

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 MIDDLETON 4 DURHAM		c. ID Number DUR-ECLL29-0-01	
b. Mailing Address (include City, State and Zip Code) 3018 APPLING WAY DURHAM, NC 27703		d. Date Filed 07/29/2026	
		e. Phone Number	
2. Report Year 2026	3. Period Start Date (mm/dd/yy) 01/01/2026	4. Period End Date (mm/dd/yy) 06/30/2026	5. Treasurer Full Name PHIL SEIB
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
☒ Candidate Campaign ☐ Party ☐ Joint Fundraiser ☐ PAC ☐ Referendum ☐ Legal Expense Fund		Municipal ☐ Organizational ☐ Thirty-five day ☐ Pre-primary ☐ Pre-election ☐ Pre-runoff ☐ Semi-annual ☒ Mid Year ☐ Year End ☐ Final ☐ Special	
7. Type of Fund (if applicable, check one) ☐ "Booster Fund" ☐ Building Fund ☐ Presidential Election Year Candidates Fund ☐ NC Public Campaign Financing Fund ☐ Other:		State/County ☐ Organizational ☐ Quarterly ☐ First ☐ Second ☐ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special	
8. Number of Fundraisers this Report 0		10. Special Report Name	
3. Account Information		3. Account Information	
a. Financial Institution Full Name PAYPAL		a. Financial Institution Full Name M&F BANK	
b. Purpose EXPENDITURES AND RECEIPTS	c. Account Code 0001	b. Purpose EXPENDITURES AND RECEIPTS	c. Account Code 01
	d. Period Begin Balance \$		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			
<u>Phil Seib</u> Printed Name of Signer		<u>[Signature]</u> Signature of Appointed Treasurer	
		<u>07/29/2026</u> Date	
FOR OFFICE USE ONLY			
Date Received:	<u>7/30/26</u>	Employee	<u>[Signature]</u>
Date Postmarked:	_____	Employee	<u>IN-PERSON</u>
Date Scanned:	_____	Employee	<u>JUL 30 2026</u>
Date Data Entered:	_____	Employee	<u>Durham County BOE</u>
		Delivery Method ☐ Normal Mail ☐ Registered Mail ☒ Hand Delivered ☐ Electronically Filed	
		☐ 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.			