

Disclosure Report Cover

Amendment <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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		c. ID Number							
Charlie Reece for Durham		PCL-388							
b. Mailing Address (include City, State and Zip Code)		d. Date Filed							
3604 Darwin Rd Durham, NC 27707-5304		09/03/2019							
		e. Phone Number							
		(919) 599-1357							
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name						
2019	07/01/2019	08/27/2019	Phillip Seib						
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"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Legal Expense Fund		<table border="1"> <tr> <th>Municipal</th> <th>State/County</th> <th>Referendum</th> </tr> <tr> <td> <input type="checkbox"/> Organizational <input checked="" type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special </td> <td> <input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special </td> <td> <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special </td> </tr> </table>		Municipal	State/County	Referendum	<input type="checkbox"/> Organizational <input checked="" type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
Municipal	State/County	Referendum							
<input type="checkbox"/> Organizational <input checked="" type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special							
7. Type of Fund (if applicable, check one)		10. Special Report Name							
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:									
8. Number of Fundraisers this Report									
0									
11. Account Information									
a. Financial Institution Full Name									
Mechanics and Farmers Bank									
b. Purpose		c. Account Code							
Campaign Receipts and Expenditures		CR01							
		d. Period Begin Balance							
		\$ 23,167.80							
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 undisclosed 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.									
_____		_____	_____						
Printed Name of Signer		Signature of Appointed Treasurer	Date						
FOR OFFICE USE ONLY			Delivery Method						
Date Received: _____	Employee: _____		<input type="checkbox"/> Normal Mail						
Date Postmarked: _____	Employee: _____		<input type="checkbox"/> Registered Mail						
Date Scanned: _____	Employee: _____		<input type="checkbox"/> Hand Delivered						
Date Data Entered: _____	Employee: _____		<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.									
CRO-1000	NC State Board of Elections		August 2008						

Detailed Summary

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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
Charlie Reece for Durham	2019 Thirty-five-day	PCL-388
Start of Election Cycle: January 1, 2016	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$23,167.80	\$2,714.18
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	\$385.00	\$2,223.00
6) Contributions from Individuals (CRO-1210)	\$4,245.00	\$35,476.34
7) Contributions from Political Party Committees (CRO-1220)	\$0.00	\$0.00
8) Contributions from Other Political Committees (CRO-1230)	\$0.00	\$0.00
9) Loan Proceeds (CRO-1410)	\$0.00	\$0.00
10) Refunds/Reimbursements To the Committee (CRO-1240)	\$36.91	\$36.91
11) Other Receipt Sources		
11a) Interest on Bank Accounts (CRO-1250)	\$0.00	\$0.00
11b) Contributions from Not-for-Profit Organizations (CRO-1250)	\$0.00	\$0.00
11c) Outside Sources of Income (CRO-1250)	\$0.00	\$0.00
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$0.00	\$0.00
11e) Exempt Purchase Price Sales (CRO-1265)	\$0.00	\$0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, and 11e)	\$4,666.91	\$37,736.25
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$7,683.57	\$18,430.15
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$0.00	\$0.00
13c) Coordinated Party Expenditures (CRO-1310)	\$0.00	\$0.00
14) Aggregated Non-Media Expenditures (CRO-1315)	\$0.00	\$0.00
15) Loan Repayments (CRO-1420)	\$0.00	\$0.00
16) Refunds/Reimbursements From the Committee (CRO-1320)	\$0.00	\$0.00
17) In-Kind Contributions (CRO-1510)	\$0.00	\$1,869.14
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$7,683.57	\$20,299.29
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$20,151.14	\$20,151.14
ADDITIONAL INFORMATION		
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$0.00	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$0.00	
22) Debts and Obligations owed By the Committee (CRO-1610)	\$0.00	
23) Debts and Obligations owed To the Committee (CRO-1620)	\$0.00	
24) Account Transfers Within the Committee (CRO-1720)	\$0.00	
25) Administrative Support (CRO-1710)	\$0.00	\$0.00
26) Forgiven Loans (CRO-1440)	\$0.00	\$0.00
27) 48-Hour Notice Reports Sum (CRO-2220)	\$0.00	\$0.00
28) Contributions to be Refunded (CRO-1215)	\$0.00	\$0.00

