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			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/y	y) 4. Period End Da	ate (mm/dd/yyyy)	5. Treasurer Full Name						
2019 07/01/2019	08/2	7/2019	L'tanya Durante						
6. Type of Committee (Check one)	9. Type of Report (che Municipal	eck only one type o	of report from one category) Referendum						
✓ Candidate Campaign Party PAC Referendum Independent Expenditure Joint Fundraiser Legal Expense Fund	☐ Organizational ☑ Thirty-five day ☐ Pre-primary ☐ Pre-election	Organizatio Quarterly First Second	nal Organizational Pre-referendum Final Supplemental Final						
7. Type of Fund (if applicable, check one)	Pre-runoff	☐ Third	☐ Annual						
"Booster Fund"	Semi-annual Mid Year	Fourth	Special						
Building Fund	Year End	Semi-annua	10. Special Report Name						
	Final	Mid Year							
Other:	Special	Final	u						
8. Number of Fundraisers this Report	Special	Special							
0		орсски							
11. Account Information									
a. Financial Institution Full Name									
Latino Community Credit Union		c. Account Code							
b. Purpose Campaign checking account		JC1							
Campaign checking account		JCT							
		d. Period Begin Ba	lance						
		\$ 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:		Normal Mail						
			Registered Mail						
Date Postmarked:	Employee:		Hand Delivered						
Date Scanned:	Employee:		- Electronically Filed						
Date Data Entered:	Employee:		Signer has not received mandatory training						
	er, custodian of books in	formation, or accour	nt information.						
You must amend the Statement of C	Organization (CRO-2100)	A-E) to make comm	-						
CRO-1000	NC State Board of Election	ons	August 2008						

Detailed Summary

Amendment	
Yes	✓ No

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

1. Committee Full Name (and Fund if applicable)		2. Type Of Report	3. ID Number
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, 1	1d, 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 sub line 18)	tract	\$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
CDO 1100	to Doord of Floations		August 2000

A many material A material and the many forms to 19 of the sta					Amendment
Aggregated Contributions from Individuals	Page _	3	of	34	☐ Yes ✓ 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 Caba	illero para Durham					5CLJ06			
3. Contributo	r Information								
a. Amend	b. Account Code	c. Form of Payment	d. In Kind Description	e. Date (mr	n/dd/yyyy)	f. Amount			
Add Remove	JC1	Credit Card		07/28	/2019	\$50.00			
Add Remove	JC1	Credit Card		08/27	//2019	\$50.00			
Add Remove	JC1	Credit Card		08/11	/2019	\$50.00			
Add Remove	JC1	Credit Card		08/27	7/2019	\$25.00			
Add Remove	JC1	Credit Card		08/11	/2019	\$25.00			
Add Remove	JC1	Credit Card		08/27	7/2019	\$50.00			
Add Remove	JC1	Credit Card		07/05	5/2019	\$10.00			
Add Remove	JC1	Credit Card		07/12	2/2019	\$50.00			
Add Remove	JC1	Credit Card		08/11	/2019	\$30.00			
Add Remove	JC1	Credit Card		08/13	/2019	\$50.00			
Add Remove	JC1	Credit Card		08/27	//2019	\$20.00			
Add Remove	JC1	Check		07/01	/2019	\$50.00			
Add Remove	JC1	Credit Card		08/25	/2019	\$25.00			
Add Remove	JC1	Credit Card		08/09	/2019	\$50.00			
Add Remove	JC1	Credit Card		07/05	07/05/2019				
4. Total only	this Page					.			
						\$545.00			
	ALL CRO-1205 Poe on line 5 of Detailed S	ages Summary Page CRO-110	00)			\$1,127.00			
000 4000									

Aggregated Contributions from Individuals								Amendmen	ıt				
Aggr	regated	Contri	butions fi	rom inc	IIVIA	uais	Page	4	of	34	Yes	✓ No	
					_								

Optional form used to report NC Contributions From Individuals of \$50 or less									
1. Committee Fu	III Name (and Fund if a	pplicable)			2. ID Numl	per			
Javiera Caba	allero para Durham					5CLJ06			
3. Contributo	r Information								
a. Amend	b. Account Code	c. Form of Payment	d. In Kind Description	e. Date (mi	n/dd/yyyy)	f. Amount			
Add Remove	JC1	Credit Card		07/24/2019		\$25.00			
Add Remove	JC1	Credit Card		07/17	//2019	\$50.00			
Add Remove	JC1	Credit Card		08/15	5/2019	\$35.00			
Add Remove	JC1	Credit Card		07/05	5/2019	\$20.00			
Add Remove	JC1	Credit Card		07/12	2/2019	\$20.00			
Add Remove	JC1	Credit Card		08/24	/2019	\$50.00			
Add Remove	JC1	Cash		07/05	5/2019	\$2.00			
Add Remove	JC1	Credit Card		07/24	/2019	\$50.00			
Add Remove	JC1	Credit Card		07/23	/2019	\$25.00			
Add Remove	JC1	Credit Card		07/17	//2019	\$20.00			
Add Remove	JC1	Credit Card		08/07	7/2019	\$25.00			
Add Remove	JC1	Cash		07/05	5/2019	\$5.00			
Add Remove	JC1	Credit Card		07/26	5/2019	\$50.00			
Add Remove	JC1	Credit Card		07/05	/2019	\$20.00			
Add Remove	JC1	Credit Card		08/27	//2019	\$50.00			
4. Total only	this Page					\$447.00			
	ALL CRO-1205 Poe on line 5 of Detailed S	Pages Summary Page CRO-110	00)			\$1,127.00			

				Amendmer	nt
Page	5	of .	34	Yes	✓ No

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

	ull Name (and Fund if a		individuais of \$50 of le		2. ID Numb	per
Javiera Caba	allero para Durham			5CLJ06		
3. Contribute	or Information					
a. Amend	b. Account Code	c. Form of Payment	d. In Kind Description	e. Date (mn	n/dd/yyyy)	f. Amount
Add Remove	JC1	Credit Card		07/27/	2019	\$10.00
Add Remove	JC1	Credit Card		08/27/	2019	\$10.00
Add Remove	JC1	Credit Card		07/24/2019		\$10.00
Add Remove	JC1	Credit Card		08/24/	2019	\$10.00
Add Remove	JC1	Credit Card		07/05/	/2019	\$25.00
Add Remove	JC1	Credit Card		07/30/	2019	\$20.00
Add Remove	JC1	Credit Card		08/27/	2019	\$25.00
Add Remove	JC1	Credit Card		07/25/	/2019	\$25.00

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

Contributions from Individuals Page 6 of 34 Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO Yes No 1205 is not used								
1. Commi	ttee Full Name (and F	und if applicable)			2. ID No	ımber		
Javiera Ca	aballero para Durham					5CLJ06		
3. Contri	ibutor Information		Add	Remove				
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d	d. Comments		
(includ	e city, state, & zip)		At	torney				
Cindy Arevalo 511 Edinborough Dr Durham, NC 27703-8485		l	Employer's Name/Specific Field					
				е	e. Election Sum to Date			
					\$600.00			
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description		j. Date	k. Amount	
	JC1	Credit Card				08/04/2019	\$100.00	
3. Contributor Information			Remove					
a. Full Na	me, Mailing Address	& Phone	b.	b. Job Title/Profession d. Comments				
(includ	e city, state, & zip)		affordable housing financinga and					
Lanier Blu	ım		development					
11 Upchu	rch Cir		c. Employer's Name/Specific Field			-		
Durham, N	NC 27705-5629		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	
	JC1	Credit Card				07/24/2019	\$35.00	
3. Contri	ibutor Information		Add	Remove				
a. Full Name, Mailing Address & Phone			b.	Job Title/Profession	d	. Comments		
(include city, state, & zip)			fordable housing financinga and					
Lanier Blu	Lanier Blum			evelopment				
11 Upchu	rch Cir		c.	Employer's Name/Specific Field				
Durham, NC 27705-5629		Dı	urham Community Land Trustees					

