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	c. ID Number
LEE WARREN COMMITTEE	
b. Mailing Address (include City, State and Zip Code)	**d. Date Filed**
P O BOX 87047 FAYETTEVILLE, NC 28304-7047	01/14/2011
	e. Phone Number
	(910) 484-0145

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2010	07/01/2010	12/31/2010	JOHN G BUIE JR

6. Type of Committee (Check One)

- ☒ Candidate Campaign
- ☐ Party
- ☐ PAC
- ☐ Referendum
- ☐ Independent Expenditure
- ☐ Joint Fundraiser
- ☐ Legal Expense Fund

7. Type of Fund *(if applicable, check one)*

- ☐ Booster Fund
- ☐ Building Fund
- ☐ Other:

8. Number of Fundraisers this Report

1

9. Type of Report *(check only one type of report from one category)*

Municipal	State/County	Referendum
☐ Organizational	☐ Organizational	☐ Organizational
☐ Thirty-five day	Quarterly	☐ Pre-referendum
☐ Pre-primary	☐ First	☐ Final
☐ Pre-election	☐ Second	☐ Supplemental Final
☐ Pre-runoff	☐ Third	☐ Annual
Semi-annual	☐ Fourth	☐ Special
☐ Mid Year	Semi-annual	
☐ Year End	☐ Mid Year	**10. Special Report Name**
☐ Final	☒ Year End	
☐ Special	☐ Final	
	☐ Special	

11. Account Information

a. Financial Institution Full Name	b. Purpose	c. Account Code	d. Period Begin Balance
BRANCH BANK & TRUST CO	CAMPAING FINANCE	001	$

11. Account Information

a. Financial Institution Full Name	b. Purpose	c. Account Code	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.

Printed Name of Signer	Signature of Appointed Treasurer	Date
JOHN G BUIE JR		01/18/2011

FOR OFFICE USE ONLY

Date Received: _____ Employee: _____

Date Postmarked: _____ Employee: _____

Date Scanned: JAN 20 2011 Employee: _____

Date Data Entered: _____ Employee: _____

Delivery Method
- ☐ Normal Mail
- ☐ Registered Mail
- ☒ Hand Delivered
- ☐ Electronically Filed

☐ 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.

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
LEE WARREN COMMITTEE	2010 Year End Semi-Annual	

Start of Election Cycle: January 1, 2009		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 5,808.06	$ 11,172.85
RECEIPTS			
5) Aggregated Contributions from Individuals	*(CRO-1205)*	$ 300.00	$ 550.00
6) Contributions from Individuals	*(CRO-1210)*	$ 6,660.00	$ 13,760.00
7) Contributions from Political Party Committees	*(CRO-1220)*	$ 0.00	$ 0.00
8) Contributions from Other Political Committees	*(CRO-1230)*	$ 0.00	$ 0.00
9) Loan Proceeds	*(CRO-1410)*	$ 0.00	$ 0.00
10) Refunds/Reimbursements to the Committee	*(CRO-1240)*	$ 0.00	$ 50.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts	*(CRO-1250)*	$ 0.00	$ 0.00
11b) Contributions from Not-For-Profit Organizations	*(CRO-1250)*	$ 0.00	$ 0.00
11c) Outside Sources of Income	*(CRO-1250)*	$ 0.00	$ 0.00
11d) Legal Expense Fund - Other Sources	*(CRO-1270)*	$ 0.00	$ 0.00
11e) Exempt Purchase Price Sales	*(CRO-1265)*	$ 0.00	$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		$ 6,960.00	$ 14,360.00
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	*(CRO-1310)*	$ 6,151.67	$ 17,853.05
13b) Contributions to Candidates/Political Committees	*(CRO-1310)*	$ 0.00	$ 0.00
13c) Coordinated Party Expenditures	*(CRO-1310)*	$ 0.00	$ 0.00
14) Aggregated Non-Media Expenditures	*(CRO-1315)*	$ 212.10	$ 1,275.51
15) Loan Repayments	*(CRO-1420)*	$ 0.00	$ 0.00
16) Refunds/Reimbursements from the Committee	*(CRO-1320)*	$ 0.00	$ 0.00
17) In-Kind Contributions	*(CRO-1510)*	$ 0.00	$ 0.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 6,363.77	$ 19,128.56
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 6,404.29	$ 6,404.29
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	*(CRO-1330)*	$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns)	*(CRO-1430)*	$ 0.00	
22) Debts and Obligations owed by the Committee	*(CRO-1610)*	$ 0.00	
23) Debts and Obligations owed to the Committee	*(CRO-1620)*	$ 0.00	
24) Account Transfers Within the Committee	*(CRO-1720)*	$ 0.00	
25) Administrative Support	*(CRO-1710)*	$ 0.00	$ 0.00
26) Forgiven Loans	*(CRO-1440)*	$ 0.00	$ 0.00
27) 48-Hour Notice Reports Sum	*(CRO-2220)*	$ 0.00	$ 0.00
28) Contributions to be Refunded	*(CRO-1215)*	$ 0.00	$ 0.00