Aggregated Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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
Charlie Reece for Durham	PCL-388

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 <input type="checkbox"/> Remove	CR01	Credit Card		07/05/2019	\$10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	CR01	Credit Card		07/02/2019	\$35.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	CR01	Credit Card		08/09/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	CR01	Credit Card		07/09/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	CR01	Credit Card		08/15/2019	\$35.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	CR01	Credit Card		08/08/2019	\$25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	CR01	Credit Card		08/09/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	CR01	Credit Card		08/13/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	CR01	Credit Card		07/26/2019	\$50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	CR01	Credit Card		07/10/2019	\$20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	CR01	Credit Card		07/05/2019	\$10.00

4. Total only this Page	\$385.00
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>	\$385.00

Contributions from Individuals

Amendment

Yes No

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	
Charlie Reece for Durham				PCL-388	
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	
Patricia Bracknell 344 SW Hayes Ave Bend, OR 97702-2112 (678) 358-7385			Analyst		
			c. Employer's Name/Specific Field		
			St. Charles Health System		
			e. Election Sum to Date		
			\$100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	CR01	Credit Card		07/28/2019	\$20.00
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	
Hampton Dellinger 4306 Peachway Dr Durham, NC 27705-7300 (919) 402-0017			Attorney		
			c. Employer's Name/Specific Field		
			Boies Schiller		
			e. Election Sum to Date		
			\$250.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	CR01	Credit Card		07/11/2019	\$250.00
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	
Jonathan and Kelly Funke 1330 5th Ave 2G New York, NY 10026-3900			Writer/Consultant		
			c. Employer's Name/Specific Field		
			Self Employed		
			e. Election Sum to Date		
			\$250.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	CR01	Credit Card		08/27/2019	\$250.00

4. Total only this page	\$520.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$4,245.00

Contributions from Individuals

Amendment

Yes No

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	
Charlie Reece for Durham				PCL-388	
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	
Louise Holland 3436 Rugby Rd Durham, NC 27707-5449 (919) 806-0391			Teacher		
			c. Employer's Name/Specific Field		
			Trinity School of Durham and Chapel Hill	e. Election Sum to Date	
				\$200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	CR01	Credit Card		07/01/2019	\$100.00
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	
Wendy Jacobs 4308 Rivermont Rd Durham, NC 27712-2935 (919) 418-3169			County commissioner		
			c. Employer's Name/Specific Field		
			Durham County Government	e. Election Sum to Date	
				\$125.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	CR01	Credit Card		07/18/2019	\$75.00
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 McAllaster 2111 W Club Blvd Durham, NC 27705-3211 (919) 682-6858			Retired		
			c. Employer's Name/Specific Field		
			Retired	e. Election Sum to Date	
				\$100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	CR01	Credit Card		07/05/2019	\$50.00

4. Total only this page	\$225.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$4,245.00

Contributions from Individuals

Amendment

Yes No

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	
Charlie Reece for Durham				PCL-388	
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	
Marcia McNally PO Box 247 Hurdle Mills, NC 27541-0247		Retired			
		c. Employer's Name/Specific Field			
		Retired		e. Election Sum to Date	
				\$250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	CR01	Check		08/03/2019	\$250.00
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	
Elizabeth W Mushak 4036 Nottaway Rd Durham, NC 27707-5425		Writer/Editor			
		c. Employer's Name/Specific Field			
		Self-Employed		e. Election Sum to Date	
				\$90.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	CR01	Check		08/03/2019	\$50.00
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 Parramore 5012 Tanglewood Dr Raleigh, NC 27612-3135 (919) 787-2287		Educator			
		c. Employer's Name/Specific Field			
		Retired. NC State University		e. Election Sum to Date	
				\$500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	CR01	Credit Card		08/27/2019	\$100.00

