

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

Committee to elect Robin Calcutt

c. ID Number

7H42YM

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

2325 East Indiana Avenue, Southern Pines, 28387

d. Date Filed

2/27/2024

e. Phone Number

910-690-9562

2. Report Year

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

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

5. Treasurer Full Name

2024

1/1/2024

2/17/2024

Teresa Robin Calcutt

6. Type of Committee (Check One)

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

9. Type of Report

(check only one type of report from one category)

Municipal

State/County

Referendum

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

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

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

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

- "Booster Fund"
- Building Fund

Other:

8. Number of Fundraisers this Report

10. Special Report Name

11. Account Information

a. Financial Institution Full Name

First Bank

11. Account Information

a. Financial Institution Full Name

b. Purpose

c. Account Code

Campaign Acc

FB1

b. Purpose

c. Account Code

d. Period Begin Balance

\$ 293.60

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

TERESA ROBIN CALCUTT

Printed Name of Signer

Teresa Robin Calcutt

Signature of Appointed Treasurer

02/27/24

Date

FOR OFFICE USE ONLY

Date Received:

2/27/24

Employee:

NL

Delivery Method

- Normal Mail
- Registered Mail
- Hand Delivered
- Electronically Filed
- Signer has not received mandatory training

Date Postmarked:

RECEIVED

Employee:

Employee:

Date Scanned:

FEB 27 2024

Employee:

Date Data Entered:

Employee:

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

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

Amendment

Yes

No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
Committee to elect Robin Calcutt	First Quarter Plus	7H42YM
Start of Election Cycle: January 1, 2024		Total this Reporting Period
4) Cash on Hand at Start	\$ 293.60	\$
RECEIPTS		
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 860.00
6) Contributions from Individuals	(CRO-1210)	\$ 3004.08
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)	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 3864.08	\$ 3864.08
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures	(CRO-1310)	\$ 2495.09
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)	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 2495.09	\$ 2495.09
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 1662.59	\$ 1662.59
ADDITIONAL INFORMATION		
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

Amendment 1 of 7 Yes No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to elect Robin Calcutt					7H42YM	
3. Contributor Information			<input type="checkbox"/>	Add	<input type="checkbox"/>	Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip) John Monroe 525 Hardee Branch Road West End NC 27376			b. Job Title/Profession		d. Comments	
			retired physician			
			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"/>	FB1	ONLINE		01/8/24	\$ 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) Rebecca Beittel 702 Wildwood Rd Aberdeen NC 28315			b. Job Title/Profession		d. Comments	
			EDUCATOR/VOLUNTEER			
			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"/>	FB1	ONLINE		01/18/24	\$ 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) Karin Kent 25 Dove Run Pinehurst NC 28387			b. Job Title/Profession		d. Comments	
			RETIRED			
			c. Employer's Name/Specific Field			
					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"/>	FB1	ONLINE		01/21/24	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages					\$ 3004.08	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

Pg 2 of 7 Yes No

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

1. Committee Full Name (and Fund if applicable)			2. ID Number			
Committee to elect Robin Calcutt			7H42YM			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Patrick and Billie Niemann 15 Timuquana TRAIL PINEHURST NC 28374			b. Job Title/Profession US ARMY RETIRED		d. Comments	
			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"/>	FB1	ONLINE		01/22/24	\$ 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) SUSAN ZUCCHINO 215 Pine Ridge Dr WHISPERING PINES NC 28327			b. Job Title/Profession RETIRED		d. Comments	
			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"/>	FB1	ONLINE		01/22/24	\$ 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) Joyce Reehling 60 Donald Ross Drive PINEHURST NC 28374			b. Job Title/Profession RETIRED		d. Comments	
			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"/>	FB1	ONLINE		01/26/24	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 450.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 3004.08	

Contributions from Individuals

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

Amendment

Pg 3 of 7 Yes No

1. Committee Full Name (and Fund if applicable)			2. ID Number			
Committee to elect Robin Calcutt			7H42YM			
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 RETIRED		d. Comments	
Kyle Sonnenberg 535 McDeeds Creek Rd SOUTHERN PINES NC 28387			c. Employer's Name/Specific Field			
					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"/>	FB1	ONLINE		02/14/24	\$ 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 IT		d. Comments	
Nicholas O'Connor 732 sun road ABERDEEN NC 28315			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"/>	FB1	ONLINE		02/15/24	\$ 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 RETIRED		d. Comments	
David Bruening 4100 Youngs Road SOUTHERN PINES NC 28387			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"/>	FB1	ONLINE		02/16/24	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 700.00	
5. Total of ALL CRO-1210 Pages					\$ 3004.08	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