Aggregated Contributions from Individuals

Page 1 of 1

Amendment ☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
LEE WARREN COMMITTEE	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	001	Check		09/14/2010	$ 50.00
☐ Add ☐ Remove	001	Check		10/04/2010	$ 50.00
☐ Add ☐ Remove	001	Check		10/01/2010	$ 50.00
☐ Add ☐ Remove	001	Check		09/10/2010	$ 50.00
☐ Add ☐ Remove	001	Check		10/11/2010	$ 50.00
☐ Add ☐ Remove	001	Check		09/30/2010	$ 50.00

4. Total only this Page	$ $300.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ $300.00

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
LEE WARREN COMMITTEE	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
D. Keith Allison 401 Harlow Drive Fayetteville, NC 28314	Chief Executive Officer/Owner	Systel, Inc.		$ 390.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/27/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
RYAN C AUL 163 S CHURCHILL DR FAYETTEVILLE, NC 28303	GENERAL MANAGEMENT	SYSTEL		$ 265.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/07/2010	$ 265.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Kristen L Baker 4000 Abercrombie Ct Fayetteville, NC 28312	Homemaker			$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/17/2010	$ 200.00
☐					$
☐					$

4. Total only this Page	$ 565.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,660.00

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
LEE WARREN COMMITTEE	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Stephen L. Baker 1709 Ft. Bragg Road Fayetteville, NC 28303	OUTSIDE SALES	NORTH & SOUTH LIGHTING SALES		$ 70.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/19/2010	$ 70.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JOHN F BRIGGS 623 GALLOWAY DR FAYETTEVILLE, NC 28303	CORPORATE EXECUTIVE	COMMUNICTION INDUSTRY		$ 280.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/07/2010	$ 70.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DOUG BRISSON 127 WYNNCREST LAKE FAYETTEVILLE, NC 28303	SALES MANAGER	COPIERS PLUS, INC		$ 240.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/07/2010	$ 70.00
☐					$
☐					$

4. Total only this Page	$ 210.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,660.00

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
LEE WARREN COMMITTEE	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
WILLIS D BROWN 1632 VERRAZZANO DR WILMINGTON, NC 28405	PERSONAL SERVICE	ATTORNEY		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	001	Check		09/17/2009	$ 50.00
☐	001	Check		09/01/2010	$ 50.00
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Rhonda J Bruckner 3347 QUARRY DR Fayetteville, NC 28303	Personal Serevice	Paralegal		$ 555.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/03/2010	$ 185.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Michael A Cole 5127 Raeford Rd Fayetteville, NC 28304	Sales	Cumberland Pawn		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/04/2010	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 335.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,660.00

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
LEE WARREN COMMITTEE	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
GEORGE DASKAL 1433 RAEFORD RD FAYETTEVILLE, NC 28305-5071	RETIRED	CUMBERLAND COUNTY SHERIFF DEPT		$ 335.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/04/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DAN D DEDERICK 6838 SURREY RD FAYETTEVILLE, NC 28306	MANAGEMENT	AUTO SALES INDUSTRY		$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/04/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
WILLIAM FAIRCLOTH 2307 ROLLING HILL RD FAYETTEVILLE, NC 28304	CPA	JOHNSON CHESTNUT & ASSOCIATES		$ 90.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/07/2010	$ 20.00
☐					$
☐					$

