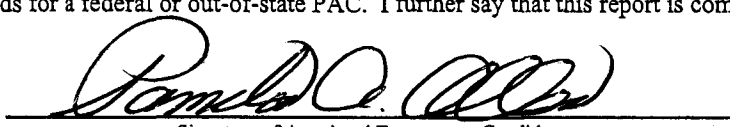


9/3/02

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 Pam Allen Election Campaign | | | 6. Date 8/29/02 | |
| 2. Address 12 Elm Ridge Lane | | | 7. ID Number | |
| 3. City Greensboro | 4. State NC | 5. Zip 27408 | 8. Phone 252-4619 | |
| 9. Type of Report 2002 Interim Report | | 10. Period Covered Start 6/30/02 End 8/24/02 | | 11. Amendment <input type="checkbox"/> Yes <input 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"/> "Booster Fund" | | | | |
| <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Soft Money Account <input type="checkbox"/> Building Fund | | | | |
| 13. Treasurer Name Elena Brown | | | | |
| 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 | |
| Bank of America | Candidate Campaign | | \$ 540.00 | |
| | | | \$ | |
| | | | \$ | |
| | | | \$ | |
| | | | \$ | |
| | | | \$ | |
| 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 | | | 8/29/02 Date | |

Detailed Summary

| 1. Name of Committee or Fund | 2. Type of Report | 3. ID Number | |
|---|---------------------|---------------------------|--|
| Pam Allen Election Campaign | 2002 Interim Report | | |
| Start of Election Cycle: January 1, 2002 | Total this Period | Total this Election Cycle | |
| 4) Cash on Hand at Start of Election Cycle | | \$ 0.00 | |
| 5) Cash on Hand at Start of Present Reporting Period | \$ 540.00 | | |
| RECEIPTS | | | |
| 6) Contributions from Individuals (CRO-1210) | \$ 3073.00 | \$ 3073.00 | |
| 7) Contributions from Political Party Committees (CRO-1220) | \$ _____ | \$ _____ | |
| 8) Contributions from Other Political Committees (CRO-1230) | \$ _____ | \$ _____ | |
| 9) Loan Proceeds (CRO-1410) | \$ 6000.00 | \$ 7000.00 | |
| 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) | \$ 9613.00 | \$ 10,073.00 | |
| EXPENDITURES | | | |
| 16) Disbursements (CRO-1310) | | | |
| 16a) Operating Expenditures (CRO-1310) | \$ 5141.00 | \$ 5141.00 | |
| 16b) Contributions to Candidates/Political Committees (CRO-1310) | \$ _____ | \$ 5601.00 | |
| 16c) Coordinated Party Expenditures (CRO-1310) | \$ _____ | \$ _____ | |
| 17) Loan Repayments (CRO-1420) | \$ _____ | \$ _____ | |
| 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) | \$ _____ | \$ _____ | |
| 22) Cash on Hand at End of Reporting Period (For this Period, add lines 5 and 12 together, then subtract line 17) (For this Election Cycle, add lines 4 and 12 together, then subtract line 17) | \$ 5141.00 | \$ 5601.00 | |
| Additional Information | | | |
| 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) | \$ _____ | | |

