

Disclosure Report Cover

Amendment
 Yes No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
 Do not use this form to update information

| | | |
|---------------------------------------------------------------------------------------------|--|----------------------------------------------------------|
| 1. Committee Information | | |
| a. Full Name Wendy Jacobs for County Commissioner | | IN-PERSON c. ID Number 45-3929986 |
| b. Mailing Address (include City, State and Zip Code) P.O. Box 52023 Durham, NC 27717 | | d. Date Filed APR 30 2012 DURHAM BOE 04/30/2012 |
| | | e. Phone Number 919-418-3169 |

| | | | |
|------------------------|-----------------------------------------------|---------------------------------------------|----------------------------------------|
| 2. Report Year 2012 | 3. Period Start Date (mm/dd/yy) 01/21/2012 | 4. Period End Date (mm/dd/yy) 04/21/2012 | 5. Treasurer Full Name Jane H. Pate |
|------------------------|-----------------------------------------------|---------------------------------------------|----------------------------------------|

| | | | | |
|--------------------------------------------------------|-------------------------------------------|----------------------------------------------------------------------------|-------------------------------------------|---------------------------------------------|
| 6. Type of Committee (Check One) | | 9. Type of Report (check only one type of report from one category) | | |
| <input checked="" type="checkbox"/> Candidate Campaign | <input type="checkbox"/> Party | <input type="checkbox"/> Municipal | <input type="checkbox"/> State/County | <input type="checkbox"/> Referendum |
| <input type="checkbox"/> PAC | <input type="checkbox"/> Referendum | <input type="checkbox"/> Organizational | <input type="checkbox"/> Organizational | <input type="checkbox"/> Organizational |
| <input type="checkbox"/> Independent Expenditure | <input type="checkbox"/> Joint Fundraiser | <input type="checkbox"/> Thirty-five day | <input type="checkbox"/> Quarterly | <input type="checkbox"/> Pre-referendum |
| <input type="checkbox"/> Legal Expense Fund | | | | |
| 7. Type of Fund (if applicable, check one) | | <input type="checkbox"/> Pre-primary | <input checked="" type="checkbox"/> First | <input type="checkbox"/> Final |
| <input type="checkbox"/> "Booster Fund" | | <input type="checkbox"/> Pre-election | <input type="checkbox"/> Second | <input type="checkbox"/> Supplemental Final |
| <input type="checkbox"/> Building Fund | | <input type="checkbox"/> Pre-runoff | <input type="checkbox"/> Third | <input type="checkbox"/> Annual |
| <input type="checkbox"/> Other: | | <input type="checkbox"/> Semi-annual | <input type="checkbox"/> Fourth | <input type="checkbox"/> Special |
| | | <input type="checkbox"/> Mid Year | <input type="checkbox"/> Semi-annual | |
| | | <input type="checkbox"/> Year End | <input type="checkbox"/> Mid Year | |
| | | <input type="checkbox"/> Final | <input type="checkbox"/> Year End | |
| | | <input type="checkbox"/> Special | <input type="checkbox"/> Final | |
| | | | <input type="checkbox"/> Special | |
| 8. Number of Fundraisers this Report 3 | | 10. Special Report Name | | |

| | | | |
|-------------------------------------------------------------|-----------------------------------|------------------------------------|-------------------------------|
| 11. Account Information | | 11. Account Information | |
| a. Financial Institution Full Name Mechanics and Farmers | | a. Financial Institution Full Name | |
| b. Purpose Campaign Acc | c. Account Code | b. Purpose | c. Account Code |
| | d. Period Begin Balance \$ 250 | | d. Period Begin Balance \$ |

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

Jane H. Pate
 Printed Name of Signer

Jane H. Pate
 Signature of Appointed Treasurer

4/29/2012
 Date

| | | | |
|----------------------------|-----------|---------------------------------------------------------------------|-----------|
| FOR OFFICE USE ONLY | | | |
| Date Received: | 4/30/2012 | Employee: | Rose Wolf |
| Date Postmarked: | _____ | Employee: | _____ |
| Date Scanned: | _____ | Employee: | _____ |
| Date Data Entered: | _____ | Employee: | _____ |
| | | Delivery Method | |
| | | <input type="checkbox"/> Normal Mail | |
| | | <input type="checkbox"/> Registered Mail | |
| | | <input checked="" type="checkbox"/> Hand Delivered | |
| | | <input type="checkbox"/> Electronically Filed | |
| | | <input type="checkbox"/> Signer has not received mandatory training | |

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.
 You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

Amendment
 Yes No

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

| 1. Committee Full Name (and Fund if applicable) | 2. Type of Report | 3. ID Number | |
|------------------------------------------------------------------------------|------------------------|------------------------------------|----------------------------------|
| Wendy Jacobs for County Commissioner | First Quarter Plus | 45-3929986 | |
| Start of Election Cycle: | January 1, 2012 | Total this Reporting Period | Total this Election Cycle |
| 4) Cash on Hand at Start | | \$ 250 | \$ 0 |
| 5) Aggregated Contributions from Individuals | (CRO-1205) | \$ 3549 | \$ 3549 |
| 6) Contributions from Individuals | (CRO-1210) | \$ 16125 | \$ 16375 |
| 7) Contributions from Political Party Committees | (CRO-1220) | \$ | \$ |
| 8) Contributions from Other Political Committees | (CRO-1230) | \$ 350 | \$ 350 |
| 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) | \$ | \$ |
| 11 e) Exempt Purchase Price Sales | (CRO-1265) | \$ | \$ |
| 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) | | \$ 20024 | \$ 20274 |
| 13) Disbursements | | | |
| 13a) Operating Expenditures | (CRO-1310) | \$ 15084.59 | \$ 15084.59 |
| 13b) Contributions to Candidates/Political Committees | (CRO-1310) | \$ | \$ |
| 13c) Coordinated Party Expenditures | (CRO-1310) | \$ | \$ |
| 14) Aggregated Non-Media Expenditures | (CRO-1315) | \$ | \$ |
| 15) Loan Repayments | (CRO-1420) | \$ | \$ |
| 16) Refunds/Reimbursements From the Committee | (CRO-1320) | \$ | \$ |
| 17) In-Kind Contributions | (CRO-1510) | \$ 120 | \$ 120 |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) | | \$ 15204.59 | \$ 15204.59 |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) | | \$ 5069.41 | \$ 5069.41 |
| 20) Non-Monetary Gifts Given to Other Committees | (CRO-1330) | \$ | \$ |
| 21) Outstanding Loans (incl. ones from other campaigns) | (CRO-1430) | \$ | \$ |
| 22) Debts and Obligations owed By the Committee | (CRO-1610) | \$ | \$ |
| 23) Debts and Obligations owed To the Committee | (CRO-1620) | \$ | \$ |
| 24) Account Transfers Within the Committee | (CRO-1720) | \$ | \$ |
| 25) Administrative Support | (CRO-1710) | \$ | \$ |
| 26) Forgiven Loans | (CRO-1440) | \$ | \$ |
| 27) 48-Hour Notice Reports Sum | (CRO-2200) | \$ | \$ |
| 28) Contributions to be Refunded | (CRO-1215) | \$ | \$ |

Aggregated Contributions from Individuals

Page

1 of 5

Amendment

Yes No

Optional form used to report NC Contributions From Individuals of \$50 or less

| | |
|------------------------------------------------------------------------------------------------|-----------------------------------|
| 1. Committee Full Name (and Fund if applicable) Wendy Jacobs for County Commissioner | 2. ID Number 45-3929986 |
|------------------------------------------------------------------------------------------------|-----------------------------------|

| 3. Contributor Information | | | | | |
|---------------------------------|-----------------|--------------------|------------------------|----------------------|-----------|
| a. Amend | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount |
| <input type="checkbox"/> Add | | Check | | 1/22/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 1/21/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 1/23/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 1/23/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 1/21/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 1/20/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 1/25/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 1/24/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 2/1/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 2/1/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 1/30/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 2/9/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 2/1/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 2/8/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 2/13/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 2/10/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 2/10/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 2/16/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 2/28/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 2/27/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 2/25/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 2/29/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |

| | |
|------------------------------------------------------------------------|----------------|
| 4. Total only this Page | \$ <u>1100</u> |
| 5. Total of ALL CRO-1205 Pages | \$ |
| <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> | |

