

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 COMMITTEE TO ELECT BURNS	c. ID Number DUR-2CL9OP-C-032
b. Mailing Address (include City, State and Zip Code) P.O. BOX 1450 DURHAM, NC 27701	d. Date Filed 01/15/2025
	e. Phone Number

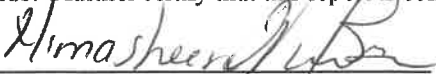
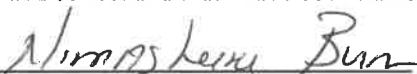
2. Report Year 2024	3. Period Start Date (mm/dd/yy) 01/01/2024	4. Period End Date (mm/dd/yy) 02/17/2024	5. Treasurer Full Name NIMASHEENA BURNS
-------------------------------	--	--	---

6. Type of Committee (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"/> Legal Expense Fund	9. Type of Report (check only one type of report from one category)		
	Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
7. Type of Fund (if applicable, check one) <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:	10. Special Report Name		
8. Number of Fundraisers this Report 1			

3. Account Information		3. Account Information	
a. Financial Institution Full Name BB&T		a. Financial Institution Full Name	
b. Purpose CAMPAIGN FUNDS	c. Account Code 001	b. Purpose	c. Account Code
	d. Period Begin Balance \$		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



01/15/2025

Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: 1/15/25	Employee: Sp	Delivery Method
Date Postmarked: IN PERSON	Employee: _____	<input type="checkbox"/> Normal Mail
Date Scanned: JAN 15 2025	Employee: _____	<input type="checkbox"/> Registered Mail
Date Data Entered: Durham County BOE	Employee: _____	<input checked="" type="checkbox"/> Hand Delivered
		<input type="checkbox"/> Electronically Filed
		<input type="checkbox"/> 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

Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment Yes No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
COMMITTEE TO ELECT BURNS	2024 First Quarter	DUR-2CL90P-C-032

Start of Election Cycle: January 1, 2021		
Total this Reporting Period	Total this Election Cycle	
\$ 8,041.77	\$ 2,967.63	

RECEIPTS

(5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 225.00	\$ 445.00
(6) Contributions from Individuals	(CRO-1210)	\$ 4,000.00	\$ 12,550.00
(7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.00	\$ 0.00
(8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.00	\$ 500.00
(9) Loan Proceeds	(CRO-1410)	\$ 0.00	\$ 0.00
(10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.00	\$ 36.00
(11) Other Receipt Sources			
(11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.00	\$ 0.00
(11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ 0.00	\$ 0.00
(11c) Outside Sources of Income	(CRO-1250)	\$ 0.00	\$ 0.00
(11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0.00	\$ 0.00
(11e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0.00	\$ 0.00
(12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 4,225.00	\$ 13,531.00

EXPENDITURES

(13) Disbursements			
(13a) Operating Expenditures	(CRO-1310)	\$ 6,922.28	\$ 10,267.08
(13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0.00	\$ 360.00
(13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.00	\$ 0.00
(14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 0.00	\$ 527.06
(15) Loan Repayments	(CRO-1420)	\$ 0.00	\$ 0.00
(16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 0.00	\$ 0.00
(17) In-Kind Contributions	(CRO-1510)	\$ 0.00	\$ 0.00
(18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 6,922.28	\$ 11,154.14
(19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 5,344.49	\$ 5,344.49

ADDITIONAL INFORMATION

(20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.00	
(21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0.00	
(22) Debts and Obligations owed by the Committee	(CRO-1610)	\$ 0.00	
(23) Debts and Obligations owed to the Committee	(CRO-1620)	\$ 0.00	
(24) Account Transfers Within the Committee	(CRO-1720)	\$ 0.00	
(25) Administrative Support	(CRO-1710)	\$ 0.00	
(26) Forgiven Loans	(CRO-1440)	\$ 0.00	
(27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0.00	
(28) Contributions to be Refunded	(CRO-1215)	\$ 0.00	

IN-PERSON
JAN 15 2025
Durham County BOE

Amendment Yes No Page 1 of 1

Optional form used to report NC Contributions From Individuals of \$50 or less

Aggregated Contributions from Individuals

I. Committee Full Name (and Fund if applicable)		2. ID Number
COMMITTEE TO ELECT BURNS		DUR-2CL90P-C-032

3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (m/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add	001	Credit Card		01/01/2024	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	001	Credit Card		02/03/2024	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	001	Credit Card		01/31/2024	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	001	Credit Card		02/03/2024	\$ 25.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	001	Credit Card		02/10/2024	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	001	Credit Card		02/05/2024	\$ 25.00	
<input type="checkbox"/> Remove						
4. Total only this Page					\$	\$225.00
5. Total of ALL CRO-1205 Pages					\$	\$225.00

