Proceeds | (CRO-1410) | \$ | | \$ | |
| 10) Refunds/Reimbursements To the Committee | (CRO-1240) | \$ | | \$ | |
| 11) Other Receipt Sources | | 20.00 | | | State Succession - Sec. |
| 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) | \$ | | \$ | |
| 11 e) Exempt Purchase Price Sales | (CRO-1265) | \$ | | \$ | |
| 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d | and 11e) | \$ | 407.00 | \$ | 34,919.09 |
| EXPENDITURES | | 9 | | | |
| 13) Disbursements | | | | | |
| 13a) Operating Expenditures | (CRO-1310) | \$ | 2675.00 | \$ | 10,210.20 |
| 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) | \$ | | \$ | 10.00 |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 a | ind 17) | \$ | 2675.00 | \$ | 10,220.10 |
| (19) Cash on Hand at End (Add lines 4 and 12 together, then subtract li | ine 18) | \$ | 24,698.89 | \$ | 24,698.89 |
| ADDITIONAL INFORMATION | | | | | |
| 20) Non-Monetary Gifts Given to Other Committees | (CRO-1330) | \$ | | | estany day at the |
| 21) Outstanding Loans (incl. ones from other campaigns) | (CRO-1430) | \$ | | | |
| 22) Debts and Obligations owed By the Committee | (CRO-1610) | \$ | | | 《 我们 我们 |
| 23) Debts and Obligations owed To the Committee | (CRO-1620) | \$ | | | |
| 24) Account Transfers Within the Committee | (CRO-1720) | \$ | | 130 | |
| 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) | \$ | | \$ | |

| Use this | s form to report inc | dividual contributions | over \$5 | 50 or contributions u | Pg <u>1</u> inder \$50 if form (| of <u>1</u> CRO 1205 is | not used | es N |
|------------------------------|--|--|------------|-------------------------|--|----------------------------|-------------|---------------------|
| | | e (and Fund if applica | able) | | | 2. ID Nu | ımber | |
| Crawfor | rd Campaign | | | | | GI | RA-C1290N- | -C002 |
| P. Ope Principles Supplement | ributor Informati | | | Add 🔲 R | Remove | | | |
| | ame, Mailing Address le city, state, & zip) | & Phone | | b. Job Title/Profession | on A State of the | d. Comme | | |
| | on H. Yancey | | | retired | | verified from personal | | |
| PO Box | 627 | | | | | bank acc | count | |
| Oxford 1 | NC 27565 | | | c. Employer's Name/ | WILLIAM TO CALL A CONTRACTOR AND CON | 2 | | |
| | | | | automobile deale | :r | a Floation | Cum to Data | |
| | | | | | | | Sum to Date | |
| f. Prior | g. Account Code | h E-m of Boymant | 1 | | 012 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 | \$ | 200.00 | |
| T. Frior | | h. Form of Payment | i. In- | Kind Description | j. Date (mm/dd | | k. Amount | |
| | 2 | check | | | 11/5/ | /2013 | \$ | 200.00 |
| | | | | | | | \$ | |
| П | | | | | | | \$ | |
| 3 Contr | ributor Information | | | d C FFV | | | Þ | |
| The second second second | me, Mailing Address | | | Add Ro | emove | d. Commen | | |
| | e city, state, & zip) | | | D. GOD THE TOTAL SOLO | | u. Commen | 1ts | |
| | | | | 1 | | | | |
| | | | | c. Employer's Name/S | Specific Field | | | |
| | | | | | | e Election | Sum to Date | |
| | | | | | | | Sum to Date | SAUTE CONTRACTOR |
| - n . | т | E Paragraphic and the Control of the | | - Inches | | \$ | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-F | Kind Description | j. Date (mm/dd/ | уууу) | k. Amount | |
| | | | | | | | \$ | |
| | | | | | | | \$ | |
| | | | | | | | \$ | |
| | ibutor Informatio | | | Add Re | emove | | | |
| | me, Mailing Address & | & Phone | | b. Job Title/Profession | n | d. Commen | its | and the h |
| (Iliciauc | e city, state, & zip) | N. III DE ENGLISHMEN IN CO. | Baltyerras | 4 | | | | |
| | | | | c. Employer's Name/S | Specific Field | 122 | φ | |
| | | | | | | | | m##1007.###407.9845 |
| | | | | | | e. Election S | Sum to Date | |
| | | | | | | \$ | 3 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-K | Kind Description | j. Date (mm/dd/ | уууу) | k. Amount | |
| | | | | | | | \$ | |
| | | | | | | | \$ | |
| | | | | | | | \$ | |
| 4. Total | l only this Page | e | | | | \$ | | 200.00 |
| | l of ALL CRO | | | | | | | |
| | | Detailed Summary Page C | PO 1100 | | | \$ | | 200.0 |