Aggregated Contributions from Individuals

Page

2 of 5

Amendment

Yes No

Optional form used to report NC Contributions From Individuals of \$50 or less

| | |
|------------------------------------------------------------------------------------------------|-----------------------------------|
| 1. Committee Full Name (and Fund if applicable) Wendy Jacobs for County Commissioner | 2. ID Number 45-3929986 |
|------------------------------------------------------------------------------------------------|-----------------------------------|

| 3. Contributor Information | | | | | | |
|-----------------------------------|--------|------------------------|---------------------------|-------------------------------|-----------------------------|------------------|
| a. Amend | | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount |
| <input type="checkbox"/> | Add | | Check | | 3/2/2012 | \$ 50 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 3/7/2012 | \$ 50 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 3/12/2012 | \$ 50 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 2/28/2012 | \$ 49 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 1/20/2012 | \$ 40 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 2/16/2012 | \$ 40 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 2/25/2012 | \$ 40 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 1/25/2012 | \$ 25 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 1/19/2012 | \$ 25 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 1/30/2012 | \$ 25 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 2/11/2012 | \$ 25 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 2/4/2012 | \$ 25 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 2/2/2012 | \$ 25 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 2/3/2012 | \$ 25 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 2/5/2012 | \$ 25 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 2/4/2012 | \$ 25 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 2/10/2012 | \$ 25 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 2/19/2012 | \$ 25 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 2/26/2012 | \$ 25 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 3/1/2012 | \$ 25 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 3/4/2012 | \$ 25 |
| <input type="checkbox"/> | Remove | | | | | |
| <input type="checkbox"/> | Add | | Check | | 3/4/2012 | \$ 25 |
| <input type="checkbox"/> | Remove | | | | | |

| | |
|------------------------------------------------------------------------|--------|
| 4. Total only this Page | \$ 694 |
| 5. Total of ALL CRO-1205 Pages | \$ |
| <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> | |

Aggregated Contributions from Individuals

Page

3 of 5

Amendment

Yes No

Optional form used to report NC Contributions From Individuals of \$50 or less

| 1. Committee Full Name (and Fund if applicable) | | 2. ID Number | | | |
|------------------------------------------------------------------------|-----------------|--------------------|------------------------|----------------------|-----------|
| Wendy Jacobs for County Commissioner | | 45-3929986 | | | |
| 3. Contributor Information | | | | | |
| a. Amend | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount |
| <input type="checkbox"/> Add | | Check | | 3/6/2012 | \$ 25 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 3/13/2012 | \$ 25 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 3/6/2012 | \$ 20 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 1/20/2012 | \$ 15 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Paypal | | 3/5/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Paypal | | 3/15/2012 | \$ 25 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Paypal | | 3/18/2012 | \$ 25 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Paypal | | 4/5/2012 | \$ 25 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Paypal | | 4/4/2012 | \$ 25 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 3/14/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 3/23/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 3/25/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 3/21/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 3/25/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 3/31/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 3/31/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 3/27/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/2/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 3/14/2012 | \$ 40 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/2/2012 | \$ 25 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/11/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/11/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| 4. Total only this Page | | | | \$ | 850 |
| 5. Total of ALL CRO-1205 Pages | | | | \$ | |
| <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> | | | | | |

Aggregated Contributions from Individuals

Page

4 of 5

Amendment

Yes No

Optional form used to report NC Contributions From Individuals of \$50 or less

| | |
|------------------------------------------------------------------------------------------------|-----------------------------------|
| 1. Committee Full Name (and Fund if applicable) Wendy Jacobs for County Commissioner | 2. ID Number 45-3929986 |
|------------------------------------------------------------------------------------------------|-----------------------------------|

| 3. Contributor Information | | | | | |
|---------------------------------|-----------------|--------------------|------------------------|----------------------|-----------|
| a. Amend | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount |
| <input type="checkbox"/> Add | | Check | | 4/11/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/12/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/7/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/11/2012 | \$ 25 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/9/2012 | \$ 25 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/10/2012 | \$ 25 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/10/2012 | \$ 25 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/5/2012 | \$ 25 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/10/2012 | \$ 25 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/7/2012 | \$ 25 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/12/2012 | \$ 20 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/6/2012 | \$ 20 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/7/2012 | \$ 10 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/7/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/5/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/12/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/12/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/12/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/11/2012 | \$ 50 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/8/2012 | \$ 35 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/12/2012 | \$ 35 |
| <input type="checkbox"/> Remove | | | | | |
| <input type="checkbox"/> Add | | Check | | 4/7/2012 | \$ 25 |
| <input type="checkbox"/> Remove | | | | | |

| | |
|------------------------------------------------------------------------|--------|
| 4. Total only this Page | \$ 770 |
| 5. Total of ALL CRO-1205 Pages | \$ |
| <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> | |

Aggregated Contributions from Individuals

Yes

No

Optional form used to report NC Contributions From Individuals of \$50 or less

| | |
|--------------------------------------------------------|---------------------|
| 1. Committee Full Name (and Fund if applicable) | 2. ID Number |
| Wendy Jacobs for County Commissioner | 45-3929986 |

| a. Amend | | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount |
|---------------------------------|--|-----------------|--------------------|-------------------------------|----------------------|-----------|
| <input type="checkbox"/> Add | | | Check | | 4/5/2012 | \$ 25 |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | | | Check | | 4/3/2012 | \$ 25 |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | | | Check | | 4/12/2012 | \$ 25 |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | | | Check | | 4/11/2012 | \$ 25 |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | | | Check | | 4/6/2012 | \$ 15 |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | | | In-kind | Food/beverage/ preparation | 2-26-12 | \$ 20 |
| <input type="checkbox"/> Remove | | | | | | |
| <input type="checkbox"/> Add | | | | | | \$ |
| <input type="checkbox"/> Remove | | | | | | \$ |
| <input type="checkbox"/> Add | | | | | | \$ |
| <input type="checkbox"/> Remove | | | | | | \$ |
| <input type="checkbox"/> Add | | | | | | \$ |
| <input type="checkbox"/> Remove | | | | | | \$ |
| <input type="checkbox"/> Add | | | | | | \$ |
| <input type="checkbox"/> Remove | | | | | | \$ |
| <input type="checkbox"/> Add | | | | | | \$ |
| <input type="checkbox"/> Remove | | | | | | \$ |
| <input type="checkbox"/> Add | | | | | | \$ |
| <input type="checkbox"/> Remove | | | | | | \$ |
| <input type="checkbox"/> Add | | | | | | \$ |
| <input type="checkbox"/> Remove | | | | | | \$ |
| <input type="checkbox"/> Add | | | | | | \$ |
| <input type="checkbox"/> Remove | | | | | | \$ |
| <input type="checkbox"/> Add | | | | | | \$ |
| <input type="checkbox"/> Remove | | | | | | \$ |
| <input type="checkbox"/> Add | | | | | | \$ |
| <input type="checkbox"/> Remove | | | | | | \$ |
| <input type="checkbox"/> Add | | | | | | \$ |
| <input type="checkbox"/> Remove | | | | | | \$ |
| <input type="checkbox"/> Add | | | | | | \$ |
| <input type="checkbox"/> Remove | | | | | | \$ |
| <input type="checkbox"/> Add | | | | | | \$ |
| <input type="checkbox"/> Remove | | | | | | \$ |

