

# Detailed Summary

WINDLE COMMITTEE PUBLIC COPY

Yes  No

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

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
John McLaughlin for Southern Pines Town Council		Year End Semi Annual			
<b>Start of Election Cycle:</b> January 1, <u>2019</u>		<b>Total this Reporting Period</b>		<b>Total this Election Cycle</b>	
4) Cash on Hand at Start		\$ 1106.18		\$ 0.00	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$	
6) Contributions from Individuals (CRO-1210)		\$ 2275.00		\$ 3450.00	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$ 500.00	
9) Loan Proceeds (CRO-1410)		\$		\$ 640.00	
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)		\$ 2275.00		\$ 4590.00	
<b>EXPENDITURES</b>					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 1670.18		\$ 2554.00	
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)		\$ 640.00		\$ 640.00	
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$		\$	
17) In-Kind Contributions (CRO-1510)		\$		\$ 325.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 2310.18		\$ 3519.00	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1071.00		\$ 1071.11	
<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)		\$		\$	

RECEIVED  
APR 20 2020  
MOORE BOE

**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) <b>John McLAVATHLIN</b>						2. ID Number	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>W. Michael Hobbs 360 Crest Road Southern Pines NC 28387</b>				b. Job Title/Profession <b>Reactor</b>		d. Comments	
				c. Employer's Name/Specific Field <b>Selfemployed</b>		e. Election Sum to Date <b>\$ 150<sup>00</sup></b>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	DDA	check		10/23/19	\$ 150 <sup>00</sup>		
<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>Perry Shelley 552 Lakeshore Drive Pawleys Island, SC 29585</b>				b. Job Title/Profession <b>Developer</b>		d. Comments	
				c. Employer's Name/Specific Field <b>Commercial Development Co.</b>		e. Election Sum to Date <b>\$ 250<sup>00</sup></b>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	DDA	check		10/21/19	\$ 250 <sup>00</sup>		
<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>Cleta Mitchell 139 National Drive Pinehurst NC 28374</b>				b. Job Title/Profession <b>Attorney</b>		d. Comments	
				c. Employer's Name/Specific Field <b>Foley &amp; Lardner, LLP</b>		e. Election Sum to Date <b>\$ 50<sup>00</sup></b>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	DDA	check		10/23/19	\$ 50 <sup>00</sup>		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 450	
5. Total of ALL CRO-1210 Pages						\$ 450	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

**Contributions from Individuals**

Pg 2 of 5

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) <b>John McLaughlin FOR So. Pines Town Council</b>						2. ID Number	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>Edward Owen 310 Crest Road Southern Pines NC 28387</b>				b. Job Title/Profession <b>Retired</b>		d. Comments	
				c. Employer's Name/Specific Field		e. Election Sum to Date <b>\$ 100<sup>00</sup></b>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	DDA	check		10/23/19	\$ 100 <sup>00</sup>		
<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>W.C. Fitzgerald, III 52 Royal County Down Pinehurst NC 28374</b>				b. Job Title/Profession <b>Retired</b>		d. Comments	
				c. Employer's Name/Specific Field		e. Election Sum to Date <b>\$ 100<sup>00</sup></b>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	DDA	check		10/23/19	\$ 100 <sup>00</sup>		
<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>Marshall Miller 249 National Drive Pinehurst NC 28374</b>				b. Job Title/Profession <b>Businessman</b>		d. Comments	
				c. Employer's Name/Specific Field <b>Self Employed</b>		e. Election Sum to Date <b>\$ 100<sup>00</sup></b>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	DDA	check		10/23/19	\$ 100 <sup>00</sup>		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page					\$ 300 <sup>00</sup>		
5. Total of ALL CRO-1210 Pages					\$ 750 <sup>00</sup>		
*This amount is on line a of Detailed Summary Page CRO-1100							

**Contributions from Individuals**

Pg 3 of 5

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	
John McLaughlin for So. Pines Town Council							
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	
Joseph S. Hiatt, III 250 River North Drive Atlanta, Georgia 30328				Commercial Developer			
				c. Employer's Name/Specific Field			
				Self employed			
						e. Election Sum to Date	
						\$ 1000 <sup>00</sup>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	DDA	check		10/23/19	\$ 1000 <sup>00</sup>		
<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	
James E Rhodes 315 Selkirk Trail Southern Pines NC 28387				Real Estate			
				c. Employer's Name/Specific Field			
				Self Employed			
						e. Election Sum to Date	
						\$ 100 <sup>00</sup>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	DDA	check		10/23/19	\$ 100 <sup>00</sup>		
<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	
Beverly Harper 247 National Drive Pinehurst, NC 28374				Retired			
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 100 <sup>00</sup>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	DDA	check		10/23/19	\$ 100 <sup>00</sup>		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page					\$ 1200 <sup>00</sup>		
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1950 <sup>00</sup>		

