

Disclosure Report Cover

Amendment
 Yes No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
 Do not use this form to update information

1. Committee Information	
a. Full Name ELECT Anita Daniels	c. ID Number ACLOAU
b. Mailing Address (include City, State and Zip Code) P.O. Box 51068 Durham, NC 27717-1068	d. Date Filed 04/30/2012
IN-PERSON MAIL <i>RK</i> APR 30 2012 APR 30 2012 <i>RK</i> DURHAM BOE DURHAM BOE <i>RK</i>	
e. Phone Number 919-564-9360	

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2012	02/16/2012	04/21/2012	Anita Daniels

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 checked="" type="checkbox"/> Municipal	<input type="checkbox"/> State/County	<input type="checkbox"/> Referendum
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input checked="" type="checkbox"/> First	<input type="checkbox"/> Final
		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	
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				
1				

11. Account Information		11. Account Information	
a. Financial Institution Full Name SunTrust	b. Purpose Campaign	a. Financial Institution Full Name	b. Purpose
c. Account Code Checking	d. Period Begin Balance \$ 40.00	c. Account Code	d. Period Begin Balance \$

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

Anita A. Daniels _____ 04/30/2012
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: 4/30/2012 Employee: Rose W. Wolf

Date Postmarked: _____ Employee: _____

Date Scanned: _____ Employee: _____

Date Data Entered: _____ Employee: _____

Delivery Method
 Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed
 Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.
 You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

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	
Elect Anita Daniels		Candidate Committee		ACLOAU	
Start of Election Cycle: January 1,		2012		Total this Reporting Period	
4) Cash on Hand at Start		\$ 40.00		\$	
5) Aggregated Contributions from Individuals		(CRO-1205)		\$ 545	
6) Contributions from Individuals		(CRO-1210)		\$ 5,240.00	
7) Contributions from Political Party Committees		(CRO-1220)		\$ 0	
8) Contributions from Other Political Committees		(CRO-1230)		\$ 0	
9) Loan Proceeds		(CRO-1410)		\$ 3,394.40	
10) Refunds/Reimbursements To the Committee		(CRO-1240)		\$ 0	
11) Other Receipt Sources					
11a) Interest on Bank Accounts		(CRO-1250)		\$ 0	
11b) Contributions from Not-for-Profit Organizations		(CRO-1250)		\$ 0	
11c) Outside Sources of Income		(CRO-1250)		\$ 0	
11d) Legal Expense Fund – Other Sources		(CRO-1270)		\$ 0	
11 e) Exempt Purchase Price Sales		(CRO-1265)		\$ 0	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)				\$ 9,179.00	
13) Disbursements					
13a) Operating Expenditures		(CRO-1310)		\$ 6,905.45	
13b) Contributions to Candidates/Political Committees		(CRO-1310)		\$	
13c) Coordinated Party Expenditures		(CRO-1310)		\$	
14) Aggregated Non-Media Expenditures		(CRO-1315)		\$	
15) Loan Repayments		(CRO-1420)		\$	
16) Refunds/Reimbursements From the Committee		(CRO-1320)		\$	
17) In-Kind Contributions		(CRO-1510)		\$ 360.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)				\$	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)				\$	
20) Non-Monetary Gifts Given to Other Committees		(CRO-1330)		\$	
21) Outstanding Loans (incl. ones from other campaigns)		(CRO-1430)		\$ 3,394.40	
22) Debts and Obligations owed By the Committee		(CRO-1610)		\$	
23) Debts and Obligations owed To the Committee		(CRO-1620)		\$	
24) Account Transfers Within the Committee		(CRO-1720)		\$	
25) Administrative Support		(CRO-1710)		\$	
26) Forgiven Loans		(CRO-1440)		\$	
27) 48-Hour Notice Reports Sum		(CRO-2200)		\$	
28) Contributions to be Refunded		(CRO-1215)		\$	