4. Total only this Page \$ 135

5. Total of ALL CRO-1205 Pages \$ 3549

(This line must be on line 5 of Detailed Summary Page CRO-1100)

Contributions from Individuals

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

| | | | | | | |
|-----------------------------------------------------------------------------------------------------------------|------------------------|---------------------------|-----------------------------------------------------------------------------------------------------------------------------|-----------------------------|--------------------------------|------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Barbara Jacobs 333 E.79th St., # 16M NY, NY 10075 | | | retired | | | |
| | | | c. Employer's Name/Specific Field N/A | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 1500 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 1/23/2012 | | \$ 1500 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Eugene Kalkin 18 Pfizer Road Bernardsville, NJ 07924 | | | President | | | |
| | | | c. Employer's Name/Specific Field Kalkin Company 59-65 Mine Brook Road Floor 3a Bernardsville, NJ07924-2424 | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 500 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 2/7/2012 | | \$ 500 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Carrick Glenn 39 Wilhelm Drive Durham, NC 27705 | | | Career and personal developmen | | | |
| | | | c. Employer's Name/Specific Field Self | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 500 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 3/10/2012 | | \$ 500 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 4. Total only this Page | | | | | \$ 2500 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1210)</i> | | | | | \$ 16,125 | |

Contributions from Individuals

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

| | | | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|-------------------------------------------------------------|-----------------------------|--------------------------------|------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Wade Penny 4105 Picket Road Durham, NC 27705 | | | attorney | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Center Investment Corp Same | | e. Election Sum to Date | |
| | | | | | \$ 400 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 3/13/2012 | | \$ 400 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Brian Marron 4 N. Poston Ct. Durham, NC 27705 | | | Chemist | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Pfizer 4222 Emperor Blvd., Suite 350 Durham, NC 27703 | | e. Election Sum to Date | |
| | | | | | \$ 350 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 2/6/2012 | | \$ 350 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Richard Goldner 39 Wilhelm Drive Durham, NC 27705 | | | Physician | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Duke University Medical Center Durham, NC | | e. Election Sum to Date | |
| | | | | | \$ 300 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 2/10/2012 | | \$ 300 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 4. Total only this Page | | | | | \$ 1050 | |
| 5. Total of ALL CRO-1210 Pages | | | | | \$ | |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | |

Contributions from Individuals

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

| | | | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|-----------------------------------------------------------------------------|-----------------------------|--------------------------------|------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Jeanne Ryan 29 Falling Water Drive Durham, NC 27713 | | | HR manager | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Duke University Durham, NC | | e. Election Sum to Date | |
| | | | | | \$ 300 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 2/27/2012 | | \$ 300 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Evan Ashkin 1528 Pinecrest Road Durham, NC 27705 | | | Physician | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | UNC Health Systems Chapel Hill, NC | | e. Election Sum to Date | |
| | | | | | \$ 250 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 1/30/2012 | | \$ 250 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Richard Trenk 10 West Road West Orange, NJ 07052 | | | Attorney | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Trenk DiPasquale 347 Mount Pleasant Avenue, Sui West Orange, NJ 07052 | | e. Election Sum to Date | |
| | | | | | \$ 500 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 2/2/2012 | | \$ 250 |
| <input type="checkbox"/> | | Check | | 4/5/2012 | | \$ 250 |
| <input type="checkbox"/> | | | | | | \$ |
| 4. Total only this Page | | | | | \$ 1050 | |
| 5. Total of ALL CRO-1210 Pages | | | | | \$ | |
| <i>(This line must be on the 6 of Detailed Summary Page CRO-1100)</i> | | | | | | |

Contributions from Individuals

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

| | | | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|-------------------------------------------------------|-----------------------------|--------------------------------|------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Ellen Eisenstadt 255 W. 94th Street NY, NY 10025 | | | Therapist | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Self Same | | e. Election Sum to Date | |
| | | | | | \$ 250 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 2/13/2012 | | \$ 250 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Grace Nordhoff 7018 52nd Ave., NE, Seattle, WA 98115 | | | Community volunteer | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Self | | e. Election Sum to Date | |
| | | | | | \$ 250 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 2/20/2012 | | \$ 250 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Paul Holmbeck Rungstedvej 18, 8000 Arhus, Denmark | | | Director | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Organic Denmark Silkeborgvej 260 DK-8230 Åbyhøj | | e. Election Sum to Date | |
| | | | | | \$ 250 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 2/16/2012 | | \$ 250 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 4. Total only this Page | | | | | \$ 750 | |
| 5. Total of ALL CRO-1210 Pages | | | | | \$ | |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | |

Contributions from Individuals

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

| | | | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|-------------------------------------------------------|-----------------------------|--------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Carol Anderson 922 Demerius Street Durham, NC 27701 | | | Owner | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Vaguely Reminiscent 728 9th St Durham, NC 27705 | | e. Election Sum to Date | |
| | | | | \$ 200 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Check | | 1/24/2012 | \$ 200 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Becky Heron 4425 Kerley Road Durham, NC 27705 | | | Retired | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | N/A | | e. Election Sum to Date | |
| | | | | \$ 200 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Check | | 1/19/2012 | \$ 200 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Heidi White 36 Bermouth Court Durham, NC 27705 | | | Physician | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Duke University Medical Center Durham, NC | | e. Election Sum to Date | |
| | | | | \$ 200 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Check | | 2/17/2012 | \$ 200 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 600 | |
| 5. Total of ALL CRO-1210 Pages | | | | | \$ | |
| <i>(This line must be on the 6 of Detailed Summary Page CRO-1100)</i> | | | | | | |

Contributions from Individuals

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

| | | | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|------------------------------------------|-----------------------------|--------------------------------|------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Carolyn Aaronson 7324 Abron Dr. Durham, NC 27713 | | | Artist | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Self | | e. Election Sum to Date | |
| | | | | | \$ 200 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 2/22/2012 | | \$ 200 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Carolyn Penny 4105 Pickett Rd. Durham, NC 27705 | | | Business Executive | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Rowan Investment Co. | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 1/22/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Pat Bocckino 7340 Abron Drive Durham, NC 27713 | | | Retired | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | N/A | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 1/20/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 4. Total only this Page | | | | | \$ 400 | |
| 5. Total of ALL CRO-1210 Pages | | | | | \$ | |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | |

Contributions from Individuals

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

| | | | | | | |
|-----------------------------------------------------------------------------------------------------------------|------------------------|---------------------------|---------------------------------------------------|-----------------------------|--------------------------------|------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Robert Healy 839 Sedgefield Street Durham, NC 27705 | | | Retired | | | |
| | | | c. Employer's Name/Specific Field N/A | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 1/19/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Jennifer McGovern 1011 Minerva Ave. Durham, NC 27701 | | | Self | | | |
| | | | c. Employer's Name/Specific Field Tutor | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 1/22/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| George Brine 6505 Hunters Lane Durham, NC 27713 | | | Retired | | | |
| | | | c. Employer's Name/Specific Field N/A | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 1/21/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 4. Total only this Page | | | | | \$ 300 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ | |

Contributions from Individuals

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

| | | | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|--------------------------------------------------------------------|-----------------------------|--------------------------------|------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| John Kuczynski 4523 Reigalwood Rd. Durham, NC 27712 | | | Landscape Architect | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Commercial Site Design 8312 Creedmoor Road Raleigh, NC 27613 | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 1/20/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Steve Schewel 2101 Club Blvd. Durham, NC 27705 | | | President | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Independent Weekly 302 E. Pettigrew Street, #300 Durham, NC | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 1/21/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| David Harris 609 Saddle Ridge Ave. Durham, NC 27704 | | | Driver | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Kerr Drug 3220 Spring Forest Road Raleigh, NC 27616 | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 1/31/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 4. Total only this Page | | | | | \$ 300 | |
| 5. Total of ALL CRO-1210 Pages | | | | | \$ | |
| <i>(This line must be on last of Detailed Summary Page CRO-1100)</i> | | | | | | |

