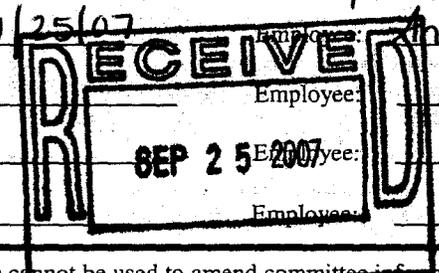


Disclosure Report Cover

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

1. Committee Information																																					
a. Full Name <i>Committee to Elect Bill CRISP to City Council</i>	c. ID Number <i>45Y0XC</i>																																				
b. Mailing Address (include City, State and Zip Code) <i>3804 SUNCHASE DRIVE FAYETTEVILLE, NC 28306</i>	d. Date Filed <i>09/25/2007</i>																																				
	e. Phone Number <i>910-425-5333</i>																																				
2. Report Year <i>2007</i>	3. Period Start Date (mm/dd/yy) <i>08/29/2007</i>																																				
4. Period End Date (mm/dd/yy) <i>09/24/2007</i>	5. Treasurer Full Name <i>William Joseph Leon Crisp</i>																																				
6. Type of Committee (Check One)																																					
<input type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum																																					
7. Type of Fund (if applicable, check one)																																					
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> NC Political Party Financing Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:																																					
8. Number of Fundraisers this Report																																					
9. Type of Report (check only one type of report from one category)																																					
<table style="width:100%; border:none;"> <tr> <td style="width:33%; border:none;">Municipal</td> <td style="width:33%; border:none;">State/County</td> <td style="width:33%; border:none;">Referendum</td> </tr> <tr> <td style="border:none;"><input type="checkbox"/> Organizational</td> <td style="border:none;"><input type="checkbox"/> Organizational</td> <td style="border:none;"><input type="checkbox"/> Organizational</td> </tr> <tr> <td style="border:none;"><input type="checkbox"/> Thirty-five day</td> <td style="border:none;"><input type="checkbox"/> Quarterly</td> <td style="border:none;"><input type="checkbox"/> Pre-referendum</td> </tr> <tr> <td style="border:none;"><input checked="" type="checkbox"/> Pre-primary</td> <td style="border:none;"><input type="checkbox"/> First Plus</td> <td style="border:none;"><input type="checkbox"/> Final</td> </tr> <tr> <td style="border:none;"><input type="checkbox"/> Pre-election</td> <td style="border:none;"><input type="checkbox"/> Second</td> <td style="border:none;"><input type="checkbox"/> Supplemental Final</td> </tr> <tr> <td style="border:none;"><input type="checkbox"/> Pre-runoff</td> <td style="border:none;"><input type="checkbox"/> Third Plus</td> <td style="border:none;"><input type="checkbox"/> Annual</td> </tr> <tr> <td style="border:none;">Semi-annual</td> <td style="border:none;"><input type="checkbox"/> Fourth</td> <td style="border:none;"><input type="checkbox"/> Special</td> </tr> <tr> <td style="border:none;"><input type="checkbox"/> Mid Year</td> <td style="border:none;">Semi-annual</td> <td></td> </tr> <tr> <td style="border:none;"><input type="checkbox"/> Year End</td> <td style="border:none;"><input type="checkbox"/> Mid Year</td> <td></td> </tr> <tr> <td style="border:none;"><input type="checkbox"/> Final</td> <td style="border:none;"><input type="checkbox"/> Year End</td> <td></td> </tr> <tr> <td style="border:none;"><input type="checkbox"/> Special</td> <td style="border:none;"><input type="checkbox"/> Final</td> <td></td> </tr> <tr> <td style="border:none;"></td> <td style="border:none;"><input type="checkbox"/> Special</td> <td></td> </tr> </table>		Municipal	State/County	Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum	<input checked="" type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus	<input type="checkbox"/> Final	<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final	<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third Plus	<input type="checkbox"/> Annual	Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special	<input type="checkbox"/> Mid Year	Semi-annual		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year		<input type="checkbox"/> Final	<input type="checkbox"/> Year End		<input type="checkbox"/> Special	<input type="checkbox"/> Final			<input type="checkbox"/> Special	
Municipal	State/County	Referendum																																			
<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational																																			
<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum																																			
<input checked="" type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus	<input type="checkbox"/> Final																																			
<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final																																			
<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third Plus	<input type="checkbox"/> Annual																																			
Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special																																			
<input type="checkbox"/> Mid Year	Semi-annual																																				
<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year																																				
<input type="checkbox"/> Final	<input type="checkbox"/> Year End																																				
<input type="checkbox"/> Special	<input type="checkbox"/> Final																																				
	<input type="checkbox"/> Special																																				
10. Special Report Name																																					
11. Account Information																																					
a. Financial Institution Full Name <i>BRANCH BANKING & TRUST</i>																																					
b. Purpose <i>Campaign Account for Receipts and Expenditures</i>																																					
c. Account Code <i>1</i>																																					
d. Period Begin Balance <i>\$ 8346.59</i>																																					
11. Account Information																																					
a. Financial Institution Full Name																																					
b. Purpose																																					
c. Account Code																																					
d. Period Begin Balance																																					
CERTIFICATION																																					
I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct and that I have been trained by the NC State Board of Elections according to Article 163-278.9(k).																																					
<i>William J. L. Crisp</i> Printed Name of Signer	<i>William J. L. Crisp</i> Signature of Appointed Treasurer																																				
	<i>Sep 25, 2007</i> Date																																				
FOR OFFICE USE ONLY																																					
Date Received: <i>9/25/07</i>	Delivery Method																																				
Date Postmarked: _____	<input type="checkbox"/> Normal Mail																																				
Date Scanned: _____	<input type="checkbox"/> Registered Mail																																				
Date Data Entered: _____	<input checked="" type="checkbox"/> Hand Delivered																																				
	<input type="checkbox"/> Electronically Filed																																				
	<input type="checkbox"/> Signer has not received mandatory training																																				
																																					
