

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 <i>Brenda Houston for County Commissioner</i>	c. ID Number
b. Mailing Address (include City, State and Zip Code) <i>3325 Tankerton West Durham, NC 27713</i>	d. Date Filed
	e. Phone Number <i>919-599-8213</i>

2. Report Year <i>2011</i>	3. Period Start Date (mm/dd/yy) <i>JAN 1, 2011</i>	4. Period End Date (mm/dd/yy) <i>DEC 31, 2011</i>	5. Treasurer Full Name <i>Barry Mayo</i>
-------------------------------	---	--	---

6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> 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 type="checkbox"/> First	<input type="checkbox"/> Final
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Booster Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Other:		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	10. Special Report Name
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
8. Number of Fundraisers this Report		<input type="checkbox"/> Final	<input checked="" type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

11. Account Information		11. Account Information	
a. Financial Institution Full Name <i>SUNTRUST</i>	b. Purpose	a. Financial Institution Full Name RECEIVED	b. Purpose JAN 30 REC'D
c. Account Code	d. Period Begin Balance \$ <i>0</i>	c. Account Code	d. Period Begin Balance \$
		DURHAM COUNTY BOARD OF ELECTIONS	

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.

Barry J Mayo Printed Name of Signer *[Signature]* Signature of Appointed Treasurer *1-26-11* Date

FOR OFFICE USE ONLY

Date Received: *1/30/2012* Employee: *MR* Delivery Method
 Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed

Date Postmarked: _____ Employee: _____
 Date Scanned: _____ Employee: _____
 Signer has not received mandatory training

Date Data Entered: _____ Employee: _____

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	
<i>Brenda Hawerton for County Commissioner</i>			
Start of Election Cycle: January 1, _____	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 0	\$ 15081.71	
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 640.00	\$ 110.-	
6) Contributions from Individuals (CRO-1210)	\$ 4625.00	\$ 1356.-	
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)	\$	\$ 80.-	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)	\$	\$	
11c) Outside Sources of Income (CRO-1250)	\$	\$	
11d) Legal Expense Fund – Other Sources (CRO-1270)	\$	\$	
11 e) Exempt Purchase Price Sales (CRO-1265)	\$	\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 5265.00	\$ 1540.-	
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 4727.74	\$ 2539.60	
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)	\$	\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 4727.74	\$ 2539.60	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 537.26	\$ 14097.51	
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)	\$		
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)	\$	\$	

Aggregated Contributions from Individuals

Page _____ of _____

Amendment

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	
Brenda Houston for County Commissioner						
3. Contributor Information						
a. Amend		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/>	Add		check		1-22-11	\$ 25.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		check		1-31-11	\$ 25.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		check		1-22-11	\$ 25.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		check		1-22-11	\$ 30.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		check		1-22-11	\$ 25.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		check		2-18-11	\$ 50.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		check		4-19-11	\$ 25.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		check		4-19-11	\$ 25.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		check		4-19-11	\$ 50.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		check		4-19-11	\$ 50.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		check		4-19-11	\$ 50.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		check		4-19-11	\$ 50.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		check		4-19-11	\$ 50.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		check		10-20-11	\$ 50.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		check		10-20-11	\$ 25.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		check		10-20-11	\$ 25.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		cash		10-20-11	\$ 10.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
4. Total only this Page					\$ 640.00	
5. Total of ALL CRO-1205 Pages					\$ 640.00	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

Amendment: Yes No
 Pg. _____ of _____

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																									
<i>Brenda Herenton for County Commission</i>																															
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																									
<i>Moses Conroy 203 Simerville Rd Chapel Hill NC 27517</i>				<i>Sec.</i>																											
				c. Employer's Name/Specific Field <i>State Gov.</i>																											
				e. Election Sum to Date		\$																									
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>f. Prior</th> <th>g. Account Code</th> <th>h. Form of Payment</th> <th>i. In-Kind Description</th> <th>j. Date (mm/dd/yyyy)</th> <th>k. Amount</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><i>1</i></td> <td><i>check</i></td> <td></td> <td><i>3-9-11</i></td> <td>\$ <i>50.-</i></td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> </tr> </tbody> </table>								f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	<input type="checkbox"/>	<i>1</i>	<i>check</i>		<i>3-9-11</i>	\$ <i>50.-</i>	<input type="checkbox"/>					\$	<input type="checkbox"/>					\$
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount																										
<input type="checkbox"/>	<i>1</i>	<i>check</i>		<i>3-9-11</i>	\$ <i>50.-</i>																										
<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																									
<i>Philip Jackson 702 Cobb St Durham, NC 27707</i>				<i>Architect</i>																											
				c. Employer's Name/Specific Field <i>Freelance Architect</i>																											
				e. Election Sum to Date		\$																									
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>f. Prior</th> <th>g. Account Code</th> <th>h. Form of Payment</th> <th>i. In-Kind Description</th> <th>j. Date (mm/dd/yyyy)</th> <th>k. Amount</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><i>1</i></td> <td><i>check</i></td> <td></td> <td><i>4-18-11</i></td> <td>\$ <i>100.-</i></td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> </tr> </tbody> </table>								f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	<input type="checkbox"/>	<i>1</i>	<i>check</i>		<i>4-18-11</i>	\$ <i>100.-</i>	<input type="checkbox"/>					\$	<input type="checkbox"/>					\$
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount																										
<input type="checkbox"/>	<i>1</i>	<i>check</i>		<i>4-18-11</i>	\$ <i>100.-</i>																										
<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																									
<i>Arnold Spence</i>																															
				c. Employer's Name/Specific Field <i>Entrepreneur</i>																											
				e. Election Sum to Date		\$																									
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>f. Prior</th> <th>g. Account Code</th> <th>h. Form of Payment</th> <th>i. In-Kind Description</th> <th>j. Date (mm/dd/yyyy)</th> <th>k. Amount</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td></td> <td><i>Money order</i></td> <td></td> <td><i>4-27-11</i></td> <td>\$ <i>100.-</i></td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> </tr> </tbody> </table>								f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	<input type="checkbox"/>		<i>Money order</i>		<i>4-27-11</i>	\$ <i>100.-</i>	<input type="checkbox"/>					\$	<input type="checkbox"/>					\$
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount																										
<input type="checkbox"/>		<i>Money order</i>		<i>4-27-11</i>	\$ <i>100.-</i>																										
<input type="checkbox"/>					\$																										
<input type="checkbox"/>					\$																										
4. Total only this Page						\$ <i>250.-</i>																									
5. Total of ALL CRO-1210 Pages						\$ <i>4625.-</i>																									
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>																															

