

## Disclosure Report Cover Sheet

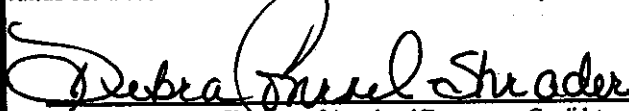
Please note that this cover sheet cannot be used to amend committee information such as the committee address; treasurer, assistant treasurer, or custodian of books information; or depository information. You must amend the Statement of Organization (CRO-2100) to make those kinds of committee changes.

1. Name of Committee or Fund				6. Date	
Committee to Re-Elect Debra Conrad-Shrader				10-21-02	
2. Address				7. ID Number	
4004 Remberton Court					
3. City	4. State	5. Zip	8. Phone		
Winston-Salem	N.C.	27106	760-9653		
9. Type of Report			10. Period Covered		11. Amendment
2002 Third Quarter Plus Report			Start	8-25-02	<input type="checkbox"/> Yes
			End	10-19-02	<input checked="" type="checkbox"/> No
12. Type of Committee or Fund (Check one)					
<input checked="" type="checkbox"/> Candidate Campaign		<input type="checkbox"/> Party		<input type="checkbox"/> Joint Fundraiser	
<input type="checkbox"/> PAC		<input type="checkbox"/> Referendum		<input type="checkbox"/> Soft Money Account	
<input type="checkbox"/> Other Fund:				<input type="checkbox"/> "Booster Fund"	
				<input type="checkbox"/> Building Fund	
13. Treasurer Name					
Debra Conrad-Shrader					
14. Assistant Treasurer Name(s)					
15. Custodian of Books Name					
16. Bank/Depository/Credit Account Information					
a. Name	b. Purpose	c. Code	d. Period Begin Balance		
B, B+T	Campaign Checking Acct.		89%	\$3,750.96	
				\$	
				\$	
				\$	
				\$	
				\$	

RECEIVED  
 OCT 24 2002  
 AND OFFICE OF THE  
 STATE BOARD OF ELECTIONS

### CERTIFICATION

I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct.

  
 Signature of Appointed Treasurer or Candidate

10-21-2002  
 Date

## Detailed Summary

1. Name of Committee or Fund	2. Type of Report	3. ID Number	
Committee to Re-Elect Debra Conrad-Shrader	3rd qtr. plus		
Start of Election Cycle: January 1, 2002	Total this Period	Total this Election Cycle	
4) Cash on Hand at Start of Election Cycle		\$ 0	
5) Cash on Hand at Start of Present Reporting Period	\$3,750.96		
<b>RECEIPTS</b>			
6) Contributions from Individuals (CRO-1210)	\$ 1985.00	\$ 7035.00	
7) Contributions from Political Party Committees (CRO-1220)	\$	\$	
8) Contributions from Other Political Committees (CRO-1230)	\$ 1000.00	\$ 1,000.00	
9) Loan Proceeds (CRO-1410)	\$	\$ 500.00	
10) Refunds and Reimbursements TO the Committee (CRO-1240)	\$	\$	
11) Other Receipt Sources (CRO-1250)			
11a) Interest on Bank Accounts (CRO-1250)	\$	\$	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)	\$	\$	
11c) Outside Sources of Income (CRO-1250)	\$	\$	
12) "Goods and Services" Contributions (CRO-1260)	\$	\$	
13) Contributions based on Forgiven Loans (CRO-1440)	\$	\$	
14) 48-Hour Notice Reports Sum	\$	\$	
15) TOTAL RECEIPTS (Add lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 12, 13, and 14)	\$ 2985.00	\$ 8,535.00	
<b>EXPENDITURES</b>			
16) Disbursements (CRO-1310)			
16a) Operating Expenditures (CRO-1310)	\$ 3511.70	\$ 4548.74	
16b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$	
16c) Coordinated Party Expenditures (CRO-1310)	\$ 0	\$ 262.00	
17) Loan Repayments (CRO-1420)	\$	\$ 500.00	
18) Forgiven Loans (CRO-1440)	\$	\$	
19) Refunds and Reimbursements FROM the Committee (CRO-1320)	\$	\$	
20) In-Kind Contributions (CRO-1510)	\$	\$	
21) TOTAL EXPENDITURES (Add lines 16a, 16b, 16c, 17, 18, 19, and 20)	\$	\$ 5310.74	
22) Cash on Hand at End of Reporting Period (For this Period, add lines 5 and 15 together, then subtract line 21) (For this Election Cycle, add lines 4 and 15 together, then subtract line 21)	\$ 3224.26	\$ 3224.26	
<b>Additional Information</b>			
23) Non-Monetary Gifts Given to Committees (CRO-1330)	\$		
24) Outstanding Loans (including ones from other campaigns) (CRO-1430)	\$		
25) Debts and Obligations owed BY the Committee (CRO-1610)	\$		
26) Debts and Obligations owed TO the Committee (CRO-1620)	\$		
27) Parent Entity's Administrative Support (CRO-1710)	\$		
28) Account Transfers (CRO-1720)	\$		

