

Detailed Summary

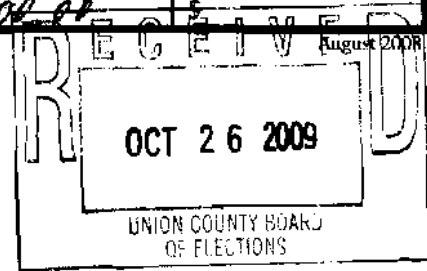
Amendment
 Yes No

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
Curry for Council		Final	QJMR46
Start of Election Cycle: January 1, _____		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 2,000	\$ 243.72
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$	\$ 135.00
6) Contributions from Individuals (CRO-1210)	\$ 850	\$	\$ 741.15
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)	\$ 850.00	\$	\$ 876.15
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 2,406.28	\$	\$ 1119.87
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)	\$ 200.	\$	\$
17) In-Kind Contributions (CRO-1510)	\$	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 2606.28	\$	\$ 1119.87
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 243.72	\$	\$ 0
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)	\$ 200.00	\$	\$

CRO-1100

NC State Board of Elections



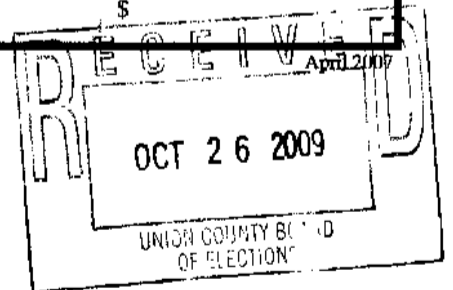
Contributions from Individuals

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) <i>Curry for Council</i>						2. ID Number <i>QJMQ46</i>	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (Include city, state, & zip) <i>Bob Curry 1200 Rosa Dr Monroe NC 28112</i>				b. Job Title/Profession <i>OWNER</i>		d. Comments	
				c. Employer's Name/Specific Field <i>Curry's associates insurance/investment</i>		e. Election Sum to Date <i>\$ 2,746.15</i>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input checked="" type="checkbox"/>	<i>1</i>	<i>Check</i>		<i>07/30/2009</i>	<i>\$ 2,000</i>		
<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						\$	
5. Total of ALL CRO-1210 Pages						\$	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

CRO-1210

NC State Board of Elections



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.

I. Committee Information			
a. Full Name <i>Curry Jr Council</i>		c. ID Number <i>QJMRUB</i>	
b. Mailing Address (include City, State and Zip Code) <i>1200 Ross Dr - Morse, NC 28122</i>		d. Date Filed <i>7/6/2009</i>	
		e. Phone Number <i>704 283-6347</i>	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name <i>Bob Curry</i>
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"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Legal Expense Fund		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty five day <input type="checkbox"/> Pre-primary <input checked="" type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
7. Type of Fund (If applicable, check one)		State/County	
<input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other		<input type="checkbox"/> Organizational Quarterly <input checked="" type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
8. Number of Fundraisers this Report <i>0</i>		10. Special Report Name	
11. Account Information		11. Account Information	
a. Financial Institution Full Name <i>PBC Bank</i>		a. Financial Institution Full Name <i>Country</i>	
b. Purpose <i>Campaign funds</i>	c. Account Code	b. Purpose <i>SEP 25</i>	c. Account Code <i>2009</i>
	d. Period Begin Balance <i>\$9,000</i>		d. Period Begin Balance <i>\$</i>
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.			
<i>Bob Curry</i> Printed Name of Signer		<i>Bob Curry</i> Signature of Appointed Treasurer	<i>9/21/09</i> Date
FOR OFFICE USE ONLY			
Date Received:	<i>9-28-09</i>	Employee:	<i>Unki Owen</i>
Date Postmarked:	_____	Employee:	_____
Date Scanned:	_____	Employee:	_____
Date Data Entered:	_____	Employee:	_____
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			
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.			