Contributions from Individuals

Amendment
 Pg. ___ of ___ Yes No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
<i>Bunola Hewerton for County Commissioners</i>							
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	
<i>John Hunt 1115 Dorsvil Rd Rochon, NC 27712</i>				c. Employer's Name/Specific Field		e. Election Sum to Date	
				<i>Retired</i>			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	<i>1</i>	<i>check</i>		<i>3-30-11</i>	\$ <i>100.-</i>		
<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	
<i>Keith Cook 419 Calvary Ct Hillsborough NC 27278</i>				c. Employer's Name/Specific Field		e. Election Sum to Date	
				<i>Retired</i>			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	<i>1</i>	<i>check</i>		<i>1-24-11</i>	\$ <i>95.-</i>		
<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	
<i>Dr's Sampson & John Sampson 3512 O'Connell Hill Rd Dunbar NC 27707</i>				c. Employer's Name/Specific Field		e. Election Sum to Date	
				<i>Doctor Self Employed</i>			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	<i>1</i>	<i>check</i>		<i>1-22-11</i>	\$ <i>50.-</i>		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page					\$ <i>225.-</i>		
5. Total of ALL CRO-1210 Pages					\$ <i>4625.-</i>		
<i>(This line must be on line 6 of Detailed Summary Page CRO-1200)</i>							

Contributions from Individuals

Amendment

Page of Yes No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
<i>Brenda Houston for Govt. Commissioner</i>							
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	
<i>Kenneth Lewis 2530 Meador Pkwy Ste 100 Raleigh NC 27713</i>				<i>Lawyer</i>			
				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"/>	<i>1</i>	<i>check</i>		<i>1-30-11</i>	\$ <i>100.-</i>		
<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	
<i>Phail Wyan 6 Treadway Court Hillsborough NC 27288</i>				<i>V.P.</i>			
				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"/>	<i>1</i>	<i>check</i>		<i>1-31-11</i>	\$ <i>100.-</i>		
<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	
<i>Bradford Thompson 300 Menwood Dr Raleigh NC 27610</i>				<i>Consultant</i>			
				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"/>	<i>1</i>	<i>check</i>		<i>2-3-11</i>	\$ <i>50.-</i>		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ <i>250.-</i>	
5. Total of ALL CRO-1210 Pages						\$ <i>4625.-</i>	

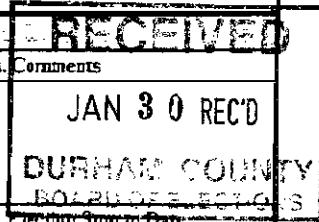
(This line must be on line 6 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Amendment Yes No
 Pg. ____ of ____

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) <i>Banda Navigator for County Commissioners</i>						2. ID Number	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Carl Wells 9 Hayscot Court Durham NC 27713</i>				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"/>	1	check		1-22-11	\$	100.-	
<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) <i>Ameer Kenchen 3503 Hadrian Dr. Durham NC 27703</i>				b. Job Title/Profession <i>VP</i>		d. Comments	
				c. Employer's Name/Specific Field <i>Community Credit Union</i>		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"/>	1	check		1-22-11	\$	100.-	
<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) <i>Cora McFadden 5613 Old Well St Durham NC 27704</i>				b. Job Title/Profession <i>Mayor Pro Tem</i>		d. Comments	
				c. Employer's Name/Specific Field <i>Durham City</i>		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"/>	1	check		1-22-11	\$	100.-	
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page					\$	300.-	
5. Total of ALL CRO-1210 Pages					\$	4625.-	



Contributions from Individuals

Amendment Pg. ___ of ___ Yes No

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

1. Committee Full Name (and Fund if applicable) <i>Banda Houston for Govt. Commission</i>						2. ID Number																									
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																									
<i>Bonita Manji 9009 Wings Nestle Ct Raleigh, NC 27617</i>				<i>Insurance Agent</i>																											
				c. Employer's Name/Specific Field <i>Allstate</i>																											
				e. Election Sum to Date		\$																									
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>f. Prior</th> <th>g. Account Code</th> <th>h. Form of Payment</th> <th>i. In-Kind Description</th> <th>j. Date (mm/dd/yyyy)</th> <th>k. Amount</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><i>1</i></td> <td><i>check</i></td> <td></td> <td><i>1-22-11</i></td> <td>\$ <i>200.-</i></td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> </tr> </tbody> </table>								f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	<input type="checkbox"/>	<i>1</i>	<i>check</i>		<i>1-22-11</i>	\$ <i>200.-</i>	<input type="checkbox"/>					\$	<input type="checkbox"/>					\$
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount																										
<input type="checkbox"/>	<i>1</i>	<i>check</i>		<i>1-22-11</i>	\$ <i>200.-</i>																										
<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																									
<i>Rene Doughty 526 Old Thompson Creek Rd Apex NC 27523</i>				<i>IT</i>																											
				c. Employer's Name/Specific Field <i>Cisco</i>																											
				e. Election Sum to Date		\$																									
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>f. Prior</th> <th>g. Account Code</th> <th>h. Form of Payment</th> <th>i. In-Kind Description</th> <th>j. Date (mm/dd/yyyy)</th> <th>k. Amount</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><i>1</i></td> <td><i>check</i></td> <td></td> <td><i>1-22-11</i></td> <td>\$ <i>100.-</i></td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> </tr> </tbody> </table>								f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	<input type="checkbox"/>	<i>1</i>	<i>check</i>		<i>1-22-11</i>	\$ <i>100.-</i>	<input type="checkbox"/>					\$	<input type="checkbox"/>					\$
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount																										
<input type="checkbox"/>	<i>1</i>	<i>check</i>		<i>1-22-11</i>	\$ <i>100.-</i>																										
<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																									
<i>Patrick Hannah 1603 Calhoun Ln Denton NC 27713</i>																															
				c. Employer's Name/Specific Field <i>Fidelity Insurance</i>																											
				e. Election Sum to Date		\$																									
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>f. Prior</th> <th>g. Account Code</th> <th>h. Form of Payment</th> <th>i. In-Kind Description</th> <th>j. Date (mm/dd/yyyy)</th> <th>k. Amount</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><i>1</i></td> <td><i>check</i></td> <td></td> <td><i>1-22-11</i></td> <td>\$ <i>50.-</i></td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> </tr> </tbody> </table>								f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	<input type="checkbox"/>	<i>1</i>	<i>check</i>		<i>1-22-11</i>	\$ <i>50.-</i>	<input type="checkbox"/>					\$	<input type="checkbox"/>					\$
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount																										
<input type="checkbox"/>	<i>1</i>	<i>check</i>		<i>1-22-11</i>	\$ <i>50.-</i>																										
<input type="checkbox"/>					\$																										
<input type="checkbox"/>					\$																										
4. Total only this Page						\$ <i>350.-</i>																									
5. Total of ALL CRO-1210 Pages						\$ <i>4625.-</i>																									