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

h. Form of Payment

Credit Card

f. Prior

g. Account Code

JC1

e. Election Sum to Date

j. Date

08/26/2019

\$185.00

\$50.00

Contributions from Individuals Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO ■ Yes ✓ No 1205 is not used								
1. Commi	ttee Full Name (and F	und if applicable)				2. ID No	ımber	
Javiera Ca	aballero para Durham					5CLJ06		
3. Contr	ibutor Information		Add	Remove				
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d	l. Comments		
(includ	e city, state, & zip)		El	ementary School Librarian				
Michelle Burton 3009 Stone Fence Ct Durham, NC 27704-3898		l	Employer's Name/Specific Field					
					е	e. Election Sum to Date		
					\$75.00			
f. Prior	g. Account Code	h. Form of Payment	:	i. In-Kind Description		j. Date	k. Amount	
	JC1	Credit Card				08/08/2019	\$25.00	
3. Contributor Information			Add	Remove				
a. Full Na	me, Mailing Address	& Phone	b. Job Title/Profession d. Comments					
(includ	e city, state, & zip)		Ac	dvanced Program Coordinator				
Montserra	t Francisca Caballero							
	alle Levante		c. Employer's Name/Specific Field					
Tucson, A	Z 85746-8383		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	
	JC1	Credit Card				07/14/2019	\$25.00	
3. Contr	ibutor Information		Add	Remove				
a. Full Name, Mailing Address & Phone		b.	Job Title/Profession	d	I. Comments			
(include city, state, & zip)		Ac	dvanced Program Coordinator					
Montserra	t Francisca Caballero							
	alle Levante		c.	Employer's Name/Specific Field				
Tucson, AZ 85746-8383		Pima Community College						

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

g. Account Code

JC1

f. Prior

h. Form of Payment

Credit Card

e. Election Sum to Date

j. Date

08/14/2019

\$150.00

\$25.00

Contributions from Individuals Page 8 of 34 Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO Yes No 1205 is not used								
1. Commi	ttee Full Name (and F	und if applicable)				2. ID Nu	ımber	
Javiera Ca	aballero para Durham					5CLJ06		
3. Contri	ibutor Information		Add	Remove				
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d	d. Comments		
(includ	e city, state, & zip)		Τe	eacher				
	Campos e Elton Rd NC 27713-1704		l	Employer's Name/Specific Field				
			"	diffalli Public Schools	е	. Election Sum	to Date	
				\$75.00				
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description		j. Date	k. Amount	
	JC1	Credit Card		·		07/13/2019	\$25.00	
3. Contr	3. Contributor Information Add Remove							
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d	. Comments		
(includ	e city, state, & zip)		Τe	eacher				
Fernando	Campos		l					
5502 Lake	e Elton Rd		C.	Employer's Name/Specific Field	l			
Durham, I	NC 27713-1704		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	
	JC1	Credit Card				08/13/2019	\$25.00	
3. Contri	ibutor Information		Add	Remove				
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d	. Comments		
(include city, state, & zip)		0	rganizer					
Bennett C								
	on, NC 27889-5004		l	Employer's Name/Specific Field				
I	y .		ים ו	Irham for All				

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

g. Account Code

JC1

f. Prior

h. Form of Payment

Credit Card

e. Election Sum to Date

j. Date

07/05/2019

\$60.00

\$35.00

Contributions from Individuals Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO Page 9 of 34 Amendment ☐ Yes ✓ No 1205 is not used									
1. Commi	ittee Full Name (and F	und if applicable)				2. ID Nu	ımber		
Javiera Ca	aballero para Durham					5CLJ06			
3. Contr	3. Contributor Information Add Remove								
a. Full Name, Mailing Address & Phone			b.	Job Title/Profession	d	. Comments			
(includ	le city, state, & zip)		0	rganizer					
Bennett Carpenter 415 E 2nd St Washington, NC 27889-5004		c. Employer's Name/Specific Field Durham for All							
					L e	. Election Sum			
			L		L		\$60.00		
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	4	j. Date	k. Amount		
	JC1	Credit Card				07/24/2019	\$25.00		
3. Contr	ibutor Information		Add	Remove					
a. Full Na	me, Mailing Address	& Phone	b. Job Title/Profession d. Comme			. Comments			
(includ	le city, state, & zip)		Not Employed						
Lillian Dav 1107 Park Durham, I			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		
	JC1	Credit Card				07/30/2019	\$25.00		
3. Contr	ibutor Information		Add	Remove					
a. Full Name, Mailing Address & Phone			b.	Job Title/Profession	d	. Comments			
(include city, state, & zip)			N	ot Employed					
Lillian Dav 1107 Park Durham, I			c. Employer's Name/Specific Field Not Employed		6	. Election Sum	to Date		
			ı			. Licetion Juli	LU Dale		

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

g. Account Code

JC1

f. Prior

h. Form of Payment

Credit Card

\$85.00

\$25.00

k. Amount

j. Date

08/19/2019

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. Commi	ttee Full Name (and F	und if applicable)				2. ID Nu	ımber	
Javiera Ca	aballero para Durham					5CLJ06		
3. Contr	3. Contributor Information Add Remove							
a. Full Name, Mailing Address & Phone			b.	Job Title/Profession	c	I. Comments		
(includ	e city, state, & zip)		Ps	sychotherapist				
Tim Donahoe 2519 Banner St Durham, NC 27704-4451		l	Employer's Name/Specific Field					
					e. Election Sum to Date			
				\$100.00				
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description		j. Date	k. Amount	
	JC1	Credit Card				08/16/2019	\$100.00	
3. Contr	ibutor Information		Add	Remove				
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d. Comments			
(includ	e city, state, & zip)		At	torney				
Esteban E	Echeverria-Arriaga							
	Orchard Ct		c. Employer's Name/Specific Field					
Chanotte,	NC 28212-6441		Se	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	
	JC1	Credit Card				08/19/2019	\$100.00	
3. Contr	ibutor Information		Add	Remove				
a. Full Name, Mailing Address & Phone		& Phone	b.	Job Title/Profession	C	l. Comments		
(include city, state, & zip)		Lik	orarian					
Emily For	d							
335 NE 6			c.	Employer's Name/Specific Field				
Portiand,	Portland, OR 97213-5003							

4. Total only this page	\$450.00
5. Total of ALL CRO-1210 Pages	\$4,302.00
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

f. Prior

g. Account Code

JC1

h. Form of Payment

Credit Card

e. Election Sum to Date

j. Date

07/30/2019

\$350.00

\$250.00

k. Amount

Portland State University

i. In-Kind Description

Contributions from Individuals Page 11 of 34 Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO Amendment Yes V No								
1205 is no	ot used ttee Full Name (and F	und if applicable)				2. ID Nu	ımbor	
	aballero para Durham	ши паррисано,				5CLJ06		
	·							
0.00	ibutor Information		Add	Remove				
	me, Mailing Address	& Phone		Job Title/Profession	d	. Comments		
(includ	e city, state, & zip)		No	on-profit				
Irene God								
4025 Grin Raleigh	nstead Ln NC 27613-2016		c.	Employer's Name/Specific Field	1			
rtaloigii, i	10 270 10 20 10		Le	ad nc	L			
				e.	. Election Sum			
					\$249.99			
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	4	j. Date	k. Amount	
	JC1	Credit Card				07/26/2019	\$200.00	
3. Contr	ibutor Information		Add	Remove				
a. Full Na	me, Mailing Address	& Phone	b. Job Title/Profession			. Comments		
(includ	e city, state, & zip)		Pł	Physical Therapist				
Andrea H	off							
6 Governo			_	Employer's Name/Specific Field	ł			
Durham, I	NC 27705-6427		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	
	JC1	Credit Card				07/24/2019	\$200.00	
3. Contr	3. Contributor Information Add Remove							
a. Full Na	me, Mailing Address	& Phone	b. Job Title/Profession			d. Comments		
(include city, state, & zip)			Self Employed					

4. Total only this page	\$900.00
5. Total of ALL CRO-1210 Pages	\$4,302.00
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

Self Employed

h. Form of Payment

Credit Card

c. Employer's Name/Specific Field

i. In-Kind Description

e. Election Sum to Date

j. Date

08/07/2019

\$500.00

\$500.00

k. Amount

Sam Hummel

f. Prior

826 Burch Ave Durham, NC 27701-2814

JC1

g. Account Code

			0 or	Page 12 of 3 contributions under \$50 if form CR		Amendm Yes	ent No
1. Committee Full Name (and Fund if applicable) 2. ID Number						ımber	
Javiera Ca	aballero para Durham					5CLJ06	
3. Contr	3. Contributor Information Add Remove						
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d. C	Comments	
(includ	e city, state, & zip)		Sc	oftware Engineer			
Thomas H 206 N Dul Apt 115				Employer's Name/Specific Field			
Dumam, i	10 27701-2004			басори	e. E	lection Sum	to Date
							\$54.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j.	Date	k. Amount
	JC1	Credit Card			0	7/11/2019	\$27.00
3. Contri	butor Information		Add	Remove			
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d. C	Comments	
(includ	e city, state, & zip)		Co	ounty commissioner			
Wendy Ja 4308 Rive Durham, I				Employer's Name/Specific Field urham County Government			
					e. E	lection Sum	
							\$75.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j.	Date	k. Amount
	JC1	Credit Card			0.	7/18/2019	\$75.00

