

**Disclosure Report Cover**

**RECEIVED**

Amendment  
 Yes  No

**JUL 06 2006**

Please note that this cover sheet cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of funds information, or account information. You must amend the Statement of Organization (CRO-1010) to make those kinds of committee changes. Use the Addendum form (CRO-1010) if more entries are needed.

**1. Committee Information**

<b>a. Full Name</b>	<b>c. ID Number</b>
ZIMMERMAN FOR SHERIFF	60YD80
<b>b. Mailing Address (include City, State and Zip Code)</b>	<b>d. Date Filed</b>
PO BOX 546 MCLEANSVILLE, NC 27301	07/06/2006
	<b>e. Phone Number</b>

<b>2. Report Year</b>	<b>3. Period Start Date (mm/dd/yyyy)</b>	<b>4. Period End Date (mm/dd/yyyy)</b>	<b>5. Treasurer Full Name</b>
2006	04/16/2006	06/30/2006	CARLA Z FULK

<b>6. Type of Committee (Check one)</b>	<b>8. Type of Report (check only one type of report from one category)</b>		
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Referendum <input type="checkbox"/> Party <input type="checkbox"/> PAC	<b>Municipal</b>	<b>State/County</b>	<b>Referendum</b>
	<input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First Plus <input checked="" type="checkbox"/> Second <input type="checkbox"/> Third Plus <input type="checkbox"/> Fourth Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
<b>7. Type of Fund (if applicable, check one)</b>	<b>9. Special Report Name</b>		
<input type="checkbox"/> Soft Money Account <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> NC Political Party Financing Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:			

<b>10. Account Information</b>		<b>10. Account Information</b>	
<b>a. Financial Institution Full Name</b>		<b>a. Financial Institution Full Name</b>	
FNB SOUTHEAST			
<b>b. Purpose</b>	<b>c. Code</b>	<b>b. Purpose</b>	<b>c. Code</b>
CAMPAIGN EXPENSES	A		
	<b>d. Period Begin Balance</b>		<b>d. Period Begin Balance</b>
	\$ 4,076.29		\$

**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.

Carla Z. Fulk Printed Name of Signer     
 Carla Z. Fulk Signature of Appointed Treasurer     
 07/06/2006 Date

**FOR OFFICE USE ONLY**

Date Received: _____	Employee: _____	<u>Delivery Method</u>
Date Postmarked: _____	Employee: _____	<input type="checkbox"/> Normal Mail
Date Scanned: _____	Employee: _____	<input type="checkbox"/> Registered Mail
		<input type="checkbox"/> Hand Delivered
		<input type="checkbox"/> Electronically Filed

**COPY** **COPY**

# Detailed Summary

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	2. ID Number	
ZIMMERMAN FOR SHERIFF	2006 Second Quarter		
Start of Election Cycle: January 1, <u>2006</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 4,076.29	\$ 0.00
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 25.00	\$ 649.00
6) Contributions from Individuals	(CRO-1210)	\$ 480.22	\$ 5,392.73
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.00	\$ 0.00
9) Loan Proceeds	(CRO-1410)	\$ 2,600.00	\$ 5,300.00
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$ 0.00	\$ 0.00
11) Other Receipt Sources	(CRO-1250)		
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
12) "Goods and Services" Contributions	(CRO-1260)	\$ 0.00	\$ 0.00
13) TOTAL RECEIPTS <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)</i>		\$ 3,105.22	\$ 11,341.73
<b>EXPENDITURES</b>			
14) Disbursements	(CRO-1310)		
14a) Operating Expenditures	(CRO-1310)	\$ 7,069.15	\$ 10,637.86
14b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0.00	\$ 100.00
14c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.00	\$ 0.00
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)	\$ 80.22	\$ 571.73
18) TOTAL EXPENDITURES <i>(Add lines 14a, 14b, 14c, 15, 16, and 17)</i>		\$ 7,149.37	\$ 11,309.59
19) Cash on Hand at End <i>(Add lines 4 and 13 together, then subtract line 18)</i>		\$ 32.14	\$ 32.14
<b>ADDITIONAL INFORMATION</b>			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 5,300.00	
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		\$ 0.00	\$ 0.00

