

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 <u>Isaac Fox Town Council</u>		c. ID Number	
b. Mailing Address (include City, State and Zip Code) <u>12888 Mustang Dr Midland, NC 28107</u>		d. Date Filed	
		e. Phone Number <u>704-728-1228</u>	
2. Report Year <u>2025</u>	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy) <u>09/23/2025</u>	5. Treasurer Full Name <u>Rachel Phipps</u>
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
☒ Candidate Campaign ☐ PAC ☐ Independent Expenditure ☐ Legal Expense Fund ☐ Party ☐ Referendum ☐ Joint Fundraiser		Municipal ☒ Organizational ☐ Thirty-five day ☐ Pre-primary ☐ Pre-election ☐ Pre-runoff ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special	
7. Type of Fund (if applicable, check one) ☐ Booster Fund ☐ Building Fund ☐ Other:		State/County ☐ Organizational ☐ Quarterly ☐ First ☐ Second ☐ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special	
8. Number of Fundraisers this Report <u>0</u>		10. Special Report Name	
11. Account Information		11. Account Information	
a. Financial Institution Full Name <u>Uwharrie Bank</u>		a. Financial Institution Full Name	
b. Purpose <u>Campaign account for receipts and expenditures</u>		b. Purpose <u>RECEIVED IN-PERSON</u> <u>SEP 29 2025</u> <u>CABARRUS COUNTY BOARD OF ELECTIONS</u>	
c. Account Code <u>2025</u>		c. Account Code	
d. Period Begin Balance <u>\$ 100.00</u>		d. Period Begin Balance <u>\$</u>	
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.			
<u>Rachel Phipps</u> Printed Name of Signer		<u>[Signature]</u> Signature of Appointed Treasurer	
		<u>9/29/2025</u> Date	
FOR OFFICE USE ONLY			
Date Received: <u>9-24-25</u>	Employee: <u>WAN</u>	Delivery Method ☐ Normal Mail ☐ Registered Mail ☒ Hand Delivered ☐ Electronically Filed	
Date Postmarked: <u>9-24-25</u>	Employee: <u>WAN</u>	☐ Signer has not received mandatory training	
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.			

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	
Isaac For Town Council		Quarterly			
Start of Election Cycle: January 1, 2025		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 100.00		\$ 100.00	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 7		\$ 7	
6) Contributions from Individuals (CRO-1210)		\$ 525.00		\$ 525.00	
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)		\$ 525.00		\$ 525.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 647.94		\$ 647.94	
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)		\$ 78.56		\$ 78.36	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 726.50		\$ 726.50	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 101.50		\$ 101.50	
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

Pg 1 of 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	
Isaac For Town Council						
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Andrea Engbek 1111 Jim Sossoman Rd Midland, NC 28107 (704) 793-6638				b. Job Title/Profession not employed c. Employer's Name/Specific Field N/A		d. Comments
				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	
☐	2025	debit	—	08/12/2025	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Wendy M. Wood 717 Union Street South Concord, NC 28025				b. Job Title/Profession not employed c. Employer's Name/Specific Field N/A		d. Comments
				e. Election Sum to Date \$ 50.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	2025	debit	—	08/12/2025	\$ 50.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Amy Steele 521 Montgrove Place NW Concord, NC 28027				b. Job Title/Profession CEO c. Employer's Name/Specific Field NNCP		d. Comments
				e. Election Sum to Date \$ 50.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	2025	debit	—	08/13/2025	\$ 50.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 200.00	
5. Total of ALL CRO-1210 Pages					\$ 525.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

Pg 2 of 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>Isaac Fork Town Council</u>					2. ID Number 	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Rebecca Hannah Patten</u> <u>90 Cabarrus Ave West</u> <u>CONCORD NC 28025</u> <u>(980) 354-3298</u>				b. Job Title/Profession <u>not employed</u>		d. Comments
				c. Employer's Name/Specific Field <u>N/A</u>		e. Election Sum to Date
				\$ <u>100.00</u>		
f. Prior ☐	g. Account Code <u>2025</u>	h. Form of Payment <u>debit</u>	i. In-Kind Description <u>—</u>	j. Date (mm/dd/yyyy) <u>08/17/2025</u>	k. Amount \$ <u>100.00</u>	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Bob Strasser</u> <u>11111 Jim Sossoman Rd</u> <u>Midland, NC 28107</u>				b. Job Title/Profession <u>not employed</u>		d. Comments
				c. Employer's Name/Specific Field <u>N/A</u>		e. Election Sum to Date
				\$ <u>50.00</u>		
f. Prior ☐	g. Account Code <u>2025</u>	h. Form of Payment <u>debit</u>	i. In-Kind Description <u>—</u>	j. Date (mm/dd/yyyy) <u>08/19/2025</u>	k. Amount \$ <u>50.00</u>	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Granada Moore</u> <u>11812 Lillian Avenue</u> <u>St. Louis, MO 63131</u>				b. Job Title/Profession <u>Supervisor</u>		d. Comments
				c. Employer's Name/Specific Field <u>Red Cross</u>		e. Election Sum to Date
				\$ <u>25.00</u>		
f. Prior ☐	g. Account Code <u>2025</u>	h. Form of Payment <u>debit</u>	i. In-Kind Description <u>—</u>	j. Date (mm/dd/yyyy) <u>08/20/2025</u>	k. Amount \$ <u>25.00</u>	
☐					\$	
☐					\$	
4. Total only this Page					\$ <u>175.00</u>	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ <u>525.00</u>	

