

# Disclosure Report Cover

MOORE COUNTY  
PUBLIC COPY

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

Emily Beth Stack

c. ID Number

b. Mailing Address (include City, State and Zip Code)

400 Spring Lake Drive  
Pinehurst, NC 28374

d. Date Filed

9/28/2021

e. Phone Number

919 770 3653

2. Report Year

2021

3. Period Start Date (mm/dd/yy)

7/12/21

4. Period End Date (mm/dd/yy)

9/21/21

5. Treasurer Full Name

Emily Beth Stack

6. Type of Committee (Check One)

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

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

- ☐ Booster Fund  
☐ Building Fund

☐ Other:

8. Number of Fundraisers this Report

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

Municipal

- ☐ Organizational  
☒ Thirty-five day  
☐ Pre-primary  
☐ Pre-election  
☐ Pre-runoff  
☐ Semi-annual  
☐ Mid Year  
☐ Year End  
☐ Final  
☐ Special

State/County

- ☐ Organizational  
☐ Quarterly  
☐ First  
☐ Second  
☐ Third  
☐ Fourth  
☐ Semi-annual  
☐ Mid Year  
☐ Year End  
☐ Final  
☐ Special

Referendum

- ☐ Organizational  
☐ Pre-referendum  
☐ Final  
☐ Supplemental Final  
☐ Annual  
☐ Special

10. Special Report Name

11. Account Information

a. Financial Institution Full Name

Fidelity Bank NC

b. Purpose

All Campaign Expenses

c. Account Code

1

d. Period Begin Balance

\$ 0

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.

Emily Stack

Printed Name of Signer

Emily Stack

Signature of Appointed Treasurer

9/28/21

Date

## FOR OFFICE USE ONLY

Date Received: 9-28-21

Employee: [Signature]

Delivery Method

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

Date Postmarked: \_\_\_\_\_

Employee: \_\_\_\_\_

Date Scanned: \_\_\_\_\_

Employee: \_\_\_\_\_

Date Data Entered: \_\_\_\_\_

Employee: \_\_\_\_\_

☐ 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.

CRO-1000

NC State Board of Elections

August 2008

**MOORE COUNTY**  
**PUBLIC COPY**

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

**Detailed Summary**

Use this form to summarize all disclosure reporting forms and to total monetary information

<b>1. Committee Full Name (and Fund if applicable)</b>	<b>2. Type of Report</b>	<b>3. ID Number</b>
Stark for Pinehurst Council	35 Day	
<b>Start of Election Cycle:</b> January 1, 2021	<b>Total this Reporting Period</b>	<b>Total this Election Cycle</b>
4) Cash on Hand at Start	\$ 0	\$ —
<b>RECEIPTS</b>		
5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$
6) Contributions from Individuals (CRO-1210)	\$ 2540.04	\$ 2545.04
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)	\$	\$
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$	\$
11e) Exempt Purchase Price Sales (CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 2540.04	\$ 2545.04
<b>EXPENDITURES</b>		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 476.22	\$ 476.22
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures (CRO-1315)	\$	\$
15) Loan Repayments (CRO-1420)	\$	\$
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$	\$
17) In-Kind Contributions (CRO-1510)	\$	\$ 5.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 476.22	\$ 481.22
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 2063.82	\$ 2063.82
<b>ADDITIONAL INFORMATION</b>		
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$	
22) Debts and Obligations owed by the Committee (CRO-1610)	\$	
23) Debts and Obligations owed to the Committee (CRO-1620)	\$	
24) Account Transfers Within the Committee (CRO-1720)	\$	
25) Administrative Support (CRO-1710)	\$	\$
26) Forgiven Loans (CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum (CRO-2220)	\$	\$
28) Contributions to be Refunded (CRO-1215)	\$	\$