Contributions from Individuals

Amendment

Pg. of Yes No

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

1. Committee Full Name (and Fund if applicable) <i>Brenda Houston for County Commissioner</i>						2. ID Number	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Ida Couch 8216 NC Hwy 751 Duxton, NC 27713</i>				b. Job Title/Profession <i>Custom Sewer</i>		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"/>	<i>1</i>	<i>check</i>		<i>1-22-11</i>	\$ <i>75.00</i>		
<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) <i>Henry McCoy Sr 802 Larchwood Dr. Duxton NC 27713</i>				b. Job Title/Profession <i>Resent Sec.</i>		d. Comments	
				c. Employer's Name/Specific Field <i>State Gov.</i>		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"/>	<i>1</i>	<i>check</i>		<i>1-20-11</i>	\$ <i>150.-</i>		
<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) <i>Grace Marsh 5808 Solitude Way Duxton NC 27713</i>				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"/>	<i>1</i>	<i>check</i>		<i>1-22-11</i>	\$ <i>50.-</i>		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page					\$ <i>275.-</i>		
5. Total of ALL CRO-1210 Pages					\$ <i>4625.-</i>		

(This line must be on line 6 of Detailed Summary Page CRO-1206)

Contributions from Individuals

Amendment
 Pg. ___ of ___ Yes No

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

1. Committee Full Name (and Fund if applicable) <i>Brenda Hewerton for County Commissioner</i>						2. ID Number	
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	
✓ <i>Mary Lovett</i> <i>829 Jerome Rd</i> <i>Dunton NC 27713</i>				<i>Exec. Sec.</i>			
				c. Employer's Name/Specific Field <i>Congressman's Office</i>			
				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"/>	<i>1</i>	<i>check</i>		<i>1-21-11</i>	\$ <i>50.-</i>		
<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	
✓ <i>John Atkins</i> <i>P.O. Box 12037</i> <i>RTP, NC 27709</i>				<i>Architect</i>			
				c. Employer's Name/Specific Field <i>John Atkins & Co.</i>			
				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"/>	<i>1</i>	<i>check</i>		<i>1-22-11</i>	\$ <i>250.-</i>		
<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	
✓ <i>George Smart</i> <i>5409 Pelham Rd</i> <i>Dunton NC 27713</i>				<i>Consultant</i>			
				c. Employer's Name/Specific Field <i>Consultant Firm</i>			
				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"/>	<i>1</i>	<i>check</i>		<i>1-22-11</i>	\$ <i>200.-</i>		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ <i>500.-</i>	
5. Total of ALL CRO-1210 Pages						\$ <i>4625.-</i>	
<i>(This line must be on Line 6 of Detailed Summary, Page CRO-1200)</i>							

Contributions from Individuals

Amendment
Pg. _____ of _____ Yes No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
<i>Brenda Hunter for County Commissioner</i>							
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	
<i>William Smith Buir 239 Country Club Dr Durham NC 27712</i>							
						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"/>	<i>1</i>	<i>check</i>		<i>1-21-11</i>	\$ <i>20.-</i>		
<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	
<i>Worth Hill Sr 4590 Holloway Rd Durham NC 27703</i>							
						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"/>	<i>1</i>	<i>check</i>		<i>1-22-11</i>	\$ <i>100.-</i>		
<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	
<i>Lewis Check 5500 Old Brant Ave Greensboro NC 27435</i>				<i>lawyer</i>			
						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"/>	<i>1</i>	<i>check</i>		<i>1-7-11</i>	\$ <i>100.-</i>		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page					\$ <i>300.-</i>		
5. Total of ALL CRO-1210 Pages					\$ <i>4625.-</i>		

(This line must be on line 6 of Detailed Summary Page CRO-1200)

Contributions from Individuals

Amendment
Pg 12 of 12 Yes No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Brenda Harrington for County Commissioner							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
✓ Thomas Tracy Sander 4 Antony Mill Circle Durham NC 27703				Lawyer			
				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"/>	1	check		1-21-11	\$ 100. -		
<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	
✓ Roland Jean 2618 Cladon Hill Durham NC 27705				Retired			
				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"/>	1	check		1-14-11	\$ 100. -		
<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	
✓ Arnold Dennis 311 Rippling Stream Rd Durham NC 27704				Professor			
				c. Employer's Name/Specific Field		e. Election Sum to Date	
				NCCW		\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	1	check			\$ 200. -		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 500. -	
5. Total of ALL CRO-1210 Pages						\$ 4625. -	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1210)</small>							