Contributions from INDIVIDUALS

| 1. Name of Committee or Fund | | | | 2. ID Number | | | |
|--|---|------------------------|--------------------|--|--------------------------|-------------------------------|-----------|
| Pam Allen Election Campaign | | | | | | | |
| 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 |
| | Jane Whichard 611 Woodland Drive Greensboro NC 27408 (336) 379-1874 800 (336) 274-4814 | Bank of America | check | 8/6/02 | <input type="checkbox"/> | <input type="checkbox"/> | \$ 500.00 |
| | b. Job Title/Profession | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| | Executive Director | | | (home) | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| c. Employer's Name/Specific Field | | | | j. If Amendment, choose change type: | | k. Election Cycle Sum to Date | |
| Music Academy of NC | | | | <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 |
| | | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| | b. Job Title/Profession | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| | | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| c. Employer's Name/Specific Field | | | | j. If Amendment, choose change type: | | k. Election Cycle Sum to Date | |
| | | | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | \$ | |
| 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 |
| | | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| | b. Job Title/Profession | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| | | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| c. Employer's Name/Specific Field | | | | j. If Amendment, choose change type: | | k. Election Cycle Sum to Date | |
| | | | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | \$ | |
| 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 |
| | | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| | b. Job Title/Profession | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| | | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| c. Employer's Name/Specific Field | | | | j. If Amendment, choose change type: | | k. Election Cycle Sum to Date | |
| | | | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | \$ | |
| 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 |
| | | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| | b. Job Title/Profession | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| | | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| c. Employer's Name/Specific Field | | | | j. If Amendment, choose change type: | | k. Election Cycle Sum to Date | |
| | | | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | \$ | |
| 4. Total only this Page | | | | | | | \$500.00 |
| 5. Total of ALL CRO-1210 Pages <small>(only show on last page)</small> | | | | | | | \$500.00 |
| <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small> | | | | | | | |

Disbursements

| | | | | | | | |
|--|---|---|---|---|--|--|---|
| 1. Name of Committee or Fund Pam Allen Election Campaign | | | | | | 2. ID Number | |
| 3. Type of Disbursement (Please use separate CRO-1330 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) U.S. Postal Service 1585 Yanceyville St. (05) 275-5335 | | d. Purpose Mailing | e. Account Number/Code | f. Form of Payment Check | g. Date (mm/dd/yyyy) 8/01/02 | h. Amount \$ 296.00 |
| | b. If Contribution to County Committee, specify: | | c. If Coordinated Party Expense, list office: | | i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | j. Election Cycle Sum To Date \$ |
| 4. Payee | a. Full Name, Mailing Address & Phone (include city, state, and zip) Gatten Enterprises 3507 Smoketree Dr. Greensboro NC 27410 (288-7820) | | d. Purpose Campaign Consultant | e. Account Number/Code | f. Form of Payment check | g. Date (mm/dd/yyyy) 8/14/02 | h. Amount \$ 400.00 |
| | b. If Contribution to County Committee, specify: | | c. If Coordinated Party Expense, list office: | | i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | j. Election Cycle Sum To Date \$ 800.00 |
| 4. Payee | a. Full Name, Mailing Address & Phone (include city, state, and zip) Arrowhead Graphics 508 Houston St. (01) 274-2419 | | d. Purpose Signs | e. Account Number/Code | f. Form of Payment Check | g. Date (mm/dd/yyyy) 8/24/02 | h. Amount \$ 3000.00 |
| | b. If Contribution to County Committee, specify: | | c. If Coordinated Party Expense, list office: | | i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | j. Election Cycle Sum To Date \$ |
| 4. Payee | a. Full Name, Mailing Address & Phone (include city, state, and zip) Conference Resources Inc. 405 Battleground Ave. (01) 379-0603 | | d. Purpose Mailing | e. Account Number/Code | f. Form of Payment Check | g. Date (mm/dd/yyyy) 8/22/02 | h. Amount \$ 385.00 |
| | b. If Contribution to County Committee, specify: | | c. If Coordinated Party Expense, list office: | | i. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | j. Election Cycle Sum To Date \$ |
| 4. Payee | a. Full Name, Mailing Address & Phone (include city, state, and zip) Carolina Peasemaker 400 Summit Ave. (05) 273-5103 | | d. Purpose Ad | e. Account Number/Code | f. Form of Payment Check | g. Date (mm/dd/yyyy) 8/23/02 | h. Amount \$ 160.00 |
| | b. If Contribution to County Committee, specify: | | c. If Coordinated Party Expense, list office: | | 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 | | | | | | | \$ 4241.00 |
| 6. Total of ALL CRO-1310 Related Pages (only show on last page) | | | | | | | \$ |
| (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) | | | | | | | \$ |