Contributions from Individuals

Amendment

| | Full Name (and Fund if app | ther candidate, | San | HAS HALLD AND | New York Control of the Control of t | at 1 = 2 = 2 = 2 = 2 | | |
|---|--|-----------------|---|---|--|----------------------|-------------------|--------|
| Crawford Cam | paign | Jieubie) | | | | 2. II | O Number | |
| | | | | | | (| GRA-C12901 | N-C002 |
| 3. Contributor | | | Add | | Remove | | | |
| | ing Address & Phone | | b. Type | of Committee | | d. Co | mments | |
| NC Realtors PA | | | 到日 | Candidate | | | | |
| 4511 Weybridg | | | c Level l | Referendum Registered (Spec | ic. | - | | |
| Greensboro NC | 27409 | | | Federal | County: | SY. | | |
| | | | \boxtimes | State | ☐ Municipality | e. Ele | ction Sum to Da | ate |
| | | | | | | \$ | 207.00 | |
| Account Code | g. Form of Payment | h In Ki | nd Descriptio | | . n | | | |
| 2 | | 11. 111-101 | na Descriptio | | i. Date (mm/dd/yyy | y) | j. Amount | |
| 2 | check | | | | 11/5/2013 | 3 | \$ 207 | .00 |
| | | | | | | | \$ | |
| | | | | | | | \$ | |
| 3. Contributor | A SECURE AND A SECURITION OF THE SECURITION OF T | | Add | R | emove | | | |
| | ng Address & Phone | | b. Type of | f Committee | | d. Con | nments | |
| (include city, stat | e, & zip) | | 44 | Candidate Referendum | PAC | | | |
| | | | c. Level R | Referendum Registered (Speci | fv) | | | |
| | | | | Federal | County: | - | | |
| | | | | State | Municipality: | e. Elec | tion Sum to Da | te |
| | | | | | | \$ | | |
| Account Code | g. Form of Payment | h. In-Kir | nd Description | n | i. Date (mm/dd/yyy | y) | j. Amount | |
| | | | | | | | \$ | |
| | I | | | | | | \$ | |
| | | | | | | | | |
| | | | | | | | \$ | |
| | | | Add | R | emove | | \$ | |
| Full Name, Mailir | ng Address & Phone | | | Committee | Harling of the second | d. Com | | |
| | ng Address & Phone | | | Committee Candidate | emove PAC | d. Com | | |
| Full Name, Mailir | ng Address & Phone | | b. Type of | Committee Candidate Referendum | PAC | d. Com | | |
| Full Name, Mailin | ng Address & Phone | | b. Type of | Committee Candidate | PAC | d. Com | | |
| Full Name, Mailir | ng Address & Phone | | b. Type of | Committee Candidate Referendum egistered (Specif | PAC | | | te |
| Full Name, Mailir | ng Address & Phone | | b. Type of | Committee Candidate Referendum egistered (Special | PAC (y) County: | | aments | de |
| Full Name, Mailin (include city, state | ng Address & Phone | | b. Type of | Committee Candidate Referendum egistered (Special Federal | PAC (y) County: | e. Elect | aments | te |
| Full Name, Mailin (include city, state | ng Address & Phone c, & zip) | | b. Type of | Committee Candidate Referendum egistered (Special Federal | PAC (y) County: Municipality: | e. Elect | nments | de |
| | ng Address & Phone c, & zip) | | b. Type of | Committee Candidate Referendum egistered (Special Federal | PAC (y) County: Municipality: | e. Elect | tion Sum to Dat | de |
| Full Name, Mailin (include city, state | ng Address & Phone c, & zip) | | b. Type of | Committee Candidate Referendum egistered (Special Federal | PAC (y) County: Municipality: | e. Elect | ition Sum to Date | de |