Contributions from Political Party Committees

Pg ____ of ____

Amendment
 Yes No

Use this form to report contributions from a political party

<p><i>Drench, Howerton Vice Count Commissioner</i></p>				
<input type="checkbox"/> <input type="checkbox"/>				
<p><i>Wendy Clark 821 Bell St. W. 207 Durham NC 27702</i></p>				
				\$
Receipt No.	Date Received	Payee Name/Description	Date (month/day/year)	Amount
1		<i>Check</i>	4-18-11	\$100.00
				\$
				\$
<input type="checkbox"/> <input type="checkbox"/>				
<p><i>Ralph Hunt 1625 Locke St. Kenning NC 27707</i></p>				
				\$
Receipt No.	Date Received	Payee Name/Description	Date (month/day/year)	Amount
1		<i>Check</i>	4-19-11	\$100.02
				\$
				\$
<input type="checkbox"/> <input type="checkbox"/>				
				\$
				\$
				\$
				\$ 200.02
				\$ 4625.00

Contributions from Individuals

Pg ____ of ____ Amendment Yes No

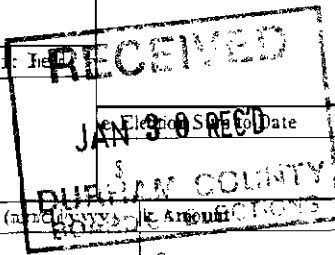
Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number
<i>Brenda Houston for County Commissioner</i>						
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		
<i>MARK KUHN KUHN</i>			c. Employer's Name/Specific Field	e. Election Sum to Date \$		
			<i>Retired</i>			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	<i>1</i>	<i>check</i>			\$ <i>250.-</i>	
<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		
<i>FRANCES DYER JAMES STEWART 2227 Parkside Dr DURHAM NC 27707</i>			c. Employer's Name/Specific Field	e. Election Sum to Date \$		
			<i>Retired</i>			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	<i>1</i>	<i>check</i>			\$ <i>100.-</i>	
<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		
<i>Sidney Simon Virginia Knight 2203 Strat Dr DURHAM NC 27707</i>			c. Employer's Name/Specific Field	e. Election Sum to Date \$		
			<i>Professor Duke Univ.</i>			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	<i>1</i>	<i>check</i>			\$ <i>200.-</i>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ <i>550.-</i>	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					\$ <i>4625.-</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	
Brenda Newton for County Commissioner							
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	
Aloya Linnac 43 Kambly Dr Durham NC 27707				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			\$ 100.-		
<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	
JAMES BRADFORD 425 E 9th St Durham NC				c. Employer's Name/Specific Field Entrepreneur James Bradford, owner			
						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"/>	/	MONEY ORDER		9-12-11	\$ 700.-		
<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						\$ 800.-	
5. Total of ALL CRO-1210 Pages						\$ 4625.-	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							



