

Disclosure Report Cover

Amendment <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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							
Javiera Caballero para Durham			5CLJ06							
b. Mailing Address (include City, State and Zip Code)			d. Date Filed							
506 Englewood Ave Durham, NC 27701-1209			09/03/2019							
			e. Phone Number							
			(984) 377-3138							
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name							
2019	07/01/2019	08/27/2019	L'tanya Durante							
6. Type of Committee (Check one)		9. Type of Report (check only one type of report from one category)								
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Legal Expense Fund		<table border="1"> <tr> <th>Municipal</th> <th>State/County</th> <th>Referendum</th> </tr> <tr> <td> <input type="checkbox"/> Organizational <input checked="" 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 </td> <td> <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 </td> <td> <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 </td> </tr> </table>			Municipal	State/County	Referendum	<input type="checkbox"/> Organizational <input checked="" 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	<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	<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
Municipal	State/County	Referendum								
<input type="checkbox"/> Organizational <input checked="" 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	<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	<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)		10. Special Report Name								
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:										
8. Number of Fundraisers this Report										
0										
11. Account Information										
a. Financial Institution Full Name										
Latino Community Credit Union										
b. Purpose			c. Account Code							
Campaign checking account			JC1							
			d. Period Begin Balance							
			\$ 0.00							
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 undisclosed 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.										
_____		_____		_____						
Printed Name of Signer		Signature of Appointed Treasurer		Date						
FOR OFFICE USE ONLY				Delivery Method						
Date Received: _____	Employee: _____			<input type="checkbox"/> Normal Mail						
Date Postmarked: _____	Employee: _____			<input type="checkbox"/> Registered Mail						
Date Scanned: _____	Employee: _____			<input type="checkbox"/> Hand Delivered						
Date Data Entered: _____	Employee: _____			<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.										
CRO-1000	NC State Board of Elections			August 2008						

Detailed Summary

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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
Javiera Caballero para Durham	2019 Thirty-five-day	5CLJ06
Start of Election Cycle: January 1, 2016	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$11,615.04	\$0.00
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$1,127.00	\$5,036.81
6) Contributions from Individuals (CRO-1210)	\$4,302.00	\$23,055.36
7) Contributions from Political Party Committees (CRO-1220)	\$0.00	\$0.00
8) Contributions from Other Political Committees (CRO-1230)	\$0.00	\$0.00
9) Loan Proceeds (CRO-1410)	\$0.00	\$0.00
10) Refunds/Reimbursements To the Committee (CRO-1240)	\$36.91	\$36.91
11) Other Receipt Sources		
11a) Interest on Bank Accounts (CRO-1250)	\$1.33	\$2.79
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)	\$5,467.24	\$28,131.87
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$8,505.36	\$17,652.27
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$0.00	\$0.00
13c) Coordinated Party Expenditures (CRO-1310)	\$0.00	\$0.00
14) Aggregated Non-Media Expenditures (CRO-1315)	\$29.68	\$36.20
15) Loan Repayments (CRO-1420)	\$0.00	\$0.00
16) Refunds/Reimbursements From the Committee (CRO-1320)	\$400.00	\$1,057.98
17) In-Kind Contributions (CRO-1510)	\$400.00	\$1,638.18
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$9,335.04	\$20,384.63
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$7,747.24	\$7,747.24
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	\$0.00
26) Forgiven Loans (CRO-1440)	\$0.00	\$0.00
27) 48-Hour Notice Reports Sum (CRO-2220)	\$0.00	\$0.00
28) Contributions to be Refunded (CRO-1215)	\$0.00	\$0.00

Aggregated Contributions from Individuals

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

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Javiera Caballero para Durham	5CLJ06

3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		07/28/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		08/27/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		08/11/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		08/27/2019	\$25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		08/11/2019	\$25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		08/27/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		07/05/2019	\$10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		07/12/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		08/11/2019	\$30.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		08/13/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		08/27/2019	\$20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Check		07/01/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		08/25/2019	\$25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		08/09/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		07/05/2019	\$10.00

4. Total only this Page	\$545.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>	\$1,127.00

Aggregated Contributions from Individuals

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

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
Javiera Caballero para Durham	5CLJ06