4. Total only this Page	$ 220.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,660.00

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
LEE WARREN COMMITTEE	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
BRIAN C FULCHER 3837 WILLIFORD ST EASTOVER, NC 28312	SIGNAL TECHINICIAN	FULCHER ELECTRIC		$ 190.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/06/2010	$ 55.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
LOUIS A FULCHER JR 3334 BEARD RD FAYETTEVILLE, NC 28312	BUSINESS OWNER	FULCHER ELECTRIC		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/05/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
J DUANE GILLIAM JR P O BOX 53555 FAYETTEVILLE, NC 28305	ATTORNEY	SELF EMPLOYED		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/29/2010	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 255.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,660.00

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
LEE WARREN COMMITTEE	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CHARLES GORE 3174 BITTERSWEET DR FAYETTEVILLE, NC 28306	BUSINESS OWNER	GORE BUILDDERS		$ 300.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/07/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
HENLEY S HALES 3868 BUTLER ISLAND BRIDGE RD ROSEBORO, NC 28382	RETIRED	INTERNAL REVENUE SERVICE		$ 800.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/16/2010	$ 200.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Swayn G Hamlet 2514 Mirror Lake Dr Fayetteville, NC 28303	Business Owner	Swayn Hamlet Appraisals		$ 400.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/01/2010	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 400.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,660.00

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
LEE WARREN COMMITTEE	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Bradford S. Hancox 313 Murray Hill Road Fayetteville, NC 28303	Attorney	Bradford Hancox Attorney At Law		$ 300.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/04/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Jerry Hogge 5313 Clypso Ct Hope Mills, NC 28348	Education	Methodist College		$ 400.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/25/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Reid A Horne 2615 Edmonton Rd Fayetteville, NC 28304	Bank Officer	Branch Bank		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/06/2010	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 300.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,660.00

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
LEE WARREN COMMITTEE	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CATHY HORNE 2100 GASTON VILLAGE LN FAYETTEVILLE, NC 28312	MANAGER	SANDY RIDGE ELECTRIC		$ 400.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/13/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
H. Terry Hutchens 1117 OFFSHORE DR FAYETTEVILLE, NC 28305	Attorney	The Law Firm of Hutchens & Senter		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/06/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JOHN H JACKSON 211 PETTY RD SANFORD, NC 27330	ATTORNEY	YARBOROUGH & ASSOCIATES		$ 300.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/07/2010	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 300.00
5. Total of ALL CRO-1210 Pages ***(This line must be on line 6 of Detailed Summary Page CRO-1100)***	$ 6,660.00

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
LEE WARREN COMMITTEE	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Tom J. Keith 121 S. Cool Spring Street Fayetteville, NC 28301	Appraiser	Tom Keith & Associates		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/05/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DAN KINLAW P O BOX 9099 FAYETTEVILLE, NC 28311	BUSINESS OWNER	MOVING & STORAGE INDUSTRY		$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/24/2010	$ 50.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Bobby L Knight 3564 Murphy Rd Fayetteville, NC 28301	Retired	RETAIL		$ 400.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/24/2010	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 250.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,660.00

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
LEE WARREN COMMITTEE	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
F Morris Langston 527 Williwood Rd Fayetteville, NC 28311	Retired	DEPT OF TRANSPORTATION, STATE OF NORTH CAROLINA		$ 400.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/27/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MICHELLE W MACKEY 3001 PLAYER AVE FAYETTEVILLE, NC 28304	DATA MANAGEMENT	CUMBERLAND COUNTY REGISTER OF DEEDS		$ 450.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/06/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
KEVIN MACNAUGHT 7324 BULLARD PIT CIRC AUTRYVILLE, NC 28318	GENERAL MANAGER	Performing Arts, Spectator Sports, and Related Industries		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/05/2010	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 300.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,660.00

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
LEE WARREN COMMITTEE	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Ronnie B Matthews 10073 Ramsey St Linden, NC 28356	Business owner	Family Foods		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/08/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CHARLES D MATTHEWS 6367 WADE-STEDMAN RD WADE, NC 28395	SELF EMPLOYED	MACHINIST		$ 210.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/07/2010	$ 70.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
F Milo McBryde 2198 Spring Ct Fayetteville, NC 28304	Probation Officer	State of North Carolina		$ 340.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/07/2010	$ 200.00
☐					$
☐					$

