## **Detailed Summary**

Amendment
Yes No

Use this form to summarize all disclosure reporting forms and to total monetary information.

2. Type of Report	3	. ID Number
First Quarter		
_2020	Total this Reporting Period	Total this Election Cycle
	\$ 8724.84	\$
-1		\$ 385
(CRO-1210)		\$ 18,198.91
(CRO-1220)	\$ 4350	\$ 4350
(CRO-1230)	\$	\$
(CRO-1410)	\$ 5000	\$ 5000
(CRO-1240)	\$	\$
		\$
ons (CRO-1250)	\$	\$
(CRO-1250)	\$	\$
(CRO-1270)	\$	\$
(CRO-1265)	\$	\$
lc, 11d and 11e)	\$ 27,933.91	\$ 27,933.91
	A 455.00	0.000
		\$ 32,455.80
ttees (CRO-1310)		\$ 3535
(CRO-1310)	\$	\$
(CRO-1315)	\$	\$
(CRO-1420)	\$	\$
(CRO-1320)	\$	\$
(CRO-1510)	\$	\$
15, 16 and 17)	\$ 35,990.80	\$ 35,990.80
btract line 18)	\$ 667.95	\$ 667.95
(CRO-1330)	\$	
(CRO-1430)	\$	
(CRO-1610)	\$	
(CRO-1620)	\$	
(CRO-1720)	SIN DEDSON	
(CRO-1710)	S	\$
(CRO-1440)	\$ 1111 0.7 2020	\$
(CRO-2220)	\$	\$
(CRO-1215)	\$DURHAM BOE	\$
	2. Type of Report First Quarter  2020  (CRO-1205) (CRO-1210) (CRO-1220) (CRO-1230) (CRO-1240)  (CRO-1250) (CRO-1250) (CRO-1250) (CRO-1250) (CRO-1250) (CRO-1250) (CRO-1270) (CRO-1265)  (CRO-1310)	Total this   Reporting Period   \$ 8724.84     (CRO-1205)   \$ 385   (CRO-1210)   \$ 18,198.91   (CRO-1230)   \$ (CRO-1230)   \$ (CRO-1240)   \$ (CRO-1250)   \$ (CRO-1250)   \$ (CRO-1250)   \$ (CRO-1250)   \$ (CRO-1250)   \$ (CRO-1265)   \$ (CRO-1265)   \$ (CRO-1310)   \$ 32,455.80   \$ (CRO-1310)   \$ 3535   (CRO-1310)   \$ (CRO-1310)   \$ (CRO-1310)   \$ (CRO-1320)   \$ (CRO-1320)   \$ (CRO-1320)   \$ (CRO-1320)   \$ (CRO-1330)   \$ (CRO-1330

Use this form for gen Do not use this form			nformati	on, must be s	signed a	and subi	mitted along with ot	her de	tailed forms.
1. Committee Inform									
a. Full Name								e, ID	Number
Brenda Howerton for	r Count	y Commissioner							
b. Mailing Address (inclu	ıde City,	State and Zip Code)						d. D	ate Filed
PO Box 12461	•								
Durham, NC 27709									
								e. Pl	ione Number
									919-599-8213
2. Report Year	3, Peri	od Start Date (mm/d	d/yy)	4. Period E (mm/dd/yy)	end Da	te	5. Treasurer Full	Name	2
2020		01/01/2020	03/3	1/2020		Monica Biggs			
6. Type of Committe	Type of Committee (Check One) 9. Type of Rep						ly one type of report	from	one category)
Candidate Campa	ign [	Party	Municip			State/C			erendum
PAC		Referendum		Organizational			Organizational		Organizational
Independent	[	Joint Fundraiser		Thirty-five day			Quarterly		Pre-referendum
Expenditure Legal Expense Fu									
7. Type of Fund		icable, check one)		Pre-primary		$\boxtimes$	First		Final
"Booster Fund"	(9 (2)	Tunion, on one	H	Pre-election		Ħ	Second		Supplemental Final
Building Fund		Pre-runoff		H	Third	IH	Annual		
		Semi-annual		П	Fourth	ΙĦ	Special		
				Mid Year			Semi-annual		
Other:				Year End	Mid Year Year End			10.	Special Report Name
				Final					
8. Number of Fund	raisers	this Report		Special		Year End Final			
			1				Special		
11. Account Inform	ation		-		11. A	count l	Information		
a. Financial Institution F		e					titution Full Name		
Wells Fargo									
b. Purpose		c. Account Code			b. Purj	ose		c.	Account Code
Campaign									
. 3		1						-	
	Ī	d. Period Begin Balanc	e					d.	Period Begin Balance
		\$ 667.95						\$	
CERTIFICATION									
CERTIFICATION		or Fund in in1	inn oo	ith all annlin-	hlo	anioio	of Article 22 A 22F	9-00	2D-22M of Chapter 163 of
									ther certify that this report
is complete, true and	l correc	t and that I have bee	n trained	by the NC S	State Bo	nard of	Elections	3. I IUI	ther certify that this report
Monica Big			ii tiuniot	1	Mos	00		7/6/2	020
_ XVOIXEU DIE		ed Name of Signer		- /s	ignature	Appoir	nted Treasurer	THE	Date
FOR OFFICE USE C		C							
Date Received:				Employee:				Deliv	very Method
Date Received.				Employee.		18	IPERSON		Normal Mail
Date Postmarke	v4-			Employee:		11.	4 1 601	Ц	Registered Mail
Date i Ostharked.							A M 0000	님	Hand Delivered
Date Scanned:				Employee:			JUL 07 2020	H	Electronically Filed
			-					لـا	Signer has not received mandatory training
Date Data Enter	red:			Employee:			OURHAM BOE		manuatory training
							JONI IVIII P. 2.3		
Please Note: Th	is form							ress, tr	reasurer, assistant treasurer,
		custod	ian of bo	ooks informa	tion, or	accoun	t information.		
	Your	nust amend the State	ement of	Organizatio	n (CRC	)-2100A	A-E) to make commi	ttee ch	anges.

Amendment

No

**Disclosure Report Cover** 

Contribution	s from Other Political	l Comn	nittees Pg	<u>1</u> of	<u>2</u>	Amendment Yes No
Use this form to re	port contributions from other can	didate, ref	ferendum or PAC commit	tees		
	Name (and Fund if applicable	)			2. ID	Number
Brenda Howerton	for County Commissioner					
3. Contributor In	formation		Add Ren	nove		
a. Full Name, Mailing	Address & Phone		b. Type of Committee		d. Com	ments
(include city, state,	& zip)		Candidate	PAC		
Butterfield for Cor	ngress		Referendum	, v		
PO Box 2571			c. Level Registered (Specify	)		
Wilson, NC 27894	<b>}</b>		Federal	County:		
			State	Municipality:	e. Elect	ion Sum to Date
					\$	
f. Account Code	g. Form of Payment	h. In-Kind	d Description	i. Date (mm/dd/yyyy)		j. Amount
1	ck 5129			3/10/20		\$ 500
						\$
						\$
3. Contributor In	formation		Add Rer	nove		
a. Full Name, Mailing	Address & Phone		b. Type of Committee		d. Com	ments
(include city, state,	& zip)		Candidate	PAC		
CORE PAC			Referendum			
325 77th St NW St	e 600		c. Level Registered (Specify	)		
Washington, DC			Federal	County:		
			State	Municipality:	e. Elect	ion Sum to Date
					\$	
f. Account Code	g. Form of Payment	h. In-Kind	l Description	i. Date (mm/dd/yyyy)		j. Amount
1	check			2/6/20		\$ 2000
						\$
						Φ.

