



# 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                |  |
|--|--|-------------------|--|-----------------------------|--|
| SABRINABERRY2020   |  | Organizational    |  |                             |  |
| Start of Election Cycle: <b>January 1,</b>                                   |  | <b>2017</b>       |  | Total this Reporting Period |  |
| 4) Cash on Hand at Start   |  | \$ 52.76          |  | \$ 0.00                     |  |
| <b>RECEIPTS</b>  |  |                   |  |                             |  |
| 5) Aggregated Contributions from Individuals                                 |  | (CRO-1205)        |  | \$                          |  |
| 6) Contributions from Individuals  |  | (CRO-1210)        |  | \$ 130.00                   |  |
| 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)        |  | \$                          |  |
| 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) |  | \$ 130.00         |  | \$ 537.00                   |  |
| <b>EXPENDITURES</b>  |  |                   |  |                             |  |
| 13) Disbursements  |  |                   |  |                             |  |
| 13a) Operating Expenditures  |  | (CRO-1310)        |  | \$ 101.63                   |  |
| 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)        |  | \$ 132.00                   |  |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)          |  | \$ 101.63         |  | \$ 323.87                   |  |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) |  | \$ 81.13          |  | \$ 81.13                    |  |
| <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)        |  | \$                          |  |

# Disbursements

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

|  |                           |   |  |   |                                |
|--|---------------------------|---|--|---|--------------------------------|
| <b>1. Committee Full Name (and Fund if applicable)</b>   |                           |   |  |   | <b>2. ID Number</b>            |
| SABRINA BERRY FOR COUNTY COMMISSIONER  |                           |   |  |   |                                |
| <b>3. Type of Disbursement</b> <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 |                                |
| <b>4. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove  |                           |   |  |   |                                |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)   |                           |   | <b>b. Coordinated Committee Name</b>   |   | <b>d. Comments</b>             |
| Go Daddy<br>14455 N. Hayden Rd<br>Suite 219<br>Scottsdale<br>AZ<br>85260   |                           |   |  |   | Website Domain                 |
|  |                           |   | <b>c. Level Registered (Specify)</b>   |   |                                |
|  |                           |   | <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: |   |                                |
|  |                           |   | <input type="checkbox"/> State <input type="checkbox"/> Municipality:        |   |                                |
|  |                           |   |  |   | <b>e. Election Sum to Date</b> |
|  |                           |   |  |   | \$ 215.37                      |
| <b>f. Account Code</b>   | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>  | <b>i. Date (mm/dd/yyyy)</b>  | <b>j. Amount</b>  | <b>k. Required Remarks</b>     |
| 1  | DEBIT CARD                | A   | 5/8/2020   | \$96.16   | Website domain                 |
|  |                           |   |  | \$  |                                |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                           |   |  |   |                                |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)   |                           |   | <b>b. Coordinated Committee Name</b>   |   | <b>d. Comments</b>             |
| Fund Hero<br>243 E. 400 S<br>Salt Lake City<br>UT<br>84111   |                           |   |  |   |                                |
|  |                           |   | <b>c. Level Registered (Specify)</b>   |   |                                |
|  |                           |   | <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: |   |                                |
|  |                           |   | <input type="checkbox"/> State <input type="checkbox"/> Municipality:        |   |                                |
|  |                           |   |  |   | <b>e. Election Sum to Date</b> |
|  |                           |   |  |   | \$ 20.76                       |
| <b>f. Account Code</b>   | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>  | <b>i. Date (mm/dd/yyyy)</b>  | <b>j. Amount</b>  | <b>k. Required Remarks</b>     |
| A81  | Electronic                | O   | 4/11/2020  | \$5.47  | RB Contribution                |
|  |                           |   |  | \$  |                                |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove   |                           |   |  |   |                                |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)   |                           |   | <b>b. Coordinated Committee Name</b>   |   | <b>d. Comments</b>             |
|  |                           |   |  |   |                                |
|  |                           |   | <b>c. Level Registered (Specify)</b>   |   |                                |
|  |                           |   | <input type="checkbox"/> Federal <input type="checkbox"/> County:            |   |                                |
|  |                           |   | <input type="checkbox"/> State <input type="checkbox"/> Municipality:        |   |                                |
|  |                           |   |  |   | <b>e. Election Sum to Date</b> |
|  |                           |   |  |   | \$                             |
| <b>f. Account Code</b>   | <b>g. Form of Payment</b> | <b>h. Purpose Code</b>  | <b>i. Date (mm/dd/yyyy)</b>  | <b>j. Amount</b>  | <b>k. Required Remarks</b>     |
|  |                           |   |  | \$  |                                |
|  |                           |   |  | \$  |                                |
| <b>5. Total only this Page</b>   |                           |   |  |   | \$ 101.63                      |
| <b>6. Total of ALL CRO-1310 Pages</b><br><i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i><br><i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i><br><i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> |                           |   |  |   | \$ 101.63                      |
| <b>7. Purpose Codes</b> (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)   |                           |   |  |   |                                |

