Amendment

Yes	No

Disclosure Report Cover

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						c. ID Number
Committee to	elect Den	ny Davi	s for	Sher	iff	
b. Mailing Address (include City, Stat	e and Zip Code)					d. Date Filed
1162 AShbury Driv	es East	over 1	IC ]	28310	7	1/27/17
,					~	e. Phone Number 910 -494 ~71 49
2. Report Year 3. Period Start	Date (mm/dd/yy)	4. Period I	End Date (r	nm/dd/yy)	5. Treasure	r Full Name
2016 7/1/16		1 2- /-	31/16		Sum	ier Sadler
6. Type of Committee (Check C					type of repo	rt from one category)
Candidate Campaign Part		nicipal		te/County		Referendum
lumb to the second seco	erendum 🔲	Organizationa	-	4	onal	Organizational
Independent Expenditure I Join	t Fundraiser	Thirty-five da	y	Quarterly		Pre-referendum
Legal Expense Fund	닏	Pre-primary	L	First		Final
TO PER 1 (C. 1)		Pre-election	-	Secon	8	Supplemental Final
7. Type of Fund (if applicable,  Booster Fund	check one)	Pre-runoff	늗	Third Fourt		Annual Special
Building Fund	l-	Semi-annual Mid Yea	_  └	Semi-annu		Special
Building Fund	띪	Year End				10. Special Report Name
Other:	IH	Final		Year		10. Special Report Name
8. Number of Fundraisers this	Report	Special	IH	] Final	LIIU	
i i i i i i i i i i i i i i i i i i i	Keport	Брести	ᆙ	Special		
			111 1	-		
11. Account Information  a. Financial Institution Full Name			11. Accou	Institution		
			a. Financiai	Histitution	ruii ivaine	
PNC BONK						
b. Purpose	c. Account Code		b. Purpose			c. Account Code
Compaign						
	d, Period Begin Ba	ılance				d. Period Begin Balance
	\$ 81.45					\$
CERTIFICATION	01017			-		
I certify that the Committee or Fu	ad is in compliance	with all anal	ioobla provi	cione of Art	tiolo 22 A 22I	2 & 22D 22M of Chapter 163
of the NC General Statutes and the						
report is complete, true and correct		1000	(T)			inds. Traitine certify that this
report is complete, true and correct	a una unu i mura o	een transea eg	and the blu	io Doma iii	23122117117	
Stammer 1 Sa	dlor	Lun	MUC	MONE	0 1	1/24/17
Printed Name of Sign			nature of App	winted Theas	SINCEL .	Date
FOR OFFICE USE ONLY			1			
4	2		V	1	Del	ivery Method
Date Received:	33-13-	Employ	yee: A			Normal Mail
Data Bastona da di		F			\ 🗖	Registered Mail
Date Postmarked:		Employ	yee:		- ' 🔯	Hand Delivered
Date Scanned:		Employ	yee:		_ 0	Electronically Filed
Date Data Entered:		Emplo	yee:			Signer has not received mandatory training
Please Note: This form ca	unnot be used to a	amend comm	nittee inforr	nation suc	h as the com	mittee address, treasurer,
A SECTION OF THE PROPERTY OF T	treasurer, custoo					
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 3. ID Number Denny Dallis for sheriff Total this Total this Start of Election Cycle: January 1, Reporting Period **Election Cycle** 4) Cash on Hand at Start \$ RECEIPTS 22 5) Aggregated Contributions from Individuals (CRO-1205) \$ 6) Contributions from Individuals (CRO-1210) \$ 60 7) Contributions from Political Party Committees (CRO-1220) \$ 8) Contributions from Other Political Committees (CRO-1230) \$ 300 9) Loan Proceeds (CRO-1410) \$ \$ 500 75 10) Refunds/Reimbursements to the Committee (CRO-1240) 75 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) \$ \$ \$ 11d) Legal Expense Fund - Other Sources (CRO-1270) \$ 11e) Exempt Purchase Price Sales \$ (CRO-1265) \$ 6000 COM 401 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e) \$ EXPENDITURES 13) Disbursements 13a) Operating Expenditures (CRO-1310) \$ 444.37 330.89 \$ 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ (CRO-1310) 13c) Coordinated Party Expenditures \$ \$ 14) Aggregated Non-Media Expenditures (CRO-1315) \$ \$ \$ 15) Loan Repayments (CRO-1420) \$ \$ 16) Refunds/Reimbursements from the Committee (CRO-1320) \$ \$ 17) In-Kind Contributions (CRO-1510) 375.80 494.37 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) \$ \$ 3 61.63 406.63 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) \$ ADDITIONAL INFORMATION 20) Non-Monetary Gifts Given to Other Committees (CRO-1330) 500 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) \$ 22) Debts and Obligations owed by the Committee (CRO-1610) \$ 23) Debts and Obligations owed to the Committee (CRO-1620) \$ 24) Account Transfers Within the Committee (CRO-1720) \$ \$ 25) Administrative Support (CRO-1710) \$ (CRO-1440) \$ 26) Forgiven Loans \$ 27) 48-Hour Notice Reports Sum \$ (CRO-2220) \$ 28) Contributions to be Refunded \$ (CRO-1215) \$

