Disclosure	Report Co	ver				Amendment
			formation.	must be signed and	submitted alo	ng with other detailed forms.
Do not use this	form to update i	nformation.		be albited and	buominica and	ng with other detailed forms.
1. Committee I	nformation				1,941 (517).	
a. Full Name	i paliti alte sil e e e e e e e e e e e e		<u> </u>			c. ID Number
Brenda	Hower	ton For	Coun	& Conness	um L	
b. Mailing Address		te and Zip Code)		J -		d. Date Filed
3325 1	anleto	n-4)				7/24/10
Dukha	mINC.	27713				1/07/16
DURham, NC 27713						e. Phone Number
2 D						919.544.4160
	3. Period Start	Date (mm/dd/yy)	4. Period 1	End Date (mm/dd/yy	5. Treasur	er Full Name
2015	1-1-15	5	6/30			
6. Type of Com						ort from one category)
Candidate Can		·	nicipal	State/County		Referendum
Independent Ex		erendum	Organizationa	— -		Organizational
Legal Expense		t Fundraiser	Thirty-five da Pre-primary	· I— ·	•	Pre-referendum
Legal Expense	runu	出	Pre-election	Fir	st cond	Final
7. Type of Fund	(if applicable,	check one	Pre-runoff	Thi		Supplemental Final Annual
Booster Fund			Semi-annual	For		Special
Building Fund		in	Mid Yea	-	++-	Special
			Year End	.	d Year	10. Special Report Name*
Other:			Final	I 	ar End	
8. Number of F	undraisers this	Report 💮	Special	Final		
				Special		
11. Account Inf	ormation	T Marin		11 PACE CONTROL TO A	mation	
a. Financial Institut				a. Financial Institution		
Dunt	Twee /	Brend		<u> </u>		
b. Purpose		c. Account Code		b. Purpose		c. Account Code
		d. Period Begin Bal	ance			d. Period Begin Balance
		\$ 695	15			\$
CERTIFICATION (CERTIFICATION CERTIFICATION C	ON	+01011				
		id is in compliance	with all annli	onblo provisions of A	eriala 20 A 201	3 & 22D-22M of Chapter 163
of the NC General	al Statutes and the	it no funds are com	with an appir mingled with	Trohibited or other n	rucie ZZA, ZZI m-disclosed fi	ands. I further certify that this
report is complet	e, true and correc	and that I have been	en trained by	the NC State Board of	f Elections.	inds. Traduct certify that this
12	/ //		(LAS	/]/<		
When	ela Hou	rentous	V 111	Carle Horn	ortin	77/24/15
	inted Name of Sign		Sign	nature of Appointed Trea	surer	Daye
FOR OFFICE U	SE ONLY IN	PERSON		1		
Date Receive	ed:	JL 2 4 2015	Employ	ee: <u>5</u>		<u>ivery Method</u> Normal Mail
Date Postma	-	IF 5 # YAIT	Employ	ee.		Registered Mail
		RHAM BOE	aniipioy			Hand Delivered
Date Scanned			Employ	ee:	_	Electronically Filed
Date Data En	tered:		Employ	ee:		Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary			Amendment
Use this form to summarize all disclosure reporting forms and	d to total me	onetary information	Yes No
1. Committee Full Name (and Fund if applicable)	2. Type of	f Report	3. ID Number
Mencla Haweiland	u Cor	ente Connece	in
Start of Election Cycle: January 1,	_	Total this Reporting Period	Total this
4) Cash on Hand at Start		\$ 695.15	Election Cycle
RECEIPTS	···		
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$1,000.10	\$
7) Contributions from Political Party Committees	(CRO-1220)		\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	11d and 11e)	\$ 6000000	\$
<u>EXPENDITURES</u>	# W <u></u>		
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 469.69	\$
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 100.00	\$
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)	\$	\$
	(CRO-1510)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15		\$ 569.69	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$1125.46	\$
ADDITIONAL INFORMATION	·		Market Commission (Commission Commission Commission Commission Commission Commission Commission Commission Com
والمراجع والمنافذ	(CRO-1330)	\$	West visite the second
	(CRO-1430)	\$	
	(CRO-1610)	\$	
	(CRO-1620)	\$	
	(CRO-1720)	\$	
	(CRO-1710)	\$	\$
the contract of the contract o	(CRO-1440)	\$	\$
00 G (D)	CRO-2220)	\$	\$
28) Contributions to be Refunded (6	CRO-1215)	\$	\$