**Aggregated Contributions from Individuals** Page 1 of 1

<b>Amendment</b>	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
ZIMMERMAN FOR SHERIFF						
<b>3. Contributor Information</b>						
<b>a. Amend</b>	<b>b. Account Code</b>	<b>c. Form of Payment</b>	<b>d. In-Kind Description</b>	<b>e. Date (mm/dd/yyyy)</b>	<b>f. Amount</b>	
<input type="checkbox"/> Add	A	Check		04/24/2006	\$ 25.00	
<input type="checkbox"/> Remove						
<b>4. Total only this Page</b>					\$ 25.00	
<b>5. Total of ALL CRO-1205 Pages</b>					\$ 25.00	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

# Contributions from Individuals

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
ZIMMERMAN FOR SHERIFF							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
KENNETH JOHNSON 701 EAST MARKET ST GREENSBORO, NC 27420				ATTORNEY			
				<b>c. Employer's Name/Specific Field</b>			
				LEE, JOHNSON AND WILLIAMS, LLP			
				<b>e. Election Cycle Sum to Date</b>		\$ 250.00	
<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"/>	A	Check		04/21/2006	\$ 250.00		
<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> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
EDWARD MARTIN 6018 SUMMIT AVE BROWN SUMMIT, NC 27214				RETIRED			
				<b>c. Employer's Name/Specific Field</b>			
				AMERICAN TOBACCO			
				<b>e. Election Cycle Sum to Date</b>		\$ 150.00	
<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"/>	A	Check		04/16/2006	\$ 150.00		
<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> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Jack Zimmerman 2304 Wilcox Dr Greensboro, NC 27405				Retired			
				<b>c. Employer's Name/Specific Field</b>			
				GPD			
				<b>e. Election Cycle Sum to Date</b>		\$ 180.22	
<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 checked="" type="checkbox"/>	A	Check		02/15/2006	\$ 100.00		
<input type="checkbox"/>	A	In-Kind	LASER LABELS AT COSTCO (3)	04/16/2006	\$ 80.22		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 480.22	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 480.22	

# Disbursements

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
ZIMMERMAN FOR SHERIFF					
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
Carolina Peacemaker PO Box 20853 Greensboro, NC 27420 (336) 274-6210					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date
					\$ 189.00
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
A	Check	NEWSPAPER AD	04/21/2006	\$ 189.00	
				\$	
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
Mult-Print 2102-D Cheshire Way Greensboro, NC 27405 (336) 375-6040					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date
					\$ 2,153.24
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
A	Check	CAMPAIGN PRINTING AND MAILERS	05/06/2006	\$ 2,153.24	
				\$	
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
Postmaster of Greensboro 201 N. Murrow Blvd Greensboro, NC 27401					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date
					\$ 2,069.03
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
A	Check	BULK MAILING FOR CAMPAIGN MAILERS	04/21/2006	\$ 2,069.03	
				\$	
5. Total only this Page				\$ 4,411.27	
6. Total of ALL CRO-1310 Pages				\$ 7,069.15	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>					
<i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Cand/Pol Comm)</i>					
<i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

# Disbursements

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

1. Committee Full Name (and Fund if applicable)			2. ID Number	
ZIMMERMAN FOR SHERIFF				
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	
ROUTH SIGNS 318-B CREEK RIDGE RD GREENSBORO, NC 27406 (336) 272-0895				
		c. Level Registered (Specify)		
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
			e. Election Cycle Sum to Date	
			\$ 4,397.88	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount
A	Check	CAMPAIGN SIGNS	05/09/2006	\$ 2,657.88
				\$
5. Total only this Page				\$ 2,657.88
6. Total of ALL CRO-1310 Pages				\$ 7,069.15
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Cand/Pol Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>				

# Loan Proceeds

Pg 1 of 2

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
ZIMMERMAN FOR SHERIFF					
<b>3. Lender Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
CARLA Z FULK 589 PIMLICO CIRCLE WHITSETT, NC 27377		REGISTERED NURSE			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Start Date (mm/dd/yyyy)</b>	
		MOSES CONE HOSPITAL		04/16/2006	
				<b>f. End Date (mm/dd/yyyy)</b>	
				06/30/2006	
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Account Code</b>	<b>j. Form of Payment</b>	<b>k. Amount</b>	
0.000 %	CAMPAIGN REMAINS OPEN	A	Check	\$ 2,100.00	
<b>l. Full Name of Lending Institution</b>				<b>m. Loan Number</b>	
<b>4. Endorsers/Makers</b> <i>(The people who guarantee the loan.)</i>					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b>		<b>e. Amount</b>	
				% \$	
<b>5. Total of ALL CRO-1410 Pages</b> <i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i>				\$ 2,600.00	