(This line must be on line 8 of Detailed Summary Page CRO-1100)

207.00

| Disburser | | | | D _o | | • | Amendment | 11. |
|--|--|-----------------------------------|--------------|--|--|--|--|--|
| Use this form | to report expenditure | s from the commit | ttee | for; operating expenses | 1 of s, contributions to | 3 candidat | e/political | ! No |
| committees an | nd coordinated party e | expenditures. | | | , | · · | | |
| Crawford Can | e Full Name (and Fu | nd if applicable) | | 41-1-12-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1- | | | 2. ID Number | |
| 3. Type of Dis | | ease use senarate | CR | 0-1310 forms for each | tura a C Diekwas au | | GRA-C1290N | 1-C002 |
| The state of the s | g Expenses | Contributions to C | andi | dates/Political Committees | type of Disoursen | nordinated I | Party Expenditures | |
| 4. Payee Infor | rmation | | | Add | Remove | Milliateu I | Party Expenditures | resident services |
| \$156.00P. 4 Y SANG XCX ST RESULTED STORESTORES | ailing Address & Phone | | | . Coordinated Committee N | | d. Com | ments | |
| (include city, state | The second secon | | S. | | | THE PARK AND PARKET | THE PERSON NAMED IN COLUMN | STORDER TOWERS |
| The Daily Dis | | | 1000 | School and man destroy and with the second | | | | |
| 304 S. Chestnu Henderson NO | | | C. | Level Registered (Specify) | | 2 | | |
| 252/430-2500 | | | | | County: | 10 Mary 199, 1911 | No. 20 Constant April 1 | |
| | 232/130/2300 | | - | _ State _ | Municipality: | 12000000000 | ion Sum to Date | No. 1 |
| | | | | | | \$ 72: | 5.00 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | | i. Date (mm/dd/yyyy) | j. Amount | k. Requ | ired Remarks | |
| 2 | check | a | | 10/24/2013 | \$525.00 | | aper ads | Walter Land |
| 2 | check | a | | 10/29/2013 | \$200.00 | newspa | aper ads | |
| 4. Payee Inform | mation | | A | dd | Remove | | | |
| a. Full Name, Mail | iling Address & Phone | | b. | Coordinated Committee Na | THE RESERVE AND THE PROPERTY OF THE PROPERTY O | d. Comn | nents | |
| (include city, state, | , & zip) | | | | | | | Eller State Control of the Control o |
| WCBQ Radio | National deli | | 77,941 | | | | | |
| 601 Henderson | | | c. | Level Registered (Specify) | | | | |
| Oxford NC 275 | | = 1 | - | Federal | County: | Publicani Supplies | | |
| (919)093-1340 | (919)693-1340 | | State | | Municipality: | e. Election | on Sum to Date | |
| | | 1 | | | | \$ 350 | 00.0 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | | i. Date (mm/dd/yyyy) | j. Amount | k. Requi | red Remarks | -11 |
| 2 | check | a | | 10/28/2013 | \$350.00 | radio ao | and the control would have an in the case of | |
| | CHECK | a | | 10/28/2013 | \$350.00 | 100000000000000000000000000000000000000 | scottle. | |
| | | | | | \$ | | | ,002.17 |
| 4. Payee Inform | l nation | | A | dd Tarley | Remove | and a large | | |
| Selection of the Company of the Comp | ling Address & Phone | | 1 | Coordinated Committee Na | | d. Comm | ients | 3 (13 (10) |
| (include city, state, | | | Toleron. | | OF SEPTEMBERS OF THE SEC. | No. of the last of | Mariand Board Service | KI TO THE PARTY OF |
| Alice J. Harris | | | | | F2 | | | |
| 5709 Grasmere | | | c. I | Level Registered (Specify) | Albert Smith Son | | | |
| Raleigh NC 276 | 509 | | | Federal | County: | | | |
| (919)83-0633 | | 1 | L |] State 🖂 | Municipality: | e. Electio | on Sum to Date | DA SERVICE DE TOMOS |
| | | | | | | \$ 600 | 0.00 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | | i. Date (mm/dd/yyyy) | j. Amount | k. Requii | red Remarks | |
| | | PROPERTY SERVICES | 1000 | | | misc. cl | | |
| 2 | check | k | | 11/12/2013 | \$600.00 | & poll v | | |
| | | | | | \$ | | | |
| 5. Total only thi | is Page | | | | | \$ | 1675.00 | |
| Market and the second s | CRO-1310 Pages | | 370 | | Protection of the second | Ψ | 1075.00 | |
| | line 13a of Detailed Sum | | | | The second secon | \$ 2 | 2675.00 | |
| | | | | ontrib to Candidates/Politica | | D 2 | 2673.00 | |
| | | | | oordinated Party Expenditur | es) | | | |
| 7. Purpose Code A* - Media | es (List detailed exp B* - Printing | enditure code in (l C* - Fundr | Action where | | D. To Another | Candidat | | |
| E - Salaries | F* - Equipment | | | | D - To Another H* - Holding 1 | | | |
| I - Postage | J - Penalties | K* - Office | | | Q* - Donation | | | |
| 0* - Other | 1-4-9-d suplayed | | | 2 6 12 (1) | | | | |
| ^ Codes require | e detailed explanatio | in in required rei | nar | ks field (k) | Standard Standard | * (54) \$ (F) (4 | men de vin viere | |