Add

X

b. Type of Committee

Candidate

c. Level Registered (Specify)

State

Federal

Referendum

3. Contributor Information

(include city, state, & zip)

Patrick Byker

2614 Stuart Drive

Durham, NC 27707

a. Full Name, Mailing Address & Phone

(This line must be on line 8 of Detailed Summary Page CRO-1100)

Remove

PAC

County: Municipality: d. Comments

e. Election Sum to Date

**Contributions from Other Political Committees** Pg Amendment Yes 🗌 No

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full	Name (and Fund if applicable	)			2. ID	Number
Brenda Howerton	for County Commissioner					
3. Contributor In	formation		Add Re	move		
a. Full Name, Mailing	Address & Phone		b. Type of Committee		d. Com	ments
(include city, state,	& zip)		Candidate	PAC		
Floyd McKissick			Referendum			
835 N Mangum St	;		c. Level Registered (Specify	y)		
Durham, NC 2770	1		Federal	County:		
			State	Municipality:	e. Elect	ion Sum to Date
					\$	
f. Account Code	g. Form of Payment	h. In-Kino	d Description	i. Date (mm/dd/yyyy)		j. Amount
1	check			12/30/19		\$ 250
						\$
						\$
3. Contributor In	formation		Add Re	emove		
a. Full Name, Mailing	Address & Phone		b. Type of Committee		d. Com	ments
(include city, state,	& zip)		Candidate	PAC		
			Referendum			
			c. Level Registered (Specify	y)		
			Federal	County:		
			State	Municipality:	e. Elect	ion Sum to Date
					\$	
f. Account Code	g. Form of Payment	h. In-Kin	d Description	i. Date (mm/dd/yyyy)	)	j. Amount
						\$
						\$
						\$
3. Contributor In	formation		Add Re	emove		
a. Full Name, Mailing	Address & Phone		b. Type of Committee		d. Com	ments
(include city, state,	& zip)		Candidate	PAC		
			Referendum			
			e. Level Registered (Specify			
			Federal	County:		
			State	Municipality:	e. Elect	ion Sum to Date
		,			\$	
f. Account Code	g. Form of Payment	h. In-Kin	d Description	i. Date (mm/dd/yyyy	- W	j. Amount
				INFERS	211	\$
				JUL <b>07</b> 202	20	\$
				DURHAM B	OE	\$
4. Total only this	Page				\$	250
5. Total of ALL C	CRO-1230 Pages	0.4400:			\$	4350
(This line must be of	n line 8 of Detailed Summary Page CR	D-1100)				

<b>Contributions from Individuals</b>	Pg <u>1</u>	of <u>16</u>	Amendment Yes No				
Use this form to report individual contributions over \$50 or contribut	ions under \$50 if form	n CRO 1205 is no	Harmed				
1. Committee Full Name (and Fund if applicable)		2. ID Nur					
Brenda Howerton for County Commissioner							
3. Contributor Information Add	Remove						
a. Full Name, Mailing Address & Phone b. Job Title/	Profession	d. Commen	ts				
(include city, state, & zip) Pastor							
Jerome Washington							
	s Name/Specific Field						
Durham, NC 27703 Mt. Verno	n Church						
		e. Election S	Sum to Date				
		\$					
f. Prior g. Account Code h. Form of Payment i. In-Kind Descriptio	n j. Date (mm	/dd/vvvv)	k. Amount				
1 check		3/3/20	\$ 100				
T CHCK							
			\$				
		ب	\$				
3. Contributor Information	Remove						
a. Full Name, Mailing Address & Phone b. Job Title/	Profession	d. Commen	ts				
(include city, state, & zip)							
Stephen Hancock							
	s Name/Specific Field						
Durham, NC 27707							
	**	e. Election	Sum to Date				
	\$						
f. Prior g. Account Code h. Form of Payment i. In-Kind Description	n j. Date (mm.	/dd/yyyy)	k. Amount				
1 ck #6138	2	2/17/20	\$ 100				
			\$				
			\$				
3. Contributor Information Add	Remove						
a. Full Name, Mailing Address & Phone b. Job Title/	T Keniove						
(include city, state, & zip) Real Estat		d. Commen	ts				
Carl P Webb		d. Commen	ets				
	Profession te Developer	d. Commen	its				
	Profession	d. Commen	its				
9 Haycox Court  Durham, NC 27713  c. Employer  Fortyam	Profession te Developer						
	Profession te Developer	e. Election	Sum to Date				
Durham, NC 27713 Fortyam	Profession te Developer s Name/Specific Field	e. Election s	Sum to Date				
Durham, NC 27713  Fortyam  f. Prior g. Account Code h. Form of Payment i. In-Kind Description	Profession te Developer s Name/Specific Field j. Date (mm	e. Election s	Sum to Date k. Amount				
Durham, NC 27713 Fortyam	Profession te Developer s Name/Specific Field j. Date (mm	e. Election s	Sum to Date				
Durham, NC 27713  Fortyam  f. Prior g. Account Code h. Form of Payment i. In-Kind Description	Profession te Developer s Name/Specific Field j. Date (mm	e. Election s	Sum to Date k. Amount				
Durham, NC 27713  Fortyam  f. Prior g. Account Code h. Form of Payment i. In-kind Description left left left left left left left left	Profession te Developer s Name/Specific Field j. Date (mm	e. Election s	Sum to Date  k. Amount \$ 200				
Durham, NC 27713  Fortyam  f. Prior g. Account Code h. Form of Payment i. In-kind Description left left left left left left left left	profession te Developer s Name/Specific Field j. Date (mm	e. Election s	k. Amount \$ 200				

of <u>16</u>

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

		n Individuals		Pg	of	16	Amendment Yes	No
				or contributions und	er \$50 if form CR			
1. Comm	nittee Full Name (	and Fund if applical	ble)			2. ID Num	ber	
Brenda H	lowerton for Coun	ty Commissioner						
3. Contri	ibutor Informatio	n		Add Rei	move			
a. Full Nan	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Comments	Ş·	
	city, state, & zip)			2 = 2				
Henry Sc				CEO				
	igton Place			c. Employer's Name/Sp	pecific Field			
Durham,	NC 27705					T7 11 0		
						e. Election S	um to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	1	ck 1705			2/18/2	0.0	\$	200
							\$	
							\$	
3. Contri	ibutor Informatio	on		Add Rei	move			
a. Full Nan	ne, Mailing Address d	& Phone		b. Job Title/Profession		d. Comments	S	
	city, state, & zip)			Consultant				
Steve To								
	l House Lane			c. Employer's Name/Sp	pecific Field			
Durnam,	NC 27503			Steve Toler, LLC		. Plantin C	4- D-4-	
						e. Election S	um to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	1	check			3/3/2	0	\$	100
							\$	
							\$	
3. Contri	ibutor Informatio	n		Add Re	move			
	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Comment	8	
	city, state, & zip)	,		37.7.0	./			
Ralph Ha				1 elires				
PO Box 2				c. Employer's Name/S	pecific Field			
Columbia	a, SC 29224					e. Election S	um to Doto	
ŀ							um to Date	
		1	1	IN RERSON		\$	1	
f. Prior	g. Account Code	h. Form of Payment	i. In-	Anm Desertphoti	j. Date (mm/dd/yy		k. Amount	
	1	ck 7625		JUL 0 7 2020	2/14/2	20	\$	100
				JOE 0 / 2020			\$	
				DURHAM BOE			\$	
4. Tota	l only this Pag	e				\$		400

18,198.91

\$

5. Total of ALL CRO-1210 Pages

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

		n Individuals			Pg	_3 of	16	Amendment Yes	☐ No
		vidual contributions o		or contributi	ons unde	r \$50 if form CRO	O 1205 is not	used	
1. Comm	ittee Full Name (	and Fund if applical	ole)				2. ID Num	ber	
Brenda H	owerton for Coun	ty Commissioner	H100000						
3. Contri	butor Informatio	n		Add 📙	Rem	iove			
	ne, Mailing Address &	Phone		b. Job Title/P	rofession		d. Comments		
	city, state, & zip)								
Mark Kul									
2821 Wad				c. Employer's	Name/Spe	ecific Field			
Durham,	NC								
							e. Election Su	m to Date	
							\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description		j. Date (mm/dd/yy	vv)	k. Amount	
				and Description					2500
	1	ck #3251				2/6/20	J	\$	2500
								\$	
								\$	
3. Contri	butor Informatio	n		Add	Rem	iove			
a. Full Nan	ne, Mailing Address &	Phone		b. Job Title/P	rofession		d. Comments		
(include	city, state, & zip)			Real &	-TA	To,			
Alice Sha									
PO Box 3				c. Employer's	Name/Spe	ecific Field			
Durham,	NC 27702								
							e. Election Su	im to Date	
							\$	100	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	1	j. Date (mm/dd/yy	уу)	k. Amount	
	1	ck 3848				2/16/2	20	\$	100
								\$	
								\$	
3. Contri	ibutor Informatio	n		Add	Ren	nove			
a. Full Nan	ne, Mailing Address &	k Phone		b. Job Title/P	rofession		d. Comments		
(include	city, state, & zip)								
Rosalyn									
2102 S A				c. Employer's	Name/Spe	ecific Field			
Chicago,	IL 60623								
				]			e. Election Su	im to Date	
							\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	1	j. Date (mm/dd/yy	уу)	k. Amount	
	1	ck 4041	IN	PERSO	N	3/12/2	20	\$	100