Contributions from Individuals

Pg 3 of 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	
Isaac For Town Council						
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Vicente Cortez 508 St Paul Road Hartford, AL 36344				b. Job Title/Profession not employed c. Employer's Name/Specific Field N/A		d. Comments e. Election Sum to Date \$ 25.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	2025	debit	—	09/03/2025	\$ 25.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Glenn Morgan 928 Pineridge St SE Concord, NC 28025				b. Job Title/Profession Custodian c. Employer's Name/Specific Field Cabarrus County Schools		d. Comments e. Election Sum to Date \$ 50.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	2025	debit	—	09/06/2025	\$ 50.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Rovenia Jasper 5214 Fowler Farm Road Mint Hill, NC 28227				b. Job Title/Profession not employed c. Employer's Name/Specific Field N/A		d. Comments e. Election Sum to Date \$ 50.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	2025	debit	—	09/09/2025	\$ 50.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 125.00	
5. Total of ALL CRO-1210 Pages					\$ 525.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

Pg

of

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	
Isaac For Town Council						
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Lorenza McEachin 7153 Barleywood Drive Locust, NC 28097 (513) 317-6993			not employed			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			N/A		\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	2025	debit	—	09/09/2025	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Catherine Tankersley 804 Crosstie St Knightdale, NC 27545			Tailor			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			self-employed		\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	2025	debit	—		\$ 50.00	
☐					\$	
☐					\$	
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Vanessa Jones 6729 Fox Ridge Cir. Davidson, NC 28036			Attorney			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	2025	debit	—		\$ 50.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 200.00	
5. Total of ALL CRO-1210 Pages					\$ 525.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

Pg 5 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	
Isaac For Town Council						
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments
Lynne Golie 1617 Heron Cove Ct NW Charlotte, NC 28269				nurse		
				c. Employer's Name/Specific Field		
				CHA		
				e. Election Sum to Date		
				\$ 25.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	2025	debit	—	09/23/2025	\$ 25.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ 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	
☐					\$	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ 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	
☐					\$	
☐					\$	
☐					\$	
4. Total only this Page					\$ 25.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 525.00	

Disbursements

Pg 1 of 2 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	
Isaac For Town Council							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Squarespace Inc 225 Varick St, 12th Flr New York, NY 10014						website fees	
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☒ Municipality:		\$ 39.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
2025	debit	C	08/15/2025	\$ 25.00	website fee		
2025	debit	C	08/15/2025	\$ 14.00	website fee		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Staples 1480 Concord Pkwy N #32 Concord, NC 28025 (704) 262-3503							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☒ Municipality:		\$ 59.91	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
2025	debit	B	08/22/2025	\$ 59.91	business cards		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Clark for the Culture LLC 3809 Bethania Lot Dr Winston Salem NC 27166						campaign buttons	
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☒ Municipality:		\$ 200.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
2025	debit	B	08/27/2025	\$ 200.00	campaign buttons		
5. Total only this Page						\$ 298.91	
6. Total of ALL CRO-1310 Pages						\$ 647.94	
(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							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

Pg 2 of 2 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	
1599C For Town Council							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☒ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
PC Signs 2534 Commerce Rd Cincinnati OH 45241 (513) 772-8844						Yard signs	
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☒ Municipality:		\$ 332.98	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
2025	debit	B	09/17/2025	\$ 332.98	yard signs		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Canva US, Inc 3212 E. Cesar Chavez St Building 1, Suite 300 Austin, TX 78702						for website & marketing	
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☒ Municipality:		\$ 16.05	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
2025	debit	K	09/22/2025	\$ 16.05	design app		
				\$			
4. Payee Information ☐ Add ☐ 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	
				☐ Federal ☐ County: ☐ State ☐ 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						\$ 349.03	
6. Total of ALL CRO-1310 Pages						\$ 647.94	
(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							
* Codes require detailed explanation in required remarks field (k)							

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	
Isaac For Town Council			
3. Contributor Information ☒ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
Andrea Engler 11111 Jim Sossamon Rd Midland, NC 28107 (704) 793-6638		☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
		c. Comments	
		printed in her office	
		d. Election Sum to Date	
		\$ 78.56	
e. Description		f. Date (mm/dd/yyyy)	
Flyer Printing & Ink		09/03/2005	
		g. Fair Market Amount	
		\$ 78.56	
		\$	
		\$	
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
		☐ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$	
e. Description		f. Date (mm/dd/yyyy)	
		g. Fair Market Amount	
		\$	
		\$	
		\$	
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
		☐ Individual ☒ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$	
e. Description		f. Date (mm/dd/yyyy)	
		g. Fair Market Amount	
		\$	
		\$	
		\$	
4. Total only this Page		\$ 78.56	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 78.56	