Disbursements Amendment Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political Yes committees and coordinated party expenditures. 1. Committee Full Name (and Fund if applicable) 2. ID Number Crawford Campaign GRA-C1290N-C002 3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures 4. Payee Information \boxtimes Add Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) Jody Reed 111 Ward Ave, c. Level Registered (Specify) Oxford NC 27565 Federal

| | | | State 🖂 | Municipality: | STREET BY |
|---|---|--|---|--|--|
| | | 7 | | i. | e. Election Sum to Date |
| ć i | The May Set Spide | I in section with | | Francisco Constitution | \$ 100.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| 2 | check | 0 | 11/12/13 | \$100.00 | poll worker |
| | | | | \$ | |
| l. Payee Infort | | | Add | Remove | |
| | ling Address & Phone | | b. Coordinated Committee N | lame | d. Comments |
| nclude city, state, Iulia Brent Mil | | | | | |
| 42 Autumn C | | | A Label Discussing Lines (CA) | DEJEKANCO O TELEVISIO | 7 |
| ittsboro, NC 2 | | | c. Level Registered (Specify) Federal | Country | |
| 11100010, 110 2 | .7512 | | State | County: Municipality: | a Floation County Date |
| | | | | wuntcipanty. | e. Election Sum to Date |
| 1 V2 79 W44 | | 1.77 | | V-22-11-11-11-11-11-11-11-11-11-11-11-11- | \$ 200.00 |
| Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| 2 | check | 0 | 11/12/13 | \$200.00 | poll worker |
| | | | | \$ | |
| Payee Inform | nation | | Add | Remove | |
| | ing Address & Phone | | b. Coordinated Committee Na | ame | d. Comments |
| nclude city, state, Coltrane Milhol | | | | | |
| 42 Autumn Ch | | | c. Level Registered (Specify) | A service of the serv | |
| ittsboro NC 27 | | | Federal | County: | |
| | | | State | Municipality: | é. Election Sum to Date |
| | | | | | ************************************** |
| | r | | | | \$ 100.00 |
| Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| 2 | check | O | 11/12/13 | \$100.00 | poll worker |
| | | | | | |
| | | | | \$ | |
| | | | | \$ | \$ 400.00 |
| Total of ALL | CRO-1310 Pages | | | \$ | 200.00, |
| Total of ALL (This line goes in l | CRO-1310 Pages line 13a of Detailed Summ | 1.5 | | | \$ 400.00. 2675.00 |
| Total of ALL This line goes in l This line goes in l | CRO-1310 Pages line 13a of Detailed Summ line 13b of Detailed Summ | nary Page CRO-1100 | if Contrib to Candidates/Politica | al Comm) | 2675.00 |
| Total of ALL This line goes in l This line goes in l This line goes in l | CRO-1310 Pages line 13a of Detailed Summ line 13b of Detailed Summ line 13c of Detailed Summ | nary Page CRO-1100 nary Page CRO-1100 | if Contrib to Candidates/Politica if Coordinated Party Expenditur | al Comm) | 2675.00 |
