

Disclosure Report Cover

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.

Amendment
 Yes No

1. Committee Information		RECEIVED	
a. Full Name DRUM FOR COUNCIL		c. ID Number	
b. Mailing Address (include City, State and Zip Code) 60 BLUE ROAD PINEHURST, NC 28374 MOORE BOE		d. Date Filed 10/30/2017	
		e. Phone Number (910)603-0477	

2. Report Year 2017	3. Period Start Date (mm/dd/yy) 09/27/2017	4. Period End Date (mm/dd/yy) 10/23/2017	5. Treasurer Full Name KEVIN DRUM
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6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Municipal	<input type="checkbox"/> State/County
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Quarterly
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> First
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> Second
		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Third
		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Fourth
		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Semi-annual
		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Mid Year
		<input type="checkbox"/> Year End	<input type="checkbox"/> Year End
		<input type="checkbox"/> Final	<input type="checkbox"/> Final
		<input type="checkbox"/> Special	<input type="checkbox"/> Special
7. Type of Fund (if applicable, check one)		10. Special Report Name	
<input type="checkbox"/> Booster Fund			
<input type="checkbox"/> Building Fund			
<input type="checkbox"/> Other:			
8. Number of Fundraisers this Report			

11. Account Information		11. Account Information	
a. Financial Institution Full Name FIRST CITIZENS BANK		a. Financial Institution Full Name	
b. Purpose CAMPAIGN ACCOUNT FOR RECEIPTS AND EXPENDITURES	c. Account Code A1	b. Purpose	c. Account Code
d. Period Begin Balance \$ 481.52		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.

KEVIN DRUM [Signature] 10/30/17
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: <u>10-30-17</u>	Employee: <u>[Signature]</u>	Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training
Date Postmarked: _____	Employee: _____	
Date Scanned: _____	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.

Amendment
 Yes No

Detailed Summary

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
DRUM FOR COUNCIL		PRE-PRIMARY	
Start of Election Cycle: January 1, 2017		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 481.62	\$ 133.81
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$	\$
6) Contributions from Individuals (CRO-1210)		\$ 2675.00	\$ 3675.00
7) Contributions from Political Party Committees (CRO-1220)		\$	\$
8) Contributions from Other Political Committees (CRO-1230)		\$	\$
9) Loan Proceeds (CRO-1410)		\$	\$
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)		\$	\$
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$	\$
11c) Outside Sources of Income (CRO-1250)		\$	\$
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)		\$ 2675.00	\$ 3675.00
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 2491.61	\$ 3119.90
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$	\$
13c) Coordinated Party Expenditures (CRO-1310)		\$	\$
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 3.00	\$ 27.00
15) Loan Repayments (CRO-1420)		\$	\$
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$	\$
17) In-Kind Contributions (CRO-1510)		\$ 1448.76	\$ 1448.76
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 3943.37	\$ 4595.66
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ <786.85	\$ <786.85
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
 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) DRUM FOR COUNCIL	2. ID Number
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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	
KENT DAVIS 60 CAROLINA VISTA DR. PINEHURST, NC 28374		OWNER		Individual Contribution	
		c. Employer's Name/Specific Field SELF-EMPLOYER			
				e. Election Sum to Date \$ 325⁰⁰	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	A1	CHECK		10/13/2017	\$ 200⁰⁰
<input type="checkbox"/>	A1	CHECK		10/19/2017	\$ 125⁰⁰
<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	
MERLE LEWIS 10 MELROSE DRIVE PINEHURST, NC 28374		RETIRED		Individual Contribution	
		c. Employer's Name/Specific Field			
				e. Election Sum to Date \$ 50⁰⁰	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	A1	CHECK		10/13/2017	\$ 50⁰⁰
<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	
KEN BAER 5 CARDINAL RUN PINEHURST, NC 28374		OWNER		Individual Contribution	
		c. Employer's Name/Specific Field DUNKIN DONUTS			
				e. Election Sum to Date \$ 200⁰⁰	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	A1	CHECK		10/13/2017	\$ 200⁰⁰
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page					\$ 575⁰⁰
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 2675⁰⁰

Contributions from Individuals

Pg 2 of 2

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) DRUM FOR COUNCIL	2. ID Number
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3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) JENNIFER STODDARD 60 BLUE ROAD PINEHURST, NC 28374	b. Job Title/Profession PHYSICIAN	d. Comments SPOUSE CONTRIBUTION				
c. Employer's Name/Specific Field PINEHURST NEPHROLOGY ASSOCIATES		e. Election Sum to Date \$ 1000⁰⁰				
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A1	CHECK		10/13/2017	\$ 1000 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) KEVIN DRUM 60 BLUE ROAD PINEHURST, NC 28374	b. Job Title/Profession OWNER	d. Comments CANDIDATE CONTRIBUTION				
c. Employer's Name/Specific Field Drum's Quill LLC		e. Election Sum to Date \$ 2000⁰⁰				
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A1	CHECK		10/13/2017	\$ 1000 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) SCOTT BREWTON P.O. BOX 4134 PINEHURST, NC 28374	b. Job Title/Profession OPERATIONS MANAGER	d. Comments CONTRIBUTION				
c. Employer's Name/Specific Field PINEHURST RESORT		e. Election Sum to Date \$ 100⁰⁰				
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A1	CHECK		10/19/2017	\$ 100 ⁰⁰	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	