		m Individuals			Pg	of	Yes No
		ividual contributions of (and Fund if applica		0 or contributions	under \$50 if form	2. ID Nu	
	lowerton for Cour		oney			Z. IIJ Nui	HOCF
, ,				- American Control of the Control of			
	ibutor Informations, Mailing Address	· · · · · · · · · · · · · · · · · · ·	<u> </u>	Add	Remove	116	
	city, state, & zip)	& Phone		b. Job Title/Profe Managing Par		d. Commen	ts
Bob Ingr				ividinaging i di	inci		
	Ventures Partners			c. Employer's Na	me/Specific Field		
	angum St, Suite 35	50		Business Owe	r		
Durham, 919-484-						e. Election S	Sum to Data
717 101	0,30						
	1					\$	1000.00
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/d	ld/yyyy)	k. Amount
		Check			4/	16/15	\$ 1000.00
							\$
							\$
3. Contr	ibutor Informatio	n c		Add []	Remove		
a. Full Nar	ne, Mailing Address &	& Phone		b. Job Title/Profe		d. Commen	ts
(include	city, state, & zip)			r			
				E. I. I. N	(C) to bridge a w		
				c. Employer's Nai	ne/Specific Field		
						e. Election S	Sum to Date
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Lind Description	j. Date (mm/d	.,	k. Amount
					3, 240 (444	~.33337	\$
$\overline{\Box}$			<u></u>			1 81 10 8 M A	\$
							\$
3. Contri	butor Informatio			Add 🗍	Remove		*
عصيرف والمراسعة كالما	ne, Mailing Address &		<u> </u>	b. Job Title/Profes		d. Comment	<u> </u>
	city, state, & zip)						
				c. Employer's Nan	ne/Specific Field		
						e. Election S	um to Date
						\$	un to Date
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/d	d/yyyy)	k. Amount
						-	\$
		200					\$
	,						S
4. Total	only this Page					\$	1000.00
	of ALL CRO						
ALCOHOLOGICAL PROPERTY.		Detailed Summary Page Ci	RO-1100)			\$	1600.60

Contributions from Individuals

Amendment

Disbursen	aents		Pg	/ of	3 Yes No
Use this form to	o report expenditures	from the commit	tee for; operating expenses	s, contributions to	candidate/political
committees and	d coordinated party ex	xpenditures.	, 1 G 1	,	F
1. Committee	Full Name (and Fur	d if applicable)			2. ID Number
Brenda Hower	ton for County Comr	missioner			
3. Type of Disi	bursement (Ple	ase use separate (RO-1310 forms for each	type of Disbursen	nent.)
Operating			ndidates/Political Committees		ordinated Party Expenditures
4. Payee Infor	mation		Add	Remove	
a. Full Name, Mai	ling Address & Phone		b. Coordinated Committee		d. Comments
(include city, state					
SunTrust Bank					
P.O. Box 3051	83		c. Level Registered (Specify)	
Nashville, TN	37230		Federal	County:	
,			State	Municipality:	e. Election Sum to Date
			L. State	winicipanty.	
					\$ 12.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	draft	_	07/20/14	\$12.00	Mantenance
/	dran		07/29/14	\$12.00	
				\$	
4. Payee Infor	mation		Add	Remove	
a. Full Name, Mai	ling Address & Phone		b. Coordinated Committee I	Vame	d. Comments
(include city, state	, & zip)			A-30	Maintenance
Sun TrustBank			7		
P.O. Box 3051	83		c. Level Registered (Specify))	-
Durham, NC			Federal County:		-
Darmani, 110			State	Municipality:	a Floriday Cum to Data
			State	windicipanty.	e. Election Sum to Date
					\$ 12.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
/	debt	0	9/8/14	\$60.00	
				\$	
4. Payee Inform					
The state of the s			Add	Remove	
	ling Address & Phone		b. Coordinated Committee ?	Name	d. Comments
(include city, state	, & zip)				
Suntrust	•				
PO Box 30518			c. Level Registered (Specify)		_
Nashville, TN	37230		Federal	County:	
			State	Municipality:	e. Election Sum to Date
					\$ 12.00
. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
/	dua fi	*	0/20/14	010.00	Mantenance
/	draft	8	9/30/14	\$12.00	
•				\$	
		1,		\$	
. Total only th					\$ 36.00
	CRO-1310 Pages				
	n line 13a of Detailed Sun				\$ 569.69
			0 if Contrib to Candidates/Politi		301.09
			0 if Coordinated Party Expendit	ures)	
	les (List detailed ex	penditure code in	(h.) above)		
* - Media	B* - Printing	C* - Fund		D - To Anoth	er Candidate
E - Salaries	F* - Equipment		•		Public Office Expenses
I - Postage	J - Penalties	K* - Offic	ce Expenses	Q* - Donatio	n to Legal Expense Fund
O* - Other					