# Contributions from Individuals

MOORE COUNTY

PUBLIC COPY

Page 1 of 6

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

3. Contributor Information

☐ Add ☐ Remove

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

b. Job Title/Profession

d. Comments

Margaret Sandrock  
11890 Titan Roberts Rd  
Cullington, NC 27546  
910 6588175

Retired

c. Employer's Name/Specific Field

Retired

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

☐

1

credit card

7/14/2021

\$ 50.00

☐

\$

☐

\$

3. Contributor Information

☐ Add ☐ Remove

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

b. Job Title/Profession

d. Comments

Giovanni Spillman  
5355 Wildwood Rd  
Salisbury, NC 28146  
704 223 2957

Consultant

c. Employer's Name/Specific Field

KKA  
Architecture

e. Election Sum to Date

\$ 26.30

f. Prior

g. Account Code

h. Form of Payment

i. In-Kind Description

j. Date (mm/dd/yyyy)

k. Amount

☐

1

credit card

7/13/2021

\$ 26.30

☐

\$

☐

\$

3. Contributor Information

☐ Add ☐ Remove

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

b. Job Title/Profession

d. Comments

Darcy Teixeira  
4600 S Four Mile Run Dr. #109  
Arlington, VA 22204  
202 341 8883

Director

c. Employer's Name/Specific Field

Freedom Works

e. Election Sum to Date

\$ 260.19

f. Prior

g. Account Code

h. Form of Payment

i. In-Kind Description

j. Date (mm/dd/yyyy)

k. Amount

☐

1

credit card

7/13/2021

\$ 260.19

☐

\$

☐

\$

4. Total only this Page

5. Total of ALL CRO-1210 Pages

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

\$ 325.49

\$ 2540.04

CRO-1210

NC State Board of Elections

2540.04 April 2007

es

## 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)

Stack for Pinehurst Council

## 2. ID Number

## 3. Contributor Information

☐ Add ☐ Removea. Full Name, Mailing Address & Phone  
(include city, state, & zip)Stephen Woodward  
180 Linden Rd.  
Pinehurst, NC 28677  
630 670 0389

b. Job Title/Profession

Retired

c. Employer's Name/Specific Field

Retired

d. Comments

e. Election Sum to Date

\$ 302.78

f. Prior

g. Account Code

h. Form of Payment

i. In-Kind Description

j. Date (mm/dd/yyyy)

k. Amount

☐

1

credit card

7/16/2021

\$ 104.26

☐

1

credit card

8/16/2021

\$ 104.26

☐

1

credit card

9/16/2021

\$ 104.26

## 3. Contributor Information

☐ Add ☐ Removea. Full Name, Mailing Address & Phone  
(include city, state, & zip)Lawrence Blackford  
10 Salem Lane, Pinehurst NC  
28574  
301 325 5761

b. Job Title/Profession

~~Retired~~ DOD

c. Employer's Name/Specific Field

~~Military/DOD~~  
US Army

d. Comments

e. Election Sum to Date

\$ 50.29

f. Prior

g. Account Code

h. Form of Payment

i. In-Kind Description

j. Date (mm/dd/yyyy)

k. Amount

☐

1

credit card

8/12/2021

\$ 50.29

☐

\$

☐

\$

## 3. Contributor Information

☐ Add ☐ Removea. Full Name, Mailing Address & Phone  
(include city, state, & zip)Mike Clemens  
8104 Pete Wiles Rd  
Middletown, MD 21769  
240 372 4341

b. Job Title/Profession

Retired

c. Employer's Name/Specific Field

Retired

d. Comments

e. Election Sum to Date

\$ 104.26

f. Prior

g. Account Code

h. Form of Payment

i. In-Kind Description

j. Date (mm/dd/yyyy)

k. Amount

☐

1

credit card

8/11/2021

\$ 104.26

☐

\$

☐

\$

## 4. Total only this Page

## 5. Total of ALL CRO-1210 Pages

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

\$ 409.33

\$ 2540.04

# Contributions from Individuals

MOORE COUNTY  
PUBLIC COPY

Pg 3 of 6

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)

Stack for Pinehurst Council

2. ID Number

3. Contributor Information

☐ Add ☐ Remove

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

Robert Bortins  
1625 E Hedgeclawn Way  
Southern Pines 28387  
814-506-5277

b. Job Title/Profession

CEO

c. Employer's Name/Specific Field

Classical  
Conversations

d. Comments

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	credit card		8/7/2021	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information