Aggrega	ated Contri	ibutions from	Individuals Page	of	Amendment  Yes No
Optional f	orm used to rep	ort NC Contributi	ons From Individuals of	\$50 or less	Yes No
1. Commit	tee Full Name (a	and Fund if applica	ble)	连脚位著的影响等 2、	ID Number
Con	nnittee.	to elect De	eny Davis Sher	12	ID THINDS!
THE RESERVE OF THE PARTY OF THE	itor Information	CONTROL SECTION AND ADDRESS OF THE PARTY OF	ACTIVATION OF THE PROPERTY OF THE PARTY OF T		of Establish Committee of Section (1841)
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
Add		Cacl		7	The state of the s
Remove		Cash		08/28/2010	9 \$ 42
Add Remove	11	Cash cash		08/29/2016	\$ 24
Add Remove		cash		08/29/246	\$ 36
Add Remove		cash		08/30/206	
Add		THE RESERVE OF THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER.			
Remove Add		cash		08/30/2016	\$ 6
Remove		Cash		09/10/206	\$ 30
Add Remove		COSN		09/10/2016	
Add		cash			
Remove Add				09/10/2016	\$ 24
Remove		cash	Lost	09/09/2016	\$ 45
Add Remove					\$
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Total onl	y this Page			\$	265
Total of	ALL CRO-12	205 Pages			265
		iled Summary Page CR	0-1100)	\$	202

		rom Individus		Pg	of		Amendment  Yes No
1. Cor	nmittee Full Na	individual contributi	olis over \$50 or o	contributions und	ier \$50 if form C	I)	ID Number
De	ant Dul	is for	Sherit	· <del>/</del>	(AC 12 41 전 보호) 해당	4.	TO IAMINOEL
3. Con	tributor Inforn	nation	a elegated L	Add Re	move		E-17年李建士的4万数,北京时间的基
a. Full l	Name, Mailing Add			b. Job Title/Profe		_	Comments
	de city, state, & zip			oune	-		
Tol	nmy Ho	ney cutt NC 28: Sell Stree	- +0	c. Employer's Na	me/Specific Field	-	
Fus	refleville	NC 783	348	101ec 1	lumbing	e. E	lection Sum to Date
S	54 Russ	sell stree	et.	SUPPLY		\$	60
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descri	ption	j. Date (mm/dd/yy	уу)	k. Amount
		Check			7/15/	2016	\$ 60
							\$
							\$
3. Con	tributor Inform	ation 💮 🔆 📜		Add Re	move Hills		<b>证的学生的现在对对外保持</b>
11	lame, Mailing Addr			b. Job Title/Profe	ssion		comments
(inclu	de city, state, & zip	)					
				c. Employer's Nar	ma/Cnasifia Field	-	
				c. Employer's Ivan	пезрестие глега	-	
						e. El	lection Sum to Date
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yy	уу)	k. Amount
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					*		\$
3. Cont	ributor Inform	ation Full Control	<b>超過低温數位[</b> ]	Add Ren	nove		第三十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二
	ame, Mailing Addr			b. Job Title/Profes	sion	d, Co	omments
(includ	e city, state, & zip)		W A				
				c. Employer's Nan	ne/Specific Field		
						e. El	ection Sum to Date
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	y)	k. Amount
							\$
							\$
							\$
4. Tota	al only this Pa	age				\$	60
THE REPORT OF LAND		O-1210 Pages of Detailed Summary Pa	ge CRO-1100)			\$	60