Detailed Summary

Amendment
 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	
Curry for Council		QJMR 46	
Start of Election Cycle: January 1, _____		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$	\$
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$	\$
6) Contributions from Individuals (CRO-1210)		\$ 2,850	\$
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)		\$	\$
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 2,406.28	\$
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)		\$ 200.00	\$
17) In-Kind Contributions (CRO-1510)		\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$	\$
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)		\$ 200.00	\$

Contributions from Individuals

Amendment
 Yes No

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

Curry for Council						QJMQ66
Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Billy Frank Horwood 906 Bridge water Dr. Monroe, NC 28112			President State Util. & Contractors.			
			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 checked="" type="checkbox"/>		check		08/27/09	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Bill E Davis 1203 E. Franklin St. Monroe, NC 28112			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 checked="" type="checkbox"/>		check		6/27/09	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
John W. Wiggins 408 W. Roosevelt Blvd. Monroe, NC 28110			Developer self-employed			
			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"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
					\$ 650.00	
					\$ 2,850.00	

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	
Curry for Council						QJMQUG	
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	
Robert W. Morrison 815 Bridgewater Dr. Monroe NC 28112				Owner			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				Morrison Appraisers		\$ 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"/>					\$		
<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	
Donald W. Richardson 3003 Wedge Ct. Matthews NC 28104				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"/>					\$		
<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	
Bob Curry 1200 Rosa Dr. Monroe, NC 28112				Candidate			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$ 2,000	
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						\$ 2,200	
5. Total of ALL CRO-1210 Pages						\$	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

Refunds/Reimbursements From the Committee

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

1. Committee Full Name (and Fund if applicable) <u>Curry for Council</u>		2. ID Number <u>RTMRK6</u>	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>John Wiggins</u> <u>408 W. Roosevelt Blvd</u> <u>Monroe, NC 28110</u>		d. Type of Committee <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	
b. Job Title/Profession <u>Developer</u>		e. Level Registered <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
c. Employer's Name/Specific Field <u>Self-employed</u>		f. Purpose Code <u>L</u>	
g. Comments <u>gave cash, I gave it back</u>		h. Original Receipt Date <u>9/18/09</u>	
i. Original Receipt Amount <u>\$ 200.00</u>		j. Election Sum to Date <u>\$ 200.00</u>	
k. Account Code			
l. Form of Payment <u>Cash</u>	m. Required Remarks <u>gave cash, I gave it back</u>		n. Date (mm/dd/yyyy) <u>9/18/09</u>
		o. Amount <u>\$ 200.00</u>	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	
b. Job Title/Profession		e. Level Registered <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
c. Employer's Name/Specific Field		f. Purpose Code	
g. Comments		h. Original Receipt Date	
i. Original Receipt Amount		j. Election Sum to Date	
k. Account Code			
l. Form of Payment	m. Required Remarks		n. Date (mm/dd/yyyy)
		o. Amount	
		<u>\$</u>	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	
b. Job Title/Profession		e. Level Registered <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
c. Employer's Name/Specific Field		f. Purpose Code	
g. Comments		h. Original Receipt Date	
i. Original Receipt Amount		j. Election Sum to Date	
k. Account Code			
l. Form of Payment	m. Required Remarks		n. Date (mm/dd/yyyy)
		o. Amount	
		<u>\$</u>	
4. Total only this Page		<u>\$ 200.00</u>	
5. Total of ALL CRO-1320 Pages <i>(This line must be on the 1st of Detailed Summary Page (CRO-1320))</i>		<u>\$ 200.00</u>	
6. Purpose Codes (List detailed disbursement code in (f) above)			
L - Returned to Contributor		M - Overpayment for Service	
P* - Reimbursement of In-Kind		O* Other	
* Codes require detailed explanation in required remarks field (m)			

Contributions to be Reimbursed

Amendment
 Yes No

Use this form to report Contributions under \$1,000 which will be refunded within 7 days.
 Refunds must be disclosed on the Refunds/Reimbursements Form (CRO-1320).

Curry for Council		QJMRL 6	
Full Name & Mailing Address of the Payee (the original vendor)		Full Name & Mailing Address of the Reimbursee (the person to whom the campaign check is written)	
John Wiggins 408 W. Roosevelt Blvd Monroe, NC 28110			
a. Contribution Description	b. Date (mm/dd/yyyy)	c. Credit Card Y/N	d. Amount
GAVE ME 200.00 CASH, I	9/18/2009		\$ 200.00
realized next day and gave it			\$
back			\$
Full Name & Mailing Address of the Payee (the original vendor)		Full Name & Mailing Address of the Reimbursee (the person to whom the campaign check is written)	
a. Contribution Description	b. Date (mm/dd/yyyy)	c. Credit Card Y/N	d. Amount
			\$
			\$
			\$
Full Name & Mailing Address of the Payee (the original vendor)		Full Name & Mailing Address of the Reimbursee (the person to whom the campaign check is written)	
a. Contribution Description	b. Date (mm/dd/yyyy)	c. Credit Card Y/N	d. Amount
			\$
			\$
			\$
Total Contributions			\$ 200.00
Total Refunds			\$ 200.00