3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		07/24/2019	\$25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		07/17/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		08/15/2019	\$35.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		07/05/2019	\$20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		07/12/2019	\$20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		08/24/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Cash		07/05/2019	\$2.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		07/24/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		07/23/2019	\$25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		07/17/2019	\$20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		08/07/2019	\$25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Cash		07/05/2019	\$5.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		07/26/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		07/05/2019	\$20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		08/27/2019	\$50.00

4. Total only this Page	\$447.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>	\$1,127.00

Aggregated Contributions from Individuals

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

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

1. Committee Full Name (and Fund if applicable)					2. ID Number
Javiera Caballero para Durham					5CLJ06
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		07/27/2019	\$10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		08/27/2019	\$10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		07/24/2019	\$10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		08/24/2019	\$10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		07/05/2019	\$25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		07/30/2019	\$20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		08/27/2019	\$25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Credit Card		07/25/2019	\$25.00

4. Total only this Page	\$135.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>	\$1,127.00

Contributions from Individuals

Amendment

Yes No

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
Javiera Caballero para Durham	5CLJ06

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Cindy Arevalo 511 Edinborough Dr Durham, NC 27703-8485		Attorney			
		c. Employer's Name/Specific Field			
		Align Technology	e. Election Sum to Date		
			\$600.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		08/04/2019	\$100.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Lanier Blum 11 Upchurch Cir Durham, NC 27705-5629		affordable housing financing and development			
		c. Employer's Name/Specific Field			
		Durham Community Land Trustees	e. Election Sum to Date		
			\$185.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		07/24/2019	\$35.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Lanier Blum 11 Upchurch Cir Durham, NC 27705-5629		affordable housing financing and development			
		c. Employer's Name/Specific Field			
		Durham Community Land Trustees	e. Election Sum to Date		
			\$185.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		08/26/2019	\$50.00

4. Total only this page	\$185.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$4,302.00

Contributions from Individuals

Amendment

Yes No

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
Javiera Caballero para Durham	5CLJ06

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Michelle Burton 3009 Stone Fence Ct Durham, NC 27704-3898		Elementary School Librarian			
		c. Employer's Name/Specific Field			
		DPS	e. Election Sum to Date		
			\$75.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		08/08/2019	\$25.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Montserrat Francisca Caballero 3039 W Calle Levante Tucson, AZ 85746-8383		Advanced Program Coordinator			
		c. Employer's Name/Specific Field			
		Pima Community College	e. Election Sum to Date		
			\$150.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		07/14/2019	\$25.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Montserrat Francisca Caballero 3039 W Calle Levante Tucson, AZ 85746-8383		Advanced Program Coordinator			
		c. Employer's Name/Specific Field			
		Pima Community College	e. Election Sum to Date		
			\$150.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		08/14/2019	\$25.00

4. Total only this page	\$75.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$4,302.00

Contributions from Individuals

Amendment

Yes No

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
Javiera Caballero para Durham	5CLJ06

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Fernando Campos 5502 Lake Elton Rd Durham, NC 27713-1704		Teacher			
		c. Employer's Name/Specific Field			
		Durham Public Schools			
		e. Election Sum to Date			
					\$75.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		07/13/2019	\$25.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Fernando Campos 5502 Lake Elton Rd Durham, NC 27713-1704		Teacher			
		c. Employer's Name/Specific Field			
		Durham Public Schools			
		e. Election Sum to Date			
					\$75.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		08/13/2019	\$25.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Bennett Carpenter 415 E 2nd St Washington, NC 27889-5004		Organizer			
		c. Employer's Name/Specific Field			
		Durham for All			
		e. Election Sum to Date			
					\$60.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		07/05/2019	\$35.00

4. Total only this page	\$85.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$4,302.00

Contributions from Individuals

Amendment

Yes No

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	
Javiera Caballero para Durham					5CLJ06	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Bennett Carpenter 415 E 2nd St Washington, NC 27889-5004			Organizer			
			c. Employer's Name/Specific Field			
			Durham for All			
					e. Election Sum to Date	
					\$60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card			07/24/2019	\$25.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Lillian Davids 1107 Park Glen Pl Durham, NC 27713-8201			Not Employed			
			c. Employer's Name/Specific Field			
			Not Employed			
					e. Election Sum to Date	
					\$85.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card			07/30/2019	\$25.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Lillian Davids 1107 Park Glen Pl Durham, NC 27713-8201			Not Employed			
			c. Employer's Name/Specific Field			
			Not Employed			
					e. Election Sum to Date	
					\$85.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description		j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card			08/19/2019	\$25.00

