

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

a. Full Name <i>Brenda Houston for County Commissioner</i>	c. ID Number OCT 26 2012
b. Mailing Address (include City, State and Zip Code) <i>P.O. Box 14403 Durham, NC 27703</i>	d. Date Filed DURHAM BOE
e. Phone Number	

<i>2012</i>	<i>7-1-12</i>	<i>10-31-12</i>	<i>Barry J. Mayo</i>
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<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:	<input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser	Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input checked="" type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
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a. Financial Institution Full Name <i>SANTROS</i>	a. Financial Institution Full Name		
b. Purpose	c. Account Code	b. Purpose	c. Account Code
d. Period Begin Balance \$ <i>359.29</i>		d. Period Begin Balance \$	

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

 Printed Name of Signer

 Signature of Appointed Treasurer

 Date

FOR OFFICE USE ONLY

Date Received: <i>10-26-12</i>	Employee: <i>Apage</i>	Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training
Date Postmarked: _____	Employee: _____	
Date Scanned: _____	Employee: _____	
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.

Start of Election Cycle: January 1, 2012		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 359.92	\$ 359.92
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 866.-	\$ 2836.-
6) Contributions from Individuals	(CRO-1210)	\$ 1700.-	\$ 7025.-
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)	\$	\$ 1309.31
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c and 11d)		\$ 2566.-	\$ 11,170.31
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 795.94	\$ 9427.08
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)		\$ 795.94	\$ 9427.08
19) Cash on Hand at End (Add lines 4 and 12 together then subtract line 18)		\$ 2129.98	\$ 2489.90
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)	\$
27) 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

BRENDA HONERTON FOR COUNTY COMMISSIONERS					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add	1	check		8-31-12	\$ 50.-
<input type="checkbox"/> Remove	1	check		9-26-12	\$ 50.-
<input type="checkbox"/> Add	1	check		9-27-12	\$ 49.-
<input type="checkbox"/> Remove	1	check		10-2-12	\$ 49.-
<input type="checkbox"/> Add	1	check		8-31-12	\$ 20.-
<input type="checkbox"/> Remove	1	check		9-13-12	\$ 15.-
<input type="checkbox"/> Add	1	check		9-29-12	\$ 49.-
<input type="checkbox"/> Remove	1	check		9-28-12	\$ 49.-
<input type="checkbox"/> Add	1	check		9-27-12	\$ 49.-
<input type="checkbox"/> Remove	1	check		10-3-12	\$ 49.-
<input type="checkbox"/> Add	1	check		9-27-12	\$ 49.-
<input type="checkbox"/> Remove	1	check		9-27-12	\$ 49.-
<input type="checkbox"/> Add	1	check		9-29-12	\$ 49.-
<input type="checkbox"/> Remove	1	check		9-27-12	\$ 49.-
<input type="checkbox"/> Add	1	check		9-27-12	\$ 49.-
<input type="checkbox"/> Remove	1	check		9-27-12	\$ 49.-
<input type="checkbox"/> Add	1	check		9-27-12	\$ 45.-
<input type="checkbox"/> Remove	1	check		9-27-12	\$ 49.-
<input type="checkbox"/> Add	1	check		9-27-12	\$ 49.-
<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					\$ 866.-
5. Total of ALL CRO-1205 Pages					\$ 866.-
<small>(This line must be on line 5 of Detailed Summary Page CRO-1100)</small>					

Contributions from Individuals

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

Brenda Hamilton for County Commissioner

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
	c. Employer's Name/Specific Field	
<i>NC Keaton PAC 4511 WEYBRIDGE LN Greensboro, NC 27407</i>	<i>PAC</i>	e. Election Sum to Date
		\$ <i>400.-</i>

l. 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>9-6-12</i>	\$ <i>400.-</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
	c. Employer's Name/Specific Field	
<i>Fahad Ali P.O. Box 2271 Duxton NC 27702</i>	<i>VP</i>	e. Election Sum to Date
	<i>NC Institute of Management E.D.</i>	
		\$ <i>100.-</i>

l. 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>8-15-12</i>	\$ <i>100.-</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	d. Comments
	c. Employer's Name/Specific Field	
<i>Judith Holland 4100 Boonesboro Dr North Chesterfield VA 23236</i>	<i>Housewife</i>	e. Election Sum to Date
		\$ <i>100.-</i>

l. 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>7-31-12</i>	\$ <i>100.-</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

