


COPY

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 these kinds of committee changes.

| | | | | | |
|--|--|-------------------------------------|------------------------|---|---|
| 1. Name of Committee or Fund Committee to Elect John Davenport, Jr. County Commissioner | | | | 6. Date 4/24/02 | |
| 2. Address 3051 Butterfield Dr. | | | | 7. ID Number | |
| 3. City Winston-Salem | | 4. State NC | 5. Zip 27105 | 8. Phone (336) 744-5866 | |
| 9. Type of Report Quarterly | | | | 10. Period Covered | |
| | | | | Start 1/1/02 | Yes <input type="checkbox"/> |
| | | | | End 4/20/02 | No <input checked="" type="checkbox"/> |
| 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"/> PAC | | <input type="checkbox"/> Referendum | | <input type="checkbox"/> "Booster Fund" | |
| <input type="checkbox"/> Other Fund: | | | | <input type="checkbox"/> Building Fund | |
| 13. Treasurer Name Melvin Scales | | | | | |
| 14. Assistant Treasurer Name(s) Nia Davenport | | | | | |
| 15. Custodian of Books Name John Davenport | | | | | |
| 16. Bank/Depository/Credit Account Information | | | | | |
| a. Name | | b. Purpose | | c. Code | d. Period Begin Balance |
| BB&T | | Campaign transactions | | [REDACTED] | \$ 150.99 |
| | | | | | \$ |
| | | | | | \$ |
| | | | | | \$ |
| | | | | | \$ |
| | | | | | \$ |
| | | | | | \$ |
| 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. | | | | | |
|  | | | | 4/26/2002 | |
| Signature of Appointed Treasurer or Candidate | | | | Date | |

Detailed Summary

| 1. Name of Committee or Fund | | 2. Type of Report | | 3. ID Number | |
|---|--|-------------------|---------------------------|---------------------|--|
| Committee to Elect John Davernport | | Quarterly | | | |
| Start of Election Cycle: January 1, 20 <u>02</u> | | Total this Period | Total this Election Cycle | For Office Use Only | |
| 4) Cash on Hand at Start of Election Cycle | | | \$ 150.99 | | |
| 5) Cash on Hand at Start of Present Reporting Period | | \$ 150.99 | | | |
| RECEIPTS | | | | | |
| 6) Contributions from Individuals (CRO-1210) | | \$ 450 | \$ 450 | | |
| 7) Contributions from Political Party Committees (CRO-1220) | | \$ — | \$ — | | |
| 8) Contributions from Other Political Committees (CRO-1230) | | \$ — | \$ — | | |
| 9) Loan Proceeds (CRO-1410) | | \$ 200 | \$ 200 | | |
| 10) Refunds & Reimbursements to 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) TOTAL RECEIPTS <i>(Add lines 6, 7, 8, 9, 10, 11a, 11b, and 11c)</i> | | \$ 650 | \$ 650 | | |
| EXPENDITURES | | | | | |
| 13) Disbursements (CRO-1310) | | | | | |
| 13a) Operating Expenditures (CRO-1310) | | \$ 209.74 | \$ 209.74 | | |
| 13b) Contributions to Candidates/Political Committees (CRO-1310) | | \$ — | \$ — | | |
| 13c) Coordinated Party Expenditures (CRO-1310) | | \$ — | \$ — | | |
| 14) Loan Repayments (CRO-1420) | | \$ 100 | \$ 100 | | |
| 15) Refunds from Committee (CRO-1320) | | \$ — | \$ — | | |
| 16) In-Kind Contributions (CRO-1510) | | \$ — | \$ — | | |
| 17) TOTAL EXPENDITURES <i>(Add lines 13a, 13b, 13c, 14, 15, and 16)</i> | | \$ 309.74 | \$ 309.74 | | |
| 18) Cash on Hand at End of Reporting Period <i>(For this Period, add lines 5 and 12 together, then subtract line 17)</i> <i>(For this Election Cycle, add lines 4 and 12 together, then subtract line 17)</i> | | \$ 491.25 | \$ 491.25 | | |
| Additional Information | | | | | |
| 19) Non-Monetary Gifts Given to Committees (CRO-1330) | | \$ | | | |
| 20) Outstanding Loans (including ones from other campaigns) (CRO-1430) | | \$ 200 | | | |
| 21) Debts and Obligations owed BY the Committee (CRO-1610) | | \$ | | | |
| 22) Debts and Obligations owed TO the Committee (CRO-1620) | | \$ | | | |
| 23) Parent Entity's Administrative Support (CRO-1710) | | \$ | | | |