In-Kind Contributions	TO TO	'g of		Amendment
Use this form to report non-monetary contributions, donations, goo	ds or services pro	wided to the comm	ittee	or fund.
Use CRO-1215 if In-Kind Contributions were or will be refu 1. Committee Full Name (and Fund if applicable)	nded within 7 d	ays.	12	ID Manual
C 1 0 -	C	1 0	2.	ID Number
	The state of the s	sheriff		
3. Contributor Information  a. Full Name, Mailing Address & Phone		emove		是自動產的。發生產手
(include city, state, & zip)	h. Type of Control	ributor	c. (	Comments
	Candidate			
Summer Sadur 1581 van Ness Or. HM NC 28348	Party			
1881 Vall 1032 Ca.	PAC	50		
HW DC 30240	Referendum		d, I	Election Sum to Date
Te	Other Receip	ot Source	\$	45
e. Description		f. Date (mm/dd/yy	уу)	g. Fair Market Amount
(Food)		9/9/16	)	\$ 45
		11.1.4		\$
e				\$
3. Contributor Information	Add Re	move	<b>%</b> 起於	1073年(建設と発展がある。 1073年(建設と発展がある。 1073年(1283年)
a. Full Name, Mailing Address & Phone	b. Type of Contri	FV = 4 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	c. C	Comments
(include city, state, & zip)	Individual		228	MCS PARK STOPPING TO THE
	Candidate			
	Party PAC			
	Referendum		1 17	lada Garan
	Other Receipt	Source		lection Sum to Date
	•		\$	
e. Description		f. Date (mm/dd/yyy	y)	g. Fair Market Amount
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W 11.1	Add 🔲 Ren	and a first of the second seco	1100 P	是基础是由人工的
(include city, state, & zip)	. Type of Contrib	utor	c. Co	mments
χ α, γ-καιο, α, α	Candidate			
İ	Party			
l	PAC			
	Referendum		i. Ele	ection Sum to Date
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Description		f. Date (mm/dd/yyyy		g. Fair Market Amount
				\$
			$\dashv$	Ψ
				\$
Signature Website Control of the Con				\$
Total only this Page		Z TELET	\$	45
. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$	45