\$ *600.-*

\$ *1700.-*

Contributions from Individuals

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

<i>Brenda Houston for Court Commissioner</i>					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
<i>ROBERT TEAR JR PO BOX 13508 RTP, NC 27709</i>		<i>Self Developer</i>			
		c. Employer's Name/Specific Field			
		<i>Teed Associates RTP, NC</i>		e. Election Sum to Date	
				<i>\$ 100.-</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>9-24-12</i>	<i>\$ 100.-</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
<i>Michael Palmer 2804 TAVISTOCK DR. Durham, NC 27712</i>					
		c. Employer's Name/Specific Field			
		<i>Self Help Credit Union Durham</i>		e. Election Sum to Date	
				<i>\$ 75.-</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>9-26-12</i>	<i>\$ 75.-</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
<i>W Stephen Toler 8709 N. 11 HOUSE LN BAHAMA, NC 27503</i>		<i>Consultant</i>			
		c. Employer's Name/Specific Field			
				e. Election Sum to Date	
				<i>\$ 75.-</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>9-26-12</i>	<i>\$ 75.-</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
					<i>\$ 250.-</i>
					<i>\$ 1700.-</i>

Contributions from Individuals

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

<i>Brenda Newton For County Commissioner</i>					
a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>		b. Job Title/Profession		d. Comments	
<i>Robert Teer Jr P.O. Box 13508 RTP, NC 27709</i>		<i>Developer</i>			
		c. Employer's Name/Specific Field			
		<i>Airport Outbound Teer Associates</i>		e. Election Sum to Date	
				\$ <i>100.-</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>9-24-12</i>	\$ <i>100.-</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>		b. Job Title/Profession		d. Comments	
<i>Faye Cal Hoen 31 Juliette Dr. Durham NC 27713</i>					
		c. Employer's Name/Specific Field			
		<i>Retired</i>		e. Election Sum to Date	
				\$ <i>100.-</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>9-26-12</i>	\$ <i>100.-</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>		b. Job Title/Profession		d. Comments	
<i>Margaret Cox Giffin 4018 Bristol Rd Durham NC 27707</i>		<i>House Wife</i>			
		c. Employer's Name/Specific Field			
				e. Election Sum to Date	
				\$ <i>250.-</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>9-26-12</i>	\$ <i>250.-</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
				\$ <i>450.-</i>	
				\$ <i>1700.-</i>	

Contributions from Individuals

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

<i>Brenda Houston For County Commissioner</i>					
a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>		b. Job Title/Profession		d. Comments	
<i>Patricia Hannah 1603 Cultivar Ln Durham, NC 27713</i>		<i>Agent</i>			
		c. Employer's Name/Specific Field			
		<i>Subvent Mutual</i>			
		e. Election Sum to Date			
				\$ <i>100.-</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>9-28-12</i>	\$ <i>100.-</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>		b. Job Title/Profession		d. Comments	
<i>Kevin Montgomery 204 Hardwick Rd Durham, NC 27713</i>					
		c. Employer's Name/Specific Field			
		<i>O'Brien Atkins</i>			
		e. Election Sum to Date			
				\$ <i>100.-</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>9-4-12</i>	\$ <i>100.-</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
a. Full Name, Mailing Address & Phone <small>(include city, state, & zip)</small>		b. Job Title/Profession		d. Comments	
<i>Thomas Hunt 1115 Don phil Rd Durham NC 27712</i>					
		c. Employer's Name/Specific Field			
		<i>Retiree</i>			
		e. Election Sum to Date			
				\$ <i>200.-</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>8-16-12</i>	\$ <i>200.-</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
					\$ <i>400.-</i>
					\$ <i>1700.-</i>

Disbursements

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

Brenda Hewerton for Local Comm. 2012

Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
<i>Fed Ex Dish</i>		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<i>Copies</i>	
				\$ <i>12.16</i>	

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	<i>Dish</i>	<i>C</i>	<i>7-5-12</i>	\$	
				\$	

a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
<i>Fed Ex Dish</i>		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<i>Copies</i>	
				\$ <i>34.89</i>	

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	<i>Dish</i>	<i>C</i>	<i>7-5-12</i>	\$	
				\$	

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

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	<i>Dish</i>	<i>C</i>	<i>7-5-12</i>	\$	<i>35.04</i>
				\$	

\$ *82.09*

(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)

\$ *795.94*

- 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.