| Total of ALL (This line goes in l (This line goes in l (This line goes in l Purpose Code | CRO-1310 Pages line 13a of Detailed Summ line 13b of Detailed Summ line 13c of Detailed Summ | nary Page CRO-1100 nary Page CRO-1100 | if Contrib to Candidates/Politica if Coordinated Party Expenditud 1.) above) | al Comm) | \$ 2675.00 |
| Total of ALL (This line goes in I) (This line goes in I) (This line goes in I) Purpose Code - Media - Salaries | CRO-1310 Pages line 13a of Detailed Summ line 13b of Detailed Summ line 13c of Detailed Summ es (List detailed expenses Printing F* - Equipment | nary Page CRO-1100 pary Page CRO-1100 pary Page CRO-1100 penditure code in (1 C* - Fundr G - Politica | if Contrib to Candidates/Politica if Coordinated Party Expenditur 1.) above) aising I Party | nl Comm) res) D - To Anothe H* - Holding | 2675.00 \$ r Candidate Public Office Expenses |
| Total of ALL (This line goes in I) (This line goes in I) (This line goes in I) Purpose Code - Media - Salaries Postage | CRO-1310 Pages line 13a of Detailed Summ line 13b of Detailed Summ line 13c of Detailed Summ es (List detailed expenses) B* - Printing | nary Page CRO-1100 nary Page CRO-1100 enditure code in (I C* - Fundr | if Contrib to Candidates/Politica if Coordinated Party Expenditur 1.) above) aising I Party | nl Comm) res) D - To Anothe H* - Holding | 2675.00 \$ |
| (This line goes in I (This line goes in I (This line goes in I Purpose Code - Media - Salaries - Postage - Other | CRO-1310 Pages line 13a of Detailed Summ line 13b of Detailed Summ line 13c of Detailed Summ es (List detailed expenses Printing F* - Equipment | nary Page CRO-1100 pary Page CRO-1100 pary Page CRO-1100 penditure code in (I C* - Fundr G - Politica K* - Office | if Contrib to Candidates/Politica if Coordinated Party Expenditur 1.) above) aising I Party Expenses | nl Comm) res) D - To Anothe H* - Holding | 2675.00 \$ r Candidate Public Office Expenses |

Amendment **Disbursements** Use this form to report expenditures from the committee for; operating expenses

| ose this form to report expenditi | | e ioi, operating | expenses, contributions | s to candidate/pontical |
|-----------------------------------|------------------|------------------|-------------------------|---|
| committees and coordinated part | ty expenditures. | | | 100 to 1 0 to 2 to |

| | full Name (and Ful | id if applicable) | | | 2. ID Number |
|--|--|--|-------------------------------------|---|--|
| Crawford Camp 3. Type of Dish | | | IDO 1210 C | | GRA-C1290-C002 |
| | | | CRO-1310 forms for each t | | |
| | | | ndidates/Political Committees | | ordinated Party Expenditures |
| 4. Payee Inform | | | Add | Remove | |
| | ing Address & Phone | | b. Coordinated Committee Na | ame | d. Comments |
| (include city, state, | & zip) | | | | |
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