~			Amendment
Disclosure Report Cover		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Yes No
Use this form for general report and committee in	formation, must be si	igned and submitted along	with other detailed forms
Do not use this form to update information		100000000000000000000000000000000000000	
1. Committee Information			, ID Number
a. Full Name	A. ()	STATE OF THE PARTY	
Brenda Howenton	For Co.	Commission	en)
b. Mailing Address (include City, State and Zip Code)		d	. Date Filed
PO, Box 14453 RTP, NC 24709			11/2/09
0=0 110 24719			Phone Number
KIP, NC allel			
E			919-599-8213
2. Report Year 3. Period Start Date (mm/dd/y)	4. Period End Dat	e (mm/dd/yy) 5. Treasurer	Full Name
2008 10-19-08	10-31	08 Fmy	T. Mayo
	Type of Report (ch	eck only one type of Jepor	
NAMES OF THE PARTY	inicipal	State/County	Referendum
Joint Fundraiser PAC	Organizational	Organizational	Organizational
Referendum Legal Expense Fund	Thirty-five day	Quarterly	Pre-referendum Final
7. Type of Fund (fapplicable, check one) 36 "Booster Fund"	Pre-primary Pre-election	First Second	Supplemental Final
Building Fund	Pre-runoff	Third	Annual
NC Political Party Financing Fund	Semi-annual	Fourth	Special
Presidential Election Year Candidates Fund	Mid Year	Semi-annual	To be a second
NC Public Campaign Financing Fund	Year End	Mid Year Year End	10. Special Report Name
Other: 8: Number of Fundraisers this Report	Special	Final	=
64 Number of Curious sisces this Acpoin	- Openin	Special	=
11. Account Information			
d. Financial insutution and a sound			
-			Action with a second second second second
b. Purpose	c. Acce)	unt Code	
			*
	d. Peric	od Begin Balance	
	\$	508.48	
	对格巴尔尔尔克尔克尔克	Carlo Salas Sa	建筑的 医神经炎 医 黄带皮带
CERTIFICATION I certify that the Committee or Fund is in com-	pliance with all appli	cable provisions of Article	22A, 22B & 22D-22M of
Chanter 163 of the NC General Statutes and the	hat no funds are com	mingled with prohibited or	other undisclosed funds. I
further certify that this report is complete, true	and correct and that	I have been/wained by the	NC State Board of Election
Bank Hament	(DYDD	not Housely	1/12/04
Printed Name of Signer	Signature o	f Appointed Treasurer	Date
FOR OFFICE USE ONLY			
Date Received Tan 12, 0	Employee	mak De	livery Method
The Received			Normal Mail Registered Mail
Date Postmarked:	Employee		Hand Delivered
			Electronically Filed
Date Scanned:	Employee:		
Date Data Entered:	Employee:		Signal has net received

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.

Amendment

Detailed Summary Use this form to summarize all disclosure reporting forms and to	o total mone		Yes No
	. Type of R		D Number
Brenda Howerton For Co. Comens	in the	& gto.	
Start of Election Cycle: January 1, _0 9		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 508.48	\$
REMODEL STATES AND STATES OF THE PARTY OF THE PARTY.			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$.	\$ 455.
6) Contributions from Individuals	(CRO-1210)	\$2400	\$11602,55
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c	and 11d)	\$2460.00	\$ 12057.55
DATE OF THE PARTY			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$667.01	\$9422.10
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)	\$ 208.	\$ 200,
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15	5, 16 and 17)	\$ 867.01	\$ 9622,01
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	stract line 18)	\$2,641,47	\$
AND DET CONTROL PROTECTION OF THE PARTY OF T			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$	
23) Debts and Obligations owed to the Committee	CRO-1620)	The state of the s	
24) Account Transfers Within the Committee	(CRO-1720)	S Droin	
25) Administrative Support	(CRO-1710)	\$ 2 REC'D	\$
26) Forgiven Loans	(CRR-1440)	ERSON	\$
27) 48-Hour Notice Reports Sum	(CRO-2220)	3	\$
28) Contributions to be Refunded	(CRO-1215)	2	1 \$

		m Individuals ividual contributions of	over \$5	P O or contributions un		of	3 1205 is no	Yes	
		(and Fund if applica		o or contributions an	TAMES		2. ID Num		The state of the state of
Rose	TAA HOWE STOW	FOR COUNTY							
STATE OF STA	ributor Informati		COM		emove			A STATE OF THE PARTY OF THE PAR	
The same of the same of	me, Mailing Address		N. Sank	b. Job Title/Profession	n		d. Comments		ERIENES .
(include	city, state, & zip)								
Dx J	TEAN WOOMS			a Employer's Name/	Specific	Field			
900 LYDIA'S WAY AAT 13			c. Employer's Name/Specific Field SELF - Employee A						
DURHA	M NC 27713			SEZF EMPIOYE	J. 73	6	e. Election Si	um to Date	
							\$ 200		
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Description	j. I	Date (mm/dd/yyyy)	ACCORDING TO A STATE OF	k. Amount	
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	me, Mailing Address			b. Job Title/Profession	n		d. Comments		
DURHA	SOUTH POINT	,		DC: Mut	well	Oneurase De	e. Election St	um to Date	
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	city, state, & zip)			Contracto	of De	e Ve luper	,		
TylER	2 S. MORRIS			c. Employer's Name/	Specific	Field			
Tyler B. MORRIS 312 FORSYTH ST RALEIGH NC 27609			SELF EmployEEN			e. Election Si	um to Date	///	
RALEIGI	1 102,7609					-			
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5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

