

# Disclosure Report Cover

Amendment  
 Yes  No

This form for general report and committee information, must be signed and submitted along with other detailed forms  
 Do not use this form to update information

<b>1. Committee Information</b>	
a. Full Name <b>DJ HAIRE Election Campaign</b>	c. ID Number <b>E94038</b>
b. Mailing Address (include City, State and Zip Code) <b>709-17 Filter Plant DRIVE FAYETTEVILLE, NC 28301</b>	d. Date Filed <b>8/28/2007</b>
	e. Phone Number <b>(910) 988-0315</b>

<b>2. Report Year</b> <b>2007</b>	<b>3. Period Start Date (mm/dd/yy)</b> <b>July 1 2007</b>	<b>4. Period End Date (mm/dd/yy)</b> <b>Aug 28 2007</b>	<b>5. Treasurer Full Name</b> <b>Gale J. Fort</b>
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<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Municipal	<input type="checkbox"/> State/County	<input type="checkbox"/> Referendum
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum		<input checked="" type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<b>7. Type of Fund (if applicable, check one)</b>		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus	<input type="checkbox"/> Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third Plus	<input type="checkbox"/> Annual
<input type="checkbox"/> NC Political Party Financing Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	<b>10. Special Report Name</b>
<input type="checkbox"/> Other:		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
<b>8. Number of Fundraisers this Report</b>		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

<b>10. Account Information</b>		<b>11. Account Information</b>	
a. Financial Institution Full Name <b>Peoples National Bank</b>	a. Financial Institution Full Name	b. Purpose <b>Check for Receipts</b>	b. Purpose
c. Account Code	c. Account Code	d. Period Begin Balance <b>\$ 307.42</b>	d. Period Begin Balance <b>\$</b>

**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).

**Gale J. Fort** Printed Name of Signer  
**[Signature]** Signature of Appointed Treasurer  
**8/30/2007** Date

**FOR OFFICE USE ONLY**

Date Received: **8/31/07**  
 Date Postmarked: \_\_\_\_\_  
 Date Scanned: \_\_\_\_\_  
 Date Data Entered: \_\_\_\_\_

**RECEIVED**  
**AUG 31 2007**

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	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	
<b>DJ Haire Election</b>			
Start of Election Cycle: January 1, <b>2007</b>	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ <b>307.42</b>	\$ <b>169.16</b>	
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ <b>-0-</b>	\$ <b>1310.00</b>	
6) Contributions from Individuals (CRO-1210)	\$ <b>1750.00</b>	\$ <b>12675.00</b>	
7) Contributions from Political Party Committees (CRO-1220)	\$ <b>-0-</b>	\$ <b>-0-</b>	
8) Contributions from Other Political Committees (CRO-1230)	\$ <b>-0-</b>	\$ <b>1000.00</b>	
9) Loan Proceeds (CRO-1410)	\$ <b>-0-</b>	\$ <b>250.00</b>	
10) Refunds/Reimbursements To the Committee (CRO-1240)	\$ <b>-0-</b>	\$ <b>-0-</b>	
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)	\$ <b>-0-</b>	\$ <b>-0-</b>	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)	\$ <b>-0-</b>	\$ <b>-0-</b>	
11c) Outside Sources of Income (CRO-1250)	\$ <b>-0-</b>	\$ <b>-0-</b>	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, and 11c)	\$ <b>1750.00</b>	\$ <b>15235.00</b>	
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ <b>1479.88</b>	\$ <b>13926.62</b>	
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ <b>-0-</b>	\$ <b>900.00</b>	
13c) Coordinated Party Expenditures (CRO-1310)	\$ <b>-0-</b>	\$ <b>-0-</b>	
14) Loan Repayments (CRO-1420)	\$ <b>-0-</b>	\$ <b>-0-</b>	
15) Refunds/Reimbursements From the Committee (CRO-1320)	\$ <b>-0-</b>	\$ <b>-0-</b>	
16) In-Kind Contributions (CRO-1510)	\$ <b>-0-</b>	\$ <b>-0-</b>	
17) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, and 16)	\$ <b>1479.88</b>	\$ <b>14826.62</b>	
18) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 17)	\$ <b>577.54</b>	\$ <b>577.54</b>	
<b>ADDITIONAL INFORMATION</b>			
19) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$ <b>-0-</b>		
20) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ <b>-0-</b>		
21) Debts and Obligations owed By the Committee (CRO-1610)	\$ <b>-0-</b>		
22) Debts and Obligations owed To the Committee (CRO-1620)	\$ <b>-0-</b>		
23) Account Transfers Within the Committee (CRO-1720)	\$ <b>-0-</b>		
24) Administrative Support (CRO-1710)	\$ <b>-0-</b>	\$ <b>-0-</b>	
25) Forgiven Loans (CRO-1440)	\$ <b>-0-</b>	\$ <b>-0-</b>	
26) 48-Hour Notice Reports Sum	\$ <b>-0-</b>	\$ <b>-0-</b>	