Contributions from INDIVIDUALS

| 1. Name of Committee or Fund | | | | | | | 2. ID Number | | |
|---|--|--|--------------------|----------------------|-------------------------------|--------------------------|--------------|--|--|
| Committee to Elect John Davenport County Commissioner | | | | | | | | | |
| 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 | | |
| | Aggregated individual contribution | XXXXXXXXXX | checks | 3/28/02 | <input type="checkbox"/> | <input type="checkbox"/> | \$ 50 | | |
| | b. Job Title/Profession | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ | | |
| | c. Employer's Name/Specific Field | j. If Amendment, choose change type: | | | k. Election Cycle Sum to Date | | | | |
| | | Add <input type="checkbox"/> Delete <input type="checkbox"/> | | \$ | | | | | |
| 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 | | |
| | Mr. Patrick D. Hennigan 132 Greenhill Ln. Mooresville, NC 28117-5950 | same | ck | 4/4/02 | <input type="checkbox"/> | <input type="checkbox"/> | \$ 100 | | |
| | b. Job Title/Profession | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ | | |
| | c. Employer's Name/Specific Field | j. If Amendment, choose change type: | | | k. Election Cycle Sum to Date | | | | |
| | | Add <input type="checkbox"/> Delete <input type="checkbox"/> | | \$ 100 | | | | | |
| 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 | | |
| | Mr. Don G. Angell P.O. 1070 Clemmons, NC 27012 | same | ck | 4/4/02 | <input type="checkbox"/> | <input type="checkbox"/> | \$ 300 | | |
| | b. Job Title/Profession | | | | <input type="checkbox"/> | <input type="checkbox"/> | \$ | | |
| | c. Employer's Name/Specific Field | j. If Amendment, choose change type: | | | k. Election Cycle Sum to Date | | | | |
| | | Add <input type="checkbox"/> Delete <input type="checkbox"/> | | \$ 300 | | | | | |
| 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"/> | \$ | | |
| | c. Employer's Name/Specific Field | j. If Amendment, choose change type: | | | k. Election Cycle Sum to Date | | | | |
| | | Add <input type="checkbox"/> Delete <input type="checkbox"/> | | \$ | | | | | |
| 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"/> | \$ | | |
| | c. Employer's Name/Specific Field | j. If Amendment, choose change type: | | | k. Election Cycle Sum to Date | | | | |
| | | Add <input type="checkbox"/> Delete <input type="checkbox"/> | | \$ | | | | | |
| 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"/> | \$ | | |
| | c. Employer's Name/Specific Field | j. If Amendment, choose change type: | | | k. Election Cycle Sum to Date | | | | |
| | | Add <input type="checkbox"/> Delete <input type="checkbox"/> | | \$ | | | | | |
| 4. Total only this Page | | | | | | | \$ 450 | | |
| 5. Total of ALL CRO-1210 Pages (only show on last page) | | | | | | | \$ 450 | | |
| (This line must be on line 6 of Detailed Summary Page CRO-1100) | | | | | | | | | |

Disbursements

| | | | | | | | | |
|---|--|---|--|--|---|--------------------------------------|--------------------------------|------------------|
| 1. Name of Committee or Fund | | | | | | 2. ID Number | | |
| Committee to Elect John Davenport County Commissioner | | | | | | | | |
| 3. Type of Disbursement <i>(Please use separate CRO-1310 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 |
| | BB&T Bank Winston-Salem, NC | | | bank charges | 3300 3300 | electronic | 1/31/02 | \$ 3 |
| 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 | | |
| | | | | Add <input type="checkbox"/> Delete <input type="checkbox"/> | | \$ 41 | | |
| 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 |
| | Forsyth County Board of Elections Winston-Salem, NC | | | filing fees | some | ck | 3/1/02 | \$ 168.74 |
| 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 | | |
| | | | | Add <input type="checkbox"/> Delete <input type="checkbox"/> | | \$ 168.74 | | |
| 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 | | |
| | | | | Add <input type="checkbox"/> Delete <input type="checkbox"/> | | \$ | | |
| 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 | | |
| | | | | Add <input type="checkbox"/> Delete <input type="checkbox"/> | | \$ | | |
| 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 | | |
| | | | | Add <input type="checkbox"/> Delete <input type="checkbox"/> | | \$ | | |
| 5. Total only this Page | | | | | | | \$ 209.74 | |
| 6. Total of ALL CRO-1310 Related Pages <i>(only show on last page)</i> | | | | | | | \$ 209.74 | |
| <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> | | | | | | | | |