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) <i>Brenda Hunter for County Commissioner</i>						2. ID Number
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>ALPINE CATERING DUKE UNIV</i>			b. Coordinated Committee Name		d. Comments <i>Fundraising Event Food</i>	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		e. Election Sum to Date <i>\$ 335.10</i>	
f. Account Code	g. Form of Payment <i>CASH</i>	h. Purpose Code <i>C</i>	i. Date (mm/dd/yyyy) <i>1-24-11</i>	j. Amount \$	k. Required Remarks <i>Fund Raising Event</i>	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Returned Check</i>			b. Coordinated Committee Name		d. Comments <i>Returned Check</i>	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		e. Election Sum to Date <i>\$ 25.00</i>	
f. Account Code	g. Form of Payment	h. Purpose Code <i>O</i>	i. Date (mm/dd/yyyy) <i>1-27-11</i>	j. Amount \$	k. Required Remarks <i>Returned Check</i>	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Not Just Paper Durham, NC</i>			b. Coordinated Committee Name		d. Comments <i>Stationary</i>	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		e. Election Sum to Date <i>\$ 20.42</i>	
f. Account Code	g. Form of Payment <i>check</i>	h. Purpose Code <i>K</i>	i. Date (mm/dd/yyyy) <i>1-28-11</i>	j. Amount \$	k. Required Remarks <i>Office Products</i>	
5. Total only this Page						<i>\$ 380.52</i>
6. Total of ALL CRO-1310 Pages						<i>\$ 4727.74</i>
<i>(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)</i>						
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>						
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) <i>Brenda Hewerton for County Commissioner</i>						2. ID Number
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
<i>Sam's Club Durham</i>					c. Level Registered (Specify):	
					<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality	
					e. Election Sum to Date	
					\$ <i>7.71</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>G</i>	<i>1-22-11</i>	\$	<i>Food</i>	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
<i>Sam's Club</i>					c. Level Registered (Specify):	
					<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality	
					e. Election Sum to Date	
					\$ <i>15.06</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>1-22-11</i>	\$	<i>Food</i>	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
<i>Wal Mart Durham</i>					c. Level Registered (Specify):	
					<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality	
					e. Election Sum to Date	
					\$ <i>6.70</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>1-20-11</i>	\$	<i>Labels</i>	
				\$		
5. Total only this Page					\$ <i>29.47</i>	
6. Total of ALL CRO-1310 Pages					\$ <i>4727.74</i>	
<i>(This line goes in line 15a of Detailed Summary Page CRO-1100 if Operating Expenses, This line goes in line 15b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm; This line goes in line 15c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						
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) <i>Brenda Houston for County Commissioner</i>						2. ID Number
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
<i>Office Depot Durham</i>					<i>Fund Raiser</i>	
					c. Level Registered (Specify)	
			<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		e. Election Sum to Date	
					\$ <i>6.92</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>1-22-11</i>	\$	<i>Badges</i>	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
<i>Park Tax Monroville</i>					<i>Fund Raiser</i>	
					c. Level Registered (Specify)	
			<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		e. Election Sum to Date	
					\$ <i>157.50</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>1-22-11</i>	\$	<i>Fundraiser Parking</i>	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
<i>Wire Merchant</i>					<i>Fund Raiser</i>	
					c. Level Registered (Specify)	
			<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		e. Election Sum to Date	
					\$ <i>143.39</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>1-22-11</i>	\$	<i>Fund Raiser</i>	
				\$		
5. Total only this Page					\$ <i>307.81</i>	
6. Total of ALL CRO-1310 Pages					\$ <i>4727.74</i>	
<i>(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.)</i>						
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	
<i>Brenda Hewitt for County Commissioner</i>							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
<i>American Party Rentals</i>						<i>Fund Raiser Punch Bowl Alaska</i>	
				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			
						\$ <i>30.17</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	<i>cash</i>	<i>C</i>	<i>1-21-11</i>	\$	<i>Punch Bowl + Alaska</i>		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
<i>USPS Postage</i>						<i>Postage</i>	
				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			
						\$ <i>17.60</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	<i>check</i>	<i>I</i>	<i>2-14-11</i>	\$	<i>Postage</i>		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
<i>SunTrust ACCOUNT ANALYSIS</i>							
				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			
						\$ <i>8.00</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	<i>check</i>	<i>D</i>	<i>2-18-11</i>	\$	<i>ACCOUNT ANALYSIS</i>		
				\$			
5. Total only this Page						\$ <i>55.77</i>	
6. Total of ALL CRO-1310 Pages						\$ <i>4727.74</i>	
<small>(This line goes in Line 15a of Detailed Summary Page CRO-1100 if Operating Expenses. This line goes in Line 15b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm. This line goes in Line 15c of Detailed Summary Page CRO-1100 if Coordinated Part. Expenditures)</small>							
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) <i>Bruna Houston for County Commissioner</i>						2. ID Number
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name	d. Comments	
<i>Postage USPS Danden NC</i>				c. Level Registered (Specify)	<i>Postage</i>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		
				e. Election Sum to Date		\$ <i>72.00</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>check</i>	<i>I</i>	<i>2-10-11</i>	\$	<i>Postage</i>	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name	d. Comments	
<i>Kroger</i>				c. Level Registered (Specify)	<i>Substance</i>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		
				e. Election Sum to Date		\$ <i>8.80</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>check</i>	<i>H</i>	<i>3-31-11</i>	\$	<i>Substance</i>	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name	d. Comments	
<i>USPS Postage</i>				c. Level Registered (Specify)	<i>Postage</i>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		
				e. Election Sum to Date		\$ <i>17.60</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>check</i>	<i>I</i>	<i>4-4-11</i>	\$	<i>Postage</i>	