(This line must be on line 5 of Detailed Summary Page CRO-1100)

CRO-1205

NC State Board of Elections

April 2007

IN-PERSON

JAN 15 2025

Durham County BOE

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used
 Amendment Yes No

1. Committee Full Name (and Fund if applicable) COMMITTEE TO ELECT BURNS
 2. ID Number DUR-2CL90P-C-032

3. Contributor Information		Add <input type="checkbox"/> Remove <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone (include city, state, & zip)	ANDREA BAKER WAKE FOREST, NC	b. Job Title/Profession	STATE EMPLOYEE
c. Employer's Name/Specific Field		d. Comments	
e. Election Sum to Date	\$ 600.00	f. Prior g. Account Code	001
	\$	h. Form of Payment	Check
	\$	i. In-Kind Description	
	\$	j. Date (m/m/dd/yyyy)	01/25/2024
	\$	k. Amount	600.00

3. Contributor Information		Add <input type="checkbox"/> Remove <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone (include city, state, & zip)	OMAR BEASLEY 3204 SKYBROOK LANE DURHAM, NC 27703	b. Job Title/Profession	
c. Employer's Name/Specific Field		d. Comments	
e. Election Sum to Date	\$ 400.00	f. Prior g. Account Code	001
	\$	h. Form of Payment	Check
	\$	i. In-Kind Description	
	\$	j. Date (m/m/dd/yyyy)	01/10/2024
	\$	k. Amount	400.00

3. Contributor Information		Add <input type="checkbox"/> Remove <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone (include city, state, & zip)	WANDA BOONE 2628 MELROSE AVE DURHAM, NC 27704	b. Job Title/Profession	CEO
c. Employer's Name/Specific Field	PCDC/TRY	d. Comments	
e. Election Sum to Date	\$ 100.00	f. Prior g. Account Code	001
	\$	h. Form of Payment	Credit Card
	\$	i. In-Kind Description	
	\$	j. Date (m/m/dd/yyyy)	01/07/2024
	\$	k. Amount	100.00

4. Total only this Page \$ 1,100.00
 5. Total of ALL CRO-1210 Pages \$ 4,000.00
 (This line must be on line 6 of Detailed Summary Page CRO-1100)
 Durham County BOE

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
 DUR-2CL90P-C-032

3. Contributor Information
 Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) NIMASHEENA BURNS 1727 GREAT BEND DRIVE DURHAM, NC 27704	b. Job Title/Profession OFFICE ASST	c. Employer's Name/Specific Field NC DOA	d. Comments	e. Election Sum to Date \$ 100.00	f. Prior g. Account Code 001	h. Form of Payment Debit Card	i. In-Kind Description	j. Date (mm/dd/yyyy) 02/02/2024	k. Amount \$ 100.00	<input type="checkbox"/>
										<input type="checkbox"/>
										<input type="checkbox"/>

3. Contributor Information
 Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) TARNOSHA BURNS 1727 GREAT BEND DRIVE DURHAM, NC 27704	b. Job Title/Profession OFFICE ASST	c. Employer's Name/Specific Field NC DOA	d. Comments	e. Election Sum to Date \$ 250.00	f. Prior g. Account Code 001	h. Form of Payment Debit Card	i. In-Kind Description	j. Date (mm/dd/yyyy) 02/10/2024	k. Amount \$ 250.00	<input type="checkbox"/>
										<input type="checkbox"/>
										<input type="checkbox"/>

3. Contributor Information
 Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) SOPHIA CHITLIK 1019 Demerius Street DURHAM, NC	b. Job Title/Profession CONSULTANT/INVESTOR	c. Employer's Name/Specific Field SELF	d. Comments	e. Election Sum to Date \$ 250.00	f. Prior g. Account Code 001	h. Form of Payment Credit Card	i. In-Kind Description	j. Date (mm/dd/yyyy) 01/25/2024	k. Amount \$ 250.00	<input type="checkbox"/>
										<input type="checkbox"/>
										<input type="checkbox"/>

