

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	
COMMITTEE TO ELECT SHAMAIYE HAYNES	2025 Thirty-five-day		
Start of Election Cycle: January 1, <u>2024</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 2,331.44	\$ 1,860.91
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 280.00	\$ 385.00
6) Contributions from Individuals	(CRO-1210)	\$ 1,400.00	\$ 3,400.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.00	\$ 1,200.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.00	\$ 0.00
9) Loan Proceeds	(CRO-1410)	\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.00	\$ 0.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.00	\$ 0.00
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ 0.00	\$ 0.00
11c) Outside Sources of Income	(CRO-1250)	\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 1,680.00	\$ 4,985.00
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 1,269.94	\$ 2,674.02
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 390.74	\$ 621.13
15) Loan Repayments	(CRO-1420)	\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0.00	\$ 0.00
17) In-Kind Contributions	(CRO-1510)	\$ 0.00	\$ 1,200.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1,660.68	\$ 4,495.15
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 2,350.76	\$ 2,350.76
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0.00	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$ 0.00	
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$ 0.00	
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0.00	
25) Administrative Support	(CRO-1710)	\$ 0.00	\$ 0.00
26) Forgiven Loans	(CRO-1440)	\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0.00	\$ 0.00
28) Contributions to be Refunded	(CRO-1215)	\$ 0.00	\$ 0.00

Aggregated Contributions from Individuals

Page 1 of 1

Amendment
 Yes No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)					2. ID Number
COMMITTEE TO ELECT SHAMAIYE HAYNES					
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Electric Funds Tran		07/11/2025	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Electric Funds Tran		07/18/2025	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Electric Funds Tran		07/17/2025	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Electric Funds Tran		07/11/2025	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Check		07/20/2025	\$ 50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Electric Funds Tran		07/10/2025	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Electric Funds Tran		07/24/2025	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Electric Funds Tran		07/17/2025	\$ 5.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Electric Funds Tran		07/10/2025	\$ 50.00
4. Total only this Page					\$ 280.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 280.00

Contributions from Individuals

Pg 1 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)						2. ID Number
COMMITTEE TO ELECT SHAMAIYE HAYNES						
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 ELWELL 4801 Pine Needle Trail Mint Hill, NC 28227			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
					\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	SH01	Electric Funds Tran		07/02/2025	\$ 500.00	
<input type="checkbox"/>	SH01	Electric Funds Tran		07/07/2025	\$ 500.00	
<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	
SHAWN KENNEDY 3020-I PROSPERITY CHURCH RD., STE 617 CHARLOTTE, NC 28269			DEVELOPER			
			c. Employer's Name/Specific Field			
			KENNEDY PROPERTIES		e. Election Sum to Date	
					\$ 600.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	SH01	Electric Funds Tran		07/09/2025	\$ 200.00	
<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)			b. Job Title/Profession		d. Comments	
Tanya Lewis 4023 Flats Main st, Apt 408 Indian Land, SC 29707			Not Employed			
			c. Employer's Name/Specific Field			
			Not Employed		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"/>	SH01	Electric Funds Tran		07/11/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1,300.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 1,400.00	

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)					2. ID Number	
COMMITTEE TO ELECT SHAMAIYE HAYNES						
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	
SAMANTHA TURNER 12911 Waterlyn Club Drive Charlotte, NC 28278			NOT EMPLOYED			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED		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"/>	SH01	Electric Funds Tran		07/09/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 100.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 1,400.00	

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
COMMITTEE TO ELECT SHAMAIYE HAYNES						
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
AMAZON MKTP US AMAZON.COM NC						
				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:		
						\$ 496.82
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
SH01	Debit Card	O	07/02/2025	\$ 129.97	PARADE CANDY	
SH01	Debit Card	O	07/03/2025	\$ 50.92	PARADE SUPPLIES	
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
CAROLINAS SCREEN PRINTING/MAURY ISLEY 2004 PHEASANT GLEN RD. CHARLOTTE, NC 28214						
				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:		
						\$ 466.80
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
SH01	Debit Card	B	07/01/2025	\$ 237.02	SHIRTS	
SH01	Debit Card	B	07/21/2025	\$ 85.00	T SHIRTS	
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
CHARLOTTE OBSERVER NC						
				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:		
						\$ 70.73
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
SH01	Debit Card	A	07/11/2025	\$ 2.13	SUBSCRIPTION TO LOCAL PAPER	
				\$		
5. Total only this Page						\$ 505.04
6. Total of ALL CRO-1310 Pages						\$ 1,269.94
<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 (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