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

CRO-1210

NC State Board of Elections

April 2007

\$

2700

18,198.91

\$

\$

JUL 0 7 2020

**DURHAM BOE** 

4. Total only this Page

5. Total of ALL CRO-1210 Pages

Contributions from Individuals	Pg	4	of	16	Amei	ndment		
						Yes	$\boxtimes$	No

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

1. Co	mmi	ittee Full Name (	and Fund if applical	ble)					2. ID Num	ber	
		owerton for Coun									
3. Co	ntri	butor Informatio	n		Add		Remo	ove			
a. Full	Nam	e, Mailing Address &	& Phone		b. Job Tit	le/Profe	ession		d. Comments	\$	
		city, state, & zip)			Comput	ter Pro	gramm	ner			
Kevi	n Ro	binson									
		nie Drive			c. Employ	er's Na	me/Spec	cific Field			
Durh	am, 1	NC 27703			Labcorp	)					
									e. Election Si	um to Date	
									\$		
									Ψ		
f. Prio	r	g. Account Code	h. Form of Payment	i. ln-K	and Descrip	tion		j. Date (mm/dd/yy	yy)	k. Amount	
		1	ck 260					3/12/2	0	\$	200
										\$	
										\$	
3. Co	ntri	butor Informatio	n		Add		Remo	ove			
		e, Mailing Address &			b. Job Tit	le/Profe			d. Comments	8	
		city, state, & zip)			Associa						
		ders Association	of Durham		11000010						
1821 Hillandale Rd Ste B					c. Employ	er's Na	me/Spec	cific Field			
Durham, NC 27705					1 .						
Duradii, NC 27703					e.				e. Election Si	um to Date	
									\$		
f. Prio	r	g. Account Code	h. Form of Payment	i. In-K	and Descrip	tion		j. Date (mm/dd/yy	yy)	k. Amount	
		1	check					2/20/2	0	\$	250
										\$	
										\$	
3. Co	ntri	butor Informatio	n		Add		Remo	ove			
a. Full	Nam	e, Mailing Address &	& Phone		b. Job Tit	le/Profe			d. Comments	\$	
		city, state, & zip)			Realtor						
		rierson									
		ency Drive			c. Employ	er's Na	me/Spec	cific Field			
Durh	am,	NC 27713			Self						
									e. Election Si	um to Date	
							natra (		\$		
f. Prio	r	g. Account Code	h. Form of Payment	i. In-K	IN PE	us C	M	j. Date (mm/dd/yy)	yy)	k. Amount	
	]	1	ck 5080		2005 20					\$	100
					JUL 0	7 2020	)			Φ.	
	_									\$	
					DURHA	M BC	DE			\$	
4. T	otal	only this Page	e						\$		550
5. T	otal	of ALL CRO	-1210 Pages						ď		10 100 01
(Th	is line	must be on line 6 of	Detailed Summary Page (	CRO-1100	)				\$		18,198.91

Contri	ibutions from	n Individuals		Pg	_5 of	16	Amendmen	K 2
Use this f	form to report indi-	vidual contributions o	ver \$50	or contributions under	r \$50 if form CR	O 1205 is no	in the second second	
		and Fund if applical				2. ID Nun		
Brenda H	owerton for Coun	ty Commissioner						
3. Contri	butor Informatio	n		Add Rem	ove			
	ne, Mailing Address &	2 Phone		b. Job Title/Profession		d. Comment	S	
	city, state, & zip)			retired				
Avis Arti								
PO Box 1				c. Employer's Name/Spe	cific Field			
Durham,	NC 27705							
						e. Election S	um to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/yy	yy)	k. Amount	
	1	ck 137			3/12/2	0	\$	200
							\$	
							\$	•
3. Contri	butor Informatio	n		Add Rem	ove			
a. Full Nan	ne, Mailing Address &	Phone		b. Job Title/Profession		d. Comment	S	
(include	city, state, & zip)			Association				
NC Home	ebuilders Associat	ion						
PO Box 9				c. Employer's Name/Spe	cific Field			
Raleigh N	NC 27624							
						e. Election S	um to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. ln-i	Kind Description	j. Date (mm/dd/yy	yy)	k. Amount	
	1	check			2/7/2	0	\$	500
							\$	
							\$	
3. Contri	butor Informatio	n		Add Rem	ove			
a, Full Nan	ne, Mailing Address &	k Phone		b. Job Title/Profession		d. Comment	ts	
(include	city, state, & zip)			N/A / R	r. 1			
James Sp	ivey			1/1/07	ired			
	ngberry Lane			c. Employer's Name/Spe	cific Field			
Chapel H	ill, NC 27517							
						e. Election S	um to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-l	KIN PERSON	j. Date (mm/dd/yy	yy)	k. Amount	
	1	electronic		o ≈ 2000	1/9/2	0	\$	250
				JUL 0 7 2020			\$	
				DURHAM BOE			\$	
4. Total	only this Page	e				\$		950

5. Total of ALL CRO-1210 Pages

18,198.91

Contr	ibutions fron	n Individuals			Pg	g .	<u>6</u> of	<u>16</u>	Amendment Yes	□ No
Use this t	form to report indi	vidual contributions of	over \$50	or contribu	ations und	der \$50	0 if form CR	O 1205 is no		П 140
		and Fund if applical						2. ID Num		
Brenda H	lowerton for Coun	ty Commissioner								
3. Contri	ibutor Informatio	on		Add	Re	emove				
a. Full Nan	ne, Mailing Address é	k Phone		b. Job Title	/Profession	n		d. Comment	8	
	city, state, & zip)			President	t					
Scott Lev								-		
314 Gran				c. Employe				-		
Chapei H	iill, NC 27514			Research	Triangle	roun	dation	e. Election S	um to Data	
									uin to Date	
								\$		
f. Prior	g. Account Code	h. Form of Payment	i. ln-l	Kind Descripti	ion	j. D	Date (mm/dd/y	ууу)	k. Amount	
	1	electronic					1/16/2	20	\$	500
									\$	
									\$	
3. Contri	ibutor Informatic	n		Add [	Re	move				
a. Full Nan	ne, Mailing Address &	k Phone		b. Job Title	/Profession	1		d. Comments	S	
(include	city, state, & zip)			CEO						
Maurice										
40	nolia Woods Drive			c. Employe						
Cary, NC	2/518			Local Go Credit U		t Fede	eral	e. Election S	4- D-4-	
				Credit O	HIOH			e. Election S	um to Date	
								\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Descripti	ion	j. E	Date (mm/dd/y	ууу)	k. Amount	
	1	electronic					1/29/	20	\$	500
									\$	
									\$	
3. Contri	ibutor Informatio	n		Add	Re	emove				
	ne, Mailing Address &		- Contract of the Contract of	b. Job Title				d. Comment	5	
	city, state, & zip)			Real Esta	ate					
Adam Kl	ein									
6 Greyle				c. Employe	r's Name/S	Specific	Field			
Durham,	NC 27712			ATC						
								e. Election S	um to Date	
								\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Descript		j. I	Date (mm/dd/y	ууу)	k. Amount	
	1	electronic		IN PER	SON		1/31/	20	\$	100
				JUL 07	7 2020				\$	
									\$	