# Loan Proceeds

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
ZIMMERMAN FOR SHERIFF					
<b>3. Lender Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
KATHY G ZIMMERMAN 5303 MCLEANSVILLE RD MCLEANSVILLE, NC 27301		LEGAL SECRETARY			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Start Date (mm/dd/yyyy)</b>	
		LEE, JOHNSON & WILLIAMS, LLP		04/16/2006	
				<b>f. End Date (mm/dd/yyyy)</b>	
				06/30/2006	
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Account Code</b>	<b>j. Form of Payment</b>	<b>k. Amount</b>	
0.000 %	CAMPAIGN REMAINS OPEN	A	Check	\$ 500.00	
<b>l. Full Name of Lending Institution</b>				<b>m. Loan Number</b>	
<b>4. Endorsers/Makers</b> <i>(The people who guarantee the loan.)</i>					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b>		<b>e. Amount</b>	
		%		\$	
<b>5. Total of ALL CRO-1410 Pages</b> <i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i>				\$ 2,600.00	

# Outstanding Loans

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

<b>1. Committee Full Name (and Fund if applicable)</b>			<b>2. ID Number</b>		
ZIMMERMAN FOR SHERIFF					
<b>3. Lender Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
CARLA Z FULK 589 PIMLICO CIRCLE WHITSETT, NC 27377		REGISTERED NURSE			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Start Date (mm/dd/yyyy)</b>	
		MOSES CONE HOSPITAL		02/12/2006	
				<b>f. End Date (mm/dd/yyyy)</b>	
				04/15/2006	
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Original Loan Amount</b>		<b>j. Remaining Loan Balance</b>	
0.00 %	CAMPAIGN REMAINS OPEN	\$ 550.00		\$ 1,200.00	
<b>k. Full Name of Lending Institution</b>				<b>l. Loan Number</b>	
<b>3. Lender Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JAMES L ZIMMERMAN 5303 MCLEANSVILLE RD MCLEANSVILLE, NC 27301		RETIRED			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Start Date (mm/dd/yyyy)</b>	
		SHERIFF DEPT		02/08/2006	
				<b>f. End Date (mm/dd/yyyy)</b>	
				04/15/2006	
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Original Loan Amount</b>		<b>j. Remaining Loan Balance</b>	
0.00 %	CAMPAIGN REMAINS OPEN	\$ 1,200.00		\$ 1,200.00	
<b>k. Full Name of Lending Institution</b>				<b>l. Loan Number</b>	
<b>3. Lender Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
KATHY G ZIMMERMAN 5303 MCLEANSVILLE RD MCLEANSVILLE, NC 27301		LEGAL SECREATARY			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Start Date (mm/dd/yyyy)</b>	
		LEE, JOHNSON & WILLIAMS, LLP		02/13/2006	
				<b>f. End Date (mm/dd/yyyy)</b>	
				04/15/2006	
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Original Loan Amount</b>		<b>j. Remaining Loan Balance</b>	
0.00 %	CAMPAIGN REMAINS OPEN	\$ 950.00		\$ 1,200.00	
<b>k. Full Name of Lending Institution</b>				<b>l. Loan Number</b>	
<b>4. Total only this Page</b>				\$ 2,700.00	
<b>5. Total of ALL CRO-1430 Pages</b> (This line must be on line 21 of Detailed Summary Page CRO-1100)				\$ 2,700.00	

# In-Kind Contributions

Pg 1 of 1

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

1. Committee Full Name (and Fund if applicable)		2. ID Number	
ZIMMERMAN FOR SHERIFF			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
Jack Zimmerman 2304 Wilcox Dr Greensboro, NC 27405		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		d. Election Cycle Sum to Date	
		\$ 180.22	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
LASER LABELS AT COSTCO (3)		04/16/2006	\$ 80.22
			\$
			\$
4. Total only this Page		\$ 80.22	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 80.22	

CRO-1510

NC State Board of Elections

March 2003