### **Refunds/Reimbursements To the Committee** Pg \_\_\_\_ of \_ ☐ Yes ☐ No Use this form to report refunds received by the committee or reimbursements for a previous expenditure. 1. Committee Full Name (and Fund if applicable) 2. ID Number 3. Contributor Information ☐ Add Remove a. Full Name, Mailing Address & Phone d. Type of Committee g. Comments (include city, state, & zip) Candidate Town of Eastover recreation Eastovery NC 28312 Referendum Party e. Level Registered (Specify) h. Original Expenditure Date County: Federal State Municipality: i, Original Expenditure Amt b. Job Title/Profession c. Employer's Name/Specific Field f. Purpose j. Election Sum to Date I, Form of Payment k. Account Code m. In-Kind Description n. Date (mm/dd/yyyy) CASh 3. Contributor Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone d. Type of Committee g. Comments (include city, state, & zip) Candidate ☐ PAC Referendum Party e. Level Registered (Specify) h. Original Expenditure Date Federal County: State Municipality: i. Original Expenditure Amt b. Job Title/Profession c. Employer's Name/Specific Field f. Purpose j. Election Sum to Date k. Account Code I. Form of Payment m. In-Kind Description n. Date (mm/dd/yyyy) o. Amount \$ 3. Contributor Information ☐ Add Remove a. Full Name, Mailing Address & Phone d. Type of Committee g. Comments (include city, state, & zip) Candidate PAC Referendum Party e. Level Registered (Specify) h, Original Expenditure Date Federal County: State Municipality: i. Original Expenditure Amt b. Job Title/Profession c. Employer's Name/Specific Field f. Purpose j. Election Sum to Date n. Date (mm/dd/yyyy) k. Account Code I. Form of Payment m. In-Kind Description o. Amount \$ 4. Total only this Page \$ 5. Total of ALL CRO-1240 Pages \$ (This line must be on line 10 of Detailed Summary Page CRO-1100)

Amendment

Disbursen	nents				Do	e	Amendment  Yes	
	o report expenditures	from the commit	tee for	operating ex	Pg of penses, contribu	tions to		∐ No
committees and	d coordinated party ex	kpenditures		F 8				
	Full Name (and Fun			Alberta		ALT I	2. ID Number	
1	ittee to		Management of the last of the			20	3	
	bursement (Please						T FILE SPECIALS	组制建
Operating Ex	THE RESIDENCE OF THE PARTY OF T	ntributions to Candid			And the second s	ordinate	d Party Expenditure	es .
	mation Mailing Address & Ph		1 IL		Remove		Kent-bilan i	接對軍事
(include city, state		ione		b. Coordinat	ed Committee Nan	ie d	l. Comments	
Tau-	ar Eachor	10 = 12000	1.5	-				
10wn	of Easton	or thecre	10 ~	c. Level Regi	stered (Specify)			
		cer	1-1	Federal	County:			
Fasto	ver 1/C -	0212.		State	Municip	ality: e	. Election Sum to 1	Date
1 00010	. ,,,,,	183100					\$ 27	5
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	I Amount	k Rea	uired Remarks	
	Check	C	7/	13/2016		I Key	dired Remarks	
	Circuit		//	12/00/10	¢ 2/3	-		
Van Seudin na	Ment Control of the Table of th				Ъ			
4. Payee Inform	The state of the s				Remove		7	
a. Full Name, Mail	ling Address & Phone			b. Coordinate	ed Committee Nam	e d	. Comments	
		1.0		-				
Willia	rms bright	1103		c. Level Regis	stered (Specify)			
1635	Bragg B	141.		☐ Federal	County:			
	000	500		☐ State	Municipa	ality: e.	Election Sum to I	ate
Faye	Heville,	NC 28.	3/2			;	\$ 98.6	9
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (	mm/dd/yyyy)	j. Amount	k. Req	uired Remarks	
	Debit	B	7/	13/2016	\$ 7,74	1		
	10 0				\$			
A David Tile	s c'articolità (militali di antigale)	riakantara akan militak	BARA TI			- AGANNA		
	nation ing Address & Phone			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Remove			
include city, stat				b. Coordinate	d Committee Name	d,	Comments	
Garras	IGA			c. Level Regis	tered (Specify)			
3745	Λ	Ĭ.		Federal	County:			
				☐ State	Municipa Municipa	lity: e.	Election Sum to D	ate
Fa	yeffeville,	NC 285	312			\$	48.08	
				nm/dd/yyyy)	j. Amount	k. Regu	ired Remarks	
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	DOVII		1/1	0-12016	6008	-		
			Ne Without Constitu		<b>)</b>			
Total only th			周 结膜	的問題就是	43、程注於得	\$	375.	2
A CONTRACTOR OF THE PARTY OF TH	CRO-1310 Pages						3	11-
	line 13a of Detailed Sumi					\$	338	82
	line 13b of Detailed Sumi						- //	
CONTRACTOR OF STREET	line 13c of Detailed Sum	And the County of the County o	BALL AND ADDRESS	the Anna State of the Auditorian process of	expenditures)			
	odes (List detailed e							
A* - Media E - Salaries	B* - Printin F* - Equipm	_		indraising itical Party			Candidate	
- Postage	J - Penalties			ffice Expense			Public Office E to Legal Expe	
O* Other	g 2 omittee	-	. 01	Type Dybens	C. Q - D0	nativil	to regat Expe	use rulla
	detailed explanatio	n in required re	marks	field (k)				