				\$		
5. Total only this Page						\$ <i>98.40</i>
6. Total of ALL CRO-1310 Pages						\$ <i>4727.74</i>
<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 Contributions to Candidates/Political Comm.)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures.)</i>						
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
J - 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) <i>Branda Hewitt for County Commissioner</i>						2. ID Number
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) <input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>No Daddy.com</i>				b. Coordinated Committee Name		d. Comments <i>WEB SITE HOSTING PACKAGE</i>
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		e. Election Sum to Date <i>\$ 101.80</i>
f. Account Code	g. Form of Payment <i>check</i>	h. Purpose Code <i>K</i>	i. Date (mm/dd/yyyy) <i>4-11-11</i>	j. Amount \$	k. Required Remarks <i>WEB SITE HOST</i>	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Son's Club</i>				b. Coordinated Committee Name		d. Comments <i>CAMERA FOR WEB SITE</i>
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		e. Election Sum to Date <i>\$ 79.73</i>
f. Account Code	g. Form of Payment <i>check</i>	h. Purpose Code <i>K</i>	i. Date (mm/dd/yyyy) <i>4-21-11</i>	j. Amount \$	k. Required Remarks <i>CAMERA</i>	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Paypal FUND RAISER UOI</i>				b. Coordinated Committee Name		d. Comments <i>JAN 30 RECD DURHAM COUNTY BOARD OF ELECTIONS</i>
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		e. Election Sum to Date <i>\$ 50.00</i>
f. Account Code	g. Form of Payment <i>check</i>	h. Purpose Code	i. Date (mm/dd/yyyy) <i>4-27-11</i>	j. Amount \$	k. Required Remarks <i>FUND RAISER UOI</i>	
5. Total only this Page						<i>\$ 231.53</i>
6. Total of ALL CRO-1310 Pages (This line goes in line 15c of Detailed Summary, Page CRO-1100 if Operating Expenses; This line goes in line 15b of Detailed Summary, Page CRO-1100 if Contrib to Candidates/Political Comm; This line goes in line 15c of Detailed Summary, Page CRO-1100 if Coordinated Party Expenditures)						<i>\$ 4727.74</i>
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
<i>Granda Association for Local Commission</i>						
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
<i>Harris Peter</i>						
				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		<i>Substance</i>
						\$ <i>9.30</i>
l. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>check</i>	<i>H</i>	<i>2-11-11</i>	\$	<i>Substance</i>	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
<i>E Tit Phil Auction Dunbar Arts Council</i>						
				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		<i>Dunbar Arts</i>
						\$ <i>60.00</i>
l. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>check</i>	<i>0</i>	<i>5-19-11</i>	\$	<i>Dunbar Arts</i>	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
<i>B & D Events</i>						<i>Fundraiser</i>
				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		
						\$ <i>225.00</i>
l. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>check</i>	<i>0</i>	<i>5-19-11</i>	\$	<i>Party Planner</i>	
				\$		
5. Total only this Page						\$ <i>294.30</i>
6. Total of ALL CRO-1310 Pages						\$ <i>4727.74</i>
<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>						
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>						
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
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
<i>Executive Consultants D. Williams 2530 Meiden Hwy Suite 200 Duxton Ct.</i>				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		<i>Ford Hain Consulting</i>
						e. Election Sum to Date
						\$ <i>200.-</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>check</i>	<i>A</i>	<i>2-3-11</i>	\$	<i>Ford Hain Consulting</i>	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
<i>Executive Consultants D. Williams</i>				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		<i>Ford Hain Consulting</i>
						e. Election Sum to Date
						\$ <i>316.-</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
			<i>2-5-11</i>	\$	<i>Consulting</i>	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
<i>DVD Family Fare</i>				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		<i>Meeting in Raleigh NCACC</i>
						e. Election Sum to Date
						\$ <i>39.55</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>check</i>	<i>H</i>	<i>6-3-11</i>	\$	<i>Gas - NCACC</i>	
				\$		
5. Total only this Page						\$ <i>585.55</i>
6. Total of ALL CRO-1310 Pages						\$ <i>4727.74</i>
<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>						
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
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments	
<i>Parker & OTIS Dunham</i>			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		<i>Substance</i>	
					e. Election Sum to Date	
				<i>\$ 12.08</i>		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>check</i>	<i>H</i>	<i>6-6-11</i>	\$	<i>substance</i>	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments	
<i>IL Palio Chapel Hill</i>			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		<i>Met with Howard Lee</i>	
					e. Election Sum to Date	
				<i>\$ 3094</i>		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>check</i>		<i>6-13-11</i>	\$	<i>substance</i>	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments	
<i>Sam's Club</i>			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		<i>Campaign Pictures</i>	
					e. Election Sum to Date	
				<i>\$ 96.77</i>		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>check</i>	<i>H</i>	<i>6-21-11</i>	\$	<i>Pictures</i>	
				\$		
5. Total only this Page						\$ <i>139.79</i>
6. Total of ALL CRO-1310 Pages						\$ <i>4727.74</i>
<i>(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)</i>						
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>						
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
<i>Bonds Houston for County Commissioners</i>						
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
<i>Victorious Praise Community Development</i>						<i>Donation</i>
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		e. Election Sum to Date
						<i>\$ 6500</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>check</i>	<i>0</i>	<i>6-29-11</i>	\$	<i>Donation</i>	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		e. Election Sum to Date
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		e. Election Sum to Date
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
5. Total only this Page						<i>\$ 65.00</i>
6. Total of ALL CRO-1310 Pages						<i>\$ 4727.74</i>
<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>						
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>						
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
--	---------------------