4. Total only this Page	$ 370.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,660.00

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
LEE WARREN COMMITTEE	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
G PAUL MCGINN 5500 VILLAGE CREEK DR PROVIDENCE FORGE, VA 23140	SALES	LOGAN SYSTEMS		$ 150.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/10/2010	$ 50.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Donovan McLaurin Post Office Box 97 Wade, NC 28395	Retired			$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/11/2010	$ 150.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Stephen R Melvin P O Box 769 Fayetteville, NC 28302	Personal Services	Attorney		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☒	001	Check		10/01/2009	$ 50.00
☐	001	Check		10/07/2010	$ 50.00
☐					$

4. Total only this Page	$ 250.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,660.00

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
LEE WARREN COMMITTEE	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
WYMAN A NICHOLS JR 6719 TURNBULL RD FAYETTEVILLE, NC 28312	BUSINESS OWNER	NICHOLS BUILDINGS		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/24/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JUDIE R PETERS 1855 FRANKIE AVE FAYETTEVILLE, NC 28304	BUSINESS OWNER	PARALEGAL SERVICES		$ 235.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/05/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Rhudy F Phillips 1450 Duncan St Fayetteville, NC 28303	Business Owner	RHUDY'S JEWELRY		$ 300.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/11/2010	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 300.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,660.00

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
LEE WARREN COMMITTEE	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
KENNETH PORTER P O BOX 884 HOPE MILLS, NC 28348	BUSINESS OWNER	HAMILTON PORTER FUNERAL HOME		$ 400.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/07/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
THOMAS R PREWITT 1775 CYPRESS LAKES RD HOPE MILLS, NC 28348	BUSINESS OWNER	CYPRESS LAKES GOLF COURSE		$ 850.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/07/2010	$ 200.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Don Price 4057 Murphy Road Fayetteville, NC 28301	Business Owner	Automotive Industry		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/10/2010	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 400.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,660.00

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
LEE WARREN COMMITTEE	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DAN RAYNOR 2087 MIDDLE RD EASTOVER, NC 28312	BUSINESS OWNER	RAYNOR TIRE		$ 300.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/04/2010	$ 200.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DEAN F RUSSELL JR 224 NORTHSTONE PLACE FAYETTEVILLE, NC 28303	OUTSIDE SALES	REAL ESTATE		$ 655.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/17/2010	$ 135.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CRAIG E SANDERS 1800 CARLISLE RD GREENSBORO, NC 27408	DATA MANAGEMENT	LOGAN SYSTEMS		$ 690.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/14/2010	$ 185.00
☐					$
☐					$

4. Total only this Page	$ 520.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,660.00

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
LEE WARREN COMMITTEE	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
W EUGENE SANDERS 1008 COUNTRY CLUB DR GREENSBORO, NC 27408	BUSINESS OWNER	LOGAN SYSTEMS		$ 690.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/14/2010	$ 185.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Harry J Sherrill 200 NORTHSTONE PL Fayetteville, NC 28303-5494	Sales	Real Estate		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/14/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Robert D. Taylor Sr Post Office Box 1806 Hope Mills, NC 28348	Retired			$ 685.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/29/2010	$ 300.00
☐					$
☐					$

4. Total only this Page	$ 585.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,660.00

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
LEE WARREN COMMITTEE	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
D. K. Taylor Post Office Box 723 Fayetteville, NC 28302	Owner	D KTaylor Oil Company		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/07/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
James V. Townsend 221 Devane Street Fayetteville, NC 28305	Realtor/Broker	Townsend Real Estate		$ 335.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/04/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
GEORGE TURNER 5509 YADKIN RD FAYETTEVILLE, NC 28303	REAL ESTATE SALES	RE/MAX HOMEOWNERS		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/04/2010	$ 200.00
☐					$
☐					$

4. Total only this Page	$ 400.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,660.00

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
LEE WARREN COMMITTEE	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CHARLES E WARREN 2917 SKYE DR FAYETTEVILLE, NC 28303	BUSINESS OWNER	FUNERAL HOME		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/05/2010	$ 50.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
LOUIE WARREN 377 HONEYCUTT DR WILMINGTON, NC 28412	BANKING	RBC CENTURA		$ 350.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/22/2010	$ 50.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MARY WARREN 1108 BELMONT CIRCLE FAYETTEVILLE, NC 28305	RETIRED			$ 130.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/07/2010	$ 130.00
☐					$
☐					$