Contributions from Individuals

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

| | | | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|-----------------------------------------------|-----------------------------|--------------------------------|------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Deborah Christie 5212 Twin Pines Lane Durham, NC 27705 | | | Homemaker | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | N/A | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 1/25/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| H. Fischer 3817 Westcrest St. Durham, NC 27707 | | | Retired | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | N/A | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 1/25/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Laura Melton 10 Hartley Place Durham, NC 27705 | | | Scientist | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | DCRI 2400 Pratt Street Durham, NC 27705 | | e. Election Sum to Date | |
| | | | | | \$ 200 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 1/28/2012 | | \$ 100 |
| <input type="checkbox"/> | | | Food, beverage, | 3/31/2012 | | \$ 100 |
| <input type="checkbox"/> | | | preparation | | | \$ |
| 4. Total only this Page | | | | | \$ 400 | |
| 5. Total of ALL CRO-1210 Pages | | | | | \$ | |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | |

Contributions from Individuals

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

| | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------------|---------------------------------------------------------------------------|-----------------------------|--------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) Eric Mlyn 1004 W. Forest Hills Blvd. Durham, NC 27707 | | | b. Job Title/Profession Higher Education | | d. Comments | |
| | | | c. Employer's Name/Specific Field Duke University Durham, NC | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Check | | 2/8/2012 | \$ 100 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) Guenevere Abernathy 109 W. Main Street Durham, NC 27701 | | | b. Job Title/Profession Realtor | | d. Comments | |
| | | | c. Employer's Name/Specific Field Self | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Check | | 2/10/2012 | \$ 100 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) Alvin Trenk 400 Flagler Dr., #1101 West Palm Beach, FL 33401 | | | b. Job Title/Profession Business Consultant | | d. Comments | |
| | | | c. Employer's Name/Specific Field Self | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Check | | 2/7/2012 | \$ 100 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 300 | |
| 5. Total of ALL CRO-1210 Pages | | | | | \$ | |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | |

Contributions from Individuals

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

| | | | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|-------------------------------------------------------|-----------------------------|--------------------------------|------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Marc Howlett 108 Collegiate Circle Durham, NC 27707 | | | Student | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | UNC-CH Chapel Hill, NC | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 2/2/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Laura Benedict 4 Indigo Creek Trail Durham, NC 27712 | | | Vice-President | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Self-Help 301 West Main Street Durham, NC 27701 | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 2/4/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Don Moffitt 2114 Wilson Street Durham, NC 27705 | | | Business Consultant | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Durham Central Market | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 2/25/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 4. Total only this Page | | | | | \$ 300 | |
| 5. Total of ALL CRO-1210 Pages | | | | | \$ | |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | |

Contributions from Individuals

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

| | | | | | | |
|-----------------------------------------------------------------------------------------------------------------|------------------------|---------------------------|---------------------------------------------------------------------------|-----------------------------|--------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Rebecca Tate 160 Solterra Way Durham, NC 27705 | | | Dentist | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Murdoch Center Butner, NC | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Check | | 2/29/2012 | \$ 100 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Harriett Sayre-McCord 3301 Cornwallis Rd Durham, NC 27705 | | | Head | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Montessori Children's Hou of Durham Durham, NC 27701 | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Check | | 3/4/2012 | \$ 100 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Edmund Milam 4900 American Drive Durham, NC 27705 | | | Attorney | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Reinhardt Milam & Idol, PLLR 4011 N. Mangum Street Durham, NC 27701 | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Check | | 3/4/2012 | \$ 100 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 300 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ | |

Contributions from Individuals

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

| | | | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|--------------------------------------------------------------------------------------------------------------|-----------------------------|--------------------------------|------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Douglas MacKinnon 111 Ivy Meadow Ln Durham, NC 27707 | | | Retired | | | |
| | | | c. Employer's Name/Specific Field N/A | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 3/10/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Jane Walters 103 Cricket Ground Durham, NC 27707 | | | Administrator | | | |
| | | | c. Employer's Name/Specific Field Project Compassion 180 Providence Road #1C Chapel Hill, NC | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 3/12/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Eric Wiebe 1507 Hermitage Court Durham, NC 27707 | | | Educator | | | |
| | | | c. Employer's Name/Specific Field Self | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Paypal | | 2/25/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 4. Total only this Page | | | | | \$ 300 | |
| 5. Total of ALL CRO-1210 Pages | | | | | \$ | |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | |

Contributions from Individuals

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

| | | | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|------------------------------------------------------------------------------------------|-----------------------------|--------------------------------|------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Reyn Bowman 2203 Shoreham St Durham, NC 27707 | | | Head | | | |
| | | | c. Employer's Name/Specific Field Scenic NC | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Paypal | | 3/9/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Barker French 1005 Monmouth Ave Durham, NC 27701 | | | Head | | | |
| | | | c. Employer's Name/Specific Field East Durham Childrens Initiati Durham, NC | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 600 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Paypal | | 3/17/2012 | | \$ 100 |
| <input type="checkbox"/> | | Paypal | | 4/3/2012 | | \$ 500 |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Sally Fessler 305 East Delafield Ave Durham, NC 27704 | | | Librarian | | | |
| | | | c. Employer's Name/Specific Field Durham Co. Library Durham, NC | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Paypal | | 3/19/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 4. Total only this Page | | | | | \$ 800 | |
| 5. Total of ALL CRO-1210 Pages | | | | | \$ | |
| <i>(This line must be on the 6 of Detailed Summary Page CRO-1100)</i> | | | | | | |

Contributions from Individuals

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

| | | | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|------------------------------------------|-----------------------------|--------------------------------|------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. HD Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Alison Seevak 1079 Neilson Street Albany, CA 94706 | | | Writer/writing teacher | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Self | | e. Election Sum to Date | |
| | | | | | \$ 250 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Paypal | | 3/15/2012 | | \$ 250 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Julie Woodmansee 3406 Ogburn Ct. Durham, NC 27705 | | | Attorney | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Self | | e. Election Sum to Date | |
| | | | | | \$ 75 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 2/25/2012 | | \$ 75 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Roland Leary 2618 Indian Trail Durham, NC 27705 | | | Retired | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 200 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 3/30/2012 | | \$ 200 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 4. Total only this Page | | | | | \$ 525 | |
| 5. Total of ALL CRO-1210 Pages | | | | | \$ | |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | |

Contributions from Individuals

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

| | | | | | | |
|----------------------------------------------------------------------------------------------------------------|------------------------|---------------------------|------------------------------------------|-----------------------------|--------------------------------|------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Kenneth Rosen 13 Woodland Ave. North Caldwell, NJ 07006 | | | Attorney/Partner | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Lowenstein Sandler PC, Roseland, NJ | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 250 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Paypal | | 4/5/2012 | | \$ 250 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Jay Rice 27 Schweinberg Dr Roseland, NJ 07068 | | | Attorney | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Nagel Rice, LLP, Roseland, NJ | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Paypal | | 4/5/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Mary Jane Rivers 913 W. Knox Durham, NC 27701 | | | Retired Horse Breeder | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Paypal | | 4/1/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 4. Total only this Page | | | | | \$ 450 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on the 6 of Detailed Summary Page CRO-1100)</i> | | | | | \$ | |