Add Remove

IBM

h. Form of Payment

Credit Card

Business Analyst

b. Job Title/Profession

c. Employer's Name/Specific Field

i. In-Kind Description

d. Comments

j. Date

08/26/2019

e. Election Sum to Date

\$150.00

\$50.00

k. Amount

3. Contributor Information

(include city, state, & zip)

Jeff King 107 W Lavender Ave

f. Prior

Durham, NC 27704-4248

JC1

a. Full Name, Mailing Address & Phone

g. Account Code

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

			0 or	Page 13 of 3 contributions under \$50 if form CR		Amendm Yes	ent No
1. Commi	ttee Full Name (and F	und if applicable)				2. ID Nu	ımber
Javiera Ca	aballero para Durham				_	5CLJ06	
3. Contri	butor Information		Add	Remove			
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d	. Comments	
(includ	e city, state, & zip)		Sι	ustainable Business & Innovation	İ		
Matthew k	Kopac				İ		
1510 Woo	odland Dr		C.	Employer's Name/Specific Field	ı		
Durham, NC 27701-1254			Burt's Bees		İ		
					е	. Election Sum	to Date
					İ		\$70.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description		j. Date	k. Amount
	JC1	Credit Card				07/26/2019	\$50.00
3. Contri	butor Information	/	Add	Remove			
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d	. Comments	
(includ	e city, state, & zip)		ret	tired	İ		
Dana Mac	N. II a v a la				İ		
Page McC 110 W Lav	vender Ave		_	Francisco de Norma (Crossifia Field	l		
Durham, N	NC 27704-4249			Employer's Name/Specific Field	İ		
			Κι	ural School and Community Trust	е	. Election Sum	to Date
							\$70.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description		j. Date	k. Amount
	JC1	Credit Card				08/07/2019	\$35.00
3. Contri	butor Information		Add	Remove			
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d	. Comments	

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

Nurse

VA

h. Form of Payment

Credit Card

c. Employer's Name/Specific Field

i. In-Kind Description

e. Election Sum to Date

j. Date

07/30/2019

\$125.00

\$25.00

k. Amount

(include city, state, & zip)

g. Account Code

Kate McMillon Murphy 114 Perth Pl

f. Prior

Durham, NC 27712-1033

JC1

Use this fo			0 or	Page 14 of 3 contributions under \$50 if form CR		Amendm Yes	ent No		
	1205 is not used 1. Committee Full Name (and Fund if applicable) 2. ID Number								
Javiera Ca	aballero para Durham	,,				5CLJ06			
3. Contr	ibutor Information		Add	Remove					
0.00	me, Mailing Address	& Phone	b.	Job Title/Profession	d.	Comments			
(includ	e city, state, & zip)		Re	etired					
Marcia Mo	:Nallv								
PO Box 2	47		C.	Employer's Name/Specific Field					
Hurale IVII	lls, NC 27541-0247		Retired						
					e.	Election Sum			
					Ļ		\$250.00		
f. Prior	g. Account Code	h. Form of Payment	:	i. In-Kind Description		j. Date	k. Amount		
	JC1	Check				07/27/2019	\$250.00		
3. Contr	ibutor Information		Add	Remove					
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d.	Comments			
(includ	e city, state, & zip)		Administrator						
Ira Muelle	•								
1009 Wat Durham, I	ts St NC 27701-1534		c.	Employer's Name/Specific Field					
,			Se	elf Employed		Election Sum	to Doto		
					e.	Election Sum	\$135.00		
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description		i. Date	k. Amount		
	JC1	Credit Card		I. III-Kiliu Description	_	07/24/2019	\$35.00		
	301	Credit Calu				0112412018			
3. Contr	ibutor Information		Add	Remove					
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d.	Comments			
(include city, state, & zip)			Βι	ıyer					

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

c. Employer's Name/Specific Field

i. In-Kind Description

e. Election Sum to Date

j. Date

07/11/2019

\$75.00

\$25.00

k. Amount

NVIDIA corporation

h. Form of Payment

Credit Card

Stacie Nagy 3251 S NC Highway 87 Graham, NC 27253-9341

JC1

g. Account Code

f. Prior

1 Committee Full Name (and Fund if applicable)					0 10 11		
1205 is not used							
Use this form to report individual contributions over \$50 or contributions	under \$5	50 if fo	rm (CRO	Yes	✓ No	
Contributions from Individuals	Page	15	of	34	Amendmer		

1. Committee Full Name (and Fund if applicable)					2. ID No	umber
Javiera Ca	aballero para Durham			5CLJ06		
3. Contr	ibutor Information		Add Remove			
a. Full Na	me, Mailing Address	& Phone	b. Job Title/Profession	d. Com	ments	
(includ	e city, state, & zip)		Buyer			
Stacie Na	αν					
3251 S NC Highway 87 Graham, NC 27253-9341		c. Employer's Name/Specific Field				
			NVIDIA corporation			
			NVIDIA corporation	e. Elec	tion Sum	n to Date
						\$75.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Dat	te	k. Amount
	JC1	Credit Card		08/11	/2019	\$25.00
				33,11		7=3133
	ibutor Information		Add Remove			
a. Full Na	me, Mailing Address	& Phone	b. Job Title/Profession	d. Com	ments	
(includ	e city, state, & zip)		History Prof			
Jocelyn O	lcott					
407 A Gat			c. Employer's Name/Specific Field			
Durnam, i	NC 27701-2827	1				
			Duke Univ.			
			Duke Univ.	e. Elec	tion Sum	n to Date
			Duke Univ.	e. Elec	tion Sum	1 to Date \$100.00
f. Prior	g. Account Code	h. Form of Payment	Duke Univ. i. In-Kind Description	e. Elect		
f. Prior	g. Account Code	h. Form of Payment Credit Card		j. Dat		\$100.00
	JC1	Credit Card	i. In-Kind Description	j. Dat	te	\$100.00 k. Amount
3. Contr	JC1	Credit Card	i. In-Kind Description Add Remove	j. Dat	t e 1/2019	\$100.00 k. Amount
3. Contri	JC1 ibutor Information me, Mailing Address	Credit Card	i. In-Kind Description Add Remove b. Job Title/Profession	j. Dat	t e 1/2019	\$100.00 k. Amount
3. Contri	JC1	Credit Card	i. In-Kind Description Add Remove	j. Dat	t e 1/2019	\$100.00 k. Amount
3. Control a. Full Na (includ	JC1 ibutor Information ime, Mailing Address e city, state, & zip)	Credit Card	i. In-Kind Description Add Remove b. Job Title/Profession	j. Dat	t e 1/2019	\$100.00 k. Amount
3. Contri a. Full Na (includ Ann Rebe 2701 Old	JC1 ibutor Information ime, Mailing Address ie city, state, & zip) ick Sugar Rd	Credit Card	i. In-Kind Description Add Remove b. Job Title/Profession	j. Dat	t e 1/2019	\$100.00 k. Amount
3. Contri a. Full Na (includ Ann Rebe 2701 Old	JC1 ibutor Information ime, Mailing Address e city, state, & zip)	Credit Card	i. In-Kind Description Add Remove b. Job Title/Profession Treasurer c. Employer's Name/Specific Field Tamika & Bryan for NCAE	j. Dat 07/24 d. Com	######################################	\$100.00 k. Amount \$100.00
3. Contri a. Full Na (includ Ann Rebe 2701 Old	JC1 ibutor Information ime, Mailing Address ie city, state, & zip) ick Sugar Rd	Credit Card	i. In-Kind Description Add Remove b. Job Title/Profession Treasurer c. Employer's Name/Specific Field	j. Dat 07/24 d. Com	######################################	\$100.00 k. Amount \$100.00
3. Contri a. Full Na (includ Ann Rebe 2701 Old Durham, M	JC1 ibutor Information ime, Mailing Address te city, state, & zip) tock Sugar Rd NC 27707-3815	& Phone	i. In-Kind Description Add Remove b. Job Title/Profession Treasurer c. Employer's Name/Specific Field Tamika & Bryan for NCAE Leadership	j. Dat 07/24 d. Com	te de/2019 ments tion Sum	\$100.00 k. Amount \$100.00
3. Contri a. Full Na (includ Ann Rebe 2701 Old	JC1 ibutor Information ime, Mailing Address ie city, state, & zip) ick Sugar Rd	Credit Card	i. In-Kind Description Add Remove b. Job Title/Profession Treasurer c. Employer's Name/Specific Field Tamika & Bryan for NCAE	j. Dat 07/24 d. Com	te de/2019 ments tion Sum	\$100.00 k. Amount \$100.00

4. Total only this page	\$150.00
5. Total of ALL CRO-1210 Pages	\$4,302.00
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