Contributions from Individuals

Pg 1 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)						2. ID Number	
D.J. HAIRE Election Campaign						E91038	
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	
JACKIE TRINCHITELLA 5809 Monclavi Place Jayetteville, NC 28314				Real Estate			
				c. Employer's Name/Specific Field			
				GORE REALTORS Sales			
				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		7/09/2007	\$ 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)				b. Job Title/Profession		d. Comments	
MYRTLE C. ENGLAND 3202 BOONE TRAIL JAYETTEVILLE, NC 28306				Retired			
				c. Employer's Name/Specific Field			
				School System			
				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		7/09/2007	\$ 200.00		
<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	
GEORGE H. ROSE 1206 LONGLEAF DRIVE JAYETTEVILLE, NC 28305				Real Estate			
				c. Employer's Name/Specific Field			
				ROSE BUILDERS Builder			
				e. Election Sum-to-Date		\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	check		7/10/2007	\$ 300.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 750.00	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>						\$ 1750.00	

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	
D.J. Haire Election Campaign					E94038	
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	
Matthew J. Watto "Rick" 4008 Fallberry Road Jayetteville, NC. 28306			Real Estate COLDWELL BANKERS Sales			
			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		7/15/2007	\$ 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	
Bobby Ewell 846 Abilene Road Jayetteville, NC. 28303			Retired Postal Worker Retired Army			
			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		7/17/2007	\$ 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)			b. Job Title/Profession		d. Comments	
Chris Cates 2818 Raetord. Rd. Ste 300 Jayetteville, NC. 28303			Real Estate CATES & CAVINESS Builder			
			c. Employer's Name/Specific Field		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		7/20/2007	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 450.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1750.00	

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	
D. J. Hair Election Campaign						E91038	
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	
D. Ralph Huff III 1127 Offshore Drive Layetteville, NC 28301				Real Estate			
				c. Employer's Name/Specific Field			
				Builder			
				e. Election Sum to Date		\$ 500.00	
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		7/20/2007	\$ 500.00		
<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	
Aaron J. Johnson 1915 Ernest Street Layetteville, NC 28301				Pastor			
				c. Employer's Name/Specific Field			
				Mt. Sinai Bpt.			
				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		7/20/2007	\$ 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	
				c. Employer's Name/Specific Field			
				e. Election Sum to Date		\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page					\$ 550.00		
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					\$ 1760.00		

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

**D.J. HAIRE Election Campaign**

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)  
**Rise News paper  
 P.O. Box 1311  
 Fayetteville NC. 28302**

b. Coordinated Committee Name

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

d. Comments

e. Election Sum to Date  
**\$ 350.00**

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
<b>A</b>	<b>check</b>	<b>Media</b>	<b>7/13/2007</b>	<b>\$ 350.00</b>	<b>ADS</b>
				\$	

4. Payee Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)  
**Rise Newspaper  
 P.O. Box 1311  
 Fayetteville, NC. 28302**

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
<b>A</b>	<b>check</b>	<b>Media</b>	<b>7/23/2007</b>	<b>\$ 100.00</b>	<b>AD</b>
				\$	

4. Payee Information  Add  Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)  
**TEB DESIGN, INC.  
 3452 Black & Decker Rd.  
 Hope Mills, NC. 28348**

b. Coordinated Committee Name

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

d. Comments

e. Election Sum to Date  
**\$ 356.55**

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
<b>B</b>	<b>check</b>	<b>Printing</b>	<b>7/15/2007</b>	<b>\$ 356.55</b>	<b>Printing of T-Shirts</b>
				\$	

5. Total only this Page **\$ 806.55**

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)  
**\$ 1479.88**

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)

**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	
D'S HAIRE Election Campaign						E94039	
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	
Artist CARD 1207 Murchison Road Jayetteville, NC. 28301							
				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:		\$ 100.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
B	check	Printing	8/2/2007	\$ 100.00	Re-electin Cards		
				\$			
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	
Parks Chapel Graphics 2503 Murchison Rd Jayetteville, NC. 28301							
				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:		\$ 320.67	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
B	check	Printing	8/15/2007	\$ 320.67	Re-electin Cards		
				\$			
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	
Walmart 3725 Ramsey Street Jayetteville, NC.							
				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:		\$ 227.66	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
O	check	Other	8/24/2007	\$ 227.66	Campaign supplies		
				\$			
5. Total only this Page						\$ 648.33	
6. Total of ALL CRO-1310 Pages						\$ 1479.88	
(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)							
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)							

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) **DJ Naire Election Campaign** 2. ID Number **E9Y038**

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)  
**Gale J. Kort  
 1440 Jini Johnson Rd  
 Fayetteville, NC. 28312**

b. Coordinated Committee Name

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

d. Comments

e. Election Sum to Date  
**\$ 25.00**

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
0	check	TRAVEL Other	8/24/00	\$ 25.00	Reimbursement for GAS
				\$	

4. Payee Information  Add  Remove

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

b. Coordinated Committee Name

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

d. Comments

e. Election Sum to Date  
 \$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	

4. Payee Information  Add  Remove

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

b. Coordinated Committee Name

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

d. Comments

e. Election Sum to Date  
 \$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	

5. Total only this Page **\$ 25.00**

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)  
**\$ 1479.88**

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)