Contributions from Individuals

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

| | | | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|-----------------------------------------------------------------------|-----------------------------|--------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Edward Flynn 155 E. 31st #22P NYC 10016 | | | Human Rights Attorney | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | United Nations | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Paypal | | 3/24/2012 | \$ 100 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Sid Stroupe 5102 N. Willowhaven Durham, NC 27713 | | | Retired CPA | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 250 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Paypal | | 4/6/2012 | \$ 250 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Jeff Fisher 682 Erwin Road Durham, NC 27707 | | | President | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Unique Places Post Office Box 3658 Durham North Carolina, 27702 | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Paypal | | 4/12/2012 | \$ 100 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 450 | |
| 5. Total of ALL CRO-1210 Pages | | | | | \$ | |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1200)</i> | | | | | | |

Contributions from Individuals

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

| | | | | | | | |
|-----------------------------------------------------------------------------------------------------------------|------------------------|---------------------------|-------------------------------|----------------------------------------------------------------------------------------|--|--------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| Matthew Bordwin 32 Cabriole Lane Melville, NY 11747 | | | | Co-President | | | |
| | | | | c. Employer's Name/Specific Field Great American Group, New York | | | |
| | | | | | | e. Election Sum to Date | |
| | | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | | Paypal | | 4/12/2012 | | \$ 100 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| Harold Bordwin 56 Westminster Rd Scarsdale, NY 10583 | | | | Co-President | | | |
| | | | | c. Employer's Name/Specific Field Great American Group, New York | | | |
| | | | | | | e. Election Sum to Date | |
| | | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | | Paypal | | 4/11/2012 | | \$ 100 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| Mary Coogan 8 Lewis Court Millstone Township, NJ 08510 | | | | Assistant Director | | | |
| | | | | c. Employer's Name/Specific Field Advocates for Children of NJ Newark, NJ | | | |
| | | | | | | e. Election Sum to Date | |
| | | | | | | \$ 75 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | | Paypal | | 4/10/2012 | | \$ 75 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 4. Total only this Page | | | | | | \$ 275 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | \$ | |

Contributions from Individuals

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

| | | | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|-------------------------------------------------------------|-----------------------------|--------------------------------|------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| James Quinn 15 Koewing Place West Orange, NJ 07052 | | | Finance | | | |
| | | | c. Employer's Name/Specific Field Allen & Co. | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 4/7/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Andrew Jacobs 415 E. 9th St., #1 NY, NY 10009 | | | Journalist | | | |
| | | | c. Employer's Name/Specific Field New York Times | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 250 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Paypal | | 4/6/2012 | | \$ 250 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Robert Dillard Teer, Jr. PO Box 13508 RTP, NC 27709 | | | President | | | |
| | | | c. Employer's Name/Specific Field Teer Associates | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 250 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 3/21/2012 | | \$ 250 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 4. Total only this Page | | | | | \$ 600 | |
| 5. Total of ALL CRO-1210 Pages | | | | | \$ | |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | |

Contributions from Individuals

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

| | | | | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|-------------------------------|------------------------------------------|--|--------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| Laura Drey 2248 Cranford Rd. Durham, NC 27705 | | | | Photographer | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | Self | | | |
| | | | | | | e. Election Sum to Date | |
| | | | | | | \$ 250 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | | Check | | 3/29/2012 | | \$ 150 | |
| <input type="checkbox"/> | | Check | | 4/7/2012 | | \$ 100 | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| Abigail Trenk 60 E. 8th St. NY, NY 10003 | | | | Executive | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | Air Pegasus | | | |
| | | | | | | e. Election Sum to Date | |
| | | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | | Check | | 3/18/2012 | | \$ 100 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| Susan Rust 3515 Cottonwood Dr. Durham, NC 27707 | | | | Accountant | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | Julian's, Chapel Hill | | | |
| | | | | | | e. Election Sum to Date | |
| | | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | | Check | | 4/1/2012 | | \$ 100 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 4. Total only this Page | | | | | | \$ 450 | |
| 5. Total of ALL CRO-1210 Pages | | | | | | \$ | |
| <i>(This box must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | | |

Contributions from Individuals

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

| | | | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|----------------------------------------------------------------------------|-----------------------------|--------------------------------|------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Laura Schanberg 5615 Loblolly Ct. Durham, NC 27705 | | | Physician | | | |
| | | | c. Employer's Name/Specific Field Duke University Medical Center | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 3/30/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Leigh Bordley 1018 Gloria Ave. Durham, NC 27701 | | | Executive Director | | | |
| | | | c. Employer's Name/Specific Field Partners for Youth | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 3/28/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| John T. Hunt 1115 Donphil Rd. Durham, NC 27712 | | | Retired | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 200 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 3/27/2012 | | \$ 100 |
| <input type="checkbox"/> | | Check | | 4/12/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| 4. Total only this Page | | | | | \$ 400 | |
| 5. Total of ALL CRO-1210 Pages | | | | | \$ | |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | |

Contributions from Individuals

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

| | | | | | | | |
|----------------------------------------------------------------------------------------------------------------|------------------------|---------------------------|------------------------------------------|--|--------------------------------|---------------------|------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | | |
| James Dobbins 1006 Monmouth Ave. Durham, NC 27701 | | | Attorney | | | | |
| | | | c. Employer's Name/Specific Field | | | | |
| | | | North Atlantic Trading | | e. Election Sum to Date | | |
| | | | | | \$ 150 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | | 4/11/2012 | | \$ 150 |
| <input type="checkbox"/> | | | | | | | \$ |
| <input type="checkbox"/> | | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | | |
| Linda K. Huff 1905 Old Red Mountain Rd. Rougemont 27572 | | | Artist | | | | |
| | | | c. Employer's Name/Specific Field | | | | |
| | | | Self | | e. Election Sum to Date | | |
| | | | | | \$ 100 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | | 4/9/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | | \$ |
| <input type="checkbox"/> | | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | | |
| Susan Beischer 34 Appleton Place Durham, NC 27705 | | | Retired | | | | |
| | | | c. Employer's Name/Specific Field | | | | |
| | | | | | e. Election Sum to Date | | |
| | | | | | \$ 100 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | | 4/11/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | | \$ |
| <input type="checkbox"/> | | | | | | | \$ |
| 4. Total only this Page | | | | | | \$ 350 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on Bar 6 of Detailed Summary Page CRO-1100)</i> | | | | | | \$ | |

Contributions from Individuals

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

| | | | | | |
|-------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------------|--------------------------------------------------|-----------------------------|--------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments |
| Melissa Mills 2232 Cranford Rd. Durham, NC 27705 | | | Consultant/writer | | |
| | | | c. Employer's Name/Specific Field Self | | |
| | | | e. Election Sum to Date | | |
| | | | \$ 100 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount |
| <input type="checkbox"/> | | Check | | 4/12/2012 | \$ 100 |
| <input type="checkbox"/> | | | | | \$ |
| <input type="checkbox"/> | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments |
| Alvin Trenk 101 Eisenhower Parkway Roseland, NJ 07068 | | | Self-employed | | |
| | | | c. Employer's Name/Specific Field Self | | |
| | | | e. Election Sum to Date | | |
| | | | \$ 100 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount |
| <input type="checkbox"/> | | Check | | 4/5/2012 | \$ 100 |
| <input type="checkbox"/> | | | | | \$ |
| <input type="checkbox"/> | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments |
| Cavett French 1005 Monmouth Ave. Durham, NC 27701 | | | Retired | | |
| | | | c. Employer's Name/Specific Field | | |
| | | | e. Election Sum to Date | | |
| | | | \$ 75 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount |
| <input type="checkbox"/> | | Check | | 4/11/2012 | \$ 75 |
| <input type="checkbox"/> | | | | | \$ |
| <input type="checkbox"/> | | | | | \$ |
| 4. Total only this Page | | | | | \$ 275 |
| 5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small> | | | | | \$ |

