## **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
Brenda Howerton for County Commissioner			
		Total this	Total this
Start of Election Cycle: January 1,	2020	Reporting Period	Election Cycle
4) Cash on Hand at Start		\$ \$667.95	\$
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$	\$
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 Organizati	ons (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, 12	lc, 11d and 11e)	\$	\$
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 1853.14	\$
13b) Contributions to Candidates/Political Commi	ttees (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)	\$ 1853.14	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18)	\$ -1185.19	\$
ADDITIONAL INFORMATION			IN PERSON
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	II LITOIT
21) Outstanding Loans (incl. ones from other campaig	gns) (CRO-1430)	\$	SEP 0 4 2020
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$	
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$	DURHAM BOE
24) Account Transfers Within the Committee	(CRO-1720)	\$	FIRE REPLACE
25) Administrative Support	(CRO-1710)	\$	\$
26) Forgiven Loans	(CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$

Use this form for ger	neral report and committee	information, must be	signed and sub	mitted along wi	th other d	letailed forms.				
Do not use this form to update information  1. Committee Information										
a. Full Name	mation					ID Number				
	ounty Commissioner					117 Ivumber				
b. Mailing Address (incl	ude City, State and Zip Code)				d.	Date Filed				
3325 Tarleton West					<del>-   -</del>					
Durham, NC 27713										
					е.	Phone Number				
		4 Dorto J	E-J D-4-							
2. Report Year	3. Period Start Date (mm/	dd/yy) 4. Period (mm/dd/yy)	End Date	5. Treasurer		ne				
2020	04/01/2020	06/3	30/2020	Monica Biggs	S					
6. Type of Committ	ee (Check One)	9. Type of Report	(check on	ly one type of re	port fron	n one category)				
Candidate Campa	ign Party	Municipal		/County Referendum						
PAC	Referendum	Organizationa	1	Organizational		Organizational				
Independent Expenditure	Joint Fundraiser	Thirty-five da	у	Quarterly	_	Pre-referendum				
Legal Expense Fu	ınd									
7. Type of Fund	(if applicable, check one)	Pre-primary		First		Final				
"Booster Fund"		Pre-election		Second		Supplemental Final				
Building Fund		Pre-runoff		Third		Annual				
		Semi-annual		Fourth		Special				
		Mid Yea		Semi-annual						
Other:		Year End	'	Mid Year	10	). Special Reporpties O				
8. Number of Funda	naisans this Damant	Final		Year End	1					
o. Number of Fund	raisers this Report	Special		Final		SEP 0 4 2020				
11. Account Inform	otion	<u> </u>		Special		OC: V + 1010				
a. Financial Institution F			11. Account	iniormation						
Wells Fargo	un 14ame		a. Pinanciai inst	nution Full Name		DURHAM BO				
b. Purpose	c. Account Code		b. Purpose			c. Account Code				
Campaign										
	d. Period Begin Balanc	· ·	-			d. Period Begin Balance				
	\$ 667.95					<b>\$</b>				
CERTIFICATION	•									
I certify that the Com	imittee or Fund is in compl	iance with all applica	able provisions	of Article 22A,	22B, & 2	2D-22M of Chapter 163 of				
is complete true and	ites and that no runds are c	ommingled with prof	nibited or other:	non-disclosed fi	inds. I fui	rther certify that this report				
is complete, true and correct and that I have been trained by the NC State Board of Elections.  Monica Biggs  9/2/2020										
	Printed Name of Signer	S .	Signature of Appoin	ted Treasurer	71412	Date				
FOR OFFICE USE O			11							
Date Received:		Employee:	A		Deli	very Method				
Date Received.	//	Employee.	-/-			Normal Mail				
Date Postmarked	1:	Employee:				Registered Mail				
	(Accessed to the Control of the Cont		2	<del></del>	M	Hand Delivered				
Date Scanned:		Employee:				Electronically Filed				
	0======================================	· ·	-		Ц	Signer has not received				
Date Data Entere	ed:	Employee:				mandatory training				
Diago Notos mi	Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer,									
<ul> <li>r rease (sole) [b)</li> </ul>	- C (1 - 1)			41	1.1					
Troube Troter 1m	s form cannot be used to a	nend committee info	rmation such as	the committee	address, t	reasurer, assistant treasurer,				
Trouse Trotter IIII	s form cannot be used to a custod You must amend the State	ian of books informa	tion, or account	information.						

CRO-1000

**Disclosure Report Cover** 

Amendment

Disbursements	Pg	1	of	4	Amendment Yes	No
Use this form to report expenditures from the committee for; operating e	expenses,	contr	ibutions to	car	ndidate/political	
committees and coordinated party expenditures.						