4. Total only this page	\$400.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$4,245.00

Contributions from Individuals

Amendment

Yes No

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	
Charlie Reece for Durham				PCL-388	
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	
Dave Shortino 105 Winding Ridge Rd Durham, NC 27713-5814		Executive			
		c. Employer's Name/Specific Field			
		Rho			
				e. Election Sum to Date	
				\$1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	CR01	Credit Card		08/09/2019	\$500.00
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 Smith 110 N Corcoran St Unit 1205 Durham, NC 27701-5020 (919) 491-4321		Vice President			
		c. Employer's Name/Specific Field			
		EbenConcepts			
				e. Election Sum to Date	
				\$260.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	CR01	Credit Card		08/27/2019	\$100.00
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	
Peachy Wagner-Staley 4727 Stratford Ct Apt 2004 Naples, FL 34105-6682 (239) 649-0841		Retired			
		c. Employer's Name/Specific Field			
		N/A			
				e. Election Sum to Date	
				\$4,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date	k. Amount
<input type="checkbox"/>	CR01	Check		08/03/2019	\$2,500.00

4. Total only this page	\$3,100.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$4,245.00

Refunds/Reimbursements To the Committee

Amendment
 Yes No

Use this form to report refunds received by the committee or reimbursements for a previous expenditure

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Charlie Reece for Durham		PCL-388	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee	
Committee to Elect Jillian Johnson PO Box 3502 Durham, NC 27702-3502 (919) 593-3176		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	
		g. Comments	
		Overpayment Refund	
		e. Level Registered (Specify)	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	
		h. Original Expenditure Date	
		04/25/2019	
		i. Original Expenditure Amt	
		\$566.17	
b. Job Title/Profession	c. Employer's Name/Specific Field	f. Purpose	j. Election Cyc Sum To Date
		Launch Party Venue	\$3,433.53
k. Account Code	l. Form of Payment	m. In-Kind Description	n. Date (mm/dd/yyyy)
CR01	Check		08/26/2019
			o. Amount
			\$36.91

PREVIEW

(DO NOT FILE THIS COPY)

4. Total only this page	\$36.91
5. Total of ALL CRO-1240 Pages (This line must be on line 10 of Detailed Summary Page CRO-1100)	\$36.91

Disbursements

Amendment
 Yes No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Charlie Reece for Durham						PCL-388	
3. Type of Disbursement (Please use separate 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)				b. Coordinated Committee Name		d. Comments	
Capital Promotions Inc PO Box 231 Po Box 231 Glenside, PA 19038-0231 (800) 884-3024						Team Charlie Yard Sign Downpayment	
				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:		\$2,240.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
CR01	Debit Card	A	07/23/2019	\$1,000.00	Yard Sign Down Payment		
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	
Capital Promotions Inc PO Box 231 Po Box 231 Glenside, PA 19038-0231 (800) 884-3024						Team Charlie Yard Sign Final Payment	
				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:		\$2,240.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
CR01	Debit Card	A	07/25/2019	\$1,240.00	Yard Signs Final Payment		
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	
Committee to Elect Jillian Johnson PO Box 3502 Durham, NC 27702-3502 (919) 593-3176						1/3 cost of Slate BCT palm cards printed in Spanish	
				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:		\$3,470.44	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
CR01	Check	B	08/20/2019	\$40.04	Slate Spanish Palm Cards		
5. Total only this page						\$2,280.04	
6. Total of ALL CRO-1310 Pages						\$7,683.57	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)							
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
7. Purpose Codes (List detailed Expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* - Other							
*Codes require detailed explanation in required remarks field (k)							