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Elect Anita Daniels					ACLOAV	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Tervie Reid Payne 216 Continental Drive Durham, NC 27712						
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>		Check		03.05.2012		\$ 50.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Sandra L. White - Olden 19 Quail Ridge Road Durham, NC 27705			Professor			
			c. Employer's Name/Specific Field			
			NCCU			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>		Check		03.13.2012		\$ 100.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Logan Craddy 219 Dacian Avenue Durham, NC 27701			MD			
			c. Employer's Name/Specific Field			
			Logan Craddy LLC			
					e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>		Money Order		03.14.2012		\$ 200.00
<input type="checkbox"/>			\$50.00	04.21.2012		\$ 50.00
<input type="checkbox"/>						\$
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages					\$ 5,240.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Elect Anita Daniels					ACLOAU	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Committee to Elect Glenn York 215 W. Horton Street Zebulon, NC			Retired			
			c. Employer's Name/Specific Field			
			Retired			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>		check		03.13.2012	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Jacqueline Elaine Brown 549 Darby Glen Lane Durham, NC 27713			CEO			
			c. Employer's Name/Specific Field			
			DERC			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		03.14.2012	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Dr. Bernadette Watts 1227 Seaton Road, # T-57 Durham, NC 27713			Retired			
			c. Employer's Name/Specific Field			
			Retired			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Check		03.16.2012	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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)					\$ 5,240.00	

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Elect Anita Daniels					ACLOAU	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Donna Atkinson 10106 Elm Crest Drive Richmond, VA 23236			Hardware Technician			
			c. Employer's Name/Specific Field			
			Authentix			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		03-15-2012	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Michelle Stanback 4011 Crown Hill Drive Durham, NC 27707			Real Estate Agent			
			c. Employer's Name/Specific Field			
			Prudential			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Check		03-17-2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Nellie F. Riley 1118 Huntsman Drive Durham, NC 27713			HR Manager			
			c. Employer's Name/Specific Field			
			State Employee Office of State Personnel			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		03-16-2012	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 200.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)					\$ 5,240.00	

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)						2. ID Number
Elect Anita Daniels						ACLOAU
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
R. P. Edmonds 524 Guy Walker Way Durham, NC 27705			Retired			
			c. Employer's Name/Specific Field			
			Retired		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		03.19.2012	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Peter L. Baker 349 Woodhurst Lane Foxboro, NC 27573			Pastor			
			c. Employer's Name/Specific Field			
			Reformation Church		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		03.18.2012	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Cindy Y. Edwards 1612 Hemlock Hill Dr. Durham, NC 27703			Executive			
			c. Employer's Name/Specific Field			
			IBM		e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		03.19.2012	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 300.00	
5. Total of ALL CRO-1210 Pages					\$ 5,240.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Elect Anita Daniels					ACLOAU	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Lynn Henderson Harris 4401 Highgate Drive Durham, NC 27713			Manager, Diversity Initiative			
			c. Employer's Name/Specific Field			
			Glaxo Smith Kline			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>		check		03.20.2012		\$ 25.00
<input type="checkbox"/>		check		04.13.2012		\$ 25.00
<input type="checkbox"/>						\$
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Elaine Hart-Brothers 4207 Champaign Drive Durham, NC 27707			MD			
			c. Employer's Name/Specific Field			
			Metropolitan Medical Group			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>		check		03.27.2012		\$ 100.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Dr. Ida Daniel Dark P.O. Box 11058 Durham, NC 27709			Retired			
			c. Employer's Name/Specific Field			
			Retired			
					e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>		check		03.20.2012		\$ 100.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 250.00	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					\$ 5,240.00	

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Elect Anita Daniels					ACLOAV	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Dr. Daphne Wiggins 304 Rippling Stream Road Durham, NC 27704			Associate Pastor			
			c. Employer's Name/Specific Field			
			Union Baptist Church		e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		03.26.2012	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Desiree T. Palmer 2804 Tavistock Drive Durham, NC 27712			Dentist			
			c. Employer's Name/Specific Field			
			Desiree Palmer, DDS		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		03.23.2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Michael J. Palmer 2804 Tavistock Drive Durham, NC 27712			Self Help			
			c. 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 (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		03.23.2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 5,240.00	

