

Legal Expense Fund - Other Receipt Sources

Pg ____ of ____

Amendment

Yes No

Only use this form to disclose donations to a legal expense fund. NC Political Committees are prohibited from receiving contributions from prohibited sources (*) identified on this form.

1. Legal Expense Fund Full Name				2. ID Number	
3. Donor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Donor Description		c. Comments	
		<input type="checkbox"/> Corporation * <input type="checkbox"/> Business Entity * <input type="checkbox"/> Labor Union * <input type="checkbox"/> Professional Association * <input type="checkbox"/> Insurance Company * <input type="checkbox"/> Individual <input type="checkbox"/> Political Committee			
				d. Year Sum to Date	
				\$	
e. Account Code	f. Form of Payment	g. In-Kind Description	h. Date (mm/dd/yyyy)	i. Amount	
				\$	
				\$	
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				d. Year Sum to Date	
				\$	
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				\$	
				\$	
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				d. Year Sum to Date	
				\$	
e. Account Code	f. Form of Payment	g. In-Kind Description	h. Date (mm/dd/yyyy)	i. Amount	
				\$	
				\$	
4. Total only this Page				\$	
5. Total of ALL CRO-1270 Pages				\$	
<i>(This line goes in line 11d of Detailed Summary Page CRO-1100)</i>					