Disbursements

Amendment
 Yes No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Charlie Reece for Durham						PCL-388	
3. Type of Disbursement (Please use separate 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)				b. Coordinated Committee Name		d. Comments	
Committee to Elect Jillian Johnson PO Box 3502 Durham, NC 27702-3502 (919) 593-3176						1/3 Slate Registration cost to be part of Pride Parade	
				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:		\$3,470.44	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
CR01	Check	O	08/20/2019	\$58.33	Pride Parade Registration		
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	
Committee to Elect Jillian Johnson PO Box 3502 Durham, NC 27702-3502 (919) 593-3176						1/3 cost of Slate Ad in the DCABP Founders Banquet Program	
				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:		\$3,470.44	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
CR01	Check	A	08/20/2019	\$83.33	Slate Ad in the DCABP Founders Banquet Program		
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	
Committee to Elect Jillian Johnson PO Box 3502 Durham, NC 27702-3502 (919) 593-3176						1/3 costs of Loco Pops Shared Slate expense for Filing Party 07/05/2019	
				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:		\$3,470.44	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
CR01	Check	O	08/20/2019	\$99.62	Popsicles for Filing Party		
5. Total only this page						\$241.28	
6. Total of ALL CRO-1310 Pages						\$7,683.57	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)							
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
7. Purpose Codes (List detailed Expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* - Other							
*Codes require detailed explanation in required remarks field (k)							

Disbursements

Amendment
 Yes No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number
Charlie Reece for Durham						PCL-388
3. Type of Disbursement (Please use separate 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)			b. Coordinated Committee Name		d. Comments	
Durham County Government 120 E Parrish St Durham, NC 27701-0104			c. Level Registered (Specify)		Filing Fee enter race for City Council at Large	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
					e. Election Sum to Date	
					\$221.17	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
CR01	Check	H	07/05/2019	\$221.17	Candidate Filing 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	
Federal Express Freight 2200 Forward Dr Harrison, AR 72601-2004 (870) 741-9000			c. Level Registered (Specify)		Charge for skid and loading dock fees	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
					e. Election Sum to Date	
					\$55.69	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
CR01	Debit Card	A	07/17/2019	\$55.69	Freight Charge for Yard Signs	
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	
Mechanics and Farmers Bank 116 W Parrish St Durham, NC 27701-3321 (919) 687-7800			c. Level Registered (Specify)		Bank Card Merchant Fees	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
					e. Election Sum to Date	
					\$1,003.40	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
CR01	Electronic Funds Transfer	C	07/01/2019	\$92.17	Bank Card Merchant Fees	
5. Total only this page					\$369.03	
6. Total of ALL CRO-1310 Pages					\$7,683.57	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)						
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)						
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						
7. Purpose Codes (List detailed Expenditure code in (h.) above)						
A* - Media	B* - Printing	C* - Fundraising		D - To Another Candidate		
E - salaries	F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - postage	J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* - Other						
*Codes require detailed explanation in required remarks field (k)						

Disbursements

Amendment
 Yes No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Charlie Reece for Durham						PCL-388	
3. Type of Disbursement (Please use separate 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)				b. Coordinated Committee Name		d. Comments	
Mechanics and Farmers Bank 116 W Parrish St Durham, NC 27701-3321 (919) 687-7800				c. Level Registered (Specify)		e. Election Sum to Date \$1,003.40	
				<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		
CR01	Electronic Funds Transfer	C	08/02/2019	\$446.22	Bank Card Merchant Fees		
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	
NGP VAN, Inc. 1101 15th St NW Ste 500 Washington, DC 20005-5006 (202) 686-9330				c. Level Registered (Specify)		e. Election Sum to Date \$1,500.00	
				<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		
CR01	Electronic Funds Transfer	K	07/03/2019	\$150.00	Monthly Subscription 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	
NGP VAN, Inc. 1101 15th St NW Ste 500 Washington, DC 20005-5006 (202) 686-9330				c. Level Registered (Specify)		e. Election Sum to Date \$1,500.00	
				<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		
CR01	Electronic Funds Transfer	K	08/02/2019	\$150.00	Monthly Subscription Fee		
5. Total only this page						\$746.22	
6. Total of ALL CRO-1310 Pages						\$7,683.57	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)							
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
7. Purpose Codes (List detailed Expenditure code in (h.) above)							
A* - Media	B* - Printing	C* - Fundraising		D - To Another Candidate			
E - salaries	F* - Equipment		G - Political Party		H* - Holding Public Office Expenses		
I - postage	J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund		
O* - Other							
*Codes require detailed explanation in required remarks field (k)							