☐ Add ☐ Remove

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

Thomas Kakadelis  
402 Midland Dr.  
Pinehurst, NC 28374  
704 575 7845

b. Job Title/Profession

Minister

c. Employer's Name/Specific Field

Self

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	credit card		8/6/2021	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information

☐ Add ☐ Remove

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

Kay Wildt  
4 Blair Ct  
Pinehurst, NC 28374  
910 978 7760

b. Job Title/Profession

Retired

c. Employer's Name/Specific Field

Retired

d. Comments

e. Election Sum to Date

\$ 52.29

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	1	credit card		8/5/2021	\$ 52.29
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page

5. Total of ALL CRO-1210 Pages

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

\$ 352.29

\$ 352.29

CRO-1210

NC State Board of Elections

2540 04 April 2007

# Contributions from Individuals

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

MOORE COUNTY  
PUBLIC COPY

Amendment

☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)

Stack for Pinehurst Council

2. ID Number

3. Contributor Information

☐ Add ☐ Remove

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

Jennifer Sadung  
7516 Hogen's Bluff Lane  
Charlotte, NC 28227  
704-575 8649

b. Job Title/Profession

Teacher

c. Employer's Name/Specific Field

YMCA

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

☐

1

credit card

8/3/2021

\$ 100.00

☐

\$

☐

\$

3. Contributor Information

☐ Add ☐ Remove

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

Christina McCall  
74 S Lake Parnock Drive  
Pinehurst, NC 28374  
910 215 7603

b. Job Title/Profession

Hospitality manager

c. Employer's Name/Specific Field

Pinehurst Resort

d. Comments

e. Election Sum to Date

\$ 104.26

f. Prior

g. Account Code

h. Form of Payment

i. In-Kind Description

j. Date (mm/dd/yyyy)

k. Amount

☐

1

credit card

7/27/2021

\$ 104.26

☐

\$

☐

\$

3. Contributor Information

☐ Add ☐ Remove

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

Anthony Bellotti  
910 M St. NW #830  
Washington, DC 20001  
202 294 4810

b. Job Title/Profession

President

c. Employer's Name/Specific Field

White Coat  
Waste Project

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

☐

1

credit card

7/18/2021

\$ 50.00

☐

\$

☐

\$

4. Total only this Page

5. Total of ALL CRO-1210 Pages

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

\$ 2540.04 254.04 25  
\$ 2540.04 254.04 25

CRO-1210

NC State Board of Elections

2540.04 April 2007

# 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)

Stack for Pinehurst Council

## 2. ID Number

## 3. Contributor Information

☐ Add ☐ Remove

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

Jonathan Sink  
804 Hawthorne Rd  
Shelby, NC 28160  
704 661 1773

b. Job Title/Profession

Attorney

c. Employer's Name/Specific Field

Sink Law PLLC

d. Comments

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

☐

1

credit card

7/18/2021

\$ 250.00

☐

\$

☐

\$

## 3. Contributor Information

☐ Add ☐ Remove

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

Miriam Chu  
120 Harvest Ln  
Carthage, NC 28327  
919 724 152

b. Job Title/Profession

Retired

c. Employer's Name/Specific Field

Retired

d. Comments

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

☐

1

credit card

7/16/2021

\$ 500.00

☐

\$

☐

\$

## 3. Contributor Information

☐ Add ☐ Remove

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

Anton Sadovnikov  
257 Magnolia Hill Dr.  
Carthage, NC 28327  
617 246 2181

b. Job Title/Profession

DOO

c. Employer's Name/Specific Field

US Army

d. Comments

e. Election Sum to Date

\$ 104.26

f. Prior

g. Account Code

h. Form of Payment

i. In-Kind Description

j. Date (mm/dd/yyyy)

k. Amount

☐

1

credit card

7/15/2021

\$ 104.26

☐

\$

☐

\$

## 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)

\$ 2540.04

es  
254.26  
es

# Contributions from Individuals

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

MOORE COUNTY  
Pg 6 of 6  
Amendment  
☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)