**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
John McLaughlin for So. Pines Town Council						
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	
Patricia Liotta 105 Hawick Court Pinehurst NC 28374				Retired		
				c. Employer's Name/Specific Field		
				e. Election Sum to Date		
				\$ 50 <sup>00</sup>		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	DDA	Check		10/23/19	\$ 50 <sup>00</sup>	
<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	
Josephine Cooper 121 Saint Mellions Drive Pinehurst NC 28374				Retired		
				c. Employer's Name/Specific Field		
				e. Election Sum to Date		
				\$ 75 <sup>00</sup>		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	DDA	Check		10/23/19	\$ 75 <sup>00</sup>	
<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	
Tom Kakadelis Midland Country Club Pinehurst NC 28374				NC Field Rep		
				c. Employer's Name/Specific Field		
				e. Election Sum to Date		
				\$ 50 <sup>00</sup>		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	DDA	Cash		10/20/19	\$ 50 <sup>00</sup>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 175 <sup>00</sup>	
5. Total of ALL CRO 1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					\$ 2125 <sup>00</sup>	

**Contributions from Individuals**

Pg 5 of 5  Yes  No

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) <u>John McLaughlin for Se. Pines Town Council</u>						2. ID Number
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Matthew Grant McLaughlin</u> <u>824 HESTER ST</u> <u>CHARLESTON SC</u>			b. Job Title/Profession <u>Businessowner</u>		d. Comments	
			c. Employer's Name/Specific Field <u>Wellfurnished</u> <u>Charleston SC</u>		e. Election Sum to Date <u>\$ 150<sup>00</sup></u>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		<u>DDA Check</u>		<u>10/20/19</u>	<u>\$ 150<sup>00</sup></u>	
<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"/>					\$	
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					\$ <u>150<sup>00</sup></u>	
5. Total of ALL CRO-1210 Pages					\$ <u>2275<sup>00</sup></u>	

**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)						ID Number
John McLaughlin for So. Pines Town Council						
2. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
3. 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	
Lowe's Home Improvement Southern Pines NC 28387						
			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:		\$ 38.46	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
DDA	Credit Card	F	9/23/19	\$ 38.46	Materials	
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	
Copyright Printing Hwy 5 Aberdeen NC 28315						
			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:		\$ 99.72	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
DDA	Credit Card	B	9/25/19	\$ 99.72	Materials Charms-outs	
5. 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 Pennsylvania Avenue Southern Pines NC 28387						
			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:		\$ 480.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
DDA	Credit Card	A	10/28/19	\$ 480.00	Advertising	
5. Total only this Page						\$ 579.72
6. Total of ALL CRO-1310 Pages						\$ 579.72
(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)						
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						
8. Codes require detailed explanation in required remarks field (6)						

38.46  
99.72  
480.00  
618.18

**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) <b>John McLaughlin for So. Pines Town Council</b>						2. ID Number
3. Type of Disbursement (Please use separate CRO-1110 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. Payer 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	
<b>WEEB Midland Road Southern Pines NC 28387</b>			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
DDA		Cashiers check	A	10/29/19	\$992.00	Advertising Radio
4. Payer 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	
<b>Carolina Storage US 1 Hwy So. Pines NC 28387</b>			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
DDA		credit card	F	11/6/19	\$60.00	Self Storage
4. Payer 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						\$ 1052.00 ✓
6. Total of ALL CRO-1110 Pages						\$ 1131.72
7. Purpose Codes (List detailed expenditure code in (h) above)						1670.18
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						



**Loan Repayments**

Use this form to report payments on an existing loan.

1. Committee Full Name (and Fund if applicable)					2. ID Number
John McLaughlin for So. Pines Town Council					
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
John McLaughlin 1475 Midland Rd. Unit 45 Southern Pines NC 28387					
				c. Original Loan Date	
				9/3/19	
				d. Original Loan Amount	
				\$ 640.00	
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$ 0	DDA	check	11/12/19	\$ 640.00	
\$				\$	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Original Loan Date	
				d. Original Loan Amount	
				\$	
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$				\$	
\$				\$	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Original Loan Date	
				d. Original Loan Amount	
				\$	
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$				\$	
\$				\$	
4. Total only this Page				\$ 640.00	
5. Total of ALL CRO-1420 Pages <i>(This line must be online &amp; of Detailed Summary Page CRO-1100)</i>				\$ 640.00	