	•		0 or	Page <u>16</u> of <u>3</u> contributions under \$50 if form CF		_ Amendm	ent No
	ttee Full Name (and F	und if applicable)				2. ID Nu	ımber
Javiera Ca	aballero para Durham				_	5CLJ06	
3. Contr	ibutor Information		Add	Remove			
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	c	I. Comments	
(includ	le city, state, & zip)		Hi	story professor			
Alyssa Ril 3124 Rido Altadena,				Employer's Name/Specific Field			
					е	. Election Sum	to Date
							\$75.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description		j. Date	k. Amount
	JC1	Credit Card				07/12/2019	\$25.00
3. Contr	ibutor Information		Add	Remove			
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	C	I. Comments	
(includ	le city, state, & zip)		Hi	story professor			
Alyssa Ri	beiro						
3124 Rido	geview Dr		C.	Employer's Name/Specific Field	ı		
Altadena,	CA 91001-4566			legheny College	1		
					е	. Election Sum	to Date
							\$75.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description		j. Date	k. Amount
	JC1	Credit Card				08/12/2019	\$25.00
3. Contr	ibutor Information		Add	Remove			
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	C	I. Comments	
(includ	le city, state, & zip)		Er	nergy Healer			
Elaine Ro	driguez-Buz						
40 N Orch			C.	Employer's Name/Specific Field	1		
Clayton, N	NC 27527-7037				1		

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

Self Employed

h. Form of Payment

Credit Card

f. Prior

g. Account Code

JC1

i. In-Kind Description

e. Election Sum to Date

j. Date

08/26/2019

\$85.00

\$35.00

Contributions from Individuals	Page	17	of	34	Amendmer	
Use this form to report individual contributions over \$50 or contribution	s under \$	50 if fo	orm (CRO	Yes	✓ No
1205 is not used						

1205 is not used								
1. Commi	ttee Full Name (and F	und if applicable)				2. ID Nu	ımber	
Javiera Ca	aballero para Durham					5CLJ06		
3. Contr	ibutor Information		Add	Remove				
a. Full Na	me, Mailing Address	& Phone	b	Job Title/Profession	d. C	Comments		
(include city, state, & zip)				althy Homes Director				
Lorisa Sei	ihal		1					
2410 Par				Turn level a News (Constitution Field				
Durham, I	NC 27705-3162		1	Employer's Name/Specific Field				
			Rei	investment Partners	e.F	Election Sum	to Date	
						<u> </u>	\$200.00	
					١.		,	
f. Prior	g. Account Code	h. Form of Payment	t	i. In-Kind Description	j.	Date	k. Amount	
	JC1	Credit Card			0	7/24/2019	\$100.00	
3. Contri	ibutor Information		Add	Remove				
a. Full Na	me, Mailing Address	& Phone	b	Job Title/Profession	d. C	Comments		
(includ	e city, state, & zip)		IT manager					
Mary Sus	on Cowell		1					
2904 Legi				Turn level a News (Constitution Field				
Durham, I	NC 27707-1924		c. Employer's Name/Specific Field					
			ETSI			e. Election Sum to Date		
							\$75.00	
f. Prior	g. Account Code	h. Form of Payment	t	i. In-Kind Description	 i.	Date	k. Amount	
					+			
	JC1	Credit Card			0	8/07/2019	\$25.00	
3. Contr	ibutor Information		Add	Remove				
a. Full Na	me, Mailing Address	& Phone	b	Job Title/Profession	d. Comments			
(includ	e city, state, & zip)		atto	orney				
Elizabeth	Simpson		1					
1809 Gler				Employada Nama/Specific Field				
Durham, NC 27701-1323		1	Employer's Name/Specific Field					
			Nat	tional Immigration Project	e. F	Election Sum	to Date	
					e. Election Sum to Date \$1,200.00			
				II.			φ1,200.00 [
f. Prior	g. Account Code	h. Form of Payment	 t	i. In-Kind Description	 j.	Date	k. Amount	

4. Total only this page	\$1,125.00
5. Total of ALL CRO-1210 Pages	\$4,302.00
(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 Yes V No 1205 is not used								
1. Commi	1. Committee Full Name (and Fund if applicable) 2. ID Number							
Javiera Ca	aballero para Durham					5CLJ06		
3. Contr	ibutor Information		Add	Remove				
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d.	Comments		
(includ	e city, state, & zip)		At	torney				
Rochelle	Snarko							
907 Cleve			_	Employer's Name/Specific Field				
Durham, I	NC 27701-2433							
			U č	arolina Farm Stewardship Assn	e.	Election Sum	to Date	
							\$5.00	
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	l	j. Date	k. Amount	
	JC1 In-Kind			Intern stipend	07/01/2019		\$400.00	
	301	III Kiliu		mem superio	`	3770172013	Ψ+00.00	
3. Contr	ibutor Information		Add	Remove				
a. Full Na	me, Mailing Address	& Phone	b. Job Title/Profession			d. Comments		
(includ	e city, state, & zip)		Di	rector				
Natalie Sr	vring							
801 Cleve				Employed Nema/Charifia Field				
Durham, I	NC 27701-2431			Employer's Name/Specific Field				
			וטנ	uke	e.	Election Sum	to Date	
							\$100.00	
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	l	j. Date	k. Amount	
	JC1	Credit Card			Τ.	08/24/2019	\$100.00	
	301	Orcuit Gard			Τ,	JUI 241 20 1 3	ψ100.00	
3. Contr	ibutor Information		Add	Remove				

a. Full Name, Mailing Address & Phone

g. Account Code

(include city, state, & zip)

Durham, NC 27701-2789

JC1

Tim Stallmann 811 Arnette Ave

Apt C

f. Prior

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

b. Job Title/Profession

Research Action Design

i. In-Kind Description

c. Employer's Name/Specific Field

Consultant

h. Form of Payment

Credit Card

d. Comments

j. Date

07/13/2019

e. Election Sum to Date

\$300.00

\$50.00

Contributions from Individuals Use this form to report individual contributions over \$5 1205 is not used	Page <u>19</u> of <u>3</u> of or contributions under \$50 if form CR	<u> </u>	Amendment Yes V No
1. Committee Full Name (and Fund if applicable)			2. ID Number
Javiera Caballero para Durham			5CLJ06
3. Contributor Information	Add Remove		
a. Full Name, Mailing Address & Phone	b. Job Title/Profession	d. Con	nments
(include city, state, & zip)	Consultant		
Tim Stallmann 811 Arnette Ave Apt C	c. Employer's Name/Specific Field		

					\$300.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
	JC1	Credit Card		08/13/2019	\$50.00

Durham, NC 27701-2789

Research Action Design

e. Election Sum to Date

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

Refunds/Reimbursements To the Committee Page 20 of 34 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 par	ra Dui	ham						5CLJ06	1
3. Contributor Info	orma	ition		\dd	Remove				
a. Full Name, Mailin	g Ad	dress & Phone		d. Type	of Committe	e	g.	Commen	ts
(include city, state, & zip)				Cand	Candidate PAC Overpayment for ve			nt for venue rental	
Committee to Elect Ji	illian	lohnson		Refer	Referendum Party				
PO Box 3502	ıllıalı (JOHNSON		e. Level Registered (Specify)				h. Original Expenditure Date	
Durham, NC 27702-3	3502			Federal County:			05	/14/2019	
				State Municipality: i.			i. C	. Original Expenditure Amt	
									\$36.91
b. Job Title/Profession c. Employer's Name/Speci				ific Field f. Purpose j.			j. E	j. Election Cyc Sum To Date	
									\$3,433.86
k. Account Code	I. Fo	orm of Payment	m. In-l	Kind Desc	cription	n. Date	(mm/d	d/yyyy)	o. Amount
JC1	Che	eck				08/27/2	019		\$36.91

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

Other Receipt S	ources
-----------------	--------

				Amendment	
Page	21	of	34	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	5CLJ0	06								
3. Type of Receipt Source (Please use separate CRO-1250 forms for each type of Receipt Source.)										
✓ Interest Contributions from No.	t-for-Profit Organizations		Outside Sources	s of Income						
4. Contributor Information										
a. Full Name, Mailing Address & Phone	b. Not-for-Profit Federal ID	#	d. Comments							
(include city, state, & zip)										
Latino Community Credit Union										
100 W Morgan St Durham, NC 27701-3315	c. Outside Source Explanat	ion								
24, 2 556		-	- Flaction 0	ala Ossas (a Data						
		H	e. Election Cv	\$2.79						
			(111/	·						
f. Account Code a. Form of Payment h. In-	Kind Description	i. Date (i	mm/dd/vvvv)	i. Amount						
JC1 ElectronicPaySystem		07/29/20)19	\$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)	\$1.33
(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 Summarv Page CRO-1100 if Outside Sources of Income)	