Stack for Rinehurst Council

2. ID Number

3. Contributor Information

☐ Add ☐ Remove

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

Marty McKenzie  
125 Midland Rd  
Pinehurst, NC 28374

b. Job Title/Profession

Owner

c. Employer's Name/Specific Field

Self

d. Comments

e. Election Sum to Date

\$ 300

f. Prior

g. Account Code

h. Form of Payment

i. In-Kind Description

j. Date (mm/dd/yyyy)

k. Amount

☐

1

check

8/16/2021

\$ 300

☐

\$

☐

\$

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. Prior

g. Account Code

h. Form of Payment

i. In-Kind Description

j. Date (mm/dd/yyyy)

k. Amount

☐

\$

☐

\$

☐

\$

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. Prior

g. Account Code

h. Form of Payment

i. In-Kind Description

j. Date (mm/dd/yyyy)

k. Amount

☐

\$

☐

\$

☐

\$

4. Total only this Page

5. Total of ALL CRO-1210 Pages

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

\$ 300

\$ 2540.04

CRO-1210

NC State Board of Elections

2540.04 April 2007

# Disbursements

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

Pg 1 of 2

Amendment  
☐ Yes ☒ No

## 1. Committee Full Name (and Fund if applicable)

Stack for Pinehurst Council

## 2. ID Number

## 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)

Staples Direct  
 500 Staples Drive  
 Frammingham, MA 01702

### b. Coordinated Committee Name

### d. Comments

### c. Level Registered (Specify)

☐ Federal

☐ County:

☐ State

☐ Municipality:

### e. Election Sum to Date

\$ 62.58

### f. Account Code

### g. Form of Payment

### h. Purpose Code

### i. Date (mm/dd/yyyy)

### j. Amount

### k. Required Remarks

1

Credit card

B

8/16/2021

\$ 62.58

Palm cards

## 4. Payee Information

☐ Add ☐ Remove

### a. Full Name, Mailing Address & Phone

(include city, state, & zip)

48 Hour Print  
 8000 Haskell Ave.  
 Van Nuys, CA 91406

### b. Coordinated Committee Name

### d. Comments

### c. Level Registered (Specify)

☐ Federal

☐ County:

☐ State

☐ Municipality:

### e. Election Sum to Date

\$ 187

### f. Account Code

### g. Form of Payment

### h. Purpose Code

### i. Date (mm/dd/yyyy)

### j. Amount

### k. Required Remarks

1

Debit card

B

9/20/2021

\$ 187.00

Palm Cards

## 4. Payee Information

☐ Add ☐ Remove

### a. Full Name, Mailing Address & Phone

(include city, state, & zip)

Wix.com  
 40 Nasser Tel-Aviv St  
 Israel

### b. Coordinated Committee Name

### d. Comments

### c. Level Registered (Specify)

☐ Federal

☐ County:

☐ State

☐ Municipality:

### e. Election Sum to Date

\$ 162

### f. Account Code

### g. Form of Payment

### h. Purpose Code

### i. Date (mm/dd/yyyy)

### j. Amount

### k. Required Remarks

1

Debit card

F

8/17/2021

\$ 162.00

Website

## 5. Total only this Page

\$ 411.58

## 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)

\$ 411.58

## 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)

CRO-1310

NC State Board of Elections

December 2009

# MOORE COUNTY PUBLIC COPY

## Disbursements

Pg 1 of 1 Amendment ☐ Yes ☒ No

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Wm Red 1776 Wilson Blvd Ste 530 Arlington, VA 22209				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:		\$ 60.38	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	electronic	0	7/2021	\$ 58.38	Fee for electronic		
1	electronic	0	8/2021	\$ 29.20	Contributions		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Wm Red 1776 Wilson Blvd Ste 530 Arlington, VA 22209				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:		\$ 4.26	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	electronic	0	9/2021	\$ 4.26	Fee for electronic		
				\$	Contributions		
<b>4. Payee Information</b> <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		
				\$			
				\$			
<b>5. Total only this Page</b>						\$ 64.64	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 476.22	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							