Dist	oursements	
DISL	tai seinents	

Pg 2 of 3 Amendment Yes No

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

1. Committee 1	un same (and run	и и аррисавіе)			2. ID Number	
3. Type of Dish	ursement (Plea	ise use separate (CRO-1310 forms for each	type of Disburse	ment)	
Operating I			andidates/Political Committees		Coordinated Party Expenditures	
4. Payee Inform	· 		Add	Remove		
a. Full Name, Mail	ing Address & Phone		b. Coordinated Committee !	Vame	d. Comments	
(include city, state.	, & zip)				Community event	
Steve Hopkins						
654 N. Hardee	st, Apt. B		c. Level Registered (Specify))		
Durham, NC 2	.7703		Federal 🔀	County:		
919-236-1532			State	Municipality:	e. Election Sum to Date	
					\$ 50.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Debt	0	6/3/15	\$50.00		
				\$		
4. Payee Inform	nation		Add	Remove		
a. Full Name, Mail	ing Address & Phone		b. Coordinated Committee	Name	d. Comments	
(include city, state,					Board Developme	
	oard of Diversity					
Chapel Hill, No	27599		c. Level Registered (Specify))	_	
			Federal County:			
			State	Municipality:	e. Election Sum to Date	
					\$ 150.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
/	Check	H	5/21/15	\$150.00		
•				\$		
4. Payee Inform	nation		Add	Remove		
a. Full Name, Mail	ing Address & Phone		b. Coordinated Committee P	Vame	d. Comments	
(include city, state,	, & zip)				Maintenance	
SunTrust Bank]			
P.O. Box30518	13		c. Level Registered (Specify)			
Nashville, TN	37230		Federal 😡	County:		
			State Municipality:		e. Election Sum to Date	
					\$ 12.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1		Ø	6/30	\$12.00		
				\$		
5. Total only th	is Page				\$ 212.00	
	CRO-1310 Pages			Managara da	<u> </u>	
		nmary Page CRO-110	00 if Operating Expenses)		10	
			00 if Contrib to Candidates/Politi	ical Comm)	\$ 569.69	
(This line goes in	line 13c of Detailed Sun	nmary Page CRO-110	00 if Coordinated Party Expendit	tures)	· ·	
	les (List detailed ex					
A* - Media B* - Printing C* - Fund					ther Candidate	
E - Salaries	F* - Equipment	G - Politi	. •		ng Public Office Expenses	
I - Postage	J - Penalties	K* - Offi	ice Expenses Q* - Donation to Legal Expense Fund			
O* - Other * Codes requir	re detailed explanat	ion in required r	emarks field (k)	.14		

Disbursements

Pg 3

03

Amendment
Yes

No

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

	ull Name (and Fun				2. ID Number		
Brenda Howerto	on for County Comn	nissioner					
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
Operating E			ndidates/Political Committees		ordinated Party Expenditures		
4. Payee Inform		the state of the s	Add	Remove			
	ng Address & Phone		b. Coordinated Committee Na		d. Comments		
•	•		b. Coordinated Committee 142	RIDE	d. Comments		
(include city, state,	& zip)		-				
Wix.com					_		
P.O. Box 40190	•		c. Level Registered (Specify)				
San Francisco,					4		
CA, 94140			Fcderal 🖂	County:			
			State	Municipality:	e. Election Sum to Date		
					E 150 O		
					\$ 158.9		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
					A new political		
1	Debt	A	6/3/15	\$158.90	71 ponerous		
<i>f</i>	2000	F 1	0,3,13	\$130.70	Website		
		<u> </u>			Website		
				 \$			
				L			
4. Payee Inform	**************************************		Add 🔲	Remove			
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Na	ıme	d. Comments		
(include city, state,]		Campaign Team		
Natucket Gril an	nd Pub		Nantucket		Meeting		
5826 Fayettevill	le Rd		c. Level Registered (Specify)				
Durham, NC 27	713		Federal	County:	1		
,			State	Municipality:	e. Election Sum to Date		
				wanesparty.	Craftetion Sum to Date		
					\$ 62.79		
f. Account Code	g. Form of Payment	h. Purpose Code	1: 5-4 ((31)	1			
i. Account Coue	g. rottii oi rayinent	u. r ui post cout	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
<i>j</i>	draft	Н	6/15/15	\$62.79			
				\$			
		<u> </u>		Y			
4. Payee Inform	ation		Add D	Remove			
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Na	ıme	d. Comments		
(include city, state,	& zip)	_					
1 00 54 1	all Aum	00101					
Lanny	AND Carry	pary N	c. Level Registered (Specify)		1		
DOI D	N 256 08		Federal Federal	County:	-		
11.46	610 000	407		•			
Duphan	ALL Cam \$25508 100 27	, v ~	State	Municipality:	e. Election Sum to Date		
			•		\$/80,00		
		r		, · · · · · · · · · · · · · · · · · · ·	1,007 0		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	1/2 1		1.1121.	6 404 43			
<i>[</i>	Chlick		0/18/15	\$. 100.00			
				\$			
5. Total only th	s Page	Jakor Vake (edagia).		ta a sa a	s 321.69 s 569.69		
	CRO-1310 Pages				3-47.97		
	_	mary Paga CDA 110	0 if Operating Expenses)		-1010		
			· · · · · ·	-1 C)	\$ 569,69		
(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)							
				res)			
	es (List detailed ex						
A* - Media B* - Printing C* - Fundraising				D - To Anoth			
E - Salaries F* - Equipment G - Politic				Public Office Expenses			
			ce Expenses	Q* - Donatio	on to Legal Expense Fund		
O* - Other							
the state of the s	en againg a grafie sa tentre i sa tentre i sa	المراجع والمستعلق المناسي والإناران	الأراج الأراج الأراج الأراج المنظم المنظم المنظور الإنهار المنظم المنظم المنطق	CANCEL PROPERTY OF THE PARTY OF			