Dis	hı	ırs	em	ei	nts

				Amendmei	nt
Page	22	of	34	Yes	✓ No

1. Committee Full Name (and Fund if application	ble)				2.	ID Number			
Javiera Caballero para Durham 5CLJ06									
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)									
✓ Operating Expenses									
4. Payee Information		Add R	emove						
a. Full Name, Mailing Address & Phone		b. Coordinate	ed Committee Name		d. Commen	its			
(include city, state, & zip)									
Capitol Promotions		c. Level Regi	stered (Specify)		ł				
PO Box 231		Federal	County:						
Glenside, PA 19038-0231		State	Municipality:		e. Election	Sum to Date			
						\$2,273.00			
f. Account Code g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	/) j.		k. Required Remarks			
JC1 Debit Card	0		07/30/2019		\$2,273.00	Yard signs			
4. Payee Information		Add R	emove						
a. Full Name, Mailing Address & Phone		b. Coordinate	ed Committee Name		d. Commen	its			
(include city, state, & zip)									
Committee to Elect Jillian Johnson		c. Level Regi	stered (Specify)		1				
PO Box 3502		Federal	County:		1				
Durham, NC 27702-3502		State	Municipality:		e. Election	Sum to Date			
						\$3,470.77			
f. Account Code g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	/) j.	Amount	k. Required Remarks			
JC1 Check	0		07/27/2019		\$283.33	Logo design			
4. Payee Information Add Remove									
a. Full Name, Mailing Address & Phone		b. Coordinate	ed Committee Name		d. Commen	its			
(include city, state, & zip)									
Committee to Elect Jillian Johnson		c. Level Regi	stered (Specify)		ł				
PO Box 3502		Federal	County:						
Durham, NC 27702-3502		State	Municipality:		e. Election	Sum to Date			
						\$3,470.77			
f. Account Code g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	/) j.		k. Required Remarks			
JC1 Check	0		08/17/2019		\$58.33	Pride parade fee			
5. Total only this page						\$2,614.66			
6. Total of ALL CRO-1310 Pages									
(This line goes in line 13a of Detailed Summary	/ Page	CRO-1100 if C	perating Expenses)			\$8,505.36			
(This line goes in line 13b of Detailed Summary	/ Page	CRO-1100 if C	ontrib to Candidates/F	Politi	cal Comm)				
(This line goes in line 13c of Detailed Summary	Page (CRO-1100 if C	oordinated Party Expe	endit	ures)				
7. Purpose Codes (List detailed Expend	diture	code in (h.) a	above)						
A* - Media B* - Printing		C* - Fun	draising	D - 1	To Another C	Candidate			
E - salaries F* - Equipment		G - Politi	cal Party	H* -	Holding Pul	blic Office Expenses			
I - postage J - Penalties		K* - Offi	ce Expenses	Q* -	Donation to	Legal Expense Fund			
O* - Other *Codes require detailed explanation in required remarks field (k)									

- :					
Dis	hu	rse	m	en	ts

Page 23 of 34 Amendment
Ves VNo

1. Committee Full Na	ame (and Fund if applica	ble)				2.	ID Number			
Javiera Caballero pa	Javiera Caballero para Durham 5CLJ06									
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)										
✓ Operating Expenses										
4. Payee Informat	ion		Add Re	emove						
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts			
(include city, state	, & zip)									
Committee to Elect J	illian Johnson		c. Level Reai	stered (Specify)						
PO Box 3502	2500		Federal	County:						
Durham, NC 27702-3	3502		State	Municipality		e. Election	Sum to Date			
							\$3,470.77			
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	y) j.		k. Required Remarks			
JC1	Check	Α		08/17/2019		\$83.33	DCABP advertisement			
4. Payee Informat	ion		Add Re	emove	•					
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts			
(include city, state	, & zip)									
Committee to Elect J	illian Johnson		c. Level Regi	stered (Specify)		ł				
PO Box 3502			Federal	County:						
Durham, NC 27702-3	3502		State	Municipality:		e. Election	Sum to Date			
							\$3,470.77			
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	y) j.	Amount	k. Required Remarks			
JC1	Check	0		08/17/2019		\$99.62	Snacks for filing party (balance)			
4. Payee Information Add Remove										
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts			
(include city, state	, & zip)									
Committee to Elect J	illian Johnson		c. Level Reai	stered (Specify)						
PO Box 3502 Durham, NC 27702-3	2502		Federal	County:						
Dumam, NC 27702-3	5502		State	Municipality		e. Election	Sum to Date			
							\$3,470.77			
f. Account Code	g. Form of Payment	+	rpose Code	i. Date (mm/dd/yyy	y) j.		k. Required Remarks			
JC1	Check	В		08/23/2019		\$40.04	Spanish language palm cards			
5. Total only this	page						\$222.99			
6. Total of ALL CF	RO-1310 Pages									
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$8,505.3							\$8,505.36			
,	13b of Detailed Summary	-				1				
-	13c of Detailed Summary				endit	ures)				
•	(List detailed Expend	liture	• • •	•						
A* - Media	B* - Printing		C* - Fun	•		Γο Another C				
E - salaries	F* - Equipment					_	blic Office Expenses			
I - postage	J - Penalties		K* - Offi	ce Expenses	Q* -	Donation to	Legal Expense Fund			
O* - Other *Codes require detailed explanation in required remarks field (k)										

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Dis	٠hı	irc	am	n	1+0

Page 24 of 34 Amendment Yes VNo

1. Committee Full Na	ame (and Fund if applical	ble)				2.	ID Number			
Javiera Caballero para Durham 5CLJ06										
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)										
✓ Operating Expenses										
4. Payee Informat	ion		Add R	emove						
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts			
(include city, state	, & zip)									
L'tanya Durante			c. Level Reai	stered (Specify)		ł				
1904 Cole Mill Rd			Federal	County:						
Apt 103 Durham, NC 27712-3	3249		State	Municipality	:	e. Election	Sum to Date			
							\$3,500.00			
f. Account Code	g. Form of Payment	-	rpose Code	i. Date (mm/dd/yyy	y) j.		k. Required Remarks			
JC1	Check	E		07/01/2019		\$600.00	Staff payment			
4. Payee Informat	ion		Add R	emove						
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts			
(include city, state	, & zip)									
L'tanya Durante			c Level Regi	stered (Specify)		-				
1904 Cole Mill Rd			Federal	County:		1				
Apt 103 Durham, NC 27712-3	3249		State	Municipality		e. Election	Sum to Date			
Barriam, NO 277 12 0	2240						\$3,500.00			
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	y) j.	Amount	k. Required Remarks			
JC1	Check	E		08/01/2019		\$600.00	Staff payment			
4. Payee Information Add Remove										
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts			
(include city, state,	, & zip)									
Durham County Gove	ernment		c Level Regi	stered (Specify)		1				
120 E Parrish Št			Federal	County:		1				
Durham, NC 27701-0	0104		State	Municipality		e. Election Sum to Date				
							\$221.17			
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	y) j.		k. Required Remarks			
JC1	Check	0		07/05/2019		\$221.17	Candidate filing fee			
5. Total only this							\$1,421.17			
6. Total of ALL CF										
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$8,505.3							\$8,505.36			
,	13b of Detailed Summary	-				1				
_	13c of Detailed Summary				endit	ures)				
•	(List detailed Expend	iiture		•	_	Ta Amatha				
A* - Media	B* - Printing		C* - Fun	-		To Another C				
E - salaries	F* - Equipment			·		_	blic Office Expenses			
I - postage	J - Penalties		K" - UIII	ce Expenses	પ^ -	Donation to	Legal Expense Fund			
O* - Other *Codes require de	tailed explanation in r	equir	ed remarks f	ield (k)						