Contributions from Individuals

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

| | | | | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|-------------------------------|---------------------------------------------------------------------------|--|---------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| Michael Passante 636 F.St. NE Washington, DC 20002 | | | | Legislative Counsel | | | |
| | | | | c. Employer's Name/Specific Field Robert Menendez | | | |
| | | | | e. Election Sum to Date | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | | Check | | 3/31/2012 | | \$ 100 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| Olive Schiff 33 Asa Street Montville, NJ 07045 | | | | Attorney | | | |
| | | | | c. Employer's Name/Specific Field Trenk, DiPasquale, Della Fera | | | |
| | | | | e. Election Sum to Date | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | | Paypal | | 4/9/2012 | | \$ 100 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| Steven Trenk 215 East 68th Street New York, NY 10021 | | | | Executive | | | |
| | | | | c. Employer's Name/Specific Field Air Pegasus | | | |
| | | | | e. Election Sum to Date | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | | Check | | 4/5/2012 | | \$ 100 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 4. Total only this Page | | | | | | \$ 300 | |
| 5. Total of ALL CRO-1210 Pages | | | | | | \$ | |
| <i>(This line must be on line 4 of Detailed Summary Page CRO-1100)</i> | | | | | | | |

Contributions from Individuals

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

| | | | | | | |
|----------------------------------------------------------------------------------------------------------------|------------------------|---------------------------|------------------------------------------|-----------------------------|--------------------------------|------------------|
| 1. Contributor Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Harry M. Byrnes 41 N. Pocono Rd Mountain Lakes, NJ 07046 | | | Auctioneer | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | A.J. Willner Springfield, NJ | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 4/5/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Matthew Schwartz 844 Dow Rd. Bridgewater, NJ 08807 | | | Accountant | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Bederson & Co. West Orange, NJ | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 4/10/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Charles Persing 21555 Kinglet Dr. Cranbury, NJ 08512 | | | Accountant | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Bederson & Co. West Orange, NJ | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 4/10/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 4. Total only this Page | | | | | \$ 300 | |
| 5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-110)</i> | | | | | \$ | |

Contributions from Individuals

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

| | | | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|--------------------------------------------------|-----------------------------|--------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Philip Neuer 805 S. Manor Blvd. West Orange, NJ 07052 | | | Attorney | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Philip D. Neuer PC | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Check | | 4/8/2012 | \$ 100 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Raymond S. Durkin 30 Lenox Pl. Maplewood, NJ 07040 | | | Retired | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Check | | 4/8/2012 | \$ 100 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Joseph Dipasquale 8 Mark Twain Dr. Morristown, NJ 07960 | | | Attorney | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Trenk, DiPasquale, Della Fera West Orange, NJ | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount | |
| <input type="checkbox"/> | | Check | | 4/7/2012 | \$ 100 | |
| <input type="checkbox"/> | | | | | \$ | |
| <input type="checkbox"/> | | | | | \$ | |
| 4. Total only this Page | | | | | \$ 300 | |
| 5. Total of ALL CRO-1210 Pages | | | | | \$ | |
| <i>(This line must be on line 4 of Detailed Summary Page CRO-1100)</i> | | | | | | |

Contributions from Individuals

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

| 1. Committee Full Name (and Fund if applicable) | | | | | | 2. ID Number | |
|-----------------------------------------------------------------------------------------|-----------------|--------------------|------------------------|-----------------------------------|--|--------------|--|
| Wendy Jacobs for County Commissioner | | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| Donald Shauger 11 Arnold Drive Randolph, NJ 07869 | | | | Construction/Bldg. Management | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | Shauger Group East Orange, NJ | | | |
| | | | | e. Election Sum to Date | | | |
| | | | | \$ | | 200 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | | Check | | 4/5/2012 | | \$ 200 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| Edward Bond 347 Mount Pleasant Ave. West Orange, NJ 07052 | | | | Accountant | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | Bederson & Co. West Orange, NJ | | | |
| | | | | e. Election Sum to Date | | | |
| | | | | \$ | | 200 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | | Check | | 4/3/2012 | | \$ 200 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| Robert Parisi 39 Fairmount Ter. West Orange, NJ 07052 | | | | Insurance Agent | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | R.D. Parisi West Orange, NJ | | | |
| | | | | e. Election Sum to Date | | | |
| | | | | \$ | | 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | | Check | | 4/5/2012 | | \$ 100 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 4. Total only this Page | | | | | | \$ 500 | |
| 5. Total of ALL CRO-1210 Pages | | | | | | \$ | |
| <i>(This Box must be on last 6 of Detailed Summary Page CRO-1210)</i> | | | | | | | |

Contributions from Individuals

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

| | | | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|------------------------------------------|-----------------------------|--------------------------------|------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Ben Becker 354 Eisenhower Pkwy Plaza 2 Livingston, NJ 07039 | | | Attorney | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Becker Meisel Livingston, NJ | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 4/5/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Susan Campbell 34 Cox Cro Rd. Toms River, NJ 08755 | | | Homemaker | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 4/6/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Irving Schwarzbaum 10 Lakeview Dr. West Orange, NJ 07052 | | | Accountant | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | J.H. Cohen LLP | | | |
| | | | | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 4/6/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 4. Total only this Page | | | | | \$ 300 | |
| 5. Total of ALL CRO-1210 Pages | | | | | \$ | |
| <i>(This Box must be on back of Detailed Summary Page CRO-1100)</i> | | | | | | |

Contributions from Individuals

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

| | | | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|------------------------------------------|-----------------------------|--------------------------------|------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Denise O'Hara 2005 Margerum Ave. Lake Como, NJ 07719 | | | Attorney | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Pringle Quinn Belmar, NJ | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 4/6/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Michael Trenk 201 W. 70th St, Apt. 7F New York NY 10023 | | | Restaurant Owner | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Lucky Burger | | e. Election Sum to Date | |
| | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 4/5/2012 | | \$ 100 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Job Title/Profession | | d. Comments | |
| Ronald B. Hitchon 15 Koewing Place West Orange, NJ 07052 | | | Finance | | | |
| | | | c. Employer's Name/Specific Field | | | |
| | | | Allen & Co. | | e. Election Sum to Date | |
| | | | | | \$ 1000 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount |
| <input type="checkbox"/> | | Check | | 4/7/2012 | | \$ 1000 |
| <input type="checkbox"/> | | | | | | \$ |
| <input type="checkbox"/> | | | | | | \$ |
| 4. Total only this Page | | | | | \$ 1200 | |
| 5. Total of ALL CRO-1210 Pages | | | | | \$ | |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | |

Contributions from Individuals

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

| | | | | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|-------------------------------|------------------------------------------|--|--------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| Anthony Sodono 11 Manette Rd. Morristown, NJ 07960 | | | | Attorney | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | Trenk/DiPasquale, West Orange, NJ | | | |
| | | | | | | e. Election Sum to Date | |
| | | | | | | \$ 100 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | | Check | | 4/5/2012 | | \$ 100 | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| | | | | | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | | | | |
| | | | | | | \$ | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | | b. Job Title/Profession | | d. Comments | |
| | | | | | | | |
| | | | | c. Employer's Name/Specific Field | | | |
| | | | | | | | |
| | | | | | | \$ | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | | k. Amount | |
| <input type="checkbox"/> | | Check | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| <input type="checkbox"/> | | | | | | \$ | |
| 4. Total only this Page | | | | | | \$ 100 | |
| 5. Total of ALL CRO-1210 Pages | | | | | | \$ | |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i> | | | | | | | |