Pg 4 of 7 Yes No

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

1. Committee Full Name (and Fund if applicable)			2. ID Number			
COMMITTEE TO ELECT ROBIN CALCUTT			7H42YM			
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 RETIRED		d. Comments	
Vest-Arnold Evelyn 6215-7 7 Lakes West, West End, NC 27376			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"/>	FB1	CHECK		1/23/24	\$ 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 RETIRED		d. Comments	
Hardy, Nancy Kelly 164 Champions RDG, Southern Pines, NC 28387			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"/>	FB1	CHECK		1/23/24	\$ 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	
Carter, Elizabeth 10 Cypress Point Drive, Pinehurst NC 283			c. Employer's Name/Specific Field			
					e. Election Sum to Date \$ 200.004	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	FB1	CHECK		1/29/24	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages					\$ 3004.08	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

Pg 5 of 7 Yes No

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

Amendment
 Yes No

1. Committee Full Name (and Fund if applicable)			2. ID Number		
COMMITTEE TO ELECT ROBIN CALCUTT			7H42YM		
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
			RETIRED		
Graham, George 4 Pinyon LN. Pinehurst, NC 28374-9491			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"/>	FB1	ONLINE		01/29/24	\$ 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
			RETIRED GOLF INSTRUCTOR		
Alpenfels, Eric and Anita 170 Quail Run, Pinehurst, NC 28374-9096			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"/>	FB1	CHECK		01/29/24	\$ 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
			RETIRED		
Peterson, Ann 545 Orchard Rd. Southern Pines, NC 28387			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"/>	FB1	CHECK		01/29/24	\$ 100.00
<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)					\$ 3004.08

Contributions from Individuals

Pg 6 of 7 Yes No

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

Amendment

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT ROBIN CALCUTT				7H42YM	
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 RETIRED	d. Comments	
Sweeney, Wanda 80 Wilson Road Pinehurst, NC 28374			c. Employer's Name/Specific Field	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"/>	FB1	CHECK		02/8/24	\$ 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 BANKER	d. Comments	
Boals Thomas 60 Prestonfield Drive, Pinehurst, NC 28334			c. Employer's Name/Specific Field	e. Election Sum to Date \$ 150.00	
			FIRST BANK		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	FB1	CHECK		02/08/24	\$ 150.00
<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 RETIRED	d. Comments	
Robinson, Joan 368 Hulsey Rd Carthage NC 28327			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"/>	FB1	CHECK		02/08/24	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 450.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 3004.08

Contributions from Individuals

Pg 7 of 7 Yes No

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

Amendment

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT ROBIN CALCUTT				7H42YM	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) KATHY LEUCK 11 Chatham Lane Pinehurst NC 28387			b. Job Title/Profession RETIRED	d. Comments e. Election Sum to Date \$ 62.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>			MEET/GREET	02/15/2024	\$ 62.00
<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) Gretchen Arnocszy 662 Herons Brook Drive, Whispering Pines 28327			b. Job Title/Profession physician	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
<input type="checkbox"/>			MEET/GREET	02/11/24	\$ 42.08
<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) Darcie Davis 40 Pinewild Drive WEST END, NC 27376			b. Job Title/Profession RETIRED	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
<input type="checkbox"/>			MEET/GREET	02/04/24	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 154.08
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 3004.08

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		
Committee to elect Robin Calcutt			7H42YM		
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input checked="" type="checkbox"/> Add	FB1	online		1/17/24	\$ 50.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	FB1	ONLINE		1/21/24	\$ 50.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	FB1	ONLINE		1/22/24	\$ 25.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	FB1	ONLINE		1/22/24	\$ 50.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	FB1	ONLINE		1/22/24	\$ 25.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	FB1	ONLINE		1/22/24	\$ 50.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	FB1	ONLINE		1/25/24	\$ 50.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	FB1	ONLINE		1/27/24	\$ 50.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	FB1	ONLINE		1/29/24	\$ 50.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	FB1	ONLINE		2/6/24	\$ 50.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	FB1	ONLINE		2/9/24	\$ 25.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	FB1	ONLINE		2/14/24	\$ 10.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	FB1	ONLINE		2/14/24	\$ 50.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	FB1	ONLINE		1/26/24	\$ 50.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	FB1	ONLINE		2/16/24	\$ 25.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	FB1	CHECK		1/29/24	\$ 50.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	FB1	CHECK		1/29/24	\$ 50.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	FB1	CHECK		1/29/24	\$ 50.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	FB1	CHECK		1/29/24	\$ 25.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	FB1	CHECK		1/29/24	\$ 75.00
<input type="checkbox"/> Remove					
<input checked="" type="checkbox"/> Add	FB1	CHECK		2/8/24	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	FB1				\$
<input type="checkbox"/> Remove					
4. Total only this Page				\$ 860.00	
5. Total of ALL CRO-1205 Pages				\$ 860.00	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					