4. Total only this Page	$ 230.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,660.00

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
LEE WARREN COMMITTEE	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
M Rick Watts 4008 FALLBERRY DR Fayetteville, NC 28306	RETIRED	Real Estate		$ 300.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/06/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
RANDALL S WILLIAMS 4336 DRAUGHON RD FAYETTEVILLE, NC 28312	DRAFTSMAN	CITY OF FAYETTEVILLE ENGINEERING DEPT		$ 240.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/07/2010	$ 70.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
THERESA L WILLIAMS 3301 MADISON AVE FAYETTEVILLE, NC 28304	MANGEMENT	SANDSHILLS ABSTRACTING INC		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/04/2010	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 270.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,660.00

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
LEE WARREN COMMITTEE	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
TYPHINA WISEMAN 431 CUMBERLAND ST FAYETTEVILLE, NC 28301	BUSINESS OWNER	WISEMAN MORTUARY		$ 400.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		09/15/2010	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ANDREW B WOOD 4491 MINNIE HALL RD AUTRYVILLE, NC 28318-7076	DIRECTOR	BUTLER FRNERAL HOME		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	001	Check		10/01/2010	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 200.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 6,660.00

Disbursements

Amendment ☒ Yes ☐ No

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
LEE WARREN COMMITTEE	

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)
ALLEGRA PRINT & IMAGING
3724 SYCAMORE DAIRY RD
SUITE 100
FAYETTEVILLE, NC 28303

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 445.14

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	B	08/13/2010	$ 124.48	GOLF TOURNAMENT
				$	APPLICATIONS

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
CUMBERLAND COMMUNITY FOUNDATION
P O BOX 2345
FAYETTEVILLE, NC 28302

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 500.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	O	11/12/2010	$ 250.00	DONATION
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
CUMBERLAND COUNTY LIVESTOCK
ASSOCIATION
301 EAST MOUNTAIN DR
FAYETTEVILLE, NC 28306

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 300.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	H	09/23/2010	$ 100.00	ADVERTISING
				$	

5. Total only this Page	$ 474.48
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)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 6,151.67

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)**

Disbursements

Amendment ☒ Yes ☐ No

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
LEE WARREN COMMITTEE	

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)

Cypress Lakes Golf Course
2126 Cypress Lakes Rd
Hope Mills, NC 28348

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 6,745.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	C	11/09/2010	$ 1,976.00	GREENS FEES - GOLF TOURNAMENT
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)

DIRECT MAIL SERVICES
P O BOX 1415
FAYETTEVILLE, NC 28302

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 1,534.21

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	C	09/17/2010	$ 265.20	DIRECT MAIL
001	Check	C	12/30/2010	$ 239.06	DIRECT MAIL

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)

FAYETTEVILLE SHRINE CLUB
C/O JERRY FORRENT
2524 LIMEKILN LN
EASTOVER, NC 28314

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ 100.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	H	12/08/2010	$ 100.00	ADVERTISING
				$	

5. Total only this Page	$ 2,580.26
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)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 6,151.67

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)**

Disbursements

Amendment ☒ Yes ☐ No

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
LEE WARREN COMMITTEE	

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)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Fayetteville State University HALL OF FAME 1200 Murchison Rd Fayetteville, NC 28301		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 130.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	H	10/06/2010	$ 65.00	ADVERTISING
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
JEB DESIGNS, INC P O BOX 65149 FAYETTEVILLE, NC 28306		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 3,675.95

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	B	11/22/2010	$ 372.60	GOLF TEES
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
JEB DESIGNS, INC P O BOX 65149 FAYETTEVILLE, NC 28306		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 330.48

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	C	11/02/2010	$ 330.48	TROPHIES-GOLF
				$	TOURNAMENT

5. Total only this Page	$ 768.08
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)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 6,151.67

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)**

Disbursements

Amendment ☒ Yes ☐ No

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
LEE WARREN COMMITTEE	

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)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
KIWANIS INTERNATIONAL FOUNDATION 3636 WOODVIEW TRACE INDIANAPOLIS, IN 46268		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 650.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	O	12/08/2010	$ 350.00	DONATION
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Lighthouse Ministries P O Box 832 Fayetteville, NC 28302		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 100.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	O	10/06/2010	$ 100.00	DONATION
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
NC INDIAN SENIOR CITIZENS COLLITION C/O ROY MAYNOR 3014 WOODLAND DR HOPE MILLS, NC 28348		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 100.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	O	08/16/2010	$ 100.00	DONATION
				$	