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Elect Anita Daniels					ACLOAV	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
John L. Atkins, III P.O. Box 12037 RTP, NC 27709			Principal			
			c. Employer's Name/Specific Field			
			O'Brien Atkins			
					e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		03.29.2012	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Dr. Lizzie J. Hawell 3512 Old Chapel Hill Rd Durham, NC 27707			MD			
			c. Employer's Name/Specific Field			
			Practice			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		03.22.2012	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
James A. Davis 602 Walnut Street Wilson, NC 27893			Pastor			
			c. Employer's Name/Specific Field			
			St. Luke Church			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		03.29.2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages					\$ 5,240.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Elect Anita Daniels				ACLOAU	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Susan L. Hester 446 Vallemmede Durham, NC 27713		Chief of Staff			
		c. Employer's Name/Specific Field			
		NCCU			
				e. Election Sum to Date	
				\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		check		03.31.2012	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
R. Edward Stewart 314 E. Alton Street Durham, NC 27707		CEO			
		c. Employer's Name/Specific Field			
		UDI			
				e. Election Sum to Date	
				\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		check		04.01.2012	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Kenneth R. Hammond 211 November Drive Durham, NC 27712		Senior Pastor			
		c. Employer's Name/Specific Field			
		Union Baptist Church			
				e. Election Sum to Date	
				\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		check		04.02.2012	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page				\$ 300.00	
5. Total of ALL CRO-1210 Pages				\$ 5,240.00	
<small>(This line must be on line 5 of Detailed Summary Page CRO-1100)</small>					

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Elect Anita Daniels					ACLOAN	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Carolyn I. Thornton 1304 McLaurin Avenue Durham, NC 27707			Retired			
			c. Employer's Name/Specific Field			
			Retired		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		04.02.2012	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Helen A. Daniels 503 King Drive Goldsboro, NC 27530			Retired			
			c. Employer's Name/Specific Field			
			Retired		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		04.04.2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Sandra V. Wiggins 4524 Newby Drive, Apt J-3 Durham, NC 27704			Finance Analyst			
			c. Employer's Name/Specific Field			
			UNC-Linberger Cancer Center		e. Election Sum to Date	
					\$ 65.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		04.05.2012	\$ 65.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 215.00	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 5 of Detailed Summary Page CRO-1100)</small>					\$ 5,240.00	

Contributions from Individuals

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

1. Committee Full Name and Fund (if applicable)						2. ID Number
Elect Anita Daniels						ACLOAV
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Ava V. Hinton 312 E. Alton Street Durham, NC 27707			Budget Services Manager			
			c. Employer's Name/Specific Field			
			City of Durham			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		04.09.2012	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Lannie Royster Willie P.O. Box 51193 Durham, NC 27717			Retired			
			c. Employer's Name/Specific Field			
			Retired			
					e. Election Sum to Date	
					\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		04.10.2012	\$ 1,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Bryan D. Lewis 115 Wenonah Way Durham, NC 27713 919.451.6157			PA-C			
			c. Employer's Name/Specific Field			
			Freedom House Recovery Center			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		cash		03.30.2012	\$ 50.00	
<input type="checkbox"/>		cash		04.21.2012	\$ 50.00	
<input type="checkbox"/>					\$	
4. Total only this Page						\$ 1,150.00
5. Total of ALL CRO-1210 Pages						\$ 5,240.00
<i>(This line must be on top of Detailed Summary Page CRO-1106)</i>						

Contributions from Individuals

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

1. Committed Full Name (and Fund if applicable)						2. ID Number
Elect Anita Daniels						ACLOAU
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Susan L. Dowd 4021 Bella Park Trail, Apt. 418 Raleigh, NC 27613			Qualified Professional			
			c. Employer's Name/Specific Field			
			Freedom House Recovery Center		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		04.21.2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Madesa L. Tucker 2508 Wedgedale Avenue Durham, NC 27703			OWNER			
			c. Employer's Name/Specific Field			
			Tucker Solutions		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		04.15.2012	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Pamela M. Rich 135 Faribault Lane, Box 4 Hillsborough, NC 27278			Manager			
			c. Employer's Name/Specific Field			
			ESC - Office, Chapel Hill		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		04.21.2012	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 200.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on back of Detailed Summary Page CRO-1190)</i>					\$ 5,240.00	

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Elect Anita Daniels					ACLOAU	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
James R. Osborn 3932 Westchester Road Durham, NC 27707			Director of Provider Operations			
			c. Employer's Name/Specific Field			
			The Durham Center			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		04. 21. 2012	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Faye Tate-Williams 412 Old Buggy Trail Hillsborough, NC 27278			RN-Team Leader			
			c. Employer's Name/Specific Field			
			VA Hospital			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		04. 21. 2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Gloria G. Quick 1326 Slmira Avenue Durham, NC 27707			Speech Therapist			
			c. Employer's Name/Specific Field			
			Quick Communications			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		04. 21. 2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 250.00	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					\$ 5,240.00	