Disbursements

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Charlie Reece for Durham						PCL-388	
3. Type of Disbursement (Please use separate 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)				b. Coordinated Committee Name		d. Comments	
North Carolina Democratic Party 220 Hillsborough St Raleigh, NC 27603-1724 (919) 821-2777						Check # 1073	
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		\$1,534.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
CR01	Check	O	07/17/2019	\$1,000.00	Voter File Access		
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	
Dolly C Reaves 121 Rocky Knob Trail Sugar Grove, NC 28679 (828) 964-7000						Check # 1074	
				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:		\$2,500.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
CR01	Check	E	07/31/2019	\$500.00	Campaign Consulting		
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	
Phillip Seib 618 E Hammond St Durham, NC 27704-4522 (919) 696-4932						Check #1075	
				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:		\$2,500.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
CR01	Check	E	07/31/2019	\$500.00	Campaign Consulting		
5. Total only this page						\$2,000.00	
6. Total of ALL CRO-1310 Pages						\$7,683.57	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)							
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
7. Purpose Codes (List detailed Expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* - Other							
*Codes require detailed explanation in required remarks field (k)							

Disbursements

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Charlie Reece for Durham						PCL-388	
3. Type of Disbursement (Please use separate 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)				b. Coordinated Committee Name		d. Comments	
Rochelle Sparko 907 Cleveland St Durham, NC 27701-2433 (919) 410-7645						Check # 1076	
				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:		\$3,000.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
CR01	Check	E	08/08/2019	\$2,000.00	Campaign Consulting		
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	
Squarespace Inc 225 Varick St Fl 12 12th Floor New York, NY 10014-4383						Part 1 of 2 Monthly Subscription Costs	
				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:		\$22.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
CR01	Electronic Funds Transfer	A	08/09/2019	\$6.00	Squarespace Monthly Subscription		
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	
Squarespace Inc 225 Varick St Fl 12 12th Floor New York, NY 10014-4383						Part 2 of 2 Monthly Subscription Fee.	
				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:		\$22.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
CR01	Electronic Funds Transfer	A	08/09/2019	\$16.00	Monthly Subscription Fee		
5. Total only this page						\$2,022.00	
6. Total of ALL CRO-1310 Pages						\$7,683.57	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)							
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)							
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
7. Purpose Codes (List detailed Expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* - Other							
*Codes require detailed explanation in required remarks field (k)							

Disbursements

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Charlie Reece for Durham		PCL-388	
3. Type of Disbursement (Please use separate 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)		b. Coordinated Committee Name	d. Comments
USPS			Stamps for Thank You Cards
		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
			\$80.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)
CR01	Debit Card	I	07/30/2019
			j. Amount
			\$25.00
			k. Required Remarks
			Stamps



5. Total only this page	\$25.00
6. Total of ALL CRO-1310 Pages	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)	\$7,683.57
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)	
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)	
7. Purpose Codes (List detailed Expenditure code in (h.) above)	
A* - Media	B* - Printing
C* - Fundraising	D - To Another Candidate
E - salaries	F* - Equipment
G - Political Party	H* - Holding Public Office Expenses
I - postage	J - Penalties
K* - Office Expenses	Q* - Donation to Legal Expense Fund
O* - Other	
*Codes require detailed explanation in required remarks field (k)	