4. Total only this Page
 \$ 600.00

5. Total of ALL CRO-1210 Pages
 Durham County BOE
 (This line must be on line 6 of Detailed Summary Page CRO-1100)
 \$ 4,000.00

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used
 Amendment Yes No Pg 3 of 6

1. Committee Full Name (and Fund if applicable)		COMMITTEE TO ELECT BURNS	
2. ID Number		DUR-2CL9OP-C-032	
3. Contributor Information			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		ZACK CZAJKOWSKI DURHAM, NC	
b. Job Title/Profession		President and CEO	
c. Employer's Name/Specific Field			
d. Comments			
e. Election Sum to Date		\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description
<input type="checkbox"/>	001	Credit Card	
			j. Date (m/m/dd/yyyy)
			02/13/2024
			k. Amount
			\$ 100.00
3. Contributor Information			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		BRYAN FOX DURHAM, NC	
b. Job Title/Profession		VICE PRESIDENT	
c. Employer's Name/Specific Field			
d. Comments			
e. Election Sum to Date		\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description
<input type="checkbox"/>	001	Credit Card	
			j. Date (m/m/dd/yyyy)
			02/03/2024
			k. Amount
			\$ 100.00
3. Contributor Information			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		THELMA GLEN WHITE DURHAM, NC	
b. Job Title/Profession		RETIRED	
c. Employer's Name/Specific Field			
d. Comments			
e. Election Sum to Date		\$ 700.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description
<input type="checkbox"/>	001	Check	
			j. Date (m/m/dd/yyyy)
			02/02/2024
			k. Amount
			\$ 700.00
4. Total only this Page			
		\$ 900.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)			
Durham County BOE		\$ 4,000.00	

1. Committee Full Name (and Fund if applicable) COMMITTEE TO ELECT BURNS

2. ID Number DUR-2CL90P-C-032

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
 PHILLIP GRAHAM
 107 SAGERVIEW WAY
 DURHAM, NC 27713

b. Job Title/Profession
 SCIENTIST

c. Employer's Name/Specific Field
 RTI

d. Comments

e. Election Sum to Date \$ 250.00

f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount
 001 Credit Card 02/05/2024 \$ 250.00

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
 ROBERT GUTMAN
 310 WATTS ST
 DURHAM, NC 27701

b. Job Title/Profession
 NOT EMPLOYED

c. Employer's Name/Specific Field
 NOT EMPLOYED

d. Comments

e. Election Sum to Date \$ 350.00

f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount
 001 Credit Card 01/05/2024 \$ 250.00

3. Contributor Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)
 LARRY HALL
 DURHAM, NC

b. Job Title/Profession
 LAWYER

c. Employer's Name/Specific Field

d. Comments

e. Election Sum to Date \$ 300.00

f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount
 001 Check 01/25/2024 \$ 300.00

4. Total only this Page

5. Total of ALL CRO-1210 Pages Durham County BOE \$ 4,000.00
 (This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used
 Amendment Yes No Pg 5 of 6

1. Committee Full Name (and Fund if applicable) COMMITTEE TO ELECT BURNS
 2. ID Number DUR-2CL90P-C-032

3. Contributor Information		Add <input type="checkbox"/> Remove <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments
ZACK HAWKINS DURHAM, NC	NC HOUSE REPRESENTATIVE		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description
<input type="checkbox"/>	001	Debit Card	
			j. Date (mm/dd/yyyy)
			01/26/2024
			k. Amount
			\$ 250.00
			e. Election Sum to Date
			\$ 250.00

3. Contributor Information		Add <input type="checkbox"/> Remove <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments
JAMESENIA HEDGEPETH FAVETTEVILLE, NC	RETIRED TEACHER		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description
<input type="checkbox"/>	001	Credit Card	
			j. Date (mm/dd/yyyy)
			01/31/2024
			k. Amount
			\$ 100.00
			e. Election Sum to Date
			\$ 100.00

3. Contributor Information		Add <input type="checkbox"/> Remove <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments
ROGER MCDUGAL 713 OXBORO CIRCLE DURHAM, NC 27713	DENTIST	MCDUGAL DDS	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description
<input type="checkbox"/>	001	Credit Card	
			j. Date (mm/dd/yyyy)
			02/12/2024
			k. Amount
			\$ 100.00
			e. Election Sum to Date
			\$ 100.00