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Elect Anita Daniels					ACLOAU	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Micheline R. Matson 25 Copper Hill Court Durham, NC 27713			PhD Consultant			
			c. Employer's Name/Specific Field			
			Self-Employed		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		04.26.2012	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Rosiland M. Wallace 112 Masondale Avenue Durham, NC 27707			Retired			
			c. Employer's Name/Specific Field			
			Retired		e. Election Sum to Date	
					\$ 75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		04.25.2012	\$ 75.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Kyska Thompson 2513 Coleman Loop Road Hillsborough, NC 27278			Salon Owner			
			c. Employer's Name/Specific Field			
			Diva Styles		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Cash		04.26.2012	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 175.00	
5. Total of ALL CRO-1210 Pages					\$ 5,240.00	
<small>(This line must be on the 5 Detailed Summary Page CRO-1100)</small>						

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)					2. ID Number:	
Elect Anita Daniels					ACLOAV	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Avis A. Artis P.O. Box 15441 Durham, NC 27704			MD			
			c. Employer's Name/Specific Field			
			Harris + Smith, OBGYN			
					e. Election Sum to Date	
					\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		04. 21. 2012	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Kim Denise Saunders 107 Abbotsford Court Durham, NC 27712			CEO			
			c. Employer's Name/Specific Field			
			Mechanics + Farmer's Bank			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		04. 21. 2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Carl P. Webb, Sr. 9 Haycox Court Durham, NC 27713			Principal			
			c. Employer's Name/Specific Field			
			Executive			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		04. 23. 2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 700.00	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 5 of Detailed Summary Page CRO-1100)</small>					\$ 5,240.00	

Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Elect Anita Daniels					ACLOAU	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Juanita Massenburg 702 Carpenter Fletcher Road Durham, NC 27713			Grants Program Administrator			
			c. Employer's Name/Specific Field			
			City of Durham			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Pay Pal		04.19.2012	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Farad Ali P.O. Box 2271 Durham, NC 27702			Project Director			
			c. Employer's Name/Specific Field			
			NC Institute of Minority Economic Development			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Pay Pal		04.07.2012	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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	
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 150.00	
5. Total of ALL CRO-1210 Pages					\$ 5,240.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

Disbursements

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

Committee Full Name (and Fund if applicable)					ID Number
Elect Anita Daniels					ACLOAU
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	
Payee Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Postmaster Shannon Plaza Station Durham, NC (800) 275-8777					
		c. Level Registered (Specify)		e. Election Sum to Date	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 315.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
Loan	Bank Card	I	03-08-2012	\$135.00	
1	Bank Card	I	03-21-2012	\$180.00	
4. Payee Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Postmaster Shannon Plaza Station Durham, NC 27707-9996 (800) 275-8777					
		c. Level Registered (Specify)		e. Election Sum to Date	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$.90	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
Loan	Cash	I	03-29-2012	\$.90	
				\$	
4. Payee Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Dollar Tree Stores, Inc. 4900 NC Hwy 55, Suite 400 Durham, NC 27713-7806					
		c. Level Registered (Specify)		e. Election Sum to Date	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 10.67	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Bank Card	O	03-13-2012	\$10.67	return envelopes
				\$	
5. Total only this Page					\$ 326.57
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 6,905.45
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

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	
Elect Anita Daniels					ACLOAU	
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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Sam's Club 4005 Chapel Hill Blvd Durham, NC 27707 (919) 489. 8160			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input checked="" 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
Loan		BankCard	O/B	03.09.2012	\$ 158.09	laserprinter cartridge, labels, copier paper, envelopes
1		BankCard	B	03.24.2012	\$ 108.95	post cards laserprinter cartridge, copier paper
4. Payee Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Sam's Club 4005 Chapel Hill Blvd Durham, NC 27707 (919) 489. 8160			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input checked="" 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
1		BankCard	O	03.31.2012	\$ (11.50)	returned #10 envelopes
1		BankCard	B	04.13.2012	\$ 22.25	postcards for printing
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Sam's Club 4005 Chapel Hill Blvd Durham, NC 27707 (919) 489. 8160			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input checked="" 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
1		BankCard	B	04.20.2012	\$ 44.49	post cards for printing
1		BankCard	O	04.20.2012	\$ (20.42)	return copier paper
5. Total only this Page					\$ 301.86	
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 6,905.45	
7. Purpose Codes (List detailed expenditure code in (k.) above)						
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate		H* - Holding Public Office Expenses	
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses		Q* - Donation to Legal Expense Fund	
I - Postage	J - Penalties	K* - Office Expenses				
O* - Other						
* Codes require detailed explanation in required remarks field (k)						