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

**DURHAM BOE** 

18,198.91

1100

\$

Contr	ibutions fro	m Individuals			Pg	7	_ of	16_	Amendment Yes	□ No
Use this t	form to report indi	vidual contributions of	over \$50	or contribu	itions unde	er \$50 if f	form CR0	) 1205 is no		
		and Fund if applical						2. ID Nun		
Brenda H	lowerton for Coun	ty Commissioner								
3. Contri	butor Informatio	n		Add [	Ren	nove				
	ne, Mailing Address &	& Phone		b. Job Title				d. Commen	ts	
	city, state, & zip)			Principal						
Lamanda	Pryor oury Street			F	r's Name/Sp					
	NC 27707				ommunity					
Darriam,				School	minimumy	Charter		e. Election S	um to Date	
								ø		
								\$	· · · · · · · · · · · · · · · · · · ·	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Descripti	on	j. Date (	mm/dd/yy	yy)	k. Amount	
	1	electronic					1/31/2	0	\$	100
									\$	
									\$	
3. Contri	butor Informatio	on		Add [	Ren	nove				
	ne, Mailing Address &	& Phone		b. Job Title				d. Commen	ts	
	city, state, & zip)			President	t/CEO					
James Sil					1 1 10	10 01 11				
208 Bella	ill, NC 27517			M & F B	r's Name/Sp	ecific Field				
Chapern	in, 110 27317			MCCID	ank			e. Election S	Sum to Date	
								•		
	40							\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Descripti	ion	j. Date (	mm/dd/yy	yy)	k. Amount	
	1	electronic					2/5/20	)	\$	300
									\$	
	A.								\$	
3. Contr	ibutor Informatio	on		Add [	Ren	nove				
	ne, Mailing Address	& Phone			/Profession			d. Commen	ts	
	city, state, & zip)			Dentist						
Ella Woo	dham Blvd 125			o Employo	r's Name/Sp	agific Field				
	lill, NC 27514				nity Smiles					
onapo	,			Communication	my simes			e. Election S	Sum to Date	
								\$		
£ Detail	a Associated	h. Form of Payment	2 8 9	/ind December		1 Page	(mm/dd/yy		k. Amount	
f. Prior	g. Account Code		1. 111-1	in beix	SON-	J. Date (				
	1	electronic	-				2/5/2	J	\$	250
				JUL 07	2020				\$	
						1			\$	

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5. Total of ALL CRO-1210 Pages

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650

\$

		m Individuals	, do es c		Pg	8	of	16	Amendment Yes	No
		vidual contributions o		or contributions	unde	r \$50 if forr				
1. Comn	iittee Full Name (	and Fund if applicat	ole)				-	2. ID Nun	aber	
Brenda H	lowerton for Coun	ty Commissioner								
3. Contr	ibutor Informatio	n		Add	Rem	ove				
a. Full Nar	ne, Mailing Address &	& Phone		b. Job Title/Profes	ssion			d. Comment	is	
	city, state, & zip)			Psychotherapis	st					
Kamala J										
320 Kinn				c. Employer's Nan		cific Field				
Durham,	NC 27713			Solay Counseli	ıng		-	TTI 41 0		
							+	e. Election S	um to Date	
								\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Lind Description		j. Date (mm	/dd/yyy	y)	k. Amount	
	1	electronic					2/8/20		\$	100
	1	electronic					2/0/20		<b>D</b>	100
									\$	
									\$	
3. Contr	ibutor Informatio	n		Add	Rem	ove				
a. Full Nar	ne, Mailing Address &	& Phone		b. Job Title/Profes	ssion			d. Comment	ts	
(include	city, state, & zip)			Director						
Frederick	Davis									
	folk Street			c. Employer's Nan	ne/Spe	cific Field				
Durham,	NC 27707			YMCA			-			
							-	e. Election S	um to Date	
								\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description		j. Date (mm	/dd/yyy	y)	k. Amount	
	1	electronic					2/9/20		\$	75
									\$	
									\$	
3. Contr	ibutor Informatio	on .		Add	Rem	ove				
a. Full Nar	ne, Mailing Address &	k Phone		b. Job Title/Profes	ssion			d. Comment	ts	
(include	city, state, & zip)			Partner						
Jessica B										
	lley Estates Drive			c. Employer's Nar	ne/Spe	ecific Field				
Raleigh,	NC 28612			Longfellow			1	TH 41 C	4 Th 4	
							+	e. Election S	ium to Date	
								\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Description		j. Date (mm	a/dd/yyy	y)	k. Amount	
	1	electronic		IN PERS	ON		2/19/20	)	\$	250
									\$	

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CRO-1210

NC State Board of Elections

April 2007

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5. Total of ALL CRO-1210 Pages

JUL 07 2020

DURHAM BOE

\$

200

18,198.91

\$

Contri	ibutions fron	n Individuals			Pg	<u>9</u> of	16	Amendment Yes	t No
		vidual contributions o		or contribution	s unde	r \$50 if form CF			
1. Comm	ittee Full Name (	and Fund if applical	ble)				2. ID Nu	mber	
Brenda H	lowerton for Coun	ty Commissioner							
3. Contri	butor Informatio	n		Add	Rem	ove			
	ne, Mailing Address &	<b>Phone</b>		b. Job Title/Prof	ession		d. Commer	nts	
	city, state, & zip)			SVP					
Michael (				c. Employer's Na		-141 - 151 - 151 -	-		
	NC 27707			Capital Broad			-		
Darman,	110 27707			Capital Bload	Castin	g Company	e. Election	Sum to Date	
							\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description		j. Date (mm/dd/y	ууу)	k. Amount	
	1	electronic				2/10/	20	\$	250
								\$	
								\$	
3. Contri	butor Informatio	n		Add	Rem	iove			
a. Full Nan	ne, Mailing Address &	Phone		b. Job Title/Prof	ession		d. Commer	nts	
(include	city, state, & zip)			Developer					
John Mite							_		
	vard Farms Rd			c. Employer's Na			_		
Durnam,	NC 27713			Southern Dur	ham L	evelopment	- ENT - 45	Same to Date	
							e. Election	Sum to Date	
							\$		
f. Prior	g. Account Code	h. Form of Payment	i. ln-k	Kind Description		j. Date (mm/dd/y	ууу)	k. Amount	
	1	electronic				2/11/	20	\$	1000
								\$	
								\$	
3. Contri	ibutor Informatio	n		Add	Rem	ove			
a. Full Nan	ne, Mailing Address &	& Phone		b. Job Title/Prof	ession		d. Commer	nts	
(include	city, state, & zip)			President					
Seth Jern									
	rthmore Rd			c. Employer's Na			_		
Durham,	NC 27707			Real Estate A	ssocia	tes Inc.	-		
							e. Election	Sum to Date	
			48.0	- FROON			\$		
f. Prior	g. Account Code	h. Form of Payment		PERSON Lind Description		j. Date (mm/dd/y	(VVV)	k. Amount	
	1	electronic		Section operate		2/13/		\$	300
			J	UL 0.7 2020				\$	
			DU	RHAM BOE				\$	

CRO-1210 NC State Board of Elections April 2007

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5. Total of ALL CRO-1210 Pages

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1550

18,198.91

\$

Contri	butions from	n Individuals		Pg	_10 of	16	Amendment Yes	□ No	
Use this f	orm to report indi	vidual contributions of	ver \$50	or contributions und	er \$50 if form CF	RO 1205 is no			
1. Comm	ittee Full Name (	and Fund if applical	ble)			2. ID Nun	nber		
Brenda H	owerton for Coun	ty Commissioner							
	butor Informatio				move	,			
	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Commen	ts		
Dawn Ba	city, state, & zip)			Attorney					
3 Slate C				c. Employer's Name/S	pecific Field	1			
Durham,	NC 27703			State of NC					
						e. Election S	Sum to Date		
						\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount		
	1	electronic			3/2/:	20	\$	100	
							\$		
						\$			
3. Contri	butor Informatio	n		Add Re	move				
	ne, Mailing Address &	k Phone		b. Job Title/Profession		d. Commen	ts		
	city, state, & zip)			n/a					
Vivian M	Lear Lane			c. Employer's Name/S	necific Field	-			
	le, NC 27560			or manager of the manager					
						e. Election S	Sum to Date		
		w	-/		77.	\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount		
	1	electronic			3/2/	20	\$	100	
							\$		
							\$		
3. Contri	butor Informatio	n		Add Re	move				
	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Commen	ts		
	city, state, & zip)			Real Estate					
Eugene E	ichanan Blvd			c. Employer's Name/S	pecific Field	-			
	NC 27701			Self					
						e. Election S	Sum to Date		
						\$			
f. Prior	g. Account Code	h. Form of Payment	i. In-	NYERSON	j. Date (mm/dd/y	уууу)	k. Amount		
	1						\$	100	
				JUL 07 2020			\$		
							\$		
4 70.4	1 1 41-2- D	A	-	DURHAM BOE	***************************************	ф		200	

\$

\$

300

18,198.91

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5. Total of ALL CRO-1210 Pages