<p>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.</p>																																					

Contributions from Individuals

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 Bill Crisp to City Council	45Y0XC

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	
PRIMIS T. JAMES 7490 AMBASSADOR DRIVE RIVERDALE, GA 30296 (770) 907-7229		INVESTIGATOR			
		c. Employer's Name/Specific Field		e. Election Sum to Date	
		Solicitor's Office, City of Atlanta, GA		\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	CHECK		09/04/2007	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
PERNELL R. COOPER 903 FORDHAM ROAD NEPTUNE, NJ 07753 (732) 918-8009		Retired US Army CSM			
		c. Employer's Name/Specific Field		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
<input type="checkbox"/>	1	CHECK		09/06/2007	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
ELLEN K. PARKER 9003 GALATIA Church Road FAYETTEVILLE, NC 28304 (910) 867-5594		Ret Educator			
		c. Employer's Name/Specific Field		e. Election Sum to Date	
		Cumberland County School System		\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	CHECK		09/08/2007	\$ 100.00
<input checked="" type="checkbox"/>	1	CHECK		06/10/2007	\$ 100.00
<input type="checkbox"/>					\$

4. Total only this Page	\$ 250.00
-------------------------	-----------

5. Total of ALL CRO-1210 Pages	\$ 950.00
--------------------------------	-----------

Contributions from Individuals

Amendment
 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 Bill CRISP to City Council 4540XC

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) JAMES H. GREENWAY 460 LAUREL PARK COOKEVILLE, TN 38501 (931) 372-0250	b. Job Title/Profession Retired Army c. Employer's Name/Specific Field	d. Comments 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
<input type="checkbox"/>	1	CHECK		09/08/2007	\$ 50.00
<input checked="" type="checkbox"/>	1	CHECK		08/03/2007	\$ 50.00
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) JOSEPH D. HIBST 3304 PLACIDO PLACE FAYETTEVILLE, NC 28306 (910) 425-8689	b. Job Title/Profession Ret Army & Ret Civil Svc c. Employer's Name/Specific Field	d. Comments 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
<input type="checkbox"/>	1	CHECK		09/12/2007	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) CHARLES E. TART, SR. 306 ANDOVER ROAD FAYETTEVILLE, NC 28311 (910) 822-0712	b. Job Title/Profession Retired US Army c. Employer's Name/Specific Field	d. Comments 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
<input type="checkbox"/>	1	CHECK		09/17/2007	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page \$ 150.00