\$

2200--

Use this f	form to report indi	vidual contributions of	over \$50	0 or contrib	utions unde	er \$50 if form CR	O 1205 is no	t used
1. Committee Full Name (and Fund if applicable)						2. ID Number		
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3. Contri	butor Informatio	n		Add [Ren	nove		
a. Full Nam	ne, Mailing Address &	k Phone		b. Job Title	e/Profession		d. Comments	S
	city, state, & zip)							
PAUL +	MARCIE HICK	MAU			1 37 40		-	
4809 5	TUDBURY HALL	COUKT			r's Name/Sp			
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	city, state, & zip)							
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326	PLEASANT	Dr.		c. Employer's Name/Specific Field			+	
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(This line wast be on line 6 of Detailed Summary Page (RO-1100)								

Contributions from Individuals

Amendment

		m Individuals			Pg	_ 3			Yes No	
		vidual contributions of		0 or contributions	unde	r \$50 if	f form CR			
1. Committee Full Name (and Fund if applicable)								2. ID Number		
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	ibutor Informatio			Add	Rem	ove				
a. Full Nan	ne, Mailing Address &	& Phone		b. Job Title/Profe	ssion			d. Comment	S	
	city, state, & zip)									
	MITCHELL			c. Employer's Na	me/Spe	cific Fie	ld			
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4. Total only this Page \$ 1000 5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						200. —				

Amendment

Disbursem				Pg	of	Yes	ľ
	report expenditures		tee for; operating ex	kpenses,	contributions to	candidate/political	
	coordinated party ex Full Name (and Fun		I A SOUND HOUSE	STIME		2. ID Number	500
	HOWERTON F		OMMISSIONIER			2. ID Ivalibes	9 100
3. Type of Dish		ise use separate (CRO-1310 forms fo	r each t	vpe of Disbursem	ent.)	Sini
Operating I	The same of the sa		ndidates/Political Comr			ordinated Party Expenditures	
4. Payee Inform	nation		Add		Remove		12.15
a. Full Name, Mail	ling Address & Phone		b. Coordinated Con	nmittee N	ame	d. Comments	
(include city, state.	, & zip)						
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			c. Level Registered	(Specify)	Country	-	
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DURHAM	27705		State		Municipanty.		
						\$ 621.08	
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A* - Media	B* - Printing		ndraising		D - To Anot	ther Candidate	
I ITEMIN	2 1111111111111111111111111111111111111		8				

E - Salaries

I - Postage

F* - Equipment

J - Penalties

Content of the Conten

G - Political Party

K* - Office Expenses

H* - Holding Public Office Expenses O* - Other

Amendment

Use this form to report non-monetary contributions, donations, goo	ds or services provide	d to the committe	e or fund.	No
Use CRO-1215 if In-Kind Contributions were or will be refu	nded within 7 days.		San O. M. Criston	
BRENDA HOWEKTON FOR COUNTY	Commercials			
assumation of an information of the second s				
, Full Name, Mailing Address & Phons (include city, state, & 200)	by Type of Contribut		Comments	
GEONGE'S GAMES B	Candidate Party			1
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6 Controlling Chichentalines 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		dic and a		
a. Full Name, Malling Address & Phone (include city, state, & zip)	b. Type of Contribu	uot	c. Comments	
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			\$ 2	200 -



North Carolina

State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director – Campaign Reporting Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

155.00

Certification of Threshold

This Certification is used by Candidate and Party Committees only, to declare or withdraw the committee's intent to raise or spend under \$3,000 in the current election cycle

FILED BY:		n _ n
Committee Name:	Brenda Howanton For (wun X Comm
Treasurer Name:	BARRY J MAYO	
Treasurer Address:	1015 ANDERSON ST	
(include city, state, & zip)	DURHAM NC 27705	
		RECEIVE
Treasurer Phone:	919-403-5330	JAN 1 Z REC'D
election cycle under the properties of the election expenditures during this elections and file require THIS DECLARATION CATTLE I am withdrawing my file the next scheduled reported.	mittee intends to neither receive nor expend more than \$3,00 occdures set forth in G.S. 163-278.10A. This certification is cycle for this committee. If this committee exceeds \$3,000 ection cycle, I understand that I must immediately notify the discampaign finance reports. AN ONLY BE MADE AT THE BEGINNING OF AN ELECTORY Certification to remain under the \$3000 threshold. I will not for all contributions and expenditures that have not been urrent election cycle. I further agree to file all future reports	will remain in effect) in contributions or the appropriate board TION CYCLE. now be required to previously reported
/-//-09 Date Signed	Signature	Musk
	. v. ou v. d. Til di Describere Alexandre de committe de la communité	rn manarés ara filad

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.