Disbursements

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)						ID Number
Elect Anita Daniels						ACLOAV
2. Type of Disbursement (Please use separate CRO-1110 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						
3. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Office Depot 4001 Chapel Hill Blvd Durham, NC 27707 (919) 490-3092			c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 14.04	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Bank Card	0	03.15.2012	\$ 6.79	Moistener bottles to seal envelopes	
1	Bank Card	0	03.19.2012	\$ 7.25	Deposit Only Stamp	
3. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Office Depot 4001 Chapel Hill Blvd Durham, NC 27707 (919) 490.3092			c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 30.56	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Bank Card	0	03.25.2012	\$ 20.96	Labels, confidential stamp, Journal	
Loan	Bank Card	0	03.26.2012	\$ 9.60	staples for campaign signs	
3. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Office Depot 4001 Chapel Hill Blvd Durham, NC 27707 (919) 490.3092			c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ (4.25)	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Bank Card	0	03.31.2012	\$(13.87)	Labels, journal	
1	Bank Card	0	04.10.2012	\$ 9.62	staples for campaign signs	
5. Total only this Page					\$ 40.35	
6. Total of ALL CRO-1110 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$ 6,905.45	
7. Purpose Codes (Use detailed expenditure code in (k) 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

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)						ID Number
Elect Anita Daniels						ACLOAU
2. Type of Disbursement (Please use separate CRO-1100 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						
3. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Walmart 1010 Martin Luther King Pkway Durham, NC 27713 (919) 213.4225			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				\$ 55.31		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	BankCard	B	03.18.2012	\$ 39.43	inkjet printer cartridges	
1	BankCard	O	03.21.2012	\$ 15.88	Copier paper Labels for mailing	
3. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Office Max 5458 New Hope Commons Dr. Durham, NC 27707 (919) 489.2277			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				\$ 3.82		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Cash	O	03.24.2012	\$ 3.82	Sharpie Pens	
				\$		
3. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Brandywine Envelope Corp 151 Hood Road P.O. Box 292 Cochranville, PA 19330 (800) 887.9399			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				\$ 591.01		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	BankCard	B	03.27.2012	\$ 347.56	Contribution envelopes	
1	BankCard	B	03.27.2012	\$ 243.45	Regular mailing envelopes	
5. Total only this Page						\$ 650.14
6. Total of ALL CRO-1100 Pages						\$ 6,905.45
(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 (Use detailed expenditure code in (j.) 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

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	
Elect Anita Daniels					ACLOAU	
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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Orlando's Custom Screen Printing 2824 N. Roxboro Street Durham, NC 27704 (919) 220-5515						
			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 3,747.15	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
Loan	CreditCard	B	03.28.2012	\$ 2,046.39	signs + frames	
Loan / 1(1/2)	CC/Check	B	04.06.2012	\$ 1,700.76	signs, frames, car magnets, labels	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Another Coley Event Spectacular Magazine 331 W. Main Street Durham, NC 27701 (919) 680-0465						
			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 309.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	PayPal	A	04.06.2012	\$ 309.00	Ad in Spectacular Magazine	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
SonicPrint.com 5018 Tampa West Blvd Tampa, FL 33634 (813) 443-5271						
			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 475.83	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Bankcard	B	04.12.2012	\$ 90.71	business cards	
1	Bankcard	B	04.17.2012	\$ 385.12	Half-page flyers	
5. Total only this Page					\$ 4,531.98	
6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$ 6,905.45	
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

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)						ID Number
Elect Anita Daniels						ACLOAU
2. 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						
3. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Cartridge World 150 W. Hwy 5A, Suite 281 Durham, NC 27713 (919) 806-0500						
			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		\$ 112.06	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Bankcard	B	04.14.2012	\$ 58.70	laser printer (color) cartridge	
1	Bankcard	B	04.16.2012	\$ 53.36	laser printer (black) cartridge	
3. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Cartridge World 150 W. Hwy 5A, Suite 281 Durham, NC 27713 (919) 806-0500						
			c. Level Registered (Specify)		e. Election Sum to Date	
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		\$ 58.70	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Bankcard	B	04.20.2012	\$ 58.70	laser printer (color) cartridge	
				\$		
3. 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	
Robocall.org P.O. Box 1393 Media, PA 19063 (800) 314-5001						
			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		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	PayPal	A	04.18.2012	\$ 416.33	Robocalls	
				\$		
5. Total only this Page						\$ 587.09
6. Total of All CRO-1310 Pages						\$ 6,905.45
(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 (k) 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