Disbursen	nents				Pg	of	Amendment  Yes No
Use this form to	o report expenditure:	from the commi	ttee for	operating exp		ributions	to candidate/political
committees and	l coordinated party e	xpenditures	CALCULATED STATES				
1. Committee	Full Name (and Fu	nd if applicable)			METALLE		2. ID Number
3. Type of Disl	bursement (Pleas	e use senarate C	RO-131	O forms for	each tune of	Diahriya	Valoriyasin birlinin ing 6 o cos
Operating Exp		ntributions to Candid					ated Party Expenditures
4. Payee Infor			STEEL	Add 🔲	Remove '	Eure Leife	Constrainty Expenditures
a. Full Name, N	Mailing Address & P.	hone			ed Committee	Name	d. Comments
(include city, state	e, & zip)						
<. mre	rsadler van nes emills M						
3007.11	110 085	5 allerup	,	c. Level Regi	stered (Specify	0.77	-
1881	Jan 1100	• •		State	1	inty: nicipality:	e. Election Sum to Date
HOPE	emills 1	10-0750	,			metpunty.	/ -
		78219					I\$ 45
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date		j. Amount	k. R	Required Remarks
	Cash	0	14/9	12016	\$ \$3		
					\$		
4. Payee Inform	nation			Add	Remove	ERCKE CON	EPARANTANTANTANTANTANTANTANTANTANTANTANTANTA
	ling Address & Phone	the state of the second of the second	Contract Property	Property of Manager Park	ed Committee	Name	d, Comments
(include city, sta	te, & zip)	5					
					tered (Specify		
				Federal State	Cou		
				State	Mur	nicipality:	e. Election Sum to Date
							\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (	nm/dd/yyyy)	j. Amount	k. R	equired Remarks
					\$		
					\$		
4-D = 1-0-2	ort, . — discussion above to an		HERA -				
4. Payee Inform	ing Address & Phone		Ш	The state of the s	Remove		但是代码或数据包含的
a. Full Name, Main (include city, stat	. 77			b. Coordinate	d Committee N	Vame	d. Comments
(	in a rip)						
				c. Level Regist	tered (Specify)		
				Federal	Cour		
				State	☐ Mun	icipality:	e. Election Sum to Date
							\$
. Account Code	g. Form of Payment	h. Purpose Code	i Data (r	am/dd/yyyy) j	. Amount	lie Da	eninal Demarks
Treesum Code	gir othi oi rayincht	in a di pose code	i. Date (I.			K. Ke	equired Remarks
					\$		
WER CONTRACTOR OF THE PARTY OF					\$		
5. Total only thi	s Page	等位置主流系统			<b>以於智慧</b> 的		\$ 45
6. Total of ALL	CRO-1310 Pages						
(This line goes in	line 13a of Detailed Sum	mary Page CRO-11	00 if Oper	ating Expenses	)	WELL STATE	\$ 275.02
	line 13b of Detailed Sum					mm)	\$ 375.82
And the second s	line 13c of Detailed Sum	THE RESERVE AND ADDRESS OF THE PARTY OF THE	Manhamma Agency P. Dr. Dr.	And the Control of th	xpenditures)	included any break paying	
	des (List detailed						
A* - Media	B* - Printin	0		ndraising	D - 7	Γο Anoth	ner Candidate
E - Salaries	F* - Equipa			tical Party			g Public Office Expenses
- Postage O* Other	J - Penaltie	S	K* - Of	fice Expense	es Q* -	Donatio	on to Legal Expense Fund
The state of the last of the state of the st	detailed explanation	n in required r	moulea	5014 (Iv)	4 54 Pro 25 E. 15.		Mile di giran e ang egy egy say yara