Contributions from Other Political Committees

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

| | | | | | |
|------------------------------------------------------------------------------------------------|---------------------------|----------------------------------------------------------------------------------|-----------------------------|--------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Type of Committee | | d. Comments | |
| Committee to Re-elect Diane Catotti for City Council PO Box 52371 Durham, NC 27717 | | <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC | | | |
| | | <input type="checkbox"/> Referendum | | | |
| | | c. Level Registered (Specify) | | | |
| | | <input type="checkbox"/> Federal <input type="checkbox"/> County: | | e. Election Sum to Date | |
| | | <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality: | | \$ 100 | |
| f. Account Code | g. Form of Payment | h. In-Kind Description | i. Date (mm/dd/yyyy) | j. Amount | |
| | Check | | 01/18/2012 | \$ 100 | |
| | | | | \$ | |
| | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Type of Committee | | d. Comments | |
| William Bell Campaign Committee 1003 Huntsman Drive Durham, NC 27713 | | <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC | | | |
| | | <input type="checkbox"/> Referendum | | | |
| | | c. Level Registered (Specify) | | | |
| | | <input type="checkbox"/> Federal <input type="checkbox"/> County: | | e. Election Sum to Date | |
| | | <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality: | | \$ 100 | |
| f. Account Code | g. Form of Payment | h. In-Kind Description | i. Date (mm/dd/yyyy) | j. Amount | |
| | Check | | 03/30/2012 | \$ 100 | |
| | | | | \$ | |
| | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Type of Committee | | d. Comments | |
| Eugene Brown for City Council 605 Jackson Street Durham, NC 27701 | | <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC | | | |
| | | <input type="checkbox"/> Referendum | | | |
| | | c. Level Registered (Specify) | | | |
| | | <input type="checkbox"/> Federal <input type="checkbox"/> County: | | e. Election Sum to Date | |
| | | <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality: | | \$ 50 | |
| f. Account Code | g. Form of Payment | h. In-Kind Description | i. Date (mm/dd/yyyy) | j. Amount | |
| | Check | | 4/7/2012 | \$ 50 | |
| | | | | \$ | |
| | | | | \$ | |
| 4. Total only this Page | | | | \$ 250 | |
| 5. Total of ALL CRO-1230 Pages | | | | \$ | |
| <i>(This line must be on Row 2 of Detailed Summary Page CRO-1100)</i> | | | | | |

Contributions from Other Political Committees

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

| | | | | | |
|-------------------------------------------------------------------------------------------------------|---------------------------|------------------------------------------------------------------------------|-----------------------------|--------------------------------|--|
| 1. Committee Full Name (and Fund if applicable) | | | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Type of Committee | | d. Comments | |
| Election Fund of Christopher J. Durkin for County Clerk 2 Gymoty Rd. West Caldwell, NJ 07006 | | <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC | | | |
| | | <input type="checkbox"/> Referendum | | | |
| | | c. Level Registered (Specify) | | | |
| | | <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: | | e. Election Sum to Date | |
| | | <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 100 | |
| f. Account Code | g. Form of Payment | h. In-Kind Description | i. Date (mm/dd/yyyy) | j. Amount | |
| | Check | | 4/9/2012 | \$ 100 | |
| | | | | \$ | |
| | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Type of Committee | | d. Comments | |
| | | <input type="checkbox"/> Candidate <input type="checkbox"/> PAC | | | |
| | | <input type="checkbox"/> Referendum | | | |
| | | c. Level Registered (Specify) | | | |
| | | <input type="checkbox"/> Federal <input type="checkbox"/> County: | | e. Election Sum to Date | |
| | | <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ | |
| f. Account Code | g. Form of Payment | h. In-Kind Description | i. Date (mm/dd/yyyy) | j. Amount | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Type of Committee | | d. Comments | |
| | | <input type="checkbox"/> Candidate <input type="checkbox"/> PAC | | | |
| | | <input type="checkbox"/> Referendum | | | |
| | | c. Level Registered (Specify) | | | |
| | | <input type="checkbox"/> Federal <input type="checkbox"/> County: | | e. Election Sum to Date | |
| | | <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ | |
| f. Account Code | g. Form of Payment | h. In-Kind Description | i. Date (mm/dd/yyyy) | j. Amount | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| 4. Total only this Page | | | | \$ 100 | |
| 5. Total of ALL CRO-1230 Pages | | | | \$ 350 | |

(This line must be on line 5 of Detailed Summary Page CRO-1100)

Disbursements

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

| | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|---------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|--------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 |
| 3. Type of Disbursement (Check one amount CRO-1310 forms for each type of Disbursement) | | | | | |
| <input checked="" type="checkbox"/> Operating Expenses | | <input type="checkbox"/> Contributions to Candidates/Political Committees | | <input type="checkbox"/> Coordinated Party Expenditures | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) Durham County Board of Electio 706 Corporation Street Durham, NC 27701 | | | b. Coordinated Committee Name | | d. Comments |
| | | | c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | |
| | | | | | e. Election Sum to Date |
| | | | | | \$ 197.77 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| | Check | H | 02/13/2012 | \$197.77 | Filing Fee |
| | | | | \$ | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) Wendy Jacobs 4308 Rivermont Road Durham, NC 27712 | | | b. Coordinated Committee Name | | d. Comments |
| | | | c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | |
| | | | | | e. Election Sum to Date |
| | | | | | \$ 4469.9 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| | Check | B | 03/02/2012 * | \$3339.80 | Capital Promo for signs |
| | Check | A | 4/21/2012 | \$380.10 | Advertising in The Chronicle |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) Herald-Sun Newspaper 2828 Pickett Road Durham, NC 27705 | | | b. Coordinated Committee Name | | d. Comments |
| | | | c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | |
| | | | | | e. Election Sum to Date |
| | | | | | \$ 969.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| | Check | B | 4/13/2012 | \$969.00 | Advertisement in Durham |
| | | | | \$ | Herald-Sun Newspaper |
| 5. Total only on Page | | | | | \$ 4886.67 |
| 6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> | | | | | \$ 15084.59 |
| 7. Purpose Codes (List detailed expenditure code in (k.) above) | | | | | |
| A* - Media | | B* - Printing | | C* - Fundraising | |
| E - Salaries | | F* - Equipment | | G - Political Party | |
| I - Postage | | J - Penalties | | K* - Office Expenses | |
| O* - Other | | | | D - To Another Candidate | |
| | | | | H* - Holding Public Office Expenses | |
| | | | | Q* - Donation to Legal Expense Fund | |
| * Codes require detailed explanation in required remarks field (k) | | | | | |

Disbursements

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

| | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|---------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|---------------------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 |
| 3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> | | | | | |
| <input checked="" type="checkbox"/> Operating Expenses | | <input type="checkbox"/> Contributions to Candidates/Political Committees | | <input type="checkbox"/> Coordinated Party Expenditures | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) The Green Room 1108 Broad Street Durham, NC 27701 | | | b. Coordinated Committee Name | | d. Comments |
| | | | c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | |
| | | | | | e. Election Sum to Date |
| | | | | | \$ 16 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| | Check | O | 4/15/2012 | \$16 | Food & Beverage |
| | | | | \$ | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) Carolina Times P.O. Box 3825 Durham, NC 27702-3825 | | | b. Coordinated Committee Name | | d. Comments |
| | | | c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | |
| | | | | | e. Election Sum to Date |
| | | | | | \$ 236.00 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| | Check | B | 4/16/2012 | \$236.00 | Advertising in Carolina Times Magazine |
| | | | | \$ | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) Independent Weekly 302 E. Pettigrew St., Suite 30 Durham, NC 27701 | | | b. Coordinated Committee Name | | d. Comments |
| | | | c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | |
| | | | | | e. Election Sum to Date |
| | | | | | \$ 707 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| | Check | B | 4/16/2012 | \$707 | Advertising in Independent Weekly Newspaper |
| | | | | \$ | |
| 5. Total only this Page | | | | | \$ 959 |
| 6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> | | | | | \$ |
| 7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i> | | | | | |
| A* - Media | B* - Printing | C* - Fundraising | D - To Another Candidate | | |
| E - Salaries | F* - Equipment | G - Political Party | H* - Holding Public Office Expenses | | |
| I - Postage | J - Penalties | K* - Office Expenses | Q* - Donation to Legal Expense Fund | | |
| O* - Other | | | | | |
| * Codes require detailed explanation in required remarks field (k) | | | | | |