Contributions from Individuals

Pg 1 of 7 Yes No

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

1. Committee Full Name (and Fund if applicable)		2. ID Number			
Committee to elect Robin Calcutt		7H42YM			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) John Monroe 525 Hardee Branch Road West End NC 27376		b. Job Title/Profession retired physician		d. Comments	
c. Employer's Name/Specific Field EDUCATOR/VOLUNTEER				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"/>				01/8/24	\$ 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) Rebecca Beittel 702 Wildwood Rd Aberdeen NC 28315		b. Job Title/Profession EDUCATOR/VOLUNTEER		d. Comments	
c. Employer's Name/Specific Field RETIRED				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"/>				01/18/24	\$ 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) Karin Kent 25 Dove Run Pinehurst NC 28387		b. Job Title/Profession RETIRED		d. Comments	
c. Employer's Name/Specific Field RETIRED				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"/>				01/21/24	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 400.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 3004.08

Contributions from Individuals

Pg 2 of 7 Yes No

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

1. Committee Full Name (and Fund if applicable)		2. ID Number			
Committee to elect Robin Calcutt		7H42YM			
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	
Patrick and Billie Niemann 15 Timuquana TRAIL PINEHURST NC 28374		US ARMY RETIRED			
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"/>				01/22/24	\$ 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	
SUSAN ZUCCHINO 215 Pine Ridge Dr WHISPERING PINES NC 28327		RETIRED			
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"/>				01/22/24	\$ 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	
Joyce Reehling 60 Donald Ross Drive PINEHURST NC 28374		RETIRED			
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"/>				01/26/24	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 450.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 3004.08

Contributions from Individuals

Pg 3 of 7 Yes No

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

Amendment

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee to elect Robin Calcutt				7H42YM	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Kyle Sonnenberg 535 McDeeds Creek Rd SOUTHERN PINES NC 28387			b. Job Title/Profession RETIRED	d. Comments	
			c. Employer's Name/Specific Field		
				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"/>				02/14/24	\$ 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) Nicholas O'Connor 732 sun road ABERDEEN NC 28315			b. Job Title/Profession IT	d. Comments	
			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"/>				02/15/24	\$ 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) David Bruening 4100 Youngs Road SOUTHERN PINES NC 28387			b. Job Title/Profession RETIRED	d. Comments	
			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"/>				02/16/24	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 700.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 3004.08

Contributions from Individuals

Pg 4 of 7 Yes No

Amendment

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO ELECT ROBIN CALCUTT					7H42YM	
3. Contributor Information			<input type="checkbox"/>	Add	<input type="checkbox"/>	Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip) Vest-Arnold Evelyn 6215-7 7 Lakes West, West End, NC 27376			b. Job Title/Profession		d. Comments	
			RETIRED			
			c. Employer's Name/Specific Field			
3. Contributor Information			<input type="checkbox"/>	Add	<input type="checkbox"/>	Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip) Hardy, Nancy Kelly 164 Champions RDG, Southern Pines, NC 28387			b. Job Title/Profession		d. Comments	
			RETIRED			
			c. Employer's Name/Specific Field			
3. Contributor Information			<input type="checkbox"/>	Add	<input type="checkbox"/>	Remove
a. Full Name, Mailing Address & Phone (include city, state, & zip) Carter, Elizabeth 10 Cypress Point Drive, Pinehurst NC 283			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field			
4. Total only this Page			\$ 400.00			
5. Total of ALL CRO-1210 Pages			\$ 3004.08			
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

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

Amendment

Yes No

1. Committee Full Name (and Fund if applicable)		2. ID Number			
COMMITTEE TO ELECT ROBIN CALCUTT		7H42YM			
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		
Graham, George 4 Pinyon LN. Pinehurst, NC 28374-9491		RETIRED			
		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"/>				01/29/24	\$ 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		
Alpenfels, Eric and Anita 170 Quail Run, Pinehurst, NC 28374-9096		RETIRED GOLF INSTRUCTOR			
		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"/>				01/29/24	\$ 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		
Peterson, Ann 545 Orchard Rd. Southern Pines, NC 28387		RETIRED			
		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"/>				01/29/24	\$ 100.00
<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)				\$ 3004.08	