5. Total only this Page	$ 550.00
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)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 6,151.67

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)**

Disbursements

Amendment ☒ Yes ☐ No

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
LEE WARREN COMMITTEE	

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)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
SAMS CLUB 5085 DAWN DR FAYETTEVILLE, NC		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 875.51

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	C	10/06/2010	$ 208.21	SUPPLIES-GOLF TOURNAMENT
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
STS. CONSTANTINE AND HELEN GREEK ORTHODOX CHURCH 614 OAKRIDGE AVE FAYETTEVILLE, NC 28305		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 382.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	O	11/17/2010	$ 150.00	DONATION
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
THE CARE CLINIC P O BOX 53438 FAYETTEVILLE, NC 28305		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 900.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	O	12/08/2010	$ 200.00	DONATION
				$	

5. Total only this Page	$ 558.21
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)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 6,151.67

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)**

Disbursements

Amendment ☒ Yes ☐ No

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
LEE WARREN COMMITTEE	

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)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
The Salvation Army 220 East Russell Street Post Office Box 514 Fayetteville, NC 28302		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 550.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	O	12/08/2010	$ 150.00	DONATION
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
U S POSTMASTER MAIN POST OFFICE GREEN ST FAYETTEVILLE, NC 28302		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 1,153.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	I	12/08/2010	$ 440.00	
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
UNITED WAY OF CUMBERLAND COUNTY 222 MAIDEN LANE FAYETTEVILLE, NC 28301		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 450.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	O	10/06/2010	$ 100.00	DONATION
				$	

5. Total only this Page	$ 690.00
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)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 6,151.67

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)**

Disbursements

Amendment ☒ Yes ☐ No

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
LEE WARREN COMMITTEE	

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)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
VANDER CIVIC ASSOC 135 BLADEN CIRCLE FAYETTEVILLE, NC 28312		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 120.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	H	10/06/2010	$ 60.00	ADVERTISING
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
WAL-MART STORES SKIBO RD FAYETTEVILLE, NC 28312		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 438.14

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	C	08/31/2010	$ 170.64	DOOR PRIZE - GOLF TOURNAMENT
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
WIDU Radio 145 Rowan Street Fayetteville, NC 28301		☐ Federal ☐ County: ☐ State ☐ Municipality:		$ 300.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
001	Check	H	09/17/2010	$ 300.00	ADVERTISING
				$	

5. Total only this Page	$ 530.64
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)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 6,151.67

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)**

Aggregated Non-Media Expenditures

Amendment ☒ Yes ☐ No

Optional form used to report NC Non-Media Expenditures of $50 or less.

1. Committee Full Name (and fund if appropriate)	2. ID Number
LEE WARREN COMMITTEE	

3. Payee Information

a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
☐ Add ☐ Remove	001	Draft	K	07/31/2010	$ 17.36	BANK ACTIVITY CHARGES
☐ Add ☐ Remove	001	Draft	K	08/31/2010	$ 16.58	BANK ACTIVITY CHARGES
☐ Add ☐ Remove	001	Draft	K	09/30/2010	$ 16.59	BANK ACTIVITY CHARGES
☐ Add ☐ Remove	001	Draft	K	10/31/2010	$ 17.63	BANK ACTIVITY CHARGES
☐ Add ☐ Remove	001	Draft	K	11/30/2010	$ 26.23	BANK ACTIVITY CHARGES
☐ Add ☐ Remove	001	Electric Funds Tran	K	12/31/2010	$ 17.71	BANK ACTIVITY CHARGE
☐ Add ☐ Remove	001	Check	O	10/06/2010	$ 50.00	DONATION
☐ Add ☐ Remove	001	Check	H	08/31/2010	$ 50.00	ADVERTISING

4. Total only this Page	$ 212.10
5. Total of ALL CRO-1315 Pages *(This line must be on line 14 of Detailed Summary Page CRO-1100)*	$ 212.10

6. Purpose Codes (List detailed expenditure code in col. d above)

	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* - Donations to Legal Expense Fund**
O* - Other			

*** Codes require detailed explanation in required remarks field (g)**