

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 Joel Landau for City Council	c. ID Number 46Y6QG
b. Mailing Address (include City, State and Zip Code) P. O. Box: 8991 Greensboro NC 27419-8991	d. Date Filed 08/06/2007
	e. Phone Number 336-854-2728

2. Report Year 2007	3. Period Start Date (mm/dd/yy) 1/1/2007	4. Period End Date (mm/dd/yy) 7/30/2007	5. Treasurer Full Name Nick Divitci
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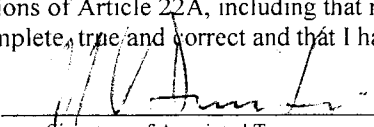
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	Municipal	State/County	Referendum
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum		<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus	<input type="checkbox"/> Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third Plus	<input type="checkbox"/> Annual
<input type="checkbox"/> NC Political Party Financing Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
<input checked="" type="checkbox"/> Other:		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
8. Number of Fundraisers this Report		<input checked="" type="checkbox"/> Special	<input type="checkbox"/> Final	
		<input type="checkbox"/> Special	<input type="checkbox"/> Special	
				10. Special Report Name Exceeded Threshold

11. Account Information		11. Account Information	
a. Financial Institution Full Name BB&T	a. Financial Institution Full Name	b. Purpose	c. Account Code
b. Purpose	c. Account Code 1	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 78.83		d. Period Begin Balance \$

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 and that I have been trained by the NC State Board of Elections according to Article 163.278.9(k).

Nick Divitci
 Printed Name of Signer


 Signature of Appointed Treasurer

08/06/2007
 Date

FOR OFFICE USE ONLY

Date Received: **RECEIVED** Employee: _____

Date Postmarked: **AUG 15 2007** Employee: _____

Date Scanned: **GUILFORD COUNTY BOARD of ELECTIONS** Employee: _____

Date Data Entered: _____ Employee: _____

Delivery Method

Normal Mail

Registered Mail

Hand Delivered

Electronically Filed

Signer has not received mandatory training

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		2. ID Number	
Joel Landau for City Council		PrePrimary		46Y6QG	
Start of Election Cycle: January 1,			2007		
			Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start			\$ 78.83		\$ 78.83
RECEIPTS					
5) Aggregated Contributions from Individuals			(CRO-1205) \$ 950.00		\$ 950.00
6) Contributions from Individuals			(CRO-1210) \$ 2,125.00		\$ 2,125.00
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) \$		\$
12) TOTAL RECEIPTS			\$ 3,075.00		\$ 3,075.00
<i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, and 11c)</i>					
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures			(CRO-1310) \$ 530.57		\$ 530.57
13b) Contributions to Candidates/Political Committees			(CRO-1310) \$		\$
13c) Coordinated Party Expenditures			(CRO-1310) \$		\$
14) Loan Repayments			(CRO-1420) \$		\$
15) Refunds/Reimbursements From the Committee			(CRO-1320) \$		\$
16) In-Kind Contributions			(CRO-1510) \$		\$
17) TOTAL EXPENDITURES			\$ 530.57		\$ 530.57
<i>(Add lines 13a, 13b, 13c, 14, 15, and 16)</i>					
18) Cash on Hand at End			\$ 2,623.26		\$ 2,623.26
<i>(Add lines 4 and 12 together, then subtract line 17)</i>					
ADDITIONAL INFORMATION					
19) Non-Monetary Gifts Given to Other Committees			(CRO-1330) \$		
20) Outstanding Loans (incl. ones from other campaigns)			(CRO-1430) \$		
21) Debts and Obligations owed By the Committee			(CRO-1610) \$		
22) Debts and Obligations owed To the Committee			(CRO-1620) \$		
23) Account Transfers Within the Committee			(CRO-1720) \$		
24) Administrative Support			(CRO-1710) \$		\$
25) Forgiven Loans			(CRO-1440) \$		\$
26) 48-Hour Notice Reports Sum			\$		\$

Aggregated Contributions from Individuals

Page

1 of 2

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			
Joel Landau for City Council		46Y6QG			
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	1	Check		3/16/2007	\$ 25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		3/16/2007	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		3/23/2007	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Cash		3/26/2007	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Cash		3/26/2007	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		3/26/2007	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		3/26/2007	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		3/26/2007	\$ 25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		3/26/2007	\$ 25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		3/26/2007	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Cash		3/26/2007	\$ 15.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		3/26/2007	\$ 25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Cash		3/26/2007	\$ 20.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		3/26/2007	\$ 50.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		3/26/2007	\$ 30.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		3/26/2007	\$ 25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		3/26/2007	\$ 35.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		4/11/2007	\$ 25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Cash		5/1/2007	\$ 40.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		6/4/2007	\$ 25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		7/3/2007	\$ 35.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	1	Check		7/19/2007	\$ 50.00
<input type="checkbox"/> Remove					
4. Total only this Page					\$ 800.00
5. Total of ALL CRO-1205 Pages					\$ 950.00
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					