4. Total only this page	\$75.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$4,302.00

Contributions from Individuals

Amendment

Yes No

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
Javiera Caballero para Durham	5CLJ06

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Tim Donahoe 2519 Banner St Durham, NC 27704-4451		Psychotherapist			
		c. Employer's Name/Specific Field			
		Carolina Outreach			
		e. Election Sum to Date			
					\$100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		08/16/2019	\$100.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Esteban Echeverria-Arriaga 6616 Crab Orchard Ct Charlotte, NC 28212-6441		Attorney			
		c. Employer's Name/Specific Field			
		Self Employed			
		e. Election Sum to Date			
					\$100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		08/19/2019	\$100.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Emily Ford 335 NE 63rd Ave Portland, OR 97213-5003		Librarian			
		c. Employer's Name/Specific Field			
		Portland State University			
		e. Election Sum to Date			
					\$350.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		07/30/2019	\$250.00

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)	\$4,302.00

Contributions from Individuals

Amendment

Yes No

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
Javiera Caballero para Durham	5CLJ06

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Irene Godinez 4025 Grimstead Ln Raleigh, NC 27613-2016		Non-profit			
		c. Employer's Name/Specific Field			
		Lead nc			
		e. Election Sum to Date			
					\$249.99
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		07/26/2019	\$200.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Andrea Hoff 6 Governors Pl Durham, NC 27705-6427		Physical Therapist			
		c. Employer's Name/Specific Field			
		Duke			
		e. Election Sum to Date			
					\$244.82
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		07/24/2019	\$200.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Sam Hummel 826 Burch Ave Durham, NC 27701-2814		Self Employed			
		c. Employer's Name/Specific Field			
		Self Employed			
		e. Election Sum to Date			
					\$500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		08/07/2019	\$500.00

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)	\$4,302.00

Contributions from Individuals

Amendment

Yes No

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
Javiera Caballero para Durham	5CLJ06

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Thomas Huzij 206 N Duke St Apt 115 Durham, NC 27701-2084		Software Engineer			
		c. Employer's Name/Specific Field			
		HeadSpin	e. Election Sum to Date		
			\$54.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		07/11/2019	\$27.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Wendy Jacobs 4308 Rivermont Rd Durham, NC 27712-2935		County commissioner			
		c. Employer's Name/Specific Field			
		Durham County Government	e. Election Sum to Date		
			\$75.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		07/18/2019	\$75.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Jeff King 107 W Lavender Ave Durham, NC 27704-4248		Business Analyst			
		c. Employer's Name/Specific Field			
		IBM	e. Election Sum to Date		
			\$150.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		08/26/2019	\$50.00

4. Total only this page	\$152.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$4,302.00

Contributions from Individuals

Amendment

Yes No

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
Javiera Caballero para Durham	5CLJ06

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Matthew Kopac 1510 Woodland Dr Durham, NC 27701-1254		Sustainable Business & Innovation			
		c. Employer's Name/Specific Field			
		Burt's Bees	e. Election Sum to Date		
			\$70.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		07/26/2019	\$50.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Page McCullough 110 W Lavender Ave Durham, NC 27704-4249		retired			
		c. Employer's Name/Specific Field			
		Rural School and Community Trust	e. Election Sum to Date		
			\$70.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		08/07/2019	\$35.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Kate McMillon Murphy 114 Perth Pl Durham, NC 27712-1033		Nurse			
		c. Employer's Name/Specific Field			
		VA	e. Election Sum to Date		
			\$125.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		07/30/2019	\$25.00

4. Total only this page	\$110.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$4,302.00

Contributions from Individuals

Amendment

Yes No

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
Javiera Caballero para Durham	5CLJ06

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Marcia McNally PO Box 247 Hurdle Mills, NC 27541-0247		Retired			
		c. Employer's Name/Specific Field			
		Retired	e. Election Sum to Date	\$250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Check		07/27/2019	\$250.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Ira Mueller 1009 Watts St Durham, NC 27701-1534		Administrator			
		c. Employer's Name/Specific Field			
		Self Employed	e. Election Sum to Date	\$135.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		07/24/2019	\$35.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Stacie Nagy 3251 S NC Highway 87 Graham, NC 27253-9341		Buyer			
		c. Employer's Name/Specific Field			
		NVIDIA corporation	e. Election Sum to Date	\$75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		07/11/2019	\$25.00