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Contri	ibutions fron	n Individuals				Pg	_11	of	16	Amendment Yes	□ No
Use this f	form to report indi-	vidual contributions o	ver \$50	or contrib	outions	unde	r \$50 if form	CRC	) 1205 is not	t used	
1. Comm	ittee Full Name (	and Fund if applical	ole)						2. ID Num	ber	
Brenda H	lowerton for Coun	ty Commissioner									
3. Contri	butor Informatio	n		Add		Rem	iove				
	ne, Mailing Address &	<b>Phone</b>		b. Job Titl					d. Comments	3	
	city, state, & zip)			Develor	oment	Office	er				
Zack Hav PO Box 8				c. Employ		161	*** *** ***				
	NC 27702			UNC CI		<u>-</u>	ecific Field				
Durnam,	NC 27702			OINC CI	парсі	11111		ł	e. Election Su	ım to Date	
								t			
									\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descrip	tion		j. Date (mm/	dd/yyy	y)	k. Amount	
	1	electronic					2.	/28/20	0	\$	500
										\$	
										\$	
3. Contri	butor Informatio	n		Add		Rem	iove				
a. Full Name, Mailing Address & Phone				b. Job Titl	le/Profe	ession			d. Comments	3	
(include city, state, & zip)				Busines	s Owr	ner					
Chris Wil					4 51	/0	9,000 arch x x				
112 Nutre	NC 27713			c. Employ Wilson				$\dashv$			
Darmani,	110 27715			W 113011	Lincip	)113C3 .	IIIC.	ł	e. Election Su	ım to Date	
									\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descrip	tion		j. Date (mm/	dd/yyy	/y)	k. Amount	
	1	electronic					2,	/28/20	0	\$	400
										\$	
										\$	
3. Contri	ibutor Informatio	n		Add		Rem	nove				
a. Full Nan	ne, Mailing Address &	k Phone		b. Job Tit	le/Profe	ession			d. Comments	5	
	city, state, & zip)			Attorne	у						
	Dellinger										
	chway Drive						ecific Field				
Durnam,	NC 27706			Boles S	chiller	-		1	e. Election St	um to Doto	
			44.1	beno	ON			1		um to Date	
			_	PERS					\$	1	
f. Prior	g. Account Code	h. Form of Payment		ind Descrip			j. Date (mm/	dd/yyy	yy)	k. Amount	
	1	electronic	-	IUL 07 20	UZU		3	3/2/20	)	\$	150
			01	IRHAM E	305					\$	
	1			11 /1 1/ /1/ 1							

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CRO-1210

NC State Board of Elections

April 2007

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5. Total of ALL CRO-1210 Pages

\$

1050

18,198.91

\$

Contri	butions fron	n Individuals			Pg	12	of _	16	Amendment Yes	☐ No
		vidual contributions o	-	or contributi	ions unde	r \$50 if form	CRO 12	205 is not	used	
1. Comm	ittee Full Name (	and Fund if applical	ole)				2.	ID Num	ber	
Brenda H	owerton for Count	ty Commissioner								
3. Contri	butor Informatio	n		Add	Rem	nove				
	ie, Mailing Address &	Phone		b. Job Title/P	rofession		d.	Comments		
	city, state, & zip)									
James An	ranony vard mill Rd #300			c. Employer's	Name/Sne	eific Field	-			
	NC 27607			C. Employer	этчины орч	- Tiola				
,							e	Election Su	m to Date	
								\$		
f. Prior	g. Account Code	h. Form of Payment	i. ln-K	ind Description	1	j. Date (mm/de	d/yyyy)		k. Amount	
	1								\$	500
									\$	
									\$	
3. Contri	butor Informatio	n		Add	Rem	nove				
	ne, Mailing Address &	Phone		b. Job Title/P	rofession		d.	Comments		
	city, state, & zip)			retired						
Willie Co	vington nrod Place			c. Employer's	s Name/Sne	ecific Field				
	NC 27705			U Dilipioy Ct	, transcript					
							e.	Election Su	ım to Date	
								\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	n	j. Date (mm/d	d/yyyy)		k. Amount	
	1								\$	250
									\$	
									\$	
3. Contri	butor Informatio	n		Add _	Ren	nove				
	ie, Mailing Address &	2 Phone		b. Job Title/P	rofession		d.	Comments		
	city, state, & zip)			retired						
Robert G 310 Watt				c. Employer's	s Name/Sne	ecific Field	-			
	NC 27701			et Binproyer	3 Tullio p		$\neg$			
,							e.	Election Su	ım to Date	
								\$		
f. Prior	g. Account Code	h. Form of Payment	i. M	PERSO	N	j. Date (mm/d	d/yyyy)		k. Amount	
	1		13.4						\$	200
				JUL 07 202	U				\$	

CRO-1210 NC State Board of Elections April 2007

**DURHAM BOE** 

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\$

950

18,198.91

\$

Contri	butions from	n Individuals			Pg	_13	of	16	Amendment Yes	No No
Use this f	orm to report indi	vidual contributions o	ver \$50	or contribution	ns under	\$50 if for	m CRC	1205 is not	used	
1. Comm	ittee Full Name (	and Fund if applical	ole)					2. ID Num	ber	
Brenda H	owerton for Coun	ty Commissioner								
3. Contri	butor Informatio	n		Add	Rem	ove				
	ne, Mailing Address &	& Phone		b. Job Title/Pro				d. Comments		
	city, state, & zip)			Commercial	Constru	iction				
Gloria Sh	ealy nnah Terrace			c. Employer's N	Jama/Sna	oific Field				
	ill, NC 27517			The Danielle						
	,				· Comp	,	İ	e. Election Su	ım to Date	
								\$		
f. Prior	g. Account Code	h. Form of Payment	i. ln-K	ind Description		j. Date (mı	m/dd/yyy	y)	k. Amount	
	1	electronic					2/27/20	)	\$	150
									\$	
									\$	
3. Contri	butor Informatio	n		Add	Rem	ove				
	ne, Mailing Address &	k Phone		b. Job Title/Pro	fession			d. Comments		
	city, state, & zip)			Real Estate						
George S 5409 Pell			:	c. Employer's N	lame/Sne	cific Field				
	NC 27713			Smart Devel						
					•			e. Election Su	ım to Date	
								\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description		j. Date (m	m/dd/yyy	у)	k. Amount	
	1	electronic					2/25/20	)	\$	250
									\$	
									\$	
	butor Informatio			Add	Rem	ove				
	ne, Mailing Address &	& Phone		b. Job Title/Pro	fession			d. Comments	<b>.</b>	
(include William l	city, state, & zip)			President						
	ntsman Drive			c. Employer's N	Name/Spe	cific Field				
Durham,				or managers year or						
								e. Election St	ım to Date	
				^	AR.I			\$		
f. Prior	g. Account Code	h. Form of Payment		N PERSC	NN.	j. Date (m	no/del/www		k. Amount	
1. 11101			1. 111-1			J. Date (III				07.00
	1	paypal		JUL 0 7 202	.0		1/6/20		\$	96.80

DURHAM BOE

4. Total only this Page

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\$

\$

496.80

18,198.91

\$

Contri	ibutions iron	n individuals				* 6	X-T UI		Yes	□ No		
Use this f	orm to report indi	vidual contributions o	ver \$50	or contri	bution	s unde	r \$50 if form CRO	O 1205 is no				
1. Comm	ittee Full Name (	and Fund if applicat	ole)					2. ID Nun	nber			
Brenda H	owerton for Count	ty Commissioner										
3. Contri	butor Informatio	n		Add		Rem	ove					
a. Full Nam	ne, Mailing Address &	Phone		b. Job Ti	tle/Prof	ession		d. Commen	ts			
(include	city, state, & zip)											
Bob Ingra												
3624 Dov				c. Emplo	yer's N	ame/Spe	cific Field					
Durham,	NC 27707											
								e. Election S	Sum to Date			
								\$				
f. Prior	g. Account Code	h. Form of Payment	i In-k	ind Descri	ntion		j. Date (mm/dd/yy	lan)	k. Amount			
				ina Doseri	PEROM					7000		
	1	check					2/11/2	0	\$	5000		
									\$			
									\$			
3. Contri	butor Informatio	n		Add		Rem	ove		<del></del>			
a. Full Nam	ne, Mailing Address &	Phone		b. Job Ti	tle/Prof	ession		d. Comments				
(include	city, state, & zip)											
	Coleman Cook											
	nont Circle			c. Emplo	yer's N	ame/Spe	cific Field					
Durham,	NC 27703											
								e. Election S	Sum to Date			
								\$				
f. Prior	g. Account Code	h. Form of Payment	i. In-k	ind Descri	ption		j. Date (mm/dd/yy	уу)	k. Amount			
	1	check					1/29/2	0	\$	100		
							-		\$			
									\$			
2 Contri	butor Informatio			Add		Rem			1	1		
	ne, Mailing Address &			b. Job Ti	tlo/Duoi		love	d. Commen	to.	1		
	city, state, & zip)	t I none		0. 300 11	(IC/III)	CSSIOII		u. Commen	LS .			
Herman S				1								
	omberg Manor Dr			c. Emplo	yer's N	ame/Spe	cific Field					
	NC 27703				-							
								e. Election S	Sum to Date			
								\$				
f. Prior	g. Account Code	h. Form of Payment	i. In-	Na BEER	SOI	V	j. Date (mm/dd/yy		k. Amount	8		
	1	paypal					2/21/2		\$	290.10		
				JUL 07	7 2020				\$			
				OURHA	M RC	F			\$			
4 Total	only this Page	1		שטערואיי	41 00			\$	Ψ	5390.10		
T. AULAI	LUMBY LIND & AZI							- D		フンプひこけ		