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

Operating Expenses
 Contributions to Candidates/Political Committees
 Coordinated Party Expenditures

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) WHOLE FOOD WASH, AL	b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality:	d. Comments FOOD + Coffee e. Election Sum to Date \$ 5.93
--	--	--

l. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	check	C	11-30-11	\$	
				\$	

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) SUNTRUST	b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality:	d. Comments BANK FEE e. Election Sum to Date \$ 10.00
--	--	--

l. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	check	C	11-30-11	\$	
				\$	

4. Payee Information Add Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality:	d. Comments e. Election Sum to Date \$
--	--	--

l. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	

5. Total only this Page \$ 15.93

6. Total of ALL CRO-1310 Pages \$ 4727.74

(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)

(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)

(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

7. Purpose Codes (List detailed expenditure code in (h.) above)

A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund
O* Other			

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

Disbursements

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
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
Joy LANA BP DURHAM NC				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality:		GAS-Trailer
						\$ 48.26
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	12-25-11	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
Cafe PARIZADE DURHAM NC				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality:		FOOD/lunch for meeting w/ Conat
						\$ 43.44
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	12-25-11	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
MEZ DURHAM NC				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality:		FOOD/meeting w/ Conat.
						\$ 22.11
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	12-29-11	\$		
				\$		
5. Total only this Page						\$ 105.81
6. Total of ALL CRO-1310 Pages						\$ 4727.74
<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>						
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
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement)</i>						
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> HARRIS TETER DURHAM NC				b. Coordinated Committee Name		d. Comments FOOD - Coffee meet
				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		\$ 930
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	11-16-11	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> BONE FISH HILL MILLSBORO NC				b. Coordinated Committee Name		d. Comments FOOD/meeting w/const
				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		\$ 19.57
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	11-18-11	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> SALADELLA Cafe DURHAM NC				b. Coordinated Committee Name		d. Comments FOOD/meeting w/const
				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		\$ 10.34
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	11-25-11	\$		
				\$		
5. Total only this Page						\$ 39.21
6. Total of ALL CRO-1310 Pages						\$ 4727.74
<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>						
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>						
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
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
<i>Shell oil DURHAM NC</i>				c. Level Registered (Specify)		<i>GAS - Travel</i>
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		
				e. Election Sum to Date		\$ <i>54.38</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>11-8-11</i>	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
<i>SPORTACUS RESTAURANT DURHAM NC</i>				c. Level Registered (Specify)		<i>FOOD/meeting w/Conat.</i>
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		
				e. Election Sum to Date		\$ <i>24.19</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>11-15-11</i>	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
<i>Shell Oil DURHAM NC</i>				c. Level Registered (Specify)		<i>GAS/Comm</i>
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		
				e. Election Sum to Date		\$ <i>49.54</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>11-15-11</i>	\$		
				\$		
5. Total only this Page						\$ 128.11
6. Total of ALL CRO-1310 Pages						\$ <i>4727.74</i>
<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>						
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>						
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
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
WITHDRAWAL for Reimbursement to DUKHAM B. King Knight.				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		
						\$ 88.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	12-21-11	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
SILVER SPOONS DUKHAM NC				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		
						\$ 13.50
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	12-27-11	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
NOT JUST PAPER DURHAM NC				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		
						\$ 15.99
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	11-4-11	\$		
				\$		
5. Total only this Page						\$ 77.99 117.99
6. Total of ALL CRO-1310 Pages						\$ 4727.74
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
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
<i>HARRIS TESTER DURHAM</i>				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		<i>FOOD FUND RAISER</i>
						e. Election Sum to Date
						\$ <i>9.30</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>12-11-11</i>	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
<i>AMERICAN CREDITORS DURHAM NC</i>				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		<i>CARDS</i>
						e. Election Sum to Date
						\$ <i>25.00</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>12-21-11</i>	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
<i>Shell O.I DURHAM NC</i>				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		<i>HAS/LOANS TRAVEL</i>
						e. Election Sum to Date
						\$ <i>40.14</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>12-11-11</i>	\$		
				\$		
5. Total only this Page						\$ 374.44
6. Total of ALL CRO-1310 Pages						\$ <i>4727.74</i>
<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>						
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>						
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
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement)</i>						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
Shell Oil DURHAM, NC				c. Level Registered (Specify)		GAS/Counts Fund
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
				e. Election Sum to Date		\$ 40.46
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	12-19-11	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
Blue Corn Cafe				c. Level Registered (Specify)		FOOD/Planning meetings
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
				e. Election Sum to Date		\$ 24.30
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	12-28-11	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
BEYO Coffee DURHAM, NC				c. Level Registered (Specify)		Coffee
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
				e. Election Sum to Date		\$ 1.87
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	12-21-11	\$		
				\$		
5. Total only this Page						\$ 366.63
6. Total of ALL CRO-1310 Pages						\$ 4727.74
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>						
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
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
<i>Weather VANE Chapel Hill NC</i>				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<i>FOOD/Plum meets</i>
						e. Election Sum to Date \$ <i>30.64</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>12-13-11</i>	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
<i>A Southern Season Chapel Hill NC</i>				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<i>FOOD/Plum meets</i>
						e. Election Sum to Date \$ <i>33.49</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>12-13-11</i>	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
<i>A Southern Season</i>				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<i>FOOD/Plum meets</i>
						e. Election Sum to Date \$ <i>21.30</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>12-16-11</i>	\$		
				\$		
5. Total only this Page						\$ 85.43
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>						\$ <i>4727.74</i>
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>						
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
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement)</i>						
<input type="checkbox"/> Operating Expenses						<input type="checkbox"/> Contributions to Candidates/Political Committees
<input type="checkbox"/> Add <input type="checkbox"/> Remove						<input type="checkbox"/> Coordinated Party Expenditures
4. Payee Information						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments	
DOUBLE TREE HOTEL WASHINGTON DC			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality:		FOON / Confusion	
					e. Election Sum to Date \$ 11.90	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	12-1-11	\$		
				\$		
4. Payee Information						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments	
CRACKER BARREL South Hill VA			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality:		FOON / Travel from Confusion	
					e. Election Sum to Date \$ 11.92	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	12-5-11	\$		
				\$		
4. Payee Information						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments	
Shell O.I. Durham NC			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality:		GAS / Travel to Hectors	
					e. Election Sum to Date \$ 48.73	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	12-7-11	\$		
				\$		
5. Total only this Page						\$ 21,972.55
6. Total of ALL CRO-1310 Pages						\$ 4727.74
<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>						
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>						
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	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees			<input type="checkbox"/> Coordinated Party Expenditures		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
OFFICE DEPOT DURHAM NC						FUND RAISER	
						e. Election Sum to Date	
c. Level Registered (Specify)							
<input type="checkbox"/> Federal <input type="checkbox"/> County		<input type="checkbox"/> State <input type="checkbox"/> Municipality				\$ 6.39	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	cash	C	9-26-11	\$			
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
SUNTRUST						BANK FEE	
						e. Election Sum to Date	
c. Level Registered (Specify)							
<input type="checkbox"/> Federal <input type="checkbox"/> County		<input type="checkbox"/> State <input type="checkbox"/> Municipality				\$ 10.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	cash	C	9-30-11	\$			
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
SUNTRUST						BANK FEE	
						e. Election Sum to Date	
c. Level Registered (Specify)							
<input type="checkbox"/> Federal <input type="checkbox"/> County		<input type="checkbox"/> State <input type="checkbox"/> Municipality				\$ 10.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	cash	C	10-31-11	\$			
				\$			
5. Total only this Page						\$ 26.39 26.39	
6. Total of ALL CRO-1310 Pages						\$ 4727.74	
<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>							
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>							
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate		H* - Holding Public Office Expenses		
E - Salaries	F* - Equipment	G - Political Party	K* - Office Expenses		Q* - Donation to Legal Expense Fund		
I - Postage	J - Penalties						
O* Other							

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
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
FEDEX DURHAM				c. Level Registered (Specify)		MAIL
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						e. Election Sum to Date
						\$ 9.02
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	9-15-11	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
FAMILY FARE DURHAM				c. Level Registered (Specify)		GAS/meeting in Raleigh
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						e. Election Sum to Date
						\$ 37.51
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	9-15-11	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
Shell Oil CONOVER NC				c. Level Registered (Specify)		GAS/meeting in Raleigh
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						e. Election Sum to Date
						\$ 26.39
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	9-19-11	\$		
				\$		
5. Total only this Page						\$ 72.92 72.92
6. Total of ALL CRO-1310 Pages						\$ 4727.74
<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>						
7. Purpose Codes <i>(List detailed expenditure code in (h.) above.)</i>						
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	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> AHA PROCESS BOOK PURCHASE Tx				b. Coordinated Committee Name		d. Comments Book/Prints	
				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		\$ 31.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	CASH	C	8-24-11	\$			
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> OFFICE DEPOT DURHAM NC				b. Coordinated Committee Name		d. Comments FUND RAISER	
				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		\$ 64.03	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	CASH	C	8-31-11	\$			
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> OFFICE DEPOT DURHAM NC				b. Coordinated Committee Name		d. Comments FUND RAISER	
				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		\$ 11.27	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	CASH	C	9-6-11	\$			
				\$			
5. Total only this Page						\$ 31.50 107.80	
6. Total of ALL CRO-1310 Pages						\$ 4727.74	
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
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
<i>Mimis Cafe Buckington NC</i>				c. Level Registered (Specify)		<i>FOOD/Return from meet in Victor</i>
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		
				e. Election Sum to Date		\$ <i>18.13</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>8-23-11</i>	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
<i>Shell Oil Concord NC</i>				c. Level Registered (Specify)		<i>Gas/Meeting</i>
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		
				e. Election Sum to Date		\$ <i>15.82</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>8-24-11</i>	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
<i>EMBASSY SUITES CONCORD NC</i>				c. Level Registered (Specify)		<i>FOOD/Conference</i>
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality		
				e. Election Sum to Date		\$ <i>16.88</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>8-24-11</i>	\$		
				\$		
5. Total only this Page						\$ <i>89.83</i>
6. Total of ALL CRO-1310 Pages						\$ <i>4727.74</i>
<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>						
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>						
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)						