4. Total only this page	\$310.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$4,302.00

Contributions from Individuals

Amendment

Yes No

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
Javiera Caballero para Durham	5CLJ06

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Stacie Nagy 3251 S NC Highway 87 Graham, NC 27253-9341		Buyer			
		c. Employer's Name/Specific Field			
		NVIDIA corporation	e. Election Sum to Date		
			\$75.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		08/11/2019	\$25.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Jocelyn Olcott 407 A Gattis St Durham, NC 27701-2827		History Prof			
		c. Employer's Name/Specific Field			
		Duke Univ.	e. Election Sum to Date		
			\$100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		07/24/2019	\$100.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Ann Rebeck 2701 Old Sugar Rd Durham, NC 27707-3815		Treasurer			
		c. Employer's Name/Specific Field			
		Tamika & Bryan for NCAE Leadership	e. Election Sum to Date		
			\$75.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		07/24/2019	\$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)	\$4,302.00

Contributions from Individuals

Amendment

Yes No

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
Javiera Caballero para Durham	5CLJ06

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Alyssa Ribeiro 3124 Ridgeview Dr Altadena, CA 91001-4566		History professor			
		c. Employer's Name/Specific Field			
		Allegheny College	e. Election Sum to Date		
			\$75.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		07/12/2019	\$25.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Alyssa Ribeiro 3124 Ridgeview Dr Altadena, CA 91001-4566		History professor			
		c. Employer's Name/Specific Field			
		Allegheny College	e. Election Sum to Date		
			\$75.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		08/12/2019	\$25.00

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Elaine Rodriguez-Buz 40 N Orchard Dr Clayton, NC 27527-7037		Energy Healer			
		c. Employer's Name/Specific Field			
		Self Employed	e. Election Sum to Date		
			\$85.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		08/26/2019	\$35.00

4. Total only this page	\$85.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$4,302.00

Contributions from Individuals

Amendment

Yes No

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	
Javiera Caballero para Durham				5CLJ06	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Lorisa Seibel 2410 Par Pl Durham, NC 27705-3162		Healthy Homes Director			
		c. Employer's Name/Specific Field			
		Reinvestment Partners			
				e. Election Sum to Date	
				\$200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		07/24/2019	\$100.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Mary Susan Sewell 2904 Legion Ave Durham, NC 27707-1924		IT manager			
		c. Employer's Name/Specific Field			
		ETSI			
				e. Election Sum to Date	
				\$75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		08/07/2019	\$25.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Elizabeth Simpson 1809 Glendale Ave Durham, NC 27701-1323		attorney			
		c. Employer's Name/Specific Field			
		National Immigration Project			
				e. Election Sum to Date	
				\$1,200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Check		07/24/2019	\$1,000.00

4. Total only this page	\$1,125.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$4,302.00

Contributions from Individuals

Amendment

Yes No

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	
Javiera Caballero para Durham				5CLJ06	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Rochelle Sparko 907 Cleveland St Durham, NC 27701-2433		Attorney			
		c. Employer's Name/Specific Field			
		Carolina Farm Stewardship Assn			
		e. Election Sum to Date		\$5.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	In-Kind	Intern stipend	07/01/2019	\$400.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Natalie Spring 801 Cleveland St Durham, NC 27701-2431		Director			
		c. Employer's Name/Specific Field			
		Duke			
		e. Election Sum to Date		\$100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		08/24/2019	\$100.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Tim Stallmann 811 Arnette Ave Apt C Durham, NC 27701-2789		Consultant			
		c. Employer's Name/Specific Field			
		Research Action Design			
		e. Election Sum to Date		\$300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		07/13/2019	\$50.00

4. Total only this page	\$550.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$4,302.00

Contributions from Individuals

Amendment

Yes No

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	
Javiera Caballero para Durham				5CLJ06	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments	
Tim Stallmann 811 Arnette Ave Apt C Durham, NC 27701-2789			Consultant		
			c. Employer's Name/Specific Field		
			Research Action Design		
			e. Election Sum to Date		
			\$300.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	JC1	Credit Card		08/13/2019	\$50.00