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
Elect Anita Daniels					ACLOAV
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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
1+1 Internet, Inc. 701 Lee Road, Suite 300 Chesterbrook, PA 19087 (877) 461-2631		c. Level Registered (Specify)		e. Election Sum to Date	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		\$ 29.97	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Pay Pal	0	04.11.2012	\$ 29.97	Campaign website
				\$	
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Saladella Cafe 4201 University Drive Durham, NC 27707 (919) 489.5776		c. Level Registered (Specify)		e. Election Sum to Date	
		<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		\$ 261.07	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Bankcard	0	04.21.2012	\$ 261.07	Food for meet + greet
				\$	
4. Payee Information <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
AT+T 13550 Independence Pkwy Fortworth, TX 76177		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		\$ 176.42	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
Loan	CC	0	02.18.2012	\$ 105.93	cell phone for campaign
Loan	Bankcard	0	04.13.2012	\$ 70.49	cell phone bills
5. Total only this Page					\$ 467.46
6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$ 6,905.45
7. Purpose Codes (List detailed expenditure code in (k) 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)					

Loan Proceeds

Pg _____ of _____

Amendment

Yes No

Use this form to report proceeds from a loan and loan endorser's information
 A loan proceeds statement must accompany each loan that is from an individual

Committee Full Name (and Fund if applicable)		ID Number	
Elect Anita Daniels		ACLOAU	
Lender Information			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
Anita A. Daniels 102 Nuttree Way Durham, NC 27713 (919) 403-0985		Interim Director - JCA	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		Freedom House Recovery Center	02.18.2012
			f. End Date (mm/dd/yyyy)
			04.13.2012
g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment
0 %	0	Loan	Credit + Debit Cards
k. Amount			\$ 3,394.40
l. Full Name of Lending Institution			m. Loan Number
Not applicable (personal)			
Endorser (Max)			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field
		d. Percentage	e. Amount
		%	\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field
		d. Percentage	e. Amount
		%	\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field
		d. Percentage	e. Amount
		%	\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field
		d. Percentage	e. Amount
		%	\$
5. Total of ALL CRO-1410 Pages			\$ 3,394.40
<i>(This line must be on line 7 of Detailed Summary Page CRO-1100)</i>			

Outstanding Loans

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)			ID Number
Elect Anita Daniels			ACLDAU
2. Lender Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
Anita A. Daniels 102 Nuttree Way Durham, NC 27713 919.403.0985		Interim Director-DCA	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		Freedom House Recovery Center	02.18.2012
		f. End Date (mm/dd/yyyy)	04.13.2012
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
0 %	0	\$ 3,394.40	\$ 3,394.40
k. Full Name of Lending Institution			l. Loan Number
Not applicable (personal)			
3. Lender 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
			e. Start Date (mm/dd/yyyy)
		c. Employer's Name/Specific Field	f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$	\$
k. Full Name of Lending Institution			l. Loan Number
3. Lender 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
			e. Start Date (mm/dd/yyyy)
		c. Employer's Name/Specific Field	f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$	\$
k. Full Name of Lending Institution			l. Loan Number
4. Total only this Page			\$ 3,394.40
5. Total of ALL CRO-1430 Pages <i>(This line must be on line 3 of Detailed Summary Page CRO-1100)</i>			\$ 3,394.40

In-Kind Contributions

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.

Committee Name (Candidate)		ID Number
Elect Anita Daniels		ACLOAU
Contributor Information		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor <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	c. Comments d. Election Sum to Date \$ 360.00
Barnone Promotion + Consulting P.O. Box 21015 Durham, NC 277103 (919) 260-0204		
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Consultation Meeting	03-03-2012	\$ 40.00
Website development/Updates	03-26-2012	\$ 200.00
Facebook Page Development/Monitoring	03-09-2012	\$ 120.00
Contributor Information		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor <input 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	c. Comments d. Election Sum to Date \$
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		\$
		\$
		\$
Contributor Information		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor <input 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	c. Comments d. Election Sum to Date \$
e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		\$
		\$
		\$
Total only this Page		
		\$ 360.00
Total of ALL CRO-1215 Forms		
		\$ 360.00