0	71	Y
( huteton	ding	Oone
Outstan	CHILL	LUans

	Amendment					
Pg	 of			Yes	☐ No	

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)		2. ID Number
If Committee I an I tame (and I am I appreciate)	SAMUATURE EVERY SERVICE PROPERTY OF THE PROPER	and the state of t
	Add Remove	
1901-1-1900	b. Job Title/Profession	d. Comments
(include city, state, & zip)	Police officer	
Denny Dulis	officer	e. Start Date (mm/dd/yyyy)
A .	c. Employer's Name/Specific Field	1 2
, , , , , , , , , , , , , , , , , , ,	Field force	OG/01/20K
Eastouer, NC 283/2	, ,	f. End Date (mm/dd/yyyy)
1 00 100		
g. Rate h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%	\$ [06	\$ 100
k. Full Name of Lending Institution		l. Loan Number
3. Lender Information	Add Remove	
	b. Job Title/Profession	d. Comments
(include city, state, & zip)	Para	
No-011 N 1/6	Pdice,	
Denny Davis		e. Start Date (mm/dd/yyyy)
	c. Employer's Name/Specific Field	06/09/2016
1126 Ashbury rd	Field	f. End Date (mm/dd/yyyy)
<b>v</b>	CRRD	i. Mit vate (iiii taa jjj))
Eastover rd, NC 28312	Field for 60	
g. Rate h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%	\$ 100	\$ 100
k. Full Name of Lending Institution		l. Loan Number
3. Lender Information	Add Remove	
	b. Job Title/Profession	d. Comments
(include city, state, & zip)	Police	
Denny Davis	officer	e. Start Date (mm/dd/yyyy)
DENII Davis	c. Employer's Name/Specific Field	
1126 ASKELT FD Eastover, NC 28512	Rabisa) Field	07/13/2016
7	and rel force	f. End Date (mm/dd/yyyy)
Eastovely NC 28512	gastice !	
g. Rate h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%	\$ 300	\$ \$00
k. Full Name of Lending Institution		l, Loan Number
4. Total only this Page		\$ 800
5. Total of ALL CRO-1430 Pages		-
(This line must be on line 21 of Detailed Summary Page CRO-1100)		\$ 500



# North Carolina

State Board of Elections 441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director

Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

# **Loan Proceeds Statement**

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

<ul> <li>Name of</li> </ul>	of committee to receive loan: Committee	e to elect Derny Davis
	or committee to make loan:	
<ul><li>Date of</li></ul>	loan to committee: $07/13/2016$	
	of lending institution and account number (	source):
• Amoun	t of loan: <u>300</u>	
<ul> <li>Descrip</li> </ul>	otion (if in-kind loan):	
• Names	of all parties responsible for payment of lo	an (guarantors): У ЍҶѵ҅Ѕ
• Period	of loan:	
<ul><li>Rate of</li></ul>	interest of loan:	
	y pledged for loan:	
ı, Den	y Day / 5 r/lending money to committee)	edge that all of the information
provided is	complete, true, and accurate. I further under	rstand I may not forgive a loan
Der	outstanding balance to any source.	07/63/2016
Signature		Date Signed
Aum	u Adu of Treasurer of Committee	07/13/2016
		Date Signed
CRO-6100	Loan Proceeds Statement	July 2014