4. Total only this page	\$50.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$4,302.00

Refunds/Reimbursements To the Committee

Amendment
 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	
Javiera Caballero para Durham			5CLJ06	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee		g. Comments
Committee to Elect Jillian Johnson PO Box 3502 Durham, NC 27702-3502		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party		Overpayment for venue rental
		e. Level Registered (Specify)		h. Original Expenditure Date
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		05/14/2019
				i. Original Expenditure Amt
				\$36.91
b. Job Title/Profession	c. Employer's Name/Specific Field	f. Purpose		j. Election Cyc Sum To Date
				\$3,433.86
k. Account Code	l. Form of Payment	m. In-Kind Description	n. Date (mm/dd/yyyy)	o. Amount
JC1	Check		08/27/2019	\$36.91

4. Total only this page	\$36.91
5. Total of ALL CRO-1240 Pages (This line must be on line 10 of Detailed Summary Page CRO-1100)	\$36.91

Other Receipt Sources

Page 21 of 34

Amendment
 Yes No

Use this form to report income not reported on another form i.e. interest income, not for profit contributions etc.

1. Committee Full Name (and Fund if applicable)		2. ID Number		
Javiera Caballero para Durham		5CLJ06		
3. Type of Receipt Source (Please use separate CRO-1250 forms for each type of Receipt Source.)				
<input checked="" type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input type="checkbox"/> Outside Sources of Income				
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Not-for-Profit Federal ID #	d. Comments	
Latino Community Credit Union 100 W Morgan St Durham, NC 27701-3315				
		c. Outside Source Explanation		
			e. Election Cycle Sum to Date	
			\$2.79	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
JC1	ElectronicPaySystem		07/29/2019	\$1.33

5. Total only this page	\$1.33
6. Total of ALL CRO-1250 Pages (This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest) (This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution) (This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)	\$1.33

Disbursements

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

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)						2. ID Number	
Javiera Caballero para Durham						5CLJ06	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Capitol Promotions PO Box 231 Glenside, PA 19038-0231				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$2,273.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JC1	Debit Card	O	07/30/2019	\$2,273.00	Yard signs		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Committee to Elect Jillian Johnson PO Box 3502 Durham, NC 27702-3502				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$3,470.77	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JC1	Check	O	07/27/2019	\$283.33	Logo design		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Committee to Elect Jillian Johnson PO Box 3502 Durham, NC 27702-3502				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$3,470.77	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JC1	Check	O	08/17/2019	\$58.33	Pride parade fee		
5. Total only this page						\$2,614.66	
6. Total of ALL CRO-1310 Pages						\$8,505.36	
(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)							

Disbursements

Amendment
 Yes No

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)						2. ID Number	
Javiera Caballero para Durham						5CLJ06	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Committee to Elect Jillian Johnson PO Box 3502 Durham, NC 27702-3502				c. Level Registered (Specify)		e. Election Sum to Date \$3,470.77	
				<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		
JC1	Check	A	08/17/2019	\$83.33	DCABP advertisement		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Committee to Elect Jillian Johnson PO Box 3502 Durham, NC 27702-3502				c. Level Registered (Specify)		e. Election Sum to Date \$3,470.77	
				<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		
JC1	Check	O	08/17/2019	\$99.62	Snacks for filing party (balance)		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Committee to Elect Jillian Johnson PO Box 3502 Durham, NC 27702-3502				c. Level Registered (Specify)		e. Election Sum to Date \$3,470.77	
				<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		
JC1	Check	B	08/23/2019	\$40.04	Spanish language palm cards		
5. Total only this page						\$222.99	
6. Total of ALL CRO-1310 Pages						\$8,505.36	
(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)							

Disbursements

Amendment
 Yes No

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)						2. ID Number	
Javiera Caballero para Durham						5CLJ06	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
L'tanya Durante 1904 Cole Mill Rd Apt 103 Durham, NC 27712-3249				c. Level Registered (Specify)		e. Election Sum to Date \$3,500.00	
				<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		
JC1	Check	E	07/01/2019	\$600.00	Staff payment		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
L'tanya Durante 1904 Cole Mill Rd Apt 103 Durham, NC 27712-3249				c. Level Registered (Specify)		e. Election Sum to Date \$3,500.00	
				<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		
JC1	Check	E	08/01/2019	\$600.00	Staff payment		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Durham County Government 120 E Parrish St Durham, NC 27701-0104				c. Level Registered (Specify)		e. Election Sum to Date \$221.17	
				<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		
JC1	Check	O	07/05/2019	\$221.17	Candidate filing fee		
5. Total only this page						\$1,421.17	
6. Total of ALL CRO-1310 Pages						\$8,505.36	
(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)							