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18,198.91

<b>Contributions from Individuals</b>		Pg <u>15</u>	_ of	16_	Amendment	
					Yes	No No
Use this form to report individual contributions over	\$50 or contribut	ions under \$50 if fo	orm CR	O 1205 is no	ot used	
1. Committee Full Name (and Fund if applicable)				2. ID Nun	aber	
Brenda Howerton for County Commissioner						
3. Contributor Information	Add	Remove				
a. Full Name, Mailing Address & Phone	b. Job Title/F	Profession		d. Comment	s	
(include city, state, & zip)						
Thelma White				}		1
1015 Jerome Court	c Employer's	Name/Specific Field		1		

Brenda H	lowerton for Coun								
3. Contri	butor Informatio	n		Add	Rem	nove			
	ne, Mailing Address &			_	e/Profession		d. Commen	ts	
	city, state, & zip)								
Thelma V									
	me Court			c. Employe	er's Name/Spe	ecific Field			
Durham,	NC								
							e. Election S	Sum to Date	
							\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	and Descript	ion	j. Date (mm/dd/yy	уу)	k. Amount	
	1 .	check				1/16/2	20	\$	250
								\$	
								\$	
3. Contri	ibutor Informatio	n		Add	Rem	nove		*	
	ne, Mailing Address &			b. Job Title	e/Profession		d. Commen	ts	1
(include	city, state, & zip)								
Jarvis Ma									
	nnon Rd #103			c. Employe	er's Name/Spe	ecific Field			
Durham,	NC 27707								
							e. Election S	Sum to Date	
							\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Lind Descript	tion	j. Date (mm/dd/yy	yy)	k. Amount	
	1	check 7277				1/22/2	20	\$	100
			+						
								\$	
								\$	
3. Contr.	ibutor Informatio	on .		Add	Ren	nove			
a. Full Nar	ne, Mailing Address	& Phone		b. Job Titl	e/Profession		d. Commen	its	'
(include	city, state, & zip)								
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(This line must be on line 6 of Detailed Summary Page CRO-1100) CRO-1210

NC State Board of Elections

April 2007

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used	Contr	ibutions fro	m Individuals			Pg	16	of	16	Amendm	ent es No
Brenda Howerton for County Commissioner  3. Contributor Information  a. Full Yame, Mailing Address & Phone (include city, state, & zip)  Daniel Jewel  L. Prior  g. Account Code  b. Form of Payment  b. Jab Title/Profession  c. Employer's Name/Specific Field  d. Comments  c. Employer's Name/Specific Field  c. Ekection Sum to Date  s  d. Comments  c. Employer's Name/Specific Field  c. Ekection Sum to Date  s  c. Employer's Name/Specific Field  c. Ekection Sum to Date  s  d. Comments  c. Employer's Name/Specific Field  c. Ekection Sum to Date  s  d. Comments  c. Employer's Name/Specific Field  c. Ekection Sum to Date  s  d. Comments  c. Employer's Name/Specific Field  c. Election Sum to Date  s  per Section Sum to Date  s  s  s  d. Total only this Page  S S70.91					or contributions	unde	r \$50 if	form CR	O 1205 is 1	not used	
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Description	Brenda H	lowerton for Cour	nty Commissioner								
Valerie Johnson	3. Contr	ibutor Informati	on		Add	Rem	ove				
Valerie Johnson	a. Full Nar	ne, Mailing Address	& Phone		b. Job Title/Profes	ssion			d. Comme	nts	
C. Employer's Name/Specific Field											
Durham, NC 27707   C. Election Sum to Date   S   S	1										
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(This line must be on line 6 of Detailed Summary Page CRO-1100)

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Disbursements

Pg 1 of 16 Amendment

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

1. Committee Fi	ull Name (and Fun		2. ID Number							
Benda Howerton	for County Commi	ssioner								
3. Type of Disbu	rsement (Plea	se use separate C	RO-1310 forms for each t	vpe of Disbursen	nent.)					
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4. Payee Inform			Add	Remove						
	ng Address & Phone		b. Coordinated Committee Na		d. Comments					
(include city, state,	-									
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			c. Level Registered (Specify)							
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E - Salaries	F* - Equipment				g Public Office Expenses					
O* - Other	Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund									
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3. Type of Disbu				2-1310 forms for ea ates/Political Committe		Venical		d Party Expenditures		
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\$ \$ 1699.59 5. Total only this Page 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$ 35,990.80 (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) C\* - Fundraising D - To Another Candidate A\* - Media B\* - Printing F\* - Equipment G - Political Party H\* - Holding Public Office Expenses E - Salaries J - Penalties K\* - Office Expenses Q\* - Donation to Legal Expense Fund I - Postage O\* - Other \* Codes require detailed explanation in required remarks field (k) CRO-1310 NC State Board of Elections December 2009

D. 1	4							Amendment	_
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			ee f	for; operating expenses	s, c	contributions to c	andid	late/political	
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CRO-1310 NC State Board of Elections December 2009

Q\* - Donation to Legal Expense Fund

K\* - Office Expenses

I - Postage

O\* - Other

J - Penalties

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

Disb	ursement	S
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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 Benda Howerton for County Commissioner 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 Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) Poll Worker **Edward Jenette** DUNAUN INC c. Level Registered (Specify) Federal County: State Municipality: e. Election Sum to Date h. Purpose Code i. Date (mm/dd/yyyy) k. Required Remarks f. Account Code g. Form of Payment j. Amount \$207 ck 1301 3/3/20 1 4. Payee Information Add Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) Poll Worker Fannie Burnette c. Level Registered (Specify) DURLAMY NO Federal County: State Municipality: e. Election Sum to Date h. Purpose Code k. Required Remarks f. Account Code g. Form of Payment i. Date (mm/dd/yyyy) j. Amount ck 1291 2/24/20 \$339 1 E \$ 4. Pavee Information Add Remove a. Full Name, Mailing Address & HAPERSON d. Comments b. Coordinated Committee Name foll worker (include city, state, & zip) Fontella Bass JUL 07 2020 c. Level Registered (Specify) Dunnamine Federal County: DURHAM BOE State Municipality: e. Election Sum to Date h. Purpose Code k. Required Remarks f. Account Code g. Form of Payment i. Date (mm/dd/yyyy) j. Amount ck 1299 E 2/28/20 \$156 1 \$ 702 5. Total only this Page 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$ 35,990.80 (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) B\* - Printing C\* - Fundraising D - To Another Candidate A\* - Media H\* - Holding Public Office Expenses E - Salaries F\* - Equipment G - Political Party I - Postage Q\* - Donation to Legal Expense Fund J - Penalties K\* - Office Expenses O\* - Other