3/29/02

Loan Repayments

| 1. Name of Committee or Fund | | | 2. ID Number | |
|---|--|--|-----------------------------------|------------------------|
| Committee to Elect John Davenport County Commissioner | | | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Original Loan Date (mm/dd/yyyy) | c. Repayment Date (mm/dd/yyyy) | g. Account Number/Code |
| | John M. Davenport, Jr. 3051 Butterfield Dr. Winston-Salem, NC 27105 | 12/01 | 1/29/02 | 0000000000 |
| | | d. Original Loan Amount | e. Remaining Balance of Loan | h. Form of Payment |
| | | \$ 100 | \$ 0 | check |
| | | f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | i. Repayment Amount |
| | | \$ 100 | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Original Loan Date (mm/dd/yyyy) | c. Repayment Date (mm/dd/yyyy) | g. Account Number/Code |
| | | | | |
| | d. Original Loan Amount | e. Remaining Balance of Loan | h. Form of Payment | |
| | \$ | \$ | | |
| | f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | i. Repayment Amount | |
| | | \$ | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Original Loan Date (mm/dd/yyyy) | c. Repayment Date (mm/dd/yyyy) | g. Account Number/Code |
| | | | | |
| | d. Original Loan Amount | e. Remaining Balance of Loan | h. Form of Payment | |
| | \$ | \$ | | |
| | f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | i. Repayment Amount | |
| | | \$ | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Original Loan Date (mm/dd/yyyy) | c. Repayment Date (mm/dd/yyyy) | g. Account Number/Code |
| | | | | |
| | d. Original Loan Amount | e. Remaining Balance of Loan | h. Form of Payment | |
| | \$ | \$ | | |
| | f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | i. Repayment Amount | |
| | | \$ | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Original Loan Date (mm/dd/yyyy) | c. Repayment Date (mm/dd/yyyy) | g. Account Number/Code |
| | | | | |
| | d. Original Loan Amount | e. Remaining Balance of Loan | h. Form of Payment | |
| | \$ | \$ | | |
| | f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | i. Repayment Amount | |
| | | \$ | | |
| 3. Lender | a. Full Name, Mailing Address & Phone (include city, state, and zip) | b. Original Loan Date (mm/dd/yyyy) | c. Repayment Date (mm/dd/yyyy) | g. Account Number/Code |
| | | | | |
| | d. Original Loan Amount | e. Remaining Balance of Loan | h. Form of Payment | |
| | \$ | \$ | | |
| | f. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | i. Repayment Amount | |
| | | \$ | | |
| 4. Total only this Page | | | | \$ 100 |
| 5. Total of ALL CRO-1420 Pages (only show on last page) | | | | \$ 100 |
| <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i> | | | | |

Loan Proceeds

| 1. Name of Committee or Fund | | | 2. ID Number | | |
|--|---|-----------------------------------|-----------------------------------|--------------------|------------------------|
| Committee to Elect John Davenport County Commission | | | | | |
| 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 |
| | John M. Davenport, Jr. 3051 Butterfield Dr. Winston-Salem, NC 27105 | 3/4/02 | 12/31/02 | 0 % | 0123456789 |
| | | e. Job Title/Profession | f. Employer's Name/Specific Field | | |
| | | Engineer | Self | | |
| | | g. Security Pledged | N/A | | |
| h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | | j. Form of Payment | |
| | | | | check | |
| | | | | k. Amount | |
| | | | | \$ 200 | |
| 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 | | | |
| | | | | | |
| | g. Security Pledged | | | | |
| h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | | j. Form of Payment | |
| | | | | | |
| | | | | k. Amount | |
| | | | | \$ | |
| 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 | | | |
| | | | | | |
| | g. Security Pledged | | | | |
| h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | | j. Form of Payment | |
| | | | | | |
| | | | | k. Amount | |
| | | | | \$ | |
| 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 | | | |
| | | | | | |
| | g. Security Pledged | | | | |
| h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | | j. Form of Payment | |
| | | | | | |
| | | | | k. Amount | |
| | | | | \$ | |
| 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 | | | |
| | | | | | |
| | g. Security Pledged | | | | |
| h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | | j. Form of Payment | |
| | | | | | |
| | | | | k. Amount | |
| | | | | \$ | |
| 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 | | | |
| | | | | | |
| | g. Security Pledged | | | | |
| h. If Amendment, choose change type: <input type="checkbox"/> Add <input type="checkbox"/> Delete | | | | j. Form of Payment | |
| | | | | | |
| | | | | k. Amount | |
| | | | | \$ | |
| 4. Total only this Page | | | | \$ 200 | |
| 5. Total of ALL CRO-1410 Pages (only show on last page) | | | | \$ 200 | |
| (This line must be on line 9 of Detailed Summary Page CRO-1100) | | | | | |

Outstanding Loans

| 1. Name of Committee or Fund | | | 2. ID Number | | |
|--|---|----------------------------|-----------------------------------|------------------|-------------------------|
| Committee to Elect John Davenport County Commissioners | | | | | |
| 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 |
| | John M. Davenport, Sr. 3051 Butterfield Dr. Winston-Salem, NC 27105 | 3/9/02 | 12/31/02 | 0 % | \$ 200 |
| | | e. Job Title/Profession | f. Employer's Name/Specific Field | | i. Loan Balance |
| | | engineer | self | | |
| | | g. Security Pledged | | | |
| | N/A | | | | \$ 200 |
| 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 | | | | | |
| 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 | | | | | \$ 200 |
| 5. Total of ALL CRO-1430 Pages (only show on last page) | | | | | \$ 200 |
| <i>(This line must be on line 20 of Detailed Summary Page CRO-1100)</i> | | | | | |