CRO-1100

NC State Board of Elections

June 2002

Contributions from INDIVIDUALS

1. Name of Committee or Fund				2. ID Number			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Ann. L. Spence 4 Graylyn Place W-S, N.C. 27106	[REDACTED]	check	8-27-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 100.00	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Joel Rynnion Jr. 3521 York Rd. W-S, N.C. 27104	[REDACTED]	check	8-27-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 100.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 100.00	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Carey Hedgpeth 2008 Faculty Drive W-S, N.C. 27106	[REDACTED]	check	8-30-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 50.00	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Barbara Berry 217 Greenleaf Dr. Kille, N.C. 27284	[REDACTED]	check	8-30-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 500.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 500.00	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	John Cocklee 2308 Robinhood Rd. W-S, N.C. 27104	[REDACTED]	check	9-12-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 150.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$
				j. If Amendment, choose change type:		k. Election Cycle Sum to Date	
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 400.00	
4. Total only this Page							\$ 900.00
5. Total of ALL CRO-1210 Pages (only show on last page)							\$
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

Contributions from INDIVIDUALS

1. Name of Committee or Fund				2. ID Number			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Sam Cooke 601 Glen Echo Trail W-S, N.C. 27106	[REDACTED]	check	9-12-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$
j. If Amendment, choose change type:				k. Election Cycle Sum to Date			
<input type="checkbox"/> Add <input type="checkbox"/> Delete				\$ 100.00			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	John Halverson	[REDACTED]	check	9-12-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 10.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$
j. If Amendment, choose change type:				k. Election Cycle Sum to Date			
<input type="checkbox"/> Add <input type="checkbox"/> Delete				\$ 10.00			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Gerald Long 7631 Lasalle Rd. Clemmons, N.C. 27012	[REDACTED]	check	9-20-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 750.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$
j. If Amendment, choose change type:				k. Election Cycle Sum to Date			
<input type="checkbox"/> Add <input type="checkbox"/> Delete				\$ 750.00			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Beryl B. Palmer 145 Hartson King, N.C.	[REDACTED]	check	9-20-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 250.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$
j. If Amendment, choose change type:				k. Election Cycle Sum to Date			
<input type="checkbox"/> Add <input type="checkbox"/> Delete				\$ 250.00			
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, & zip)	d. Account Number/Code	e. Form of Payment	f. Date (mm/dd/yyyy)	g. In-Kind	h. Prior Report	i. Amount
	Nancy New	[REDACTED]	check	10-2-02	<input type="checkbox"/>	<input type="checkbox"/>	\$ 25.00
	b. Job Title/Profession				<input type="checkbox"/>	<input type="checkbox"/>	\$
	c. Employer's Name/Specific Field				<input type="checkbox"/>	<input type="checkbox"/>	\$
j. If Amendment, choose change type:				k. Election Cycle Sum to Date			
<input type="checkbox"/> Add <input type="checkbox"/> Delete				\$ 25.00			
4. Total only this Page							\$1,085.00
5. Total of ALL CRO-1210 Pages (only show on last page)							\$ 1985.00
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

Contributions from OTHER POLITICAL COMMITTEES

1. Name of Committee or Fund						2. ID Number	
Committee to Re-Elect Debra Conrad-Skrader							
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. In-Kind	f. Amount	
	N.C. Realtors P.A.C. 421 Fayetteville St. STE 1109 Raleigh, N.C. 27601		check	10-6-02	<input type="checkbox"/>	\$ 1,000.00	
g. Type of Committee <input type="checkbox"/> Federal <input checked="" type="checkbox"/> State <input type="checkbox"/> County: _____						h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete	
						i. Election Cycle Sum to Date \$ 1,000.00	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. In-Kind	f. Amount	
					<input type="checkbox"/>	\$	
g. Type of Committee <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> County: _____						h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete	
						i. Election Cycle Sum to Date \$	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. In-Kind	f. Amount	
					<input type="checkbox"/>	\$	
g. Type of Committee <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> County: _____						h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete	
						i. Election Cycle Sum to Date \$	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. In-Kind	f. Amount	
					<input type="checkbox"/>	\$	
g. Type of Committee <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> County: _____						h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete	
						i. Election Cycle Sum to Date \$	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. In-Kind	f. Amount	
					<input type="checkbox"/>	\$	
g. Type of Committee <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> County: _____						h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete	
						i. Election Cycle Sum to Date \$	
3. Contributor	a. Full Name, Mailing Address & Phone (include city, state, and zip)	b. Account Number/Code	c. Form of Payment	d. Date (mm/dd/yyyy)	e. In-Kind	f. Amount	
					<input type="checkbox"/>	\$	
g. Type of Committee <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> County: _____						h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete	
						i. Election Cycle Sum to Date \$	
4. Total only this Page						\$ 1000.00	
5. Total of ALL CRO-1230 Pages (only show on last page)						\$ 1000.00	
(This line must be on line 8 of Detailed Summary Page CRO-1100)							