Amendment

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

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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 Benda Howerton for County Commissioner (Please use separate CRO-1310 forms for each type of Disbursement.) 3. Type of Disbursement X Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures Remove 4. Pavee Information a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) Voll Worker Jaline Langley c. Level Registered (Specify) JURNAM NC Federal County: e. Election Sum to Date State Municipality: h. Purpose Code f. Account Code g. Form of Payment i. Date (mm/dd/yyyy) j. Amount k. Required Remarks \$396 E 3/5/20 1 ck 1272 \$ Add Remove 4. Payee Information d. Comments a. Full Name, Mailing Address & Phone b. Coordinated Committee Name Poll Worker (include city, state, & zip) Kawaun Johnson c. Level Registered (Specify) DURHEMINE Federal County: State Municipality: e. Election Sum to Date h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks f. Account Code g. Form of Payment \$222 1 ck 1266 E 3/2/20 \$ 4. Payee Information Add Remove a. Full Name, Mailing Address & Phone PERSON b. Coordinated Committee Name d. Comments BII WOULD (include city, state, & zip) Kevin Dark JUL 07 2020 c. Level Registered (Specify) 5501 Grandmessa Drive Durham, NC 27713 Federal County: e. Election Sum to Date State Municipality: **DURHAM BOE** 933 g. Form of Payment f. Account Code h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks \$429 Ε 2/24/20 1 ck 1300 2/28/20 \$504 1 ck1247  $\mathbf{E}$ 5. Total only this Page \$ 1551 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) 35,990.80 (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 H\* - Holding Public Office Expenses E - Salaries F\* - Equipment G - Political Party Q\* - Donation to Legal Expense Fund K\* - Office Expenses I - Postage J - Penalties O\* - Other

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

Amendment

**Disbursements** 

Pg <u>6</u> of <u>16</u> Amendment

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

	ull Name (and Fund						2. ID Number
	n for County Commi	ssioner					
3. Type of Disbu	rsement (Plea.	se use separate C	RO	-1310 forms for each t			
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DURham			c. Level Registered (Specify)				
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			_	Coordinated Party Expenditu	ures)		
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A* - Media	B* - Printing	C* - Fun			D - To Anot		ic Office Expenses
E - Salaries I - Postage	F* - Equipment  J - Penalties	G - Politi K* - Offi		-			legal Expense Fund
O* - Other	a - i chaines	K - OIII		na an ga waa aa waa	& Douge	•V L	
	e detailed explanat	ion in required r	em	arks field (k)			

No

<b>Disburseme</b>	nts
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No Yes 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 Benda Howerton for County Commissioner (Please use separate CRO-1310 forms for each type of Disbursement.) 3. Type of Disbursement Contributions to Candidates/Political Committees Coordinated Party Expenditures M Operating Expenses 4. Pavee Information Add Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments Poll Worker (include city, state, & zip) Natosha Crump c. Level Registered (Specify) DURHam Federal County: State Municipality: e. Election Sum to Date 984 h. Purpose Code i. Date (mm/dd/yyyy) k. Required Remarks f. Account Code g. Form of Payment j. Amount \$732 1 3/5/20 ck 1267 1 check E 2/18/20 \$252 4. Pavee Information Add Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments Roll Worker (include city, state, & zip) Regine Lewis DU Rhamy NC c. Level Registered (Specify) Federal County: State Municipality: e. Election Sum to Date h. Purpose Code k. Required Remarks f. Account Code g. Form of Payment i. Date (mm/dd/yyyy) j. Amount 2/24/20 \$48 1 ck 1238 E 4. Payee Information Add Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments gou would (include city, state, & zip) Rasheed Johnson IN PERSON c. Level Registered (Specify) 855 Estes St Durham, NC 27701 Federal County: State Municipality: e. Election Sum to Date JUL 07 2020 1047 g. Form of Payme DURI-AMPBO j. Amount k. Required Remarks i. Date (mm/dd/yyyy) f. Account Code ck 1295 Е 2/25/20 \$252 1 3/5/20 \$795 ck 1270 E 1 2079 5. Total only this Page 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$ 35,990.80 (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) C\* - Fundraising D - To Another Candidate B\* - Printing A\* - Media F\* - Equipment G - Political Party H\* - Holding Public Office Expenses E - Salaries I - Postage O\* - Donation to Legal Expense Fund J - Penalties K\* - Office Expenses O\* - Other \* Codes require detailed explanation in required remarks field (k)

Amendment

Disb	urs	em	ents
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of <u>16</u> 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 Fu	all Name (and Fund	d if applicable)			2. ID Number
	for County Commi				
3. Type of Disbu			CRO-1310 forms for each ty	pe of Disbursem	ent.)
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(include city, state,	_				
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Durham	410		c. Level Registered (Specify)		
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			State	Municipality:	e. Election Sum to Date
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				\$	
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TaeQuan Ziglar  DUKham	MC		c. Level Registered (Specify)		
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501 Wyldewood	d Dr		c. Level Registered (Specify)		
Durham, NC 27		<b>07</b> .2020	Federal County:		
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	Ma. 1 100.				\$ 1185
	DURF	IAM BOE		<del>;;===================================</del>	\$ 1185
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			00 if Coordinated Party Expenditu	11 (23)	
	es (List detailed ex			D To A ==41	ner Candidate
A* - Media E - Salaries	B* - Printing F* - Equipment		ndraising ical Party		g Public Office Expenses
I - Postage	J - Penalties		ical Party ice Expenses		on to Legal Expense Fund
O* - Other	5 ·· 1 CHAILICS	A OII		* Donner	
	e detailed explanat	ion in required r	remarks field (k)		

Amendment **Disbursements** 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 Benda Howerton for County Commissioner 3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) X Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures 4. Pavee Information Add Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments Hall Worker (include city, state, & zip) Timira Conley Durham, NC c. Level Registered (Specify) Federal County: State Municipality: e. Election Sum to Date \$ h. Purpose Code k. Required Remarks f. Account Code g. Form of Payment i. Date (mm/dd/yyyy) j. Amount 1 ck 1240 2/24/20 \$132 \$ 4. Pavee Information Add Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments Poll Worker (include city, state, & zip) Natalie Lane Durham, NC c. Level Registered (Specify) Federal County: State Municipality: e. Election Sum to Date h. Purpose Code k. Required Remarks f. Account Code g. Form of Payment i. Date (mm/dd/yyyy) j. Amount 2/27/20 1 ck 1246 E \$366 \$ Add 4. Payee Information Remove a. Full Name, Mailing Address & Phone IN PERSON d. Comments b. Coordinated Committee Name Poll worker (include city, state, & zip) Daryl Oglesby, Jr JUL 07 2020 500 Malone Street c. Level Registered (Specify) Federal Durham, NC 27713 County: a Flaction Sum to Data State Municipality

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					\$ 8	04	
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1	ck 1245	Е	2/27/20	\$78			
1	ck 1248	Е	3/5/20	\$726			
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7. Purpose Cod	les (List detailed ex	penditure code in (	h.) above)				

A\* - Media E - Salaries

I - Postage

O\* - Other

B\* - Printing

J - Penalties

F\* - Equipment

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

C\* - Fundraising

G - Political Party

K\* - Office Expenses

D - To Another Candidate

H\* - Holding Public Office Expenses

Q\* - Donation to Legal Expense Fund

**Disbursements** 

Pg	<u>10</u>	of <u>16</u>	Amendment
			Yes

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

	ıll Name (and Func						2. ID Number
Benda Howerton	for County Commi	ssioner					
3. Type of Disbu			RO	-1310 forms for each t	pe of Disbursem	ient.)	
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Alexie Paige						100	1 work
_	///		c.	Level Registered (Specify)		ľ	
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Arva Whitaker						""	access and
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1 UUKNAN	JNC.	IUL 07 2020	F	Federal Federal	County:	-	
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O* - Other	A 1 AUGUNA	II - OIII			× 2011		&
	e detailed explanat	ion in required r	em	arks field (k)			

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No

of 16 Amendment Disbursements No Yes Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures. 2. ID Number 1. Committee Full Name (and Fund if applicable) Benda Howerton for County Commissioner (Please use separate CRO-1310 forms for each type of Disbursement.) 3. Type of Disbursement Contributions to Candidates/Political Committees Coordinated Party Expenditures Operating Expenses Add Remove 4. Payee Information a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) 1811 Worker Deavyion Lee DERHAMY NC c. Level Registered (Specify) Federal County: State Municipality: e. Election Sum to Date \$ h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks g. Form of Payment f. Account Code \$321 1 ck 1249 E 3/5/20 \$ Add Remove 4. Pavee Information a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments fell Worker (include city, state, & zip) Derker Prker c. Level Registered (Specify) 611 Hoyle Street