Contributions from Individuals

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	
Joel Landau for City Council					46Y6QG	
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	
Debbie Fields 902 Carolina St Greensboro NC 27401			Physician			
			c. Employer's Name/Specific Field			
					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"/>	1	Credit Car		2/28/2007		\$ 100.00
<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	
Laurie Gengenbach 7233 Bulb Rd Julian NC 27283						
			c. Employer's Name/Specific Field			
			NC A&T S. Univ		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"/>	1	Check		3/14/2007		\$ 100.00
<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	
Rus McCarter 3708 Mulberry Lane Summerfield NC 27358						
			c. Employer's Name/Specific Field			
					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"/>	1	Check		3/14/2007		\$ 100.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 300.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 2,125.00	

Contributions from Individuals

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	
Joel Landau for City Council					46Y6QG	
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	
Kathleen A Rooney 7130 Rabbit Hollow Rd Summerfield NC 27358						
			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"/>	1	Check		3/26/2007	\$ 100.00	
<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	
John G Sheffield 302 Ridgeway Drive Greensboro NC 27403						
			e. Election Sum to Date			
		\$ 75.00				
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		3/26/2007	\$ 75.00	
<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	
Ben Wilson 819 Larkwood Drive Greensboro NC 27410-3431						
			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"/>	1	Check		3/26/2007	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 275.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 2,125.00	

Contributions from Individuals

Amendment

 Pg 3 of 4 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	
Joel Landau for City Council					46Y6QG	
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	
Helen Allegrone 925 New Garden Rd Apt 64 Greensboro NC 27410						
			Retired		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"/>	1	Check		4/5/2007	\$ 100.00	
<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	
Carole Drexel 307 Aberdeen Ter Greensboro NC 27403			Net.Mark + Interfaith Minister			
			c. Employer's Name/Specific Field			
			Self		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"/>	1	Check		5/1/2007	\$ 1,000.00	
<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	
Kimberly M Yarbray 4407 Graham Rd Greensboro NC 27410						
			c. Employer's Name/Specific Field			
					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"/>	1	Check		5/1/2007	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1,200.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 2,125.00	

Contributions from Individuals

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	
Joel Landau for City Council					46Y6QG	
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	
Kenneth R DuBoff 12430 West Dixie Hwy N Miami FL 33161			Attorney		e. Election Sum to Date \$ 100.00	
			c. Employer's Name/Specific Field			
			Kenneth R DuBoff P.A.			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		6/27/2007	\$ 100.00	
<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	
Nancy Walkowiak 117 Batchelor Drive Greensboro NC 27410					e. Election Sum to Date \$ 150.00	
			c. Employer's Name/Specific Field			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		7/3/2007	\$ 150.00	
<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	
Gay E Cheney 6209 Bard's Lane Brown Summit NC 27214					e. Election Sum to Date \$ 100.00	
			c. Employer's Name/Specific Field			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		7/30/2007	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 350.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 2,125.00	

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
Joel Landau for City Council					46Y6QG
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
If Its Paper 1220 Battleground Ave Greensboro NC 27408					
			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:		
					\$ 41.06
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	C	3/15/2007	\$34.46	Office Supplies for Invitations
1	Check	C	3/23/2007	\$6.60	Office Supplies for Invitations
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 Greensboro NC 27401					
			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:		
					\$ 81.24
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	C	3/16/2007	\$39.80	Stamps
1	Check	C	7/25/2007	\$41.44	Stamps
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
Susan Sassmann 3611 Birchwood Lane Greensboro NC 27410					
			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:		
					\$ 90.79
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	C	5/20/2007	\$90.79	Food for Fundra
				\$	
5. Total only this Page					\$ 213.09
6. Total of ALL CRO-1310 Pages					\$ 530.57
<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 Candidates/Political Comm)</i>					
<i>(This line goes in line 14c 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	
E - Salaries		F* - Equipment		D - To Another Candidate	
I - Postage		J - Penalties		G - Political Party	
				H* - Holding Public Office Expenses	
				K* - Office Expenses	
				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
Joel Landau for City Council					46Y6QG
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	
Joel Landau 6 Collwood Ct Greensboro NC 27409					
		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:		\$ 76.28	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	K	5/24/2007	\$76.28	Website Hostng and Domain Name
				\$	
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	
Guilford County Board of Elections Greensboro NC 27401					
		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:		\$ 25.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	H	7/6/2007	\$25.00	Filing Fee
				\$	
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	
Guilford County Democratic Party 6600 W Market St Greensboro NC 27409					
		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
1	Check	G	7/9/2007	\$100.00	Unity Dinner Sponsorship
				\$	
5. Total only this Page					\$ 201.28
6. Total of ALL CRO-1310 Pages					\$ 530.57
<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 Candidates/Political Comm)</i>					
<i>(This line goes in line 14c 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	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
				D - To Another Candidate	
				H* - Holding Public Office Expenses	
				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
Joel Landau for City Council					46Y6QG
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 <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments
Matrix Computer Concepts P. O. Box 1001 Summerfiled NC 27358					
			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:		
					\$ 113.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Check	B	7/23/2007	\$113.00	Palm Cards Printing & S&H
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments
PayPal 2145 Hamilton Ave San Jose, CA 95125					
			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:		
					\$ 3.20
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Credit Card	C	2/28/2007	\$3.20	Credit Card Pro cessing Fee
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments
			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:		
					\$
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					\$ 116.20
6. Total of ALL CRO-1310 Pages					\$ 530.57
<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 Candidates/Political Comm)</i>					
<i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
				D - To Another Candidate	
				H* - Holding Public Office Expenses	
				O* - Other	