Disbursements

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Curry for Council						QJMQU6	
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	
Sign Masters 314 B. Depot St. Monroe, NC 28112				Curry for Council		Yard Signs	
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality		\$ 386.11	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
		B	9/16/09	\$ 386.11	Yard Signs		
				\$			
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	
Photo pros & more 1404-A Skyway Dr. Monroe, NC 28110				Curry for Council		Campaign P.C.	
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality		\$ 48.04	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
		A	09/01/2009	\$ 48.04	Needed for Campaign literature		
				\$			
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	
Target Mailing P.O. Box 36187 Charlotte, NC 28236				Curry for Council		Printing & postage for Campaign lit.	
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality		\$ 944.75	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
		B	09/02/2009	\$ 944.75	Printing & postage		
				\$			
5. Total only						\$ 1,378.40	
6. Total of ALL CRO-1310 Pages						\$	
7. Purpose Code (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		O* - Other	
* Codes require detailed explanation in required remarks field (k)							

Disbursements

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

1. Committee Full Name (and Fund if applicable) <i>Curry for Council</i>						2. ID Number <i>QJMQ 116</i>	
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 <i>(include city, state, & zip)</i> <i>Key Printing & Graphics</i> <i>134 S. Main St.</i> <i>Monroe NC 28110</i>				b. Coordinated Committee Name <i>Curry for Council</i>		d. Comments <i>Printed flyers for Newspaper</i>	
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		<i>\$ 269.38</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
		<i>B</i>	<i>09/16/2009</i>	<i>\$ 269.38</i>	<i>Printed flyers</i>		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> <i>Monroe Enquirer - Journal</i> <i>500 W. Jefferson St.</i> <i>Monroe NC 28112</i>				b. Coordinated Committee Name <i>Curry for Council</i>		d. Comments <i>add for meet & greet</i>	
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		<i>\$ 325.00</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
		<i>A</i>	<i>09/23/2009</i>	<i>\$ 325.00</i>	<i>add for meet & greet</i>		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> <i>John Grosham, attorney</i> <i>741 Kenilworth Ave.</i> <i>Charlotte, NC</i>				b. Coordinated Committee Name <i>Curry for Council</i>		d. Comments <i>retainer</i>	
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		<i>\$ 200.00</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
		<i>O</i>	<i>09/16/2009</i>	<i>\$ 200.00</i>	<i>legal retainer</i>		
				\$			
5. Total only this Page						<i>\$ 794.38</i>	
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>							
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		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) <i>Curry for Council</i>						2. ID Number <i>9JMRU6</i>	
3. Type of Disbursement (Please use sections 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							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Bob Curry 1000 Rava Dr - Monroe, NC 28112</i>				b. Coordinated Committee Name <i>Curry for Council</i>		d. Comments <i>Was given 200.00 cash contribution deposited it, check out problem w/ it.</i>	
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		e. Election Sum to Date \$ <i>200.00</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
		<i>C</i>	<i>09/21/2009</i>	\$ <i>200.00</i>			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Union County Bd of Elections P.O. Box 1106 Monroe, NC 28111</i>				b. Coordinated Committee Name <i>Curry for Council</i>		d. Comments <i>billing fee</i>	
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		e. Election Sum to Date \$ <i>5.00</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
		<i>H</i>	<i>07/06/2009</i>	\$ <i>5.00</i>	<i>billing fee</i>		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Union Co. Bd. of Elections P.O. Box 1106 Monroe, NC 28111</i>				b. Coordinated Committee Name <i>Curry for Council</i>		d. Comments <i>CD is Abstracts</i>	
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		e. Election Sum to Date \$ <i>28.00</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
		<i>H</i>	<i>08/07/2009</i>	\$ <i>28.00</i>	<i>CD is Abstracts.</i>		
5. Total only this Page						\$ 205.00 <i>233.00</i>	
6. Total of ALL CRO-1310 Pages <small>(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)</small>						\$	
7. Purpose Codes (List detailed expenditure code in (k.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		O* - Other	
* Codes require detailed explanation in required remarks field (k.)							