50.83

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	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
AMERICAN Chicago IL						Mental Health Corp.	
				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:		\$ 25.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	cash	C	7-26-11	\$			
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
Bayou Coffee DURHAM						FOOD/meeting	
				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:		\$ 14.28	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	cash	C	8-16-11	\$			
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
PILOT MEGANE						Hwy/travel to meet in Charlotte	
				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:		\$ 45.92	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	cash	C	8-12-11	\$			
				\$			
5. Total only this Page						\$ 60.00 89.20	
6. Total of ALL CRO-1310 Pages						\$ 4727.74	
<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>							
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>							
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
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
Sheaton Chicago IL				c. Level Registered (Specify)		FOOD/Conference
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
				e. Election Sum to Date		\$ 19.76
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	7-25-11	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
Sheaton Chicago Dinner Chicago IL				c. Level Registered (Specify)		FOOD/Conference
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
				e. Election Sum to Date		\$ 2309
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	7-26-11	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
MACARONI GRILL Chicago IL				c. Level Registered (Specify)		FOOD/Conference
				<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
				e. Election Sum to Date		\$ 24.19
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	cash	C	7-26-11	\$		
				\$		
5. Total only this Page						\$ 4727.74 67.04
6. Total of ALL CRO-1310 Pages						\$ 4727.74
(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						

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
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
<i>CAPERS CAFE LE BAR Portland OR</i>				c. Level Registered (Specify)		<i>Food/Conference</i>
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
				e. Election Sum to Date		\$ <i>11.70</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>7-21-11</i>	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
<i>NIU INC Chicago IL</i>				c. Level Registered (Specify)		<i>Conference</i>
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
				e. Election Sum to Date		\$ <i>28.42</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>7-21-11</i>	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
<i>Chicago ELITE Chicago IL</i>				c. Level Registered (Specify)		<i>Conference</i>
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
				e. Election Sum to Date		\$ <i>7.02</i>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>7-25-11</i>	\$		
				\$		
5. Total only this Page						\$ <i>47.14</i>
6. Total of ALL CRO-1310 Pages						\$ <i>4727.74</i>
<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>						
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>						
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): <i>BRENDA HUNTERSON for County Commissioner</i>						2. ID Number
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name	d. Comments	
<i>PB Media DURHAM</i>					<i>WEB SITE DESIGN</i>	
				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:		
					\$ <i>100.-</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>11-4-11</i>	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name	d. Comments	
<i>EBC INC DURHAM</i>					<i>WEB DESIGN</i>	
				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:		
					\$ <i>350.-</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>CASH</i>	<i>C</i>	<i>9-8-11</i>	\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name	d. Comments	
<i>DAN & LOUIS OYSTER BAR PORTLAND OR</i>					<i>Food/Conference</i>	
				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:		
					\$ <i>25.50</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>cash</i>	<i>C</i>	<i>7-19-11</i>	\$		
				\$		
5. Total only this Page						\$ <i>475.50</i>
6. Total of ALL CRO-1310 Pages						\$ <i>4727.74</i>
<small>(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)</small>						
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	
BRENDA HOWERTON for County Commissioner							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
AMERICAN PARTY RENTALS DURHAM						FUNA RAISE	
				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		\$ 31.22	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	cash	C	11-22-11	\$			
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
PB MEDIA DURHAM						WEB SITE DESIGN	
				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		\$ 300.-	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	cash	C	10-4-11	\$			
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
PB Media DURHAM						WEB SITE DESIGN	
				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		\$ 320.27	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	cash	C	9-8-11	\$			
				\$			
5. Total only this Page						\$ 651.49	
6. Total of ALL CRO-1310 Pages						\$ 4727.74	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)							
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

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	
Brenda Houston for County Commissioner							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
OFFICE DEPOT DURHAM						FUNN RAISER	
				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		\$ 4.79	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	CASH	C	10-20-11	\$			
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
CIRCLE K DURHAM						Mag/Conference	
				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		\$ 54.38	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	CASH	C	11-5-11	\$	MEETING		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
CIRCLE K						Mag/Conference	
				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		\$ 49.54	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	CASH	C	11-12-11	\$	TRAVEL EXP		
				\$			
5. Total only this Page						\$ 108.71	
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 Candidate/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
						RECEIVED 4727.74	
7. Purpose Codes (List detailed expenditure code in (h.) above)						JAN 30 RECD	
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate		E* - Holding Public Office Expenses		
E - Salaries	F* - Equipment	G - Political Party	H* - 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)						2. ID Number	
Bunda Hunter for County Commissioner							
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)							
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
SAM'S CLUB Durham						Fund Raiser	
				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		\$ 13.24	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	CASH	C	10-20-11	\$			
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
HARRIS TEETER DURHAM						FUND RAISER	
				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		\$ 48.03	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	CASH	C	10-20-11	\$			
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
TOTAL WINE DURHAM						FUND RAISER	
				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		\$ 75.71	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	CASH	C	10-20-11	\$			
				\$			
5. Total only this Page						\$ 136.98	
6. Total of ALL CRO-1310 Pages						\$ 4727.74	
<small>(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 Contributions/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</small>							
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)							