# Contributions from Individuals

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

|   |                        |                           |                               |  |  |                                |  |
|---|------------------------|---------------------------|-------------------------------|--|--|--------------------------------|--|
| <b>1. Committee Full Name (and Fund if applicable)</b>  |                        |                           |                               |  |  | <b>2. ID Number</b>            |  |
| SABRINABERRY2020  |                        |                           |                               |  |  |                                |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove       |                        |                           |                               |  |  |                                |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                |                        |                           |                               | <b>b. Job Title/Profession</b>           |  | <b>d. Comments</b>             |  |
| Robert Baxter jr<br>1820 Heritage Pond Dr, Apt 204<br>Charlotte, NC 28262                                       |                        |                           |                               | Security Coordinator                     |  |                                |  |
|   |                        |                           |                               | <b>c. Employer's Name/Specific Field</b> |  |                                |  |
|   |                        |                           |                               | unable to obtain -                       |  |                                |  |
|   |                        |                           |                               |  |  | <b>e. Election Sum to Date</b> |  |
|   |                        |                           |                               |  |  | \$ 100.00                      |  |
| <b>f. Prior</b>   | <b>g. Account Code</b> | <b>h. Form of Payment</b> | <b>i. In-Kind Description</b> | <b>j. Date (mm/dd/yyyy)</b>              |  | <b>k. Amount</b>               |  |
| <input type="checkbox"/>  | A81                    | Online                    |                               | 4/11/2020                                |  | \$ 100.00                      |  |
| <input type="checkbox"/>  |                        |                           |                               |  |  | \$                             |  |
| <input type="checkbox"/>  |                        |                           |                               |  |  | \$                             |  |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                  |                        |                           |                               |  |  |                                |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                |                        |                           |                               | <b>b. Job Title/Profession</b>           |  | <b>d. Comments</b>             |  |
| Sabrina Berry<br>555 Clearwater Drive<br>Concord<br>nc<br>28027   |                        |                           |                               | Property manager                         |  |                                |  |
|   |                        |                           |                               | <b>c. Employer's Name/Specific Field</b> |  |                                |  |
|   |                        |                           |                               | ah4r                                     |  |                                |  |
|   |                        |                           |                               |  |  | <b>e. Election Sum to Date</b> |  |
|   |                        |                           |                               |  |  | \$ 162.00                      |  |
| <b>f. Prior</b>   | <b>g. Account Code</b> | <b>h. Form of Payment</b> | <b>i. In-Kind Description</b> | <b>j. Date (mm/dd/yyyy)</b>              |  | <b>k. Amount</b>               |  |
| <input type="checkbox"/>  | A81                    | transfer                  | 30.00                         | 3/5/2020                                 |  | \$ 30.00                       |  |
| <input type="checkbox"/>  |                        |                           |                               |  |  | \$                             |  |
| <input type="checkbox"/>  |                        |                           |                               |  |  | \$                             |  |
| <b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                  |                        |                           |                               |  |  |                                |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                |                        |                           |                               | <b>b. Job Title/Profession</b>           |  | <b>d. Comments</b>             |  |
|   |                        |                           |                               |  |  |                                |  |
|   |                        |                           |                               | <b>c. Employer's Name/Specific Field</b> |  |                                |  |
|   |                        |                           |                               |  |  |                                |  |
|   |                        |                           |                               |  |  | <b>e. Election Sum to Date</b> |  |
|   |                        |                           |                               |  |  | \$                             |  |
| <b>f. Prior</b>   | <b>g. Account Code</b> | <b>h. Form of Payment</b> | <b>i. In-Kind Description</b> | <b>j. Date (mm/dd/yyyy)</b>              |  | <b>k. Amount</b>               |  |
| <input type="checkbox"/>  |                        |                           |                               |  |  | \$                             |  |
| <input type="checkbox"/>  |                        |                           |                               |  |  | \$                             |  |
| <input type="checkbox"/>  |                        |                           |                               |  |  | \$                             |  |
| <b>4. Total only this Page</b>  |                        |                           |                               |  |  | \$ 130.00                      |  |
| <b>5. Total of ALL CRO-1210 Pages</b><br><i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> |                        |                           |                               |  |  | \$ 130.00                      |  |