5. Total of ALL CRO-1210 Pages \$

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

Contributions from Individuals

Pg 3 of 3

Amendment
 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) Committee to Elect Bill CRISP to City Council	2. ID Number 45Y0XC
---	-------------------------------

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) JUANA M. MAYS-BLACKSHEAR 3820 SUNCHASE DRIVE FAYETTEVILLE, NC 28306 (910) 823-9940		b. Job Title/Profession Active Duty US Army		d. Comments:	
		c. Employer's Name/Specific Field Ft. Bragg, NC		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
<input type="checkbox"/>	1	CHECK		09/17/2007	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Judith W. WEGNER 2307 PICKARD MOUNTAIN ROAD HILLSBOROUGH, NC 27278 (910) 929-5024		b. Job Title/Profession LAW PROFESSOR		d. Comments:	
		c. Employer's Name/Specific Field UNC Sch of LAW Chapel Hill, NC		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
<input type="checkbox"/>	1	CHECK		09/21/2007	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) CHARLES A. GORE 3174 BITTERSWEET DRIVE FAYETTEVILLE, NC 28304 (910) 424-4042		b. Job Title/Profession Building Contractor		d. Comments:	
		c. Employer's Name/Specific Field GORE BUILT HOMES, INC FAYETTEVILLE, NC		e. Election Sum to Date \$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	CHECK		09/22/2007	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ 550.00
-------------------------	------------------

5. Total of ALL CRO-1210 Pages	\$
--------------------------------	----

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

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		2. ID Number	
Committee to Elect Bill Crisp to City Council				45Y0XC	
Start of Election Cycle: January 1, 2007			Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start			\$ 8346.59		\$ 0
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$	
6) Contributions from Individuals (CRO-1210)		\$ 950.00		\$ 10,569.00	
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 Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, and 11c)		\$ 950.00		\$ 10,569.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 4813.64		\$ 6086.05	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
13c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
14) Loan Repayments (CRO-1420)		\$		\$	
15) Refunds/Reimbursements From the Committee (CRO-1320)		\$		\$	
16) In-Kind Contributions (CRO-1510)		\$		\$	
17) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, and 16)		\$ 4813.64		\$ 6086.05	
18) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 17)		\$ 4482.95		\$ 4482.95	
ADDITIONAL INFORMATION					
19) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
20) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$			
21) Debts and Obligations owed By the Committee (CRO-1610)		\$			
22) Debts and Obligations owed To the Committee (CRO-1620)		\$			
23) Account Transfers Within the Committee (CRO-1720)		\$			
24) Administrative Support (CRO-1710)		\$		\$	
25) Forgiven Loans (CRO-1440)		\$		\$	
26) 48-Hour Notice Reports Sum		\$		\$	

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) Committee to Elect Bill Crisp to City Council	2. ID Number 45Y0XC
---	-------------------------------

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 Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Office Max 1800 Skibo Road Fayetteville, NC 28303 (910) 487-3738	b. Coordinated Committee Name	d. Comments
c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 67.52

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CHECK	K	04/11/2007	\$ 67.52	Stamps, Paper, Print Cartridges
				\$	

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) US Postal Service Haymount Station Fayetteville, NC 28305-4835 (910) 486-8981	b. Coordinated Committee Name	d. Comments
c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 41.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CHECK	I	09/12/2007	\$ 41.00	100 Postage Stamps
				\$	

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) Hodges Associates, Inc 912 Hay Street Fayetteville, NC 28305 (910) 483-8489	b. Coordinated Committee Name	d. Comments
c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 1,065.31

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CHECK	A	09/21/2007	\$ 284.81	Design Yard Signs/Billboards
				\$	

5. Total only this Page **\$ 393.33**

6. Total of ALL CRO-1310 Pages
 (This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)
 (This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)
 (This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)
\$ 4813.64

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	O* - Other

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 Bill Crisp to City Council						4540XC	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
William GEORG Printing 3469 Black and Decker Road Hope Mills, NC 28348 (910) 221-2700							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 4420.31	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	CHECK	B	09/22/2007	\$ 4420.31	Yd Signs/Pole Hangers/Billboards		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				\$			
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
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						\$ 4420.31	
6. Total of ALL CRO-1310 Pages						\$	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>							
<i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>							
<i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
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	O* - Other				
* Codes require detailed explanation in required remarks field (k)							