4. Total only this Page \$ 450.00
 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) Durham County BOE \$ 4,000.00

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used
 Amendment Yes No Pg 6 of 6

1. Committee Full Name (and Fund if applicable) COMMITTEE TO ELECT BURNS
 2. ID Number DUR-2CL90P-C-032

3. Contributor Information		Add <input type="checkbox"/> Remove <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone (include city, state, & zip)	CARL WEBB DURHAM, NC	b. Job Title/Profession	Marketing Consultant
c. Employer's Name/Specific Field		d. Comments	
e. Election Sum to Date			
f. Prior	<input type="checkbox"/>	g. Account Code	001
h. Form of Payment	Credit Card	i. In-Kind Description	
j. Date (mm/dd/yyyy)	01/31/2024	k. Amount	\$ 100.00

3. Contributor Information		Add <input type="checkbox"/> Remove <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone (include city, state, & zip)	TINA WILLIAMS 2404 OTIS STREET DURHAM, NC 27707	b. Job Title/Profession	ADMINISTRATOR
c. Employer's Name/Specific Field	MCDUGAL ENDODONTICS	d. Comments	
e. Election Sum to Date			
f. Prior	<input checked="" type="checkbox"/>	g. Account Code	001
h. Form of Payment	Credit Card	i. In-Kind Description	
j. Date (mm/dd/yyyy)	12/14/2023	k. Amount	\$ 25.00
			\$ 25.00
			\$ 25.00

4. Total only this Page \$ 150.00

5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100) \$ 4,000.00

IN-PERSON

JAN 15 2025

Durham County BOE

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) COMMITTEE TO ELECT BURNS
 2. ID Number DUR-2CL90P-C-032

3. Type of Disbursement Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures
 (Please use separate CRO-1310 forms for each type of Disbursement.)

4. Payee Information		Remove <input type="checkbox"/> Add <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone	CANVA 600 CALIFORNIA STREET SAN FRANCISCO, CA 94108	b. Coordinated Committee Name	d. Comments
(include city, state, & zip)			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)
001	Draft	A	01/24/2024
k. Required Remarks		j. Amount	
WEB AND SOCIAL		\$ 19.94	

4. Payee Information		Remove <input type="checkbox"/> Add <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone	JWS STAFFING AND CONSULTING (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
(include city, state, & zip)			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)
001	Check	EO	02/16/2024
k. Required Remarks		j. Amount	
POLL WORKERS		\$ 3,000.00	

4. Payee Information		Remove <input type="checkbox"/> Add <input type="checkbox"/>	
a. Full Name, Mailing Address & Phone	NC LOVE AND RESPECT (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
(include city, state, & zip)			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)
001	Check	O	02/02/2024
k. Required Remarks		j. Amount	
POLL WORKERS		\$ 1,752.00	

5. Total only this Page \$ 4,771.94

6. Total of ALL CRO-1310 Pages \$ 6,922.28

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

Disbursements

Amendment No Yes Pg 2 of 2

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) COMMITTEE TO ELECT BURNS
 2. ID Number DUR-2CL90P-C-032

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		a. Full Name, Mailing Address & Phone		b. Coordinated Committee Name		d. Comments	
<input type="checkbox"/> Add <input type="checkbox"/> Remove		VISTA PRINT (include city, state, & zip)		NC		\$ 2,092.34 e. Election Sum to Date	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (m/dd/yyyy)	j. Amount	k. Required Remarks		
001	Debit Card	B	01/27/2024	\$ 1,633.88	SIGNS AND PALM CARDS		
001	Debit Card	B	02/08/2024	\$ 458.46	YARD SIGNS		

4. Payee Information		a. Full Name, Mailing Address & Phone		b. Coordinated Committee Name		d. Comments	
<input type="checkbox"/> Add <input type="checkbox"/> Remove		100 Gansevoort St NEW YORK, NY 10014 WIX (include city, state, & zip)		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 459.85 e. Election Sum to Date	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (m/dd/yyyy)	j. Amount	k. Required Remarks		
001	Draft	A	01/14/2024	\$ 29.00	WEBSITE		
001	Draft	A	02/14/2024	\$ 29.00	WEB		

5. Total only this Page \$ 2,150.34

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)
 \$ 6,922.28

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

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

IN-PERSON

JAN 15 2025

Durham County BOE