Wendell Howerton Fire Counts Commission

Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Brenda Howerton 3325 Tarleton West Durham NC 27713				Reimbursement	
		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:		\$ 200. -	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	check		7-1-12	\$	
				\$	

a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
for Cremontie				Poll Work	
		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:		\$ 20. -	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	check	0	8-30-12	\$	
				\$	

a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Valarie Brown				Campaign Work	
		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:		\$ 100. -	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	check	0	8-25-12	\$	
				\$	

\$ 320. -

(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)

\$ 795.94

- 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) <i>Mendo Hewitt for Court 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>Blued Family Care Durham</i>			b. Coordinated Committee Name		d. Comments <i>Don't travel to court Carpenter Sign</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>\$ 37.35</i>	
f. Account Code	g. Form of Payment <i>Debt</i>	h. Purpose Code <i>C</i>	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	
				\$		
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>\$ 37.35</i>
6. Total of ALL CRO-1310 Pages						<i>\$ 795.94</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>Blends Howerton for County Commission</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>Sycamore Restaurant Durham, NC</i>					<i>Campaign Team meeting</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>\$62.83</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>Debit</i>	<i>0</i>	<i>8-2-12</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>Vonage</i>					<i>Campaign phone</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>\$34.65</i>	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	<i>Debit</i>	<i>C</i>	<i>7-17-12</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</i>					<i>Acc. Maint.</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>\$ 10 -</i>	
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>\$ 107.48</i>	
6. Total of ALL CRO-1310 Pages					<i>\$ 795.94</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.

Blonde Hunter For County Commission

Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
<i>Shell Oil</i>		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<i>Trail-Campaign Work Sign Delivery</i>	
				\$ <i>30.18</i>	

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	<i>Debit</i>	<i>C</i>	<i>8-6-12</i>	\$	
				\$	

a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
<i>Shell Oil</i>		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<i>Trail-Campaign Work Sign Delivery</i>	
				\$ <i>40.28</i>	

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	<i>Debit</i>	<i>C</i>	<i>8-10-12</i>	\$	
				\$	

a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
<i>Vonage</i>		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<i>Phone - Campaign</i>	
				\$ <i>34.65</i>	

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	<i>Debit</i>	<i>C</i>	<i>8-17-12</i>	\$	
				\$	

\$ *105.11*

(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)

\$ *795.94*

- 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) Brenda Howerton for County Commissioner						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) Foster Market				b. Coordinated Committee Name		d. Comments Campaign Committee Meeting	
				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 \$ 15.92	
f. Account Code	g. Form of Payment Debt	h. Purpose Code 0	i. Date (mm/dd/yyyy) 9-4-2	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) Suntrust				b. Coordinated Committee Name		d. Comments Acct maint.	
				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 \$ 10.00	
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						\$ 25.91	
6. Total of ALL CRO-1310 Pages						\$ 795.94	
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.

Monica Howerton for, County Commissioner

Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures

a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
<u>Rockwood Family Fair</u>			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality.		<u>Gas Travel for Campaign</u>
					e. Election Sum to Date \$ <u>38.22</u>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	<u>Debt</u>	<u>C</u>	<u>9-9-12</u>	\$	
				\$	

a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
<u>Vonage</u>			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<u>Phone Campaign</u>
					e. Election Sum to Date \$ <u>34.65</u>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	<u>Debt</u>	<u>C</u>	<u>9-26-12</u>	\$	
				\$	

a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
<u>C+H Cafeteria</u>			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<u>Heating / Food for Campaign Workers</u>
					e. Election Sum to Date \$ <u>15.12</u>
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	<u>Debt</u>	<u>O</u>	<u>9-28-12</u>	\$	
				\$	

\$ 87.99

(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)

\$ 795.94

- 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