Disbursements

| | | | | | | | | |
|---|---|---|--|--|------------------------|--------------------|-------------------------------|-----------|
| 1. Name of Committee or Fund Pam Allen Election Campaign | | | | | | 2. ID Number | | |
| 3. Type of Disbursement <i>(Please use separate CRO-1330 forms for each type of Disbursements.)</i> | | | | | | | | |
| <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 |
| | Greensboro Times 21 Looney Circle (06) 988-2436 | | | Ad | | check | 8/23/02 | \$350.00 |
| b. If Contribution to County Committee, specify: | | c. If Coordinated Party Expense, list office: | | i. If Amendment, choose change type: | | | j. Election Cycle Sum To Date | |
| | | | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | \$ | |
| 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 |
| | Rhinoxeros Times 107 E. Market St. (01) 273-0885 | | | Ad | | check | 8/23/02 | \$550.00 |
| b. If Contribution to County Committee, specify: | | c. If Coordinated Party Expense, list office: | | i. If Amendment, choose change type: | | | j. Election Cycle Sum To Date | |
| | | | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | \$ | |
| 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 Expense, list office: | | i. If Amendment, choose change type: | | | j. Election Cycle Sum To Date | |
| | | | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | \$ | |
| 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 Expense, list office: | | i. If Amendment, choose change type: | | | j. Election Cycle Sum To Date | |
| | | | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | \$ | |
| 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 Expense, list office: | | i. If Amendment, choose change type: | | | j. Election Cycle Sum To Date | |
| | | | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | \$ | |
| 5. Total only this Page | | | | | | | \$900.00 | |
| 6. Total of ALL CRO-1310 Related Pages <i>(only show on last page)</i> | | | | | | | \$5141.00 | |
| <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> | | | | | | | | |

160

| 1. Name of Committee or Fund | | | 2. ID Number | | |
|---|--|-----------------------------------|--------------------------|--------------------|------------------------|
| Pam Allen Election Campaign | | | | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Start Date (mm/dd/yyyy) | c. End Date (mm/dd/yyyy) | d. Interest Rate % | i. Account Number/Code |
| | Richard R. Allen 12 Elm Ridge Lane Greensboro, NC 27408 (336) 282-4619 | 7/31/02 | | | |
| | e. Job Title/Profession | f. Employer's Name/Specific Field | | j. Form of Payment | |
| | g. Security Pledged | Personal | | Check | |
| | h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | k. Amount | \$1000.00 |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Start Date (mm/dd/yyyy) | c. End Date (mm/dd/yyyy) | d. Interest Rate % | i. Account Number/Code |
| | Pamela A. Allen 12 Elm Ridge Lane Greensboro, NC 27408 (336) 282-4619 | 8/01/02 | | | |
| | e. Job Title/Profession | f. Employer's Name/Specific Field | | j. Form of Payment | |
| | g. Security Pledged | Personal | | Check | |
| | h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | k. Amount | \$5000.00 |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Start Date (mm/dd/yyyy) | c. End Date (mm/dd/yyyy) | d. Interest Rate % | i. Account Number/Code |
| | | | | | |
| | e. Job Title/Profession | f. Employer's Name/Specific Field | | j. Form of Payment | |
| | g. Security Pledged | | | k. Amount | |
| | h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | | \$ |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Start Date (mm/dd/yyyy) | c. End Date (mm/dd/yyyy) | d. Interest Rate % | i. Account Number/Code |
| | | | | | |
| | e. Job Title/Profession | f. Employer's Name/Specific Field | | j. Form of Payment | |
| | g. Security Pledged | | | k. Amount | |
| | h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | | \$ |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Start Date (mm/dd/yyyy) | c. End Date (mm/dd/yyyy) | d. Interest Rate % | i. Account Number/Code |
| | | | | | |
| | e. Job Title/Profession | f. Employer's Name/Specific Field | | j. Form of Payment | |
| | g. Security Pledged | | | k. Amount | |
| | h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | | \$ |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Start Date (mm/dd/yyyy) | c. End Date (mm/dd/yyyy) | d. Interest Rate % | i. Account Number/Code |
| | | | | | |
| | e. Job Title/Profession | f. Employer's Name/Specific Field | | j. Form of Payment | |
| | g. Security Pledged | | | k. Amount | |
| | h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | | \$ |
| 4. Total only this Page | | | | \$6000.00 | |
| 5. Total of ALL CRO-1410 Pages (only show on last page) | | | | \$6000.00 | |
| (This line must be on line 9 of Detailed Summary Page CRO-1100) | | | | | |