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	CRO-1310 Pages						
	line 13a of Detailed Sun	nmary Page CRO-110	0 if (	Operating Expenses)			\$ 35,990.80
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	line 13c of Detailed Sun		-		enditu	ires)	
	les (List detailed ex						
A* - Media	B* - Printing	C* - Fun					ner Candidate
E - Salaries I - Postage	F* - Equipment J - Penalties	G - Politic K* - Offi					g Public Office Expenses on to Legal Expense Fund
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	re detailed explanat	ion in required r	ema	arks field (k)			
CRO-1310				e Board of Elections			December 2009
V-1-V 1-V1-V							

Disbursements	3
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No Yes Use this form to report expenditures from the committee for, operating expenses, contributions to candidate/political committees and coordinated party expenditures. 2. ID Number 1. Committee Full Name (and Fund if applicable) Benda 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 Remove 4. Payee Information a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) Carolina Banner c. Level Registered (Specify) 3535 Hillsborough Rd Durham, NC 27705 Federal County: State Municipality: e. Election Sum to Date h. Purpose Code i. Date (mm/dd/yyyy) k. Required Remarks f. Account Code g. Form of Payment j. Amount campaign signs \$4061.13 1 check В 2/27/20 4. Payee Information Add Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) Longleaf Agency 1053 E Whitaker Mill Rd #115 c. Level Registered (Specify) Federal Raleigh, NC 27604 County: e. Election Sum to Date State Municipality: 2892 h. Purpose Code k. Required Remarks i. Date (mm/dd/yyyy) f. Account Code g. Form of Payment j. Amount 1 E 1/27/20 \$2622 card 3/2/20 \$270 1 E card Remove 4. Pavee Information Add a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) IN PERSON Sheila Mullen Durhampuc c. Level Registered (Specify) Federal County: JUL 07 2020 e. Election Sum to Date State Municipality: g. Form of Payment h. Purpose Code f. Account Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks \$852 1 E 3/19/20 check \$ 5. Total only this Page 7805.13 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$ 35,990.80 (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 K\* - Office Expenses Q\* - Donation to Legal Expense Fund I - Postage J - Penalties O\* - Other

Amendment

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

D	is	b	ur	se	m	en	ts	
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No Yes Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures. 2. ID Number 1. Committee Full Name (and Fund if applicable) Benda Howerton for County Commissioner 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 Remove 4. Payee Information a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) Doll Worker Jan Cromartie DURNAMINC c. Level Registered (Specify) Federal County: State Municipality: e. Election Sum to Date 500 h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks f. Account Code g. Form of Payment 3/19/20 \$200 1 card 2/24/20 \$300 1 check E 4. Payee Information Add Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) ActBlue . on hin es c. Level Registered (Specify) Federal County: State Municipality: e. Election Sum to Date h. Purpose Code k. Required Remarks g. Form of Payment i. Date (mm/dd/yyyy) f. Account Code j. Amount fees 0 3/10/20 \$90.39 1 electronic Add Remove 4. Pavee Information a. Full Name, Mailing Address & Photol PERSON b. Coordinated Committee Name d. Comments (include city, state, & zip) Vanity Ecommerce JUL **07** 2020 on une c. Level Registered (Specify) Federal County: e. Election Sum to Date State Municipality: **DURHAM BOE** g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks f. Account Code \$148.02 1 electronic 0 3/4/20 \$ 5. Total only this Page 738.41 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) 35,990.80 \$ (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

Amendment

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

Disbursemen	ts
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Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures. 2. ID Number 1. Committee Full Name (and Fund if applicable) Benda Howerton for County Commissioner (Please use separate CRO-1310 forms for each type of Disbursement.) 3. Type of Disbursement Contributions to Candidates/Political Committees Coordinated Party Expenditures Operating Expenses Remove 4. Payee Information a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) Canon Morgan Ralesh NC 27613 1826 Jeffrey Alan ex. c. Level Registered (Specify) Federal County: State Municipality: e. Election Sum to Date h. Purpose Code k. Required Remarks i. Date (mm/dd/yyyy) j. Amount g. Form of Payment f. Account Code Consultant/ 3/23/20 \$3600 E 1 check Strategist Add Remove 4. Pavee Information a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) Elijah King c. Level Registered (Specify) Federal County: e. Election Sum to Date State Municipality: h. Purpose Code k. Required Remarks i. Date (mm/dd/yyyy) j. Amount f. Account Code g. Form of Payment 2/19/20 \$285 check Е \$ Add Remove 4. Pavee Information a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments IN PERSON (include city, state, & zip) Partners for Youth c. Level Registered (Specify) DURham, NC JUL 07 2020 County: Federal e. Election Sum to Date State Municipality: **DURHAM BOE** h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks f. Account Code g. Form of Payment donation \$100 0 3/14/20 1 check S 3985 5. Total only this Page 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$ 35,990.80 (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) C\* - Fundraising D - To Another Candidate B\* - Printing A\* - Media F\* - Equipment G - Political Party H\* - Holding Public Office Expenses E - Salaries K\* - Office Expenses Q\* - Donation to Legal Expense Fund I - Postage J - Penalties O\* - Other \* Codes require detailed explanation in required remarks field (k)

Amendment

Yes

No

Disbursements

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 Benda Howerton for County Commissioner 3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) Contributions to Candidates/Political Committees Coordinated Party Expenditures Operating Expenses 4. Payee Information Add Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) 3552 Farmyter du. Greenstry 1 27407 c. Level Registered (Specify) Federal County: State Municipality: e. Election Sum to Date h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks g. Form of Payment f. Account Code 2/7/20 \$700 electronic E .1 Add Remove 4. Payee Information a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) Abraham DURHOW c. Level Registered (Specify) Federal County: e. Election Sum to Date State Municipality: h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks f. Account Code g. Form of Payment check Е 2/14/20 \$50 \$ 4. Pavee Information Add Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments IN PERSON (include city, state, & zip) c. Level Registered (Specify) JUL 07 2020 Federal County: e. Election Sum to Date State Municipality: DURHAM BOE h. Purpose Code k. Required Remarks i. Date (mm/dd/yyyy) f. Account Code g. Form of Payment j. Amount \$ S 750 5. Total only this Page 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$ 35,990.80 (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)

\* Codes require detailed explanation in required remarks field (k) CRO-1310 NC State Board of Elections December 2009

D - To Another Candidate

H\* - Holding Public Office Expenses

Q\* - Donation to Legal Expense Fund

C\* - Fundraising

G - Political Party

K\* - Office Expenses

B\* - Printing

J - Penalties

F\* - Equipment

A\* - Media

E - Salaries I - Postage

O\* - Other

Disbursements	S
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Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures. 2. ID Number 1. Committee Full Name (and Fund if applicable) Benda Howerton for County Commissioner 3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) Contributions to Candidates/Political Committees Coordinated Party Expenditures Operating Expenses Add Remove 4. Payee Information a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) **Durham Committee Affairs** c. Level Registered (Specify) of Black People 601 Fayetteville St Federal County: membership e. Election Sum to Date Municipality: Durham, NC 27701 State h. Purpose Code k. Required Remarks g. Form of Payment i. Date (mm/dd/yyyy) j. Amount f. Account Code \$500 1 0 2/10/20 electronic 0 \$3000 1 electronic Add Remove 4. Payee Information a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) People's Alliance c. Level Registered (Specify) PO Box 2935 Durham, NC 27715 Federal County: Municipality: e. Election Sum to Date State h. Purpose Code k. Required Remarks i. Date (mm/dd/yyyy) j. Amount f. Account Code g. Form of Payment membership electronic 0 1/26/20 \$35 Add 4. Pavee Information Remove a. Full Name, Mailing Address RERSON b. Coordinated Committee Name d. Comments (include city, state, & zip) JUL **07** 2020 c. Level Registered (Specify) Federal County: **DURHAM BOE** e. Election Sum to Date State Municipality: h. Purpose Code k. Required Remarks f. Account Code g. Form of Payment i. Date (mm/dd/yyyy) j. Amount S 1 S 3535 5. Total only this Page 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$ 35,990.80 (This line goes in line 13h 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) D - To Another Candidate C\* - Fundraising A\* - Media B\* - Printing G - Political Party H\* - Holding Public Office Expenses F\* - Equipment E - Salaries Q\* - Donation to Legal Expense Fund I - Postage J - Penalties K\* - Office Expenses O\* - Other \* Codes require detailed explanation in required remarks field (k)

Amendment Yes

No