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Dis	hu	rse	m	en	ts

Page 25 of 34 Amendment
Ves VNo

1. Committee Full Na	me (and Fund if applical	ble)				2.	ID Number		
Javiera Caballero pa	ara Durham					5	5CLJ06		
3. Type of Disbursen	nent (Please use sepai	rate CF	RO-1310 forms	for each type of Di	sbur	sement.)			
✓ Operating Expenses									
4. Payee Informat	ion		Add Re	emove					
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts		
(include city, state,	& zip)								
Durham Short Run S	hirts		c. Level Regi	stered (Specify)		1			
301 E Chapel Hill St			Federal	County:		1			
Durham, NC 27701-3	301		State	Municipality		e. Election	Sum to Date		
							\$120.00		
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	y) j.	Amount	k. Required Remarks		
JC1	Debit Card	0		08/12/2019		\$120.00	T-shirts		
4. Payee Informat	ion		الاطط الله						
				emove		1			
a. Full Name, Mailing			b. Coordinate	ed Committee Name		d. Commen	ts		
(include city, state,	& zip)								
Facebook, Inc.			c. Level Reai	stered (Specify)		1			
1 Hacker Way Menlo Park, CA 9402	5-1456		Federal	County:					
World Falk, 671 0402	.0 1400		State	Municipality		e. Election	Sum to Date		
							\$134.97		
f. Account Code	g. Form of Payment	1	rpose Code	i. Date (mm/dd/yyy	y) j.		k. Required Remarks		
JC1	Debit Card	A		07/11/2019		\$9.97	Digital advertisement		
4. Payee Informat	4. Payee Information Add Remove								
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts		
(include city, state,	& zip)								
Facebook, Inc.			a Laval Basi	stared (Chasiful		-			
1 Hacker Way			c. Level Registered (Specify) Federal County:			1			
Menlo Park, ČA 9402	5-1456		State	Municipality		e. Election	Sum to Date		
					-		\$134.97		
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	y) j.	Amount	k. Required Remarks		
JC1	Debit Card	Α	-	08/22/2019			Digital advertisement		
5. Total only this	page						\$154.97		
6. Total of ALL CR	RO-1310 Pages								
(This line goes in line	13a of Detailed Summary	Page	CRO-1100 if O	perating Expenses)			\$8,505.36		
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$8,505.36 (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)									
, ,	13c of Detailed Summary	-				1			
7. Purpose Codes	(List detailed Expend	liture (code in (h.) a	above)					
A* - Media	B* - Printing		C* - Fun	-	D -	To Another C	andidate		
E - salaries	F* - Equipment				H* -	Holding Pul	blic Office Expenses		
I - postage	J - Penalties			•		=	Legal Expense Fund		
O* - Other							- .		
	tailed explanation in r	equire	ed remarks f	ield (k)					

Dis	hı	ırs	em	ei	nts

				Amendmei	nt
Page	26	of	34	Yes	✓ No

1. Committee Full Na	ame (and Fund if applical	ble)				2.	ID Number		
Javiera Caballero pa	ara Durham					5	5CLJ06		
3. Type of Disburser	3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)								
✓ Operating Expenses									
4. Payee Information Add Remove									
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts		
(include city, state	, & zip)								
Facebook, Inc.			c. Level Reai	stered (Specify)					
1 Hacker Way	05 4450		Federal	County:					
Menlo Park, CA 9402	20-1400		State	Municipality		e. Election	Sum to Date		
		_					\$134.97		
f. Account Code	g. Form of Payment	-	rpose Code	i. Date (mm/dd/yyy	y) j.		k. Required Remarks		
JC1	Debit Card	A		08/25/2019		\$25.00	Digital advertisement		
4. Payee Informat	ion		Add Re	emove					
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts		
(include city, state	, & zip)								
Sally Hodges-Copple			c. Level Reai	stered (Specify)					
501 Willard St			Federal	County:					
Apt 238 Durham, NC 27701-3	3287		State Municipality: e. Election		e. Election	Sum to Date			
							\$1,232.98		
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	y) j.	Amount	k. Required Remarks		
JC1	Check	E		07/27/2019		\$250.00	Staff payment		
4. Payee Information Add Remove									
a. Full Name, Mailing	g Address & Phone		b. Coordinated Committee Name d. Cor			d. Commen	ts		
(include city, state	, & zip)								
Sally Hodges-Copple			c. Level Registered (Specify)			-			
501 Willard St			Federal County:						
Apt 238 Durham, NC 27701-3	3287		State	Municipality	:	e. Election	e. Election Sum to Date		
,							\$1,232.98		
f. Account Code	g. Form of Payment		rpose Code	i. Date (mm/dd/yyy	y) j.		k. Required Remarks		
JC1	Check	E		08/23/2019		\$250.00	Staff payment		
5. Total only this	page						\$525.00		
6. Total of ALL CF	RO-1310 Pages								
(This line goes in line	13a of Detailed Summary	Page	CRO-1100 if O	perating Expenses)			\$8,505.36		
(This line goes in line	13b of Detailed Summary	Page	CRO-1100 if C	ontrib to Candidates/F	Politi	cal Comm)			
(This line goes in line	13c of Detailed Summary	Page	CRO-1100 if C	oordinated Party Expe	endit	ures)			
7. Purpose Codes	(List detailed Expend	liture	code in (h.) a	above)					
A* - Media	B* - Printing		C* - Fun	draising	D - 1	Γο Another C	andidate		
E - salaries	F* - Equipment		G - Politi	cal Party	H* -	Holding Pul	blic Office Expenses		
I - postage	J - Penalties		K* - Offi	ce Expenses	Q* -	Donation to	Legal Expense Fund		
O* - Other *Codes require de	tailed explanation in r	equir	ed remarks f	ield (k)					
				()					

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Dis	٠hı	irc	am	n	1+0

				Amendme	nt
Page	27	of	34	Yes	✓ No

	inated party expenditure								
1. Committee Full Na	ame (and Fund if applica	ble)				2.	2. ID Number		
Javiera Caballero pa							5CLJ06		
	nent (Please use sepa			_					
✓ Operating Expens	es Contributions	to Car	didates/Politica	al Committees	Cc	ordinated Pa	arty Expenditures		
4. Payee Informat	ion		Add R	emove					
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name	•	d. Commer	nts		
(include city, state,	, & zip)								
Latino Community Cr	edit Union		c. Level Regi	stered (Specify)		1			
100 W Morgan St			Federal	County:		1			
Durham, NC 27701-3	3315		State	Municipality	/ :	e. Election	Sum to Date		
							\$55.00		
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	/y) j.	Amount	k. Required Remarks		
JC1	Draft	К		07/29/2019		\$8.00	Account maintenance fee		
4. Payee Informat	ion		Add R	emove					
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name	<u> </u>	d. Commer	nts		
(include city, state	, & zip)								
	• • • • • • • • • • • • • • • • • • • •		<u> </u>						
NGP VAN PO Box 392264				stered (Specify)		1			
Pittsburgh, PA 15251	-9264		Federal	County:		e. Election Sum to Date			
			State	Municipality	/:	e. Election	\$1,050.00		
f. Account Code	g. Form of Payment	h Du	rpose Code	i. Date (mm/dd/yyy	ΛΛ i	Amount	k. Required Remarks		
JC1	Draft	K	ipose oode	07/03/2019	, A) 1-	\$150.00	-		
301	Diait			0170072010		ψ.σσ.σσ	Database monthly lee		
4. Payee Informat	ion		Add	emove					
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name	<u> </u>	d. Commer	nts		
(include city, state	, & zip)								
NGP VAN				-11 (016-)					
PO Box 392264				stered (Specify)		1			
Pittsburgh, PA 15251	-9264		Federal State	County: Municipality	,.	e Flection	Sum to Date		
			State	iviuriicipality	<i>'</i> .	C. LICCHOII	\$1,050.00		
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	/v) i.	<u> </u> Amount	k. Required Remarks		
JC1	Draft	K	. pood domo	08/02/2019	77 3-		Database monthly fee		
001	Drun.	'`					Database menuny rec		
5. Total only this	page						\$308.00		
6. Total of ALL CF							φοσο.σσ		
	· ·	. D	CDC 4400 # C				\$0.505.00		
	13a of Detailed Summary	_		·	D - 1:::		\$8,505.36		
, -	13b of Detailed Summary	-				· · · · · · · · · · · · · · · · · · ·			
	13c of Detailed Summary				enait	ures)			
•	(List detailed Expend	iture		•		.	N 11 1		
A* - Media	B* - Printing		C* - Fun	•		Γο Another C			
E - salaries	F* - Equipment			cal Party		=	blic Office Expenses		
I - postage	J - Penalties		K* - Offi	ce Expenses	Q* -	Donation to	Legal Expense Fund		
O* - Other									
*Codes require de	tailed explanation in I	require	ed remarks f	ield (k)					