Outstanding Loans

| 1. Name of Committee or Fund | | 2. ID Number | | | |
|--|---|--|--------------------------------------|--------------------|-------------------------|
| Pam Allen Election Campaign | | | | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Start Date (mm/dd/yyyy) | c. End Date (mm/dd/yyyy) | d. Interest Rate % | h. Original Loan Amount |
| | Richard R. Allen 12 Elm Ridge Lane Greensboro, NC 27408 (336) 282-4619 | 3/05/02 | | | \$2000.00 |
| | e. Job Title/Profession | f. Employer's Name/Specific Field | | i. Loan Balance | |
| | Husband | | | \$2000.00 | |
| | g. Security Pledged | | j. If Amendment, choose change type: | | |
| Personal | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Start Date (mm/dd/yyyy) | c. End Date (mm/dd/yyyy) | d. Interest Rate % | h. Original Loan Amount |
| | Pamela A. Allen 12 Elm Ridge Lane Greensboro, NC 27408 (336) 282-4619 | | | | \$5000.00 |
| | e. Job Title/Profession | f. Employer's Name/Specific Field | | i. Loan Balance | |
| | Self | | | \$5000.00 | |
| | g. Security Pledged | | j. If Amendment, choose change type: | | |
| Personal | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Start Date (mm/dd/yyyy) | c. End Date (mm/dd/yyyy) | d. Interest Rate % | h. Original Loan Amount |
| | | | | | \$ |
| | e. Job Title/Profession | f. Employer's Name/Specific Field | | i. Loan Balance | |
| | | | | \$ | |
| | g. Security Pledged | | j. If Amendment, choose change type: | | |
| | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Start Date (mm/dd/yyyy) | c. End Date (mm/dd/yyyy) | d. Interest Rate % | h. Original Loan Amount |
| | | | | | \$ |
| | e. Job Title/Profession | f. Employer's Name/Specific Field | | i. Loan Balance | |
| | | | | \$ | |
| | g. Security Pledged | | j. If Amendment, choose change type: | | |
| | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Start Date (mm/dd/yyyy) | c. End Date (mm/dd/yyyy) | d. Interest Rate % | h. Original Loan Amount |
| | | | | | \$ |
| | e. Job Title/Profession | f. Employer's Name/Specific Field | | i. Loan Balance | |
| | | | | \$ | |
| | g. Security Pledged | | j. If Amendment, choose change type: | | |
| | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Start Date (mm/dd/yyyy) | c. End Date (mm/dd/yyyy) | d. Interest Rate % | h. Original Loan Amount |
| | | | | | \$ |
| | e. Job Title/Profession | f. Employer's Name/Specific Field | | i. Loan Balance | |
| | | | | \$ | |
| | g. Security Pledged | | j. If Amendment, choose change type: | | |
| | | <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | |
| 4. Total only this Page | | | | | \$7000.00 |
| 5. Total of ALL CRO-1430 Pages (only show on last page) | | | | | \$7000.00 |
| (This line must be on line 20 of Detailed Summary Page CRO-1100) | | | | | |