Disbursements

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

| | | | | | |
|---------------------------------------------------------------------------------------------------------------|---------------------------|---------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|-------------------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 |
| 3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> | | | | | |
| <input checked="" type="checkbox"/> Operating Expenses | | <input type="checkbox"/> Contributions to Candidates/Political Committees | | <input type="checkbox"/> Coordinated Party Expenditures | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Coordinated Committee Name | | d. Comments |
| PA-PAC PO Box 3221 Durham, NC 27715 | | | | | |
| | | | c. Level Registered (Specify) | | e. Election Sum to Date |
| | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 500 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| | Check | O | 4/21/2012 | \$500 | Mailing |
| | | | | \$ | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Coordinated Committee Name | | d. Comments |
| National Mail Service 3201 Chapel Hill Rd. Durham, NC 27707 | | | | | |
| | | | c. Level Registered (Specify) | | e. Election Sum to Date |
| | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ 744.87 |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| | Check | O | 4/21/2012 | \$744.87 | Direct Mail Expenses |
| | | | | \$ | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Coordinated Committee Name | | d. Comments |
| Wendy Jacobs 308 Rivermont Road Durham, NC 27712 | | | | | See also p. 1 Expense Reimbursement |
| | | | c. Level Registered (Specify) | | e. Election Sum to Date |
| | | | <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | \$ |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| | Check | A | 4/21/2012 | \$300 | Advertising in Spectacular Mag |
| | Check | A | 4/21/2012 | \$450 | Advertising in Triangle Tribun |
| 5. Total only this Page | | | | | \$ 1994.87 |
| 6. Total of ALL CRO-1310 Pages | | | | | \$ |
| <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> | | | | | |
| <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> | | | | | |
| <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> | | | | | |
| 7. Purpose Codes (List detailed expenditures code in (h.) above) | | | | | |
| A* - Media | | B* - Printing | | C* - Fundraising | |
| E - Salaries | | F* - Equipment | | G - Political Party | |
| I - Postage | | J - Penalties | | K* - Office Expenses | |
| O* - Other | | | | D - To Another Candidate | |
| | | | | H* - Holding Public Office Expenses | |
| | | | | Q* - Donation to Legal Expense Fund | |
| * Codes require detailed explanation in required remarks field (k) | | | | | |

Disbursements

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

| | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|----------------------------------------------|----------------------------------------------------------|
| 1. Committee Full Name (and Fund if applicable) Wendy Jacobs for County Commissioner | | | | | 2. ID Number 45-3929986 |
| 3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> | | | | | |
| <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures | | | | | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> B & J Custom Printing 1403 Person Street Durham, NC 27703 | | b. Coordinated Committee Name | | d. Comments | |
| | | c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | e. Election Sum to Date \$ 1845.75 | |
| f. Account Code | g. Form of Payment Check | h. Purpose Code B | i. Date (mm/dd/yyyy) 4/21/2012 | j. Amount \$1845.75 | k. Required Remarks Printing of Direct Mailing |
| | | | | \$ | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> USPS 323 E Chapel Hill St Durham, NC 27701 | | b. Coordinated Committee Name | | d. Comments | |
| | | c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | e. Election Sum to Date \$ 5297.75 | |
| f. Account Code | g. Form of Payment Check | h. Purpose Code I | i. Date (mm/dd/yyyy) 4/17/2012 | j. Amount \$5297.75 | k. Required Remarks |
| | | | | \$ | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i> Mechanics & Farmers Bank PO Box 1932 Durham, NC 27702 | | b. Coordinated Committee Name | | d. Comments | |
| | | c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | e. Election Sum to Date \$ 12 | |
| f. Account Code | g. Form of Payment Deduction | h. Purpose Code O | i. Date (mm/dd/yyyy) 01/31/2012 | j. Amount \$12 | k. Required Remarks Bank Fees |
| | | | | \$ | |
| 5. Total only this Page | | | | | \$ 7155.50 |
| 6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> | | | | | \$ |
| 7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i> | | | | | |
| A* - Media | B* - Printing | C* - Fundraising | D - To Another Candidate | | |
| E - Salaries | F* - Equipment | G - Political Party | H* - Holding Public Office Expenses | | |
| I - Postage | J - Penalties | K* - Office Expenses | Q* - Donation to Legal Expense Fund | | |
| O* - Other | | | | | |
| * Codes require detailed explanation in required remarks field (k) | | | | | |

Disbursements

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

| | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|---------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|--------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | | | | 2. ID Number |
| Wendy Jacobs for County Commissioner | | | | | 45-3929986 |
| 3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement)</i> | | | | | |
| <input checked="" type="checkbox"/> Operating Expenses | | <input type="checkbox"/> Contributions to Candidates/Political Committees | | <input type="checkbox"/> Coordinated Party Expenditures | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) Paypal | | | b. Coordinated Committee Name | | d. Comments |
| | | | c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | |
| | | | | | e. Election Sum to Date |
| | | | | | \$ 88.55 |
| l. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| | Deduction | O | various | \$88.55 | Transaction fee |
| | | | | \$ | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Coordinated Committee Name | | d. Comments |
| | | | c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | |
| | | | | | e. Election Sum to Date |
| | | | | | \$ |
| l. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| | | | | \$ | |
| | | | | \$ | |
| 4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | | b. Coordinated Committee Name | | d. Comments |
| | | | c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: | | |
| | | | | | e. Election Sum to Date |
| | | | | | \$ |
| l. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
| | | | | \$ | |
| | | | | \$ | |
| 5. Total only this Page | | | | | \$ 88.55 |
| 6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i> | | | | | \$ |
| 7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i> | | | | | |
| A* - Media | B* - Printing | C* - Fundraising | D - To Another Candidate | | |
| E - Salaries | F* - Equipment | G - Political Party | H* - Holding Public Office Expenses | | |
| I - Postage | J - Penalties | K* - Office Expenses | Q* - Donation to Legal Expense Fund | | |
| O* - Other | | | | | |
| * Codes require detailed explanation in required remarks field (k) | | | | | |

In-Kind Contributions

Amendment

Pg 1 of 1 Yes No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

| | | | |
|------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|
| 1. Committee Full Name (and Fund if applicable) | | 2. ID Number | |
| Wendy Jacobs for County Commissioner | | 45-3929986 | |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Type of Contributor | c. Comments |
| Heidi Carter 31 Falling Water Dr. Durham, NC 27713 | | <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source | |
| | | | d. Election Sum to Date |
| | | | \$ 20 |
| e. Description | | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| Food, beverage and prep for Fund Raiser | | 2/26/2012 | \$ 20 |
| | | | \$ |
| | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Type of Contributor | c. Comments |
| Laura Melton 10 Hartley Place Durham, NC 27705 | | <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source | |
| | | | d. Election Sum to Date |
| | | | \$ 200 |
| e. Description | | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| Food, beverage and prep for Fund Raiser | | 3/31/2012 | \$ 100 |
| | | | \$ |
| | | | \$ |
| 3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| a. Full Name, Mailing Address & Phone (include city, state, & zip) | | b. Type of Contributor | c. Comments |
| | | <input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source | |
| | | | d. Election Sum to Date |
| | | | \$ |
| e. Description | | f. Date (mm/dd/yyyy) | g. Fair Market Amount |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| 4. Total only this Page | | \$ 120 | |
| 5. Total of ALL CRO-1510 Pages | | \$ 120 | |
| <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i> | | | |