Disbursements

Amendment
 Yes No

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)						2. ID Number	
Javiera Caballero para Durham						5CLJ06	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Durham Short Run Shirts 301 E Chapel Hill St Durham, NC 27701-3301				c. Level Registered (Specify)		e. Election Sum to Date \$120.00	
				<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		
JC1	Debit Card	O	08/12/2019	\$120.00	T-shirts		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Facebook, Inc. 1 Hacker Way Menlo Park, CA 94025-1456				c. Level Registered (Specify)		e. Election Sum to Date \$134.97	
				<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		
JC1	Debit Card	A	07/11/2019	\$9.97	Digital advertisement		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Facebook, Inc. 1 Hacker Way Menlo Park, CA 94025-1456				c. Level Registered (Specify)		e. Election Sum to Date \$134.97	
				<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		
JC1	Debit Card	A	08/22/2019	\$25.00	Digital advertisement		
5. Total only this page						\$154.97	
6. Total of ALL CRO-1310 Pages						\$8,505.36	
(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)							

Disbursements

Amendment
 Yes No

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)						2. ID Number	
Javiera Caballero para Durham						5CLJ06	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Facebook, Inc. 1 Hacker Way Menlo Park, CA 94025-1456							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$134.97	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JC1	Debit Card	A	08/25/2019	\$25.00	Digital advertisement		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Sally Hodges-Copple 501 Willard St Apt 238 Durham, NC 27701-3287							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$1,232.98	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JC1	Check	E	07/27/2019	\$250.00	Staff payment		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Sally Hodges-Copple 501 Willard St Apt 238 Durham, NC 27701-3287							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$1,232.98	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JC1	Check	E	08/23/2019	\$250.00	Staff payment		
5. Total only this page						\$525.00	
6. Total of ALL CRO-1310 Pages						\$8,505.36	
(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)							

Disbursements

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

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)						2. ID Number	
Javiera Caballero para Durham						5CLJ06	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Latino Community Credit Union 100 W Morgan St Durham, NC 27701-3315				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$55.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JC1	Draft	K	07/29/2019	\$8.00	Account maintenance fee		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
NGP VAN PO Box 392264 Pittsburgh, PA 15251-9264				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$1,050.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JC1	Draft	K	07/03/2019	\$150.00	Database monthly fee		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
NGP VAN PO Box 392264 Pittsburgh, PA 15251-9264				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$1,050.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JC1	Draft	K	08/02/2019	\$150.00	Database monthly fee		
5. Total only this page						\$308.00	
6. Total of ALL CRO-1310 Pages						\$8,505.36	
(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)							

Disbursements

Amendment
 Yes No

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)						2. ID Number	
Javiera Caballero para Durham						5CLJ06	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
North Carolina Democratic Party 220 Hillsborough St Attn: Meredith Cuomo Raleigh, NC 27603-1724				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$750.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JC1	Check	O	07/19/2019	\$500.00	Voter/field database		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
North Carolina Democratic Party 220 Hillsborough St Attn: Meredith Cuomo Raleigh, NC 27603-1724				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$750.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JC1	Check	O	08/05/2019	\$250.00	Voter/field database		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Paragon Payment Solutions 1505 N Hayden Rd Ste 110 Scottsdale, AZ 85257-3770				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$960.27	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JC1	Draft	K	07/01/2019	\$241.89	Credit card processing fee		
5. Total only this page						\$991.89	
6. Total of ALL CRO-1310 Pages						\$8,505.36	
(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)							