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Dis	hu	rse	m	en	ts

Page 28 of 34 Amendment
Ves VNo

Javier Caballero para Durbam SCLI06	1. Committee Full Na	me (and Fund if applical	ble)				2.	ID Number		
Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures	Javiera Caballero pa	ara Durham					5	5CLJ06		
4. Payee Information	3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)									
a. Full Name, Mailing Address & Phone (include city, state, & zip) North Carolina Democratic Party 220 Hillsborough St Attr. Meredith Cuomo Raleigh, N.C. 27060-1724 Level Registered (Specify) State Municipality:	✓ Operating Expenses									
Continue city, state, & zip) County	4. Payee Informati	4. Payee Information Add Remove								
North Carolina Democratic Party 220 Hillsborough St Attr. Meredith Cumo Raleigh, NC 27603-1724 Federal	a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts		
Pederal County: Election Sum to Date S750.00	(include city, state,	& zip)								
Pederal County: Election Sum to Date S750.00	North Carolina Demo	cratic Party		c. Level Reai	stered (Specify)		1			
Raleigh, NC 27603-1724 State				Federal	County:					
A. Account Code G. Form of Payment D. Purpose Code D. Date (mm/dd/yyyy) D. Amount R. Required Remarks D. Coordinated Committee Name D. Coordinated Coordinated Coordinated Name D. Coordinated Coordinated Coordinated Coordinated Name D.				State	Municipality	:	e. Election	Sum to Date		
4. Payee Information a. Full Name, Mailing Address & Phone (include city, state, & zip) North Carolina Democratic Party 220 Hillisborough St Attr. Merediff Coumo Raleigh, NC 27603-1724 Federal County: State Municipality: State Municipality: Account Code G. Form of Payment D. Coordinated Committee Name (include city, state, & zip) Add Remove 4. Payee Information Add Remove 5750.00 6. Account Code G. Form of Payment D. Purpose Code D. Date (mm/dd/yyyy) J. Amount Scottsfale, Az 85257-3770 Account Code G. Form of Payment D. Coordinated Committee Name County: State Municipality: State Municipality: C. Level Registered (Specify) Scottsfale, Az 85257-3770 C. Level Registered (Specify) State Municipality: State Municipality: State Municipality: C. Level Registered (Specify) State Municipality: State Municipality: C. Level Registered (Specify) State Municipality: State Municipality: C. Level Registered (Specify) State Municipality: State Municipality: C. Level Registered (Specify) State Municipality: State Municipality: C. Level Registered (Specify) State Municipality: C. Leve								· ·		
4. Payee Information a. Full Name, Mailing Address & Phone (include city, state, & zip) North Carolina Democratic Party 220 Hillsborough St Attr.: Meredith Cuomo Raleigh, NC 27603-1724 Pederal			h. Pu	rpose Code		y) j.		-		
a. Full Name, Mailing Address & Phone (include city, state, & zip) North Carolina Democratic Party 220 Hillsborough St Attn: Meredith Cuomo Raleigh, NC 27603-1724 Check Chedial Check Check Check Check Check Check Check Check Che	JC1	Check	0		07/19/2019		\$500.00	Voter/field database		
Cinclude city, state, & zip) North Carolina Democratic Party 220 Hillisborough St Attn: Meredith Cuomo Raleigh, NC 27603-1724 G. Level Registered (Snecifv) State	4. Payee Informati	ion		Add R	emove					
School Comments Country Country Check O Os/05/2019 Section Sum to Date Section	a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts		
Federal County: Election Sum to Date S750.00	(include city, state,	& zip)								
Federal County: Election Sum to Date S750.00	North Carolina Demo	cratic Party		c. Level Regi	stered (Specify)		1			
Raleigh, NC 27603-1724 State	220 Hillsborough St	•		l —			1			
Sy50.00 Sy50				State	Municipality	:	e. Election	Sum to Date		
4. Payee Information a. Full Name, Mailing Address & Phone (include city, state, & zip) Paragon Payment Solutions 1505 N Hayden Rd Ste 110 Scottsdale, AZ 85257-3770 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 (This line goes in line 13a 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 Contrib to Candidates/Political Comm) (This line goes in line 13c 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 Contrib to Candidates/Political Comm) (This line goes in line 13c 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 Contrib to Candidates/Political Comm) (This line goes in line 13c 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 Contrib to Candidate 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 Q* - Donation to Legal Expense Fund O* - Other	1 taloign, 110 27 000 1							\$750.00		
4. Payee Information a. Full Name, Mailing Address & Phone (include city, state, & zip) Paragon Payment Solutions 1505 N Hayden Rd Ste 110 Scottsdale, AZ 85257-3770 f. Account Code JDC1 Draft D	f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	y) j.	Amount	k. Required Remarks		
a. Full Name, Mailing Address & Phone (include city, state, & zip) Paragon Payment Solutions 1505 N Hayden Rd Stee 110 Scottsdale, AZ 85257-3770 C. Level Redistered (Specify) Federal County: State 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 (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13c 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	JC1	Check	0		08/05/2019		\$250.00	Voter/field database		
(include city, state, & zip) Paragon Payment Solutions 1505 N Hayden Rd Ste 110 Scottsdale, AZ 85257-3770 State	4. Payee Informati	4. Payee Information Add Remove								
Paragon Payment Solutions 1505 N Hayden Rd Ste 110 Scottsdale, AZ 85257-3770 Federal	a. Full Name, Mailing	g Address & Phone		b. Coordinated Committee Name d. Comm			d. Commen	ts		
Federal County: e. Election Sum to Date \$960.27	(include city, state,	& zip)								
Tederal County: State Municipality: E. Election Sum to Date Sp60.27	Paragon Payment So	lutions		c. Level Registered (Specify)			ł			
Scottsdale, AZ 85257-3770 State 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 (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$8,505.36 (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	1505 N Hayden Rd									
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 (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$8,505.36 (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		'-3770		State	Municipality		e. Election	Election Sum to Date		
5. Total only this page 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) 7. Purpose Codes (List detailed Expenditure code in (h.) above) A*- Media B*- Printing C*- Fundraising D - To Another Candidate E - salaries F*- Equipment G - Political Party H*- Holding Public Office Expenses I - postage J - Penalties K*- Office Expenses Q*- Donation to Legal Expense Fund O*- Other							\$960.27			
5. Total only this page \$991.89 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$8,505.36 (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		g. Form of Payment	h. Pu	rpose Code	, , , , , , , , , , , , , , , , , , , ,	y) j.		•		
6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) 7. Purpose Codes (List detailed Expenditure code in (h.) above) A* - Media B* - Printing C* - Fundraising D - To Another Candidate E - salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses I - postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund O* - Other	JC1	Draft	K		07/01/2019		\$241.89	Credit card processing fee		
(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	5. Total only this	page						\$991.89		
(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	6. Total of ALL CR	RO-1310 Pages								
(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	(This line goes in line	13a of Detailed Summary	Page	CRO-1100 if C	perating Expenses)			\$8,505.36		
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	(This line goes in line	13b of Detailed Summary	Page	CRO-1100 if C	ontrib to Candidates/F	Politi	cal Comm)			
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	(This line goes in line	13c of Detailed Summary	Page	CRO-1100 if C	oordinated Party Expe	endit	ures)			
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	7. Purpose Codes	(List detailed Expend	liture	code in (h.) a	above)					
I - postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund O* - Other	A* - Media	B* - Printing		C* - Fun	draising	D - 1	To Another C	andidate		
O* - Other	E - salaries	F* - Equipment		G - Politi	cal Party	Н* -	Holding Pul	blic Office Expenses		
	I - postage	J - Penalties		K* - Offi	ce Expenses	Q* -	Donation to	Legal Expense Fund		
*Codes require detailed explanation in required remarks field (k)		tailed explanation in r	equir	ed remarks f	ield (k)					

- :					
Dis	hu	rse	m	en	ts

Page 29 of 34 Amendment
Ves VNo

1. Committee Full Na	ame (and Fund if applical	ble)				2.	ID Number		
Javiera Caballero pa	ara Durham					5	5CLJ06		
3. Type of Disburser	3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)								
Operating Expens	✓ Operating Expenses								
4. Payee Informat	ion		Add Re	emove					
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts		
(include city, state	, & zip)								
Paragon Payment So	lutions		c. Level Reai	stered (Specify)					
1505 N Hayden Rd			Federal	County:					
Ste 110 Scottsdale, AZ 85257	7-3770		State	Municipality	:	e. Election	Sum to Date		
·							\$960.27		
f. Account Code	g. Form of Payment	-	rpose Code	i. Date (mm/dd/yyy	y) j.		k. Required Remarks		
JC1	Draft	K		08/02/2019		\$222.68	Credit card processing fee		
4. Payee Informat	ion		Add Re	emove					
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts		
(include city, state	, & zip)								
Rochelle Sparko			c. Level Regi	stered (Specify)		-			
907 Cleveland St			Federal	County:		1			
Durham, NC 27701-2	2433		State	Municipality	:	e. Election	Sum to Date		
							\$3,400.00		
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	y) j.	Amount	k. Required Remarks		
JC1	Check	E		07/01/2019		\$1,000.00	Staff payment		
4. Payee Information Add Remove									
a. Full Name, Mailing	g Address & Phone		b. Coordinate	b. Coordinated Committee Name d. Comr			ts		
(include city, state	, & zip)								
Rochelle Sparko			c. Level Registered (Specify)			-			
907 Cleveland St			Federal County:						
Durham, NC 27701-2	2433		State	Municipality	:	e. Election	. Election Sum to Date		
							\$3,400.00		
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	y) j.		k. Required Remarks		
JC1	Check	E		08/12/2019		\$1,000.00	Staff payment		
5. Total only this	200						\$2,222.68		
6. Total of ALL CF							ΨΖ,ΖΖΖ.00		
	13a of Detailed Summary	Page	CPO-1100 if O	nerating Evnences)			\$8,505.36		
· -	13b of Detailed Summary	_			Politi	cal Comm)	φο,ουσ.ου		
,	13c of Detailed Summary	-				1			
_	(List detailed Expend					,			
A* - Media	B* - Printing		C* - Fun	•	D - 7	Γο Another C	andidate		
E - salaries	F* - Equipment			•			blic Office Expenses		
I - postage	J - Penalties			•		_	Legal Expense Fund		
O* - Other							5 1		
	tailed explanation in r	equir	ed remarks f	ield (k)					