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT ROBIN CALCUTT				7H42YM	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Sweeney, Wanda 80 Wilson Road Pinehurst, NC 28374			b. Job Title/Profession RETIRED		d. Comments e. Election Sum to Date \$ 200.00
			c. Employer's Name/Specific Field 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"/>				02/8/24	\$ 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) Boals Thomas 60 Prestonfield Drive, Pinehurst, NC 283			b. Job Title/Profession BANKER		d. Comments e. Election Sum to Date \$ 150.00
			c. Employer's Name/Specific Field e. Election Sum to Date \$ 150.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>				02/08/24	\$ 150.00
<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) Robinson, Joan 368 Hulsey Rd Carthage NC 28327			b. Job Title/Profession RETIRED		d. Comments e. Election Sum to Date \$ 100.00
			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"/>				02/08/24	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 450.00
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 3004.08

Contributions from Individuals

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

Amendment
Pg 7 of 7 Yes No

1. Committee Full Name (and Fund if applicable)			2. ID Number		
COMMITTEE TO ELECT ROBIN CALCUTT			7H42YM		
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	
KATHY LEUCK 11 Chatham Lane Pinehurst NC 28387		RETIRED			
c. Employer's Name/Specific Field					
				e. Election Sum to Date	
				\$ 62.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>			MEET/GREET		\$ 62.00
<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	
Gretchen Arnocszy 662 Herons Brook Drive, Whispering Pines 28327					
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"/>			MEET/GREET	02/11/24	\$ 42.08
<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	
Darcie Davis 40 Pinewild Drive WEST END, NC 27376		RETIRED			
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"/>			MEET/GREET	02/04/24	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 154.08
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 3004.08

Disbursements

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

1. Committee Full Name (and Fund if applicable)					2. ID Number
Committee to elect Robin Calcutt					7H42YM
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement)</i>					
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) First Bank 10205 US-15 Southern Pines, NC 28387			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		bank fees
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date	
			\$ 10.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
FB1			12/21/23	\$10.00	BANK FEE
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) PILOT PO BOX 58 SOUTHERN PINES, NC 28387			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		PRINT AD
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date	
			\$ 1296.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
FB1	DEBIT	A	02/08/2024	\$1196.00	AD
FB1	DEBIT	A	02/14/2024	\$100.00	AD
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) MUIRFIELD BROADCASTING, STAR 102.5 200 SHORT ROAD SOUTHERN PINES, NC 28387			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		RADIO AD
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date	
			\$ 906.40		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
FB1	DEBIT	A	01/31/2024	\$453.20	RADIO AD RADIO AD
FB1	DEBIT	A	02/15/2024	\$453.20	
5. Total only this Page \$ 2212.40					
6. Total of ALL CRO-1310 Pages					
<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>					\$ 2495.09
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

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

1. Committee Full Name (and Fund if applicable)					2. ID Number
Committee to elect Robin Calcutt					7H42YM
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) STRIPE ONLINE SERVICE 354 Oyster Point Blvd CALIFORNIA, 94080			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		online fees
			<input type="checkbox"/> Federal	<input type="checkbox"/> County:	
			<input checked="" type="checkbox"/> State	<input type="checkbox"/> Municipality:	
					e. Election Sum to Date
					\$ 51.39
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
FB1	online	O	01/31/24	\$44.99	online FEE
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) VISTAPRINT 95 Hayden Ave, Lexington, MA 02421			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		PRINT AD
			<input type="checkbox"/> Federal	<input type="checkbox"/> County:	
			<input checked="" type="checkbox"/> State	<input type="checkbox"/> Municipality:	
					e. Election Sum to Date
					\$ 175.26
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
FB1	DEBIT	B	01/31/2024	\$175.26	POSTCARDS
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) WALMART STORE LAURINBURG, NC 28352			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		SNACKS
			<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> County:	
			<input type="checkbox"/> State	<input type="checkbox"/> Municipality:	
					e. Election Sum to Date
					\$ 62.44
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
FB1	DEBIT	O	02/13/2024	\$62.44	SNACKS
				\$	
5. Total only this Page <input type="checkbox"/> \$ 282.69					
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <input type="checkbox"/> \$ 2495.09					
<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>					
7. Purpose Codes (List detailed expenditure code in (h.) above)					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
O* - Other				D - To Another Candidate	
				H* - Holding Public Office Expenses	
				Q* - Donation to Legal Expense Fund	

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