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	
COMMITTEE TO ELECT SHAMAIYE HAYNES							
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	
CW WILLIAMS NC							
				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:		\$ 75.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SH01	Debit Card	O	07/14/2025	\$ 75.00	VENDOR FEE FOR		
				\$	TABLING		
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	
DOLLAR TREE 3301 FREEDOM DRIVE CHARLOTTE, NC 28208							
				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:		\$ 57.38	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SH01	Debit Card	O	07/07/2025	\$ 57.38	SUPPLIES		
				\$			
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	
EMANUEL HAGGINS 861 RAY CRAWFORD DRIVE WINTERVILLE, NC 28590							
				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:		\$ 65.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SH01	Debit Card	O	07/21/2025	\$ 65.00	CANVASSING		
				\$			
5. Total only this Page						\$ 197.38	
6. Total of ALL CRO-1310 Pages						\$ 1,269.94	
<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 (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

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
COMMITTEE TO ELECT SHAMAIYE HAYNES						
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
IENATE, LLC NC						
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 \$ 282.26
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
SH01	Debit Card	O	07/11/2025	\$ 282.26	CAMPAIGN LAUNCH	
				\$		
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
MAILCHIMP MAILCHIMP.COM NC						
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 \$ 99.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
SH01	Debit Card	A	07/28/2025	\$ 33.00	DIGITAL MAIL SERVICES	
				\$		
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
MAILMETOR MAILMETOR.COM NC						
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 \$ 26.76
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
SH01	Debit Card	A	07/25/2025	\$ 13.38	DIGITAL MAIL	
				\$		
5. Total only this Page						\$ 328.64
6. Total of ALL CRO-1310 Pages						\$ 1,269.94
<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 (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

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	
COMMITTEE TO ELECT SHAMAIYE HAYNES							
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	
SHAWN MUMFORD 809 CATES STREET #G CHARLOTTE, NC 28202							
				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:				\$ 70.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SH01	Debit Card	O	07/21/2025	\$ 70.00	CANVASSING		
				\$			
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	
NORTH CAROLINA DANCE TEAM NC							
				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:				\$ 100.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SH01	Debit Card	O	07/14/2025	\$ 100.00	PARADE ASSISTANCE		
				\$			
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	
TST RUNAWAY STREETCAR 2124 THRIFT ROAD CHARLOTTE, NC 28208							
				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:				\$ 68.88	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
SH01	Debit Card	O	07/10/2025	\$ 68.88	CAMPAIGN TEAM MEETING		
				\$			
5. Total only this Page						\$ 238.88	
6. Total of ALL CRO-1310 Pages						\$ 1,269.94	
<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 (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

Optional form used to report NC Non-Media Expenditures of \$50 or less.

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO ELECT SHAMAIYE HAYNES						
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 <input type="checkbox"/> Remove	SH01	Debit Card	O	07/01/2025	\$ 24.84	PARADE SUPPLIES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Debit Card	O	07/02/2025	\$ 41.79	PARADE SUPPLIES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Debit Card	O	07/03/2025	\$ 11.79	TABLE CLOTH
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Debit Card	O	07/03/2025	\$ 15.00	PARADE DECOR
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Debit Card	O	07/03/2025	\$ 18.26	PARADE DECOR
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Debit Card	O	07/03/2025	\$ 25.71	PARADE SUPPLIES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Debit Card	O	07/09/2025	\$ 13.92	EVENT DECORATIONS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Debit Card	O	07/17/2025	\$ 42.89	SUPPLIES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Debit Card	O	07/20/2025	\$ 34.00	CANVASSING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Draft	O	07/07/2025	\$ 37.00	BANK FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Debit Card	O	07/14/2025	\$ 17.12	SUPPLIES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Debit Card	B	07/07/2025	\$ 35.81	FLYERS
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Debit Card	O	07/14/2025	\$ 36.30	SUPPLIES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	SH01	Debit Card	O	07/14/2025	\$ 36.31	SUPPLIES
4. Total only this Page					\$	390.74
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$	390.74
6. Purpose Codes (List detailed expenditure code in (d) above)						
	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* - Donations to Legal Expense Fund		
O* - Other						
* Codes require detailed explanation in required remarks field (g)						