D	ie	hı	ıre	em	۵r	ıte
u	15	ωı	112	em	eг	11.5

Page 30 of 34 Amendment
Ves VNo

1. Committee Full Na	ame (and Fund if applical	ble)				2.	ID Number		
Javiera Caballero pa	ara Durham					5	5CLJ06		
3. Type of Disburser	3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)								
✓ Operating Expens	✓ Operating Expenses								
4. Payee Information Add Remove									
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts		
(include city, state	, & zip)								
Squarespace, Inc.			c. Level Reai	stered (Specify)		ł			
225 Varick St			Federal	County:					
FI 12 New York, NY 10014	-4383		State	Municipality	:	e. Election	Sum to Date		
·							\$166.00		
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	y) j.		k. Required Remarks		
JC1	Draft	K		07/03/2019		\$6.00	Website/domain		
4. Payee Informat	ion		Add Re	emove					
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts		
(include city, state	, & zip)								
Squarespace, Inc.			c. Level Regi	stered (Specify)		1			
225 Varick St			Federal	County:		1			
FI 12 New York, NY 10014	-4383		State	Municipality			on Sum to Date		
	1000						\$166.00		
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	y) j.	Amount	k. Required Remarks		
JC1	Debit Card	K		07/21/2019		\$16.00	Website/domain		
4. Payee Information Add Remove									
a. Full Name, Mailing	g Address & Phone		b. Coordinated Committee Name d. Cor			d. Commen	ts		
(include city, state	, & zip)								
Squarespace, Inc.			c. Level Registered (Specify)			ł			
225 Varick St			Federal County:						
FI 12 New York, NY 10014	-4383		State	Municipality		e. Election	e. Election Sum to Date		
							\$166.00		
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	y) j.		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 CF	RO-1310 Pages								
(This line goes in line	13a of Detailed Summary	Page	CRO-1100 if O	perating Expenses)			\$8,505.36		
(This line goes in line	13b of Detailed Summary	Page	CRO-1100 if C	ontrib to Candidates/F	Politi	cal Comm)			
(This line goes in line	13c of Detailed Summary	Page	CRO-1100 if C	oordinated Party Expe	endit	ures)			
7. Purpose Codes	(List detailed Expend	liture	code in (h.) a	above)					
A* - Media	B* - Printing		C* - Fun	draising	D - 1	To Another C	Candidate		
E - salaries	F* - Equipment		G - Politi	cal Party	H* -	Holding Pul	blic Office Expenses		
I - postage	J - Penalties		K* - Offi	ce Expenses	Q* -	Donation to	Legal Expense Fund		
O* - Other *Codes require de	tailed explanation in r	eguir	ed remarks f	ield (k)					
				()					

					Amendment	
Disbursements	Page	31	of	34	Yes	✓ No

committees and coord	inated party expenditures							
Committee Full Name (and Fund if applicable)						2. ID Number		
Javiera Caballero para Durham						5CLJ06		
3. Type of Disbursen	3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
✓ Operating Expenses						Party Expenditures		
4. Payee Information Add Remove								
a. Full Name, Mailing Address & Phone			b. Coordinated Committee Name d. Comm			ients		
(include city, state,	& zip)							
Squarespace, Inc.			c. Level Reai	stered (Specify)				
225 Varick St			Federal	County:				
FI 12 New York, NY 10014	-4383		State Municipality: e. Election		on Sum to Date			
,						\$166.00		
f. Account Code	g. Form of Payment	h. Pui	rpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
JC1	Debit Card	K	·	08/21/2019	\$16.0	00 Website/domain		

5. Total only this page				\$16.00
6. Total of ALL CRO-13	10 Pages			
(This line goes in line 13a o	f Detailed Summary Page CRC	0-1100 if Operating Expenses)		\$8,505.36
(This line goes in line 13b o	Political Comm)			
(This line goes in line 13c of	f Detailed Summary Page CRO	0-1100 if Coordinated Party Exp	enditures)	
7. Purpose Codes (List	detailed Expenditure cod	e in (h.) above)		
A* - Media	B* - Printing	C* - Fundraising	D - To Another	Candidate
E - salaries	F* - Equipment	G - Political Party	H* - Holding P	ublic Office Expenses
I - postage	J - Penalties	K* - Office Expenses	Q* - Donation	to Legal Expense Fund
O* - Other				
*Codes require detailed	l explanation in required re	emarks field (k)		

Aggregated Non-Media Expenditures

Page 32 of 34 Amendment Yes V No

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

Optional form used to report NC Non-Media Expenditures of \$50 of less.									
1. Committee Full Name (and Fund if applicable) 2. ID Number									
Javiera Caballero para Durham 5CLJ06									
3. Payee Info	3. Payee Information								
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date	f. Amount	g. Required Remarks			
Add JC1 Debit Card O 07/05/2019 \$29.68 Filing event lunch									

4. Total only thi	s Page				\$29.68
5. Total of ALL	CRO-1315 Pages				\$29.68
(This line must be on	line 14 of Detailed Summary P			,	
6. Purpose Codes	(List detailed expenditure	code in (d.) above)		'	
	B* - Printing	C*- Fundraising	D - To Anoth	er Candidate	
E - salaries	F* - Equipment	G - Political Party	H* - Holding	Public Office Expenses	
I - postage	J - Penalties	K* - Office Expenses	Q* - Donatio	n to Legal Expense Fund	
O* - Other					
*Codes require de	etailed explanation in requi	ired remarks field (g)			

Refunds/Reimbursements From the Committee Page 33 of 34 Use this form to report refunds/reimbursements, including contributions returned to the contributor Amendment Yes VNo							
1. Committee Full Nam	:	2. ID Number					
Javiera Caballero para Durham						5CLJ06	
3. Payee Information	n 🔲 A	.dd	Remove				
a. Full Name, Mailing Address & Phone d. Type of Committee h. Orig						inal Receipt Date	
(include city, state, & zip)			Candidate PAC			07/01/2019	
Pooballa Sparka		Refer	endum Pai	rty			
Rochelle Sparko 907 Cleveland St		e. Level Registered			i. Original Receipt Amt		
Durham, NC 27701-243	3	Federal County:				\$400.00	
		State	State Municipality:				
		f. Purpose Code			j. Election Sum To Date		
		P				\$5.00	
b. Job Title/Profession	c. Employer's Name/Spec	ific	g. Comments		k. Acco	unt Code	
Attorney	Carolina Farm Stewardship	Assn			JC1		
I. Form of Payment	m. Required Remarks			n. Date (m	m/dd/yyy	y) o. Amount	
Check	Reimbursement: intern stipend	b		07/10/2019		\$400.00	

4. Total only this page	\$400.00		
5. Total of ALL CRO-1320 Pages	\$400.00		
(This line must be on line 16 of Detailed			
6. Purpose Codes (List detailed			
L - Returned to Contributor	M - Overpayment for Service	N - Exceeded	d Contribution Limit
P* - Reimbursement of In-Kind			
*Codes require detailed explana			

			- 4		4 -	
In-	Kin	()	nnt	rıhı	utio	ns
		u •	OII.		4	

In-Kind Contributions	Page _	34	of _	34	Amendment ☐ Yes ✓ No
Use this form to report non-monetary contributions, donations, goods of Use CRO-1215 if In-Kind Contributions were or will be refunded within	provid	ded 1	to the	committee or fund.	
1. Committee Full Name (and Fund if applicable)					2. ID Number
Committee Full Name (and Fund if applicable) Javiera Caballero para Durham					2. ID Number 5CLJ06

1. Committee Full Name (and Fund if applicable)			2. ID Number
Javiera Caballero para Durham	5CLJ06		
3. Contributor Information	Add R	emove	
a. Full Name, Mailing Address, & Phone (include city, state & zip)	b. Type of co	ntributor	c. Comments
Rochelle Sparko 907 Cleveland St Durham, NC 27701-2433	☐ V Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendu ☐ Other Rec	m eipt 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