Disbursements

Amendment
 Yes No

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)						2. ID Number	
Javiera Caballero para Durham						5CLJ06	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Paragon Payment Solutions 1505 N Hayden Rd Ste 110 Scottsdale, AZ 85257-3770				c. Level Registered (Specify)		e. Election Sum to Date \$960.27	
				<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		
JC1	Draft	K	08/02/2019	\$222.68	Credit card processing fee		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Rochelle Sparko 907 Cleveland St Durham, NC 27701-2433				c. Level Registered (Specify)		e. Election Sum to Date \$3,400.00	
				<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		
JC1	Check	E	07/01/2019	\$1,000.00	Staff payment		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Rochelle Sparko 907 Cleveland St Durham, NC 27701-2433				c. Level Registered (Specify)		e. Election Sum to Date \$3,400.00	
				<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		
JC1	Check	E	08/12/2019	\$1,000.00	Staff payment		
5. Total only this page						\$2,222.68	
6. Total of ALL CRO-1310 Pages						\$8,505.36	
(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)							

Disbursements

Amendment
 Yes No

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)						2. ID Number	
Javiera Caballero para Durham						5CLJ06	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Squarespace, Inc. 225 Varick St Fl 12 New York, NY 10014-4383				c. Level Registered (Specify)		e. Election Sum to Date \$166.00	
				<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		
JC1	Draft	K	07/03/2019	\$6.00	Website/domain		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Squarespace, Inc. 225 Varick St Fl 12 New York, NY 10014-4383				c. Level Registered (Specify)		e. Election Sum to Date \$166.00	
				<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		
JC1	Debit Card	K	07/21/2019	\$16.00	Website/domain		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Squarespace, Inc. 225 Varick St Fl 12 New York, NY 10014-4383				c. Level Registered (Specify)		e. Election Sum to Date \$166.00	
				<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		
JC1	Debit Card	K	08/03/2019	\$6.00	Website/domain		
5. Total only this page						\$28.00	
6. Total of ALL CRO-1310 Pages						\$8,505.36	
(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)							

Disbursements

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

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)		2. ID Number	
Javiera Caballero para Durham		5CLJ06	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)			
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name	d. Comments
Squarespace, Inc. 225 Varick St Fl 12 New York, NY 10014-4383			
		c. Level Registered (Specify)	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
			e. Election Sum to Date
			\$166.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)
JC1	Debit Card	K	08/21/2019
			j. Amount
			\$16.00
			k. Required Remarks
			Website/domain

5. Total only this page	\$16.00
6. Total of ALL CRO-1310 Pages	\$8,505.36
(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)	

Aggregated Non-Media Expenditures

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

Optional form used to report NC Non-Media Expenditures of \$50 or less.

1. Committee Full Name (and Fund if applicable)						2. ID Number
Javiera Caballero para Durham						5CLJ06
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	JC1	Debit Card	O	07/05/2019	\$29.68	Filing event lunch

4. Total only this Page	\$29.68
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>	\$29.68

6. Purpose Codes (List detailed expenditure code in (d.) above)			
	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 (g)			

Refunds/Reimbursements From the Committee

Amendment
 Yes No

Use this form to report refunds/reimbursements, including contributions returned to the contributor

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Javiera Caballero para Durham		5CLJ06	
3. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee	
Rochelle Sparko 907 Cleveland St Durham, NC 27701-2433		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	
		e. Level Registered	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
		h. Original Receipt Date	
		07/01/2019	
		i. Original Receipt Amt	
		\$400.00	
		j. Election Sum To Date	
		\$5.00	
b. Job Title/Profession	c. Employer's Name/Specific	g. Comments	k. Account Code
Attorney	Carolina Farm Stewardship Assn		JC1
l. Form of Payment	m. Required Remarks	n. Date (mm/dd/yyyy)	o. Amount
Check	Reimbursement: intern stipend	07/10/2019	\$400.00

4. Total only this page	\$400.00
5. Total of ALL CRO-1320 Pages (This line must be on line 16 of Detailed Summary Page CRO-1100)	\$400.00
6. Purpose Codes (List detailed disbursement code in (f))	
L - Returned to Contributor	M - Overpayment for Service
N - Exceeded Contribution Limit	
P* - Reimbursement of In-Kind	O* Other
*Codes require detailed explanation in required remarks field (m)	

In-Kind Contributions

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

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
 Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number
Javiera Caballero para Durham		5CLJ06
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name, Mailing Address, & Phone (include city, state & zip)	b. Type of contributor	c. Comments
Rochelle Sparko 907 Cleveland St Durham, NC 27701-2433	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date
		\$5.00
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Intern stipend	07/01/2019	\$400.00

4. Total only this page	\$400.00
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)	\$400.00