4. Total only this Page	\$ 2100 ⁰⁰
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>	\$ 2675 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
DRUM FOR COUNCIL						
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 type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
STAPLES 290 TURNER STREET ABERDEEN, NC 28315					COPIES	
c. Level Registered (Specify)			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 87.51	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A1	DEBIT	K	09/28/2017	\$ 87.51	COPIES	
				\$		
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	
VILLAGE PRINTERS, INC 22 RATTLESNAKE TRAIL PINEHURST, NC 28374						
c. Level Registered (Specify)			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 171.90	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A1	DEBIT	B	10/16/2017	\$ 171.90	STICKERS & BANNER	
				\$		
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	
THE PILOT, LLC 145 W. PENNSYLVANIA AVE SOUTHERN PINES, NC 28387					ADS	
c. Level Registered (Specify)			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 899.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A1	DEBIT	A	10/18/2017	\$ 899.00	ADVERTISING	
				\$		
5. Total only this Page					\$ 1158.41	
6. Total of ALL CRO-1310 Pages					\$ 2491.61	
7. Purpose Codes <i>(List detailed expenditure code in (h) above)</i>						
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		
DRUM FOR COUNCIL								
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		
CROSS & OBERLIE POLITICAL LAWN SIGNS 916 BYRD AVE NEENAH, WI 54956						POLITICAL SIGNS STICKERS		
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:						\$ 711.20		
f. Account Code		g. Form of Payment		h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A1		DEBIT				10/23/2017	\$ 711.20	SIGNS, STICKERS
							\$	
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		
W10Z MUIRFIELD BROADCASTING 200 SHORT ST SOUTHERN PINES, NC 28387						ADVERTISING RADIO		
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:						\$ 622.00		
f. Account Code		g. Form of Payment		h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A1		CHECK		A		10/23/2017	\$ 622.00	ADVERTISING
							\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove								
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments		
c. Level Registered (Specify)				e. Election Sum to Date				
<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:						\$		
f. Account Code		g. Form of Payment		h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
							\$	
							\$	
5. Total only this Page						\$ 1333.20		
6. Total of ALL CRO-1310 Pages						\$ 2491.61		
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 applicable) DRUM FOR COUNCIL	2. ID Number
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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
<input type="checkbox"/> Add	A1	DRAFT	0	09/29/2017	\$ 3.00	BANKSERVICE FEE
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add					\$	
<input type="checkbox"/> Remove					\$	
<input type="checkbox"/> Add					\$	
<input type="checkbox"/> Remove					\$	
<input type="checkbox"/> Add					\$	
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<input type="checkbox"/> Remove					\$	
<input type="checkbox"/> Add					\$	
<input type="checkbox"/> Remove					\$	

4. Total only this Page	\$ 3.00
5. Total of ALL CRO-1315 Pages	\$ 3.00

(This line must be on line 14 of Detailed Summary Page CRO-1100)

6. Purpose Codes (List detailed expenditure code in (d) above)			
E - Salaries	B* - Printing	C* - Fundraising	D - To Another Candidate
I - Postage	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
O* - Other	J - Penalties	K* - Office Expenses	Q* - Donations to Legal Expense Fund

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

In-Kind Contributions

Pg 1 of 1

Amendment
 Yes No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
 Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
DRUM FOR COUNCIL			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
KEVIN DRUM 60 BLUE ROAD PINEHURST, NC 28374		<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 1258.76	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
FACEBOOK ADS - PAID PERSONAL ACCT		09/30/2017	\$ 192.08
FACEBOOK ADS - PAID PERSONAL ACCT		10/23/2017	\$ 355.48
CROSS & OBERLIE - POLITICAL SIGNS		09/27/2017	\$ 711.20
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
MARTHA & BART O'CONNOR 535 DONALD ROSS DRIVE PINEHURST, NC 28374		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 90.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
EVENT FOOD/DRINKS		10/05/2017	\$ 60.00
PRINTING/MAILING COST		10/05/2017	\$ 12.50
OTHER/MISC (NAME TAGS, ^{Supplies} FLOWERS)		10/05/2017	\$ 17.50
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
KATHIE & MARK PARSONS 185 EVERETTE ROAD PINEHURST, NC 28374		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 100.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
EVENT - MEET & GREET		10/15/2017	\$ 100.00
			\$
			\$
4. Total only this Page			\$ 1448.76
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$ 1448.76