Disbursements

1. Name of Committee or Fund <b>Committee to Re-Elect Debra Conrad-Shrader</b>						2. ID Number		
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursements.)								
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures				
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Smith Phillips Lumber 603 E. 17th St. W-S, N.C. 27105			wooden stake	[REDACTED]	check	8-27-02	\$ 114.49
b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date		
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 114.49		
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Sartin's Advertising 360 W 4 1/2 St. W-S, N.C. 27101			political signs	[REDACTED]	check	8-28-02	\$ 790.76
b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date		
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 790.76		
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Postmaster U.S Postal Service Robinhood Rd. W-S, N.C. 27106			stamps	[REDACTED]	check	8-30-02	\$ 29.89
b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date		
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 100.08		
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Office Depot 7774 North Point Blvd W-S, N.C. 27106			electric stapler for signs	[REDACTED]	check	8-30-02	\$ 81.99
b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date		
				<input type="checkbox"/> Add <input type="checkbox"/> Delete		\$ 151.01		
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	Ace Hardware 3450 Robinhood Rd. W-S, N.C. 27106			staples + paper	[REDACTED]	check	9-22-02	\$ 27.62
b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type:		j. Election Cycle Sum To Date		
				<input type="checkbox"/> Add <input checked="" type="checkbox"/> Delete		\$ 27.62		
5. Total only this Page								\$ 1044.75
6. Total of ALL CRO-1310 Related Pages (only show on last page)								\$
(This line goes in line 16a of Detailed Summary Page CRO-1100 if Operating Expenses)								
(This line goes in line 16b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)								
(This line goes in line 16c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)								

Disbursements

1. Name of Committee or Fund <i>Committee to Re-Elect Deborah Shadrach</i>						2. ID Number		
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursements.)								
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures				
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip) <i>W-S Journal 418 N. Marshall W-S, N.C. 27101</i>			d. Purpose <i>ads</i>	e. Account Number/Code <i>[REDACTED]</i>	f. Form of Payment <i>check</i>	g. Date (mm/dd/yyyy) <i>10/1/02</i>	h. Amount <i>\$1543.82</i>
	b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date <i>\$1,543.82</i>	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip) <i>Clemmons Courier 3600 Clemmons Rd. Clemmons, N.C. 27008</i>			d. Purpose <i>ads</i>	e. Account Number/Code <i>[REDACTED]</i>	f. Form of Payment <i>check</i>	g. Date (mm/dd/yyyy) <i>10/1/02</i>	h. Amount <i>\$129.38</i>
	b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date <i>\$129.38</i>	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip) <i>Kernersville News 300 E. Mountain St. Kernersville, N.C. 27284</i>			d. Purpose <i>ads</i>	e. Account Number/Code <i>[REDACTED]</i>	f. Form of Payment <i>check</i>	g. Date (mm/dd/yyyy) <i>10/1/02</i>	h. Amount <i>\$277.86</i>
	b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date <i>\$277.86</i>	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip) <i>Dustin's 860 W 4 1/2 St W-S, N.C. 27101</i>			d. Purpose <i>brochure signs</i>	e. Account Number/Code <i>[REDACTED]</i>	f. Form of Payment <i>check</i>	g. Date (mm/dd/yyyy) <i>9/19/02</i>	h. Amount <i>\$515.89</i>
	b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date <i>\$1306.65</i>	
4. Payee	a. Full Name, Mailing Address & Phone (include city, state, and zip)			d. Purpose	e. Account Number/Code	f. Form of Payment	g. Date (mm/dd/yyyy)	h. Amount
	b. If Contribution to County Committee, specify:		c. If Coordinated Party Exp, list Cand/Comm:		i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete		j. Election Cycle Sum To Date	
5. Total only this Page							<i>\$2466.95</i>	
6. Total of ALL CRO-1310 Related Pages (only show on last page)							<i>\$3511.70</i>	
<i>(This line goes in line 16a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>								
<i>(This line goes in line 16b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>								
<i>(This line goes in line 16c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>								