

# Disclosure Report Cover

Amendment
<input type="checkbox"/> Yes <input type="checkbox"/> 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.

<b>1. Committee Information</b>	
a. Full Name Rebecca Harvard Barnes for Mayor of Durham Committee	c. ID Number
b. Mailing Address (include City, State and Zip Code)	d. Date Filed 7-21-2023
	e. Phone Number 919-801-3095

2. Report Year 2023	3. Period Start Date (mm/dd/yy) ?	4. Period End Date (mm/dd/yy) 7-28-2023	5. Treasurer Full Name Rebecca Elizabeth Harvard
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<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<b>Municipal</b>	<b>State/County</b>	<b>Referendum</b>
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
		<input type="checkbox"/> Year End	<input checked="" type="checkbox"/> Mid Year	
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	
<b>7. Type of Fund (if applicable, check one)</b>		<b>10. Special Report Name</b>		
<input type="checkbox"/> Booster Fund				
<input type="checkbox"/> Building Fund				
<input type="checkbox"/> Other:				
<b>8. Number of Fundraisers this Report</b>				

<b>11. Account Information</b>		<b>11. Account Information</b>	
a. Financial Institution Full Name State Employees Credit Union	a. Financial Institution Full Name	b. Purpose MAIL	b. Purpose
b. Purpose previously ... campaign account	c. Account Code	JUL 26 2023	c. Account Code
d. Period Begin Balance \$ - 0 -		DURHAM BOE	d. Period Begin Balance
			\$

**CERTIFICATION**

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

Rebecca E. Harvard      Rebecca E. Harvard      7-21-2023  
 Printed Name of Signer      Signature of Appointed Treasurer      Date

**FOR OFFICE USE ONLY**

Date Received: 7/20/23      Employee: GHT-62      Delivery Method  
 Normal Mail  
 Registered Mail  
 Hand Delivered  
 Electronically Filed  
 Signer has not received mandatory training

Date Postmarked: \_\_\_\_\_      Employee: \_\_\_\_\_  
 Date Scanned: \_\_\_\_\_      Employee: \_\_\_\_\_  
 Date Data Entered: \_\_\_\_\_      Employee: \_\_\_\_\_

**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	3. ID Number	
Rebecca Harvard Barnes for Mayor of Durham Committee			
Start of Election Cycle: January 1, <u>2023</u>	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ - 0 -	\$ - 0 -	
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)	\$		\$
6) Contributions from Individuals (CRO-1210)	\$		\$
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)	\$		\$
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$		\$
11e) Exempt Purchase Price Sales (CRO-1265)	\$		\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)	\$		\$
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$		\$
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$		\$
13c) Coordinated Party Expenditures (CRO-1310)	\$		\$
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)	\$		\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$		\$
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$		\$
<b>ADDITIONAL INFORMATION</b>			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$		\$
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)	\$		\$
26) Forgiven Loans (CRO-1440)	\$		\$
27) 48-Hour Notice Reports Sum (CRO-2220)	\$		\$
28) Contributions to be Refunded (CRO-1215)	\$		\$

MAIL

JUL 26 023

DURHAM BOE

# Contributions from Individuals

N/A

Pg \_\_\_\_ of \_\_\_\_

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

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$	
<b>5. Total of ALL CRO-1210 Pages</b>						\$	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

MAIL

JUL 26 2023

DIEHART BOE

# Disbursements

N/A

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

<b>1. Committee Full Name (and Fund if applicable)</b>	<b>2. ID Number</b>

**3. Type of Disbursement** *(Please use separate CRO-1310 forms for each type of Disbursement.)*

Operating Expenses    
  Contributions to Candidates/Political Committees    
  Coordinated Party Expenditures

**4. Payee Information**      Add      Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> <small>(include city, state, &amp; zip)</small>	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>
<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
				\$	
				\$	

**4. Payee Information**      Add      Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> <small>(include city, state, &amp; zip)</small>	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
		<span style="font-size: 2em; color: blue;">MAIL</span>  <span style="color: blue;">JUL 26 2023</span>
<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>
<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<span style="color: blue;">DURHAM BOE</span> \$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	

**4. Payee Information**      Add      Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> <small>(include city, state, &amp; zip)</small>	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>
<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**     \$

**6. Total of ALL CRO-1310 Pages**     \$

(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)

(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)

(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

**7. Purpose Codes** (List detailed expenditure code in (h.) above)

- |              |                |                      |                                     |
|--------------|----------------|----------------------|-------------------------------------|
| A* - Media   | B* - Printing  | C* - Fundraising     | D - To Another Candidate            |
| E - Salaries | F* - Equipment | G - Political Party  | H* - Holding Public Office Expenses |
| I - Postage  | J - Penalties  | K* - Office Expenses | Q* - Donation to Legal Expense Fund |
| O* Other     |                |                      |                                     |

\* Codes require detailed explanation in required remarks field (k)