1. Committee Full Name (and Fund if applicable)  2. ID Number								
	n for County Comm							
3. Type of Disbu	rsement (Plea	se use separate C	RO-1310 forms for each ty	pe of Disbursem	ent.)			
Operating Ex	rpenses	Contributions to Car	ndidates/Political Committees	Coo	ordinated Party Expenditures			
4. Payee Inform	ation		Add	Remove				
	ng Address & Phone	- Indiana	b. Coordinated Committee Na	ame	d. Comments			
(include city, state,	& zip)							
Wix.com								
77 IN. COII			c. Level Registered (Specify)					
			Federal	County:				
			State	Municipality:	e. Election Sum to Date			
			State	withincipality.	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			
I. Account Code	g. Form or Layment	u. pose coue	i. Date (ilini/dd/yyyy)	j. Amount	WEBSITE			
1	card	O	6/29/20	\$36	WEDSITE			
				\$				
4.70 * 7.0			A 11					
4. Payee Inform			Add	Remove	T			
	ng Address & Phone		b. Coordinated Committee Na	ame	d. Comments			
(include city, state,								
Crawley Creativ								
Greensboro, NC	•		c. Level Registered (Specify)					
			Federal	County:				
			State	Municipality:	e. Election Sum to Date			
					\$			
			2					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
1	electronic	Е	4/6/20 \$250.00					
		\$	IN PERSON					
4. Payee Inform	ation		Add	Remove				
	ng Address & Phone		b. Coordinated Committee Na		d. Comments SEP 0 4 2020			
(include city, state,	-				3L) V × 2020			
Lifeloc	**		-					
Lifeioc			c, Level Registered (Specify)		DURHAM BOE			
			Federal Federal	County:				
			State	Municipality:	e. Election Sum to Date			
			State	with the street of the street	e. Election Sum to Date			
					\$			
f. Account Code	g. Form of Payment	h. Purpose Code	i Date (mm/dd/saran)	j. Amount	k. Required Remarks			
i. Account Code	g. corni di rayment	an I ai post Cout	i. Date (mm/dd/yyyy)	J. Amount	n. Acquireu Acmarks			
1	card	0	6/5/20	\$104.97				
				e				
				\$				
5. Total only th					\$ 390.97			
	CRO-1310 Pages							
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)  \$ 1853.14								
(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)								
	es (List detailed ex							
A* - Media	B* - Printing	C* - Fun		D - To Anoth				
E - Salaries	F* - Equipment		itical Party H* - Holding Public Office Expenses					
I - Postage	J - Penalties	K* - Offi	ce Expenses	Q* - Donatio	n to Legal Expense Fund			
O* - Other	المعالمة المعالمة	lan in manufact	amoulto Gold (I.)					
- " Codes requir	e detailed explanat	ion in required r	emarks neid (K)					

D	is	b	ur	se	m	en	ts	
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Pg 2 of 4 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 Full Name (and Fund if applicable) 2. ID Number Brenda Howerton for County Commissioner (Please use separate CRO-1310 forms for each type of Disbursement.) 3. Type of Disbursement Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures 4. Payee Information Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) Actblue c. Level Registered (Specify) Federal County: State 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 0 \$14.25 1 electronic 4/3/20 \$ 4. Payee Information Add Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) Grammarly c. Level Registered (Specify) Federal County: State Municipality: e. Election Sum to Date h. Purpose Code f. Account Code g. Form of Payment i. Date (mm/dd/yyyy) k. Required Remarks j. Amount software \$59.95 1 0 4/8/20 card IN PERSON \$ 4. Payee Information Add Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments SEP 0 4 2020 (include city, state, & zip) Vantiv **DURHAM BOE** c. Level Registered (Specify) Federal County: State 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 1 0 \$17.97 card 4/9/20 \$ 5. Total only this Page \$ 92.17 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$ 1853.14 (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

I - Postage

O\* - Other

F\* - Equipment

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

J - Penalties

G - Political Party

K\* - Office Expenses

H\* - Holding Public Office Expenses

Q\* - Donation to Legal Expense Fund

Disburseme	ents		1	Pg	<u>3</u>	of <u>4</u>	Amendment Yes No			
			e for; operating expen	nses, o	contribution	s to candida	ate/political			
	coordinated party ex									
	ull Name (and Fund						2. ID Number			
	on for County Comm		00 1210 (	1. 4	cn!.t					
3. Type of Disbu			RO-1310 forms for ea		pe of Disbu		4 Death Francis He man			
4. Payee Inform		Continuations to Care	Add	es	Remove	Coordinate	d Party Expenditures			
	ation ng Address & Phone		b. Coordinated Commit	too Na		d Co	d. Comments			
(include city, state,			b. Coordinated Commit	ice iva	RIC	u. Co	d. Comments			
Paula Wolfe	*/									
616 Weathergre	en Drive		c. Level Registered (Spec	cify)						
Raleigh, NC 276			Federal		County:					
			State		Municipality	: e. Ele	ection Sum to Date			
						\$				
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	)	j. Amount	k. Re	quired Remarks			
1	check	E	5/11/20		\$1000					
					\$					
4. Payee Inform	ation		Add		Remove					
a. Full Name, Mailin	ng Address & Phone		b. Coordinated Committee Name			d. Co	omments			
(include city, state,	& zip)									
Durham for All										
1803 Chapel Hil		-	c. Level Registered (Spe	cify)						
Durham, NC 27	707		Federal County:			Til	- C - C - A - D - A			
		-	State		Municipality	: e. Ele	ection Sum to Date			
						\$				
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	)	j. Amount	k. Re	equired Remarks			
1	card	0	6/29/20		\$20.00	men	nbership			
					\$		IN PERSON			
4. Payee Inform	ation		Add Remove				INFLINE			
a. Full Name, Mailing Address & Phone			b. Coordinated Committee Name			d. Co	d. Comments			
(include city, state, & zip)							SEP 0 4 2020			
SK Graphic Des										
steve@skgraphicdesign.com			c. Level Registered (Specify)			DURHAM BOE				
			Federal	H	County:					
			State	Ш	Municipality	e. Ele	ection Sum to Date			
					\$					
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	)	j. Amount	k. Re	equired Remarks			

1 Ε 5/16/2020 \$150 card \$ 5. Total only this Page \$ 1170 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$ 1853.14 (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 J - Penalties I - Postage K\* - Office Expenses Q\* - Donation to Legal Expense Fund O\* - Other \* Codes require detailed explanation in required remarks field (k) NC State Board of Elections December 2009