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			c. ID Number				
Charlie Reece for Durham PCL-388							
b. Mailing Address (include City, State and Zip Code) d. Date Filed							
3604 Darwin Rd 10/28/2019							
Durham, NC 27707-5304			e. Phone Number				
			(919) 599-1357				
2. Report Year 3. Period Start Date (mm/dd/y	(v) A Period End F	Date (mm/dd/yyyy)	5. Treasurer Full Name				
2019 09/24/2019		21/2019	Phillip Seib				
6. Type of Committee (Check one)	9. Type of Report (ch		f report from one category)				
✓ Candidate Campaign	Municipal Organizational Thirty-five day Pre-primary Pre-election Pre-runoff Semi-annual Mid Year	State/County Organization Quarterly First Second Third Fourth Semi-annua	Pre-referendum Final Supplemental Final Annual Special				
Building Fund	Year End	Mid Year	10. Special Report Name				
Other:	Final	Year End	. 1				
8. Number of Fundraisers this Report	Special	Final					
0		Special					
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 Bal	ance				
		\$ 16,773.35					
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 committigled 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							
Date Received: 1028/2019	Employee:	Klice	Delivery Method				
Date Postmarked:	Employee:	V - 0000 =	☐ Normal Mail☐ Registered Mail				
Date Scanned:	Employee:		Hand Delivered				
Date Data Entered:	Employee:		☐ Electronically Filed☐ Signer has not received☐				
Please Note: This form cannot be used to am	end committee informat	ion such as the com	mandatory training				
assistant treasure	er, custodian of books in	formation, or account	t information.				
You must amend the Statement of CCRO-1000	rganization (CRO-2100 <i>i</i> NC State Board of Electio		ee changes. OCT 2 8 2019 August 2008				

Disclosure	Report	Cover
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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			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			e. Phone Number					
			(919) 599-1357					
2. Report Year 3. Period Start Date (mm/dd/y	v) 4 Period End D	Date (mm/dd/yyyy)	5. Treasurer Full Name					
2019 09/24/2019		21/2019	Phillip Seib					
6. Type of Committee (Check one)			of report from one category)					
Candidate Campaign Party PAC Referendum Independent Expenditure Joint Fundraiser Legal Expense Fund 7. Type of Fund (if applicable, check one) "Booster Fund" Building Fund Other: 8. Number of Fundraisers this Report 0 11. Account Information a. Financial Institution Full Name Mechanics and Farmers Bank b. Purpose	Municipal Organizational Thirty-five day Pre-primary Pre-election Pre-runoff Semi-annual Mid Year Year End Final Special	State/County Organizatio Quarterly First Second Third Fourth Semi-annua Year End Final Special C. Account Code	Pre-referendum Final Supplemental Final Annual Special 10. Special Report Name					
Campaign Receipts and Expenditures		CR01						
		d. Period Begin Ba	alance					
		\$ 16,773.35						
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								
,	2.3							
FOR OFFICE USE ONLY Date Received:	Employee:		Delivery Method Normal Mail					
			Registered Mail					
Date Postmarked:	Employee:		Hand Delivered					
Date Scanned:	Employee:		- Electronically Filed					
Date Data Entered:	Employee:		Signer has not received mandatory training					
	er, custodian of books ir	nformation, or accour	nt information.					
You must amend the Statement of C CRO-1000	Organization (CRO-2100 NC State Board of Electi	,	itee changes. August 2008					

Detailed Summary

Amendment

☐ Yes ✓ No

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

Committee Full Name (and Fund if applicable)		2. Type Of Report	3. ID Number
Charlie Reece for Durham		2019 Pre-Election	PCL-388
Start of Election Cycle: January 1, 2016		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$16,773.35	\$2,714.18
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$76.67	\$2,455.41
6) Contributions from Individuals	(CRO-1210)	\$124.16	\$35,984.38
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)	\$0.00	\$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, 1	I1d, and 11e)	\$200.83	\$38,476.70
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$8,691.31	\$31,033.13
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)	\$50.28	\$1,925.16
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16	and 17)	\$8,741.59	\$32,958.29
19) Cash on Hand at End (Add lines 4 and 12 together, then sub ine 18)	tract	\$8,232.59	\$8,232.59
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
,	to Doord of Floations	1	A

		s from Individua	Als Page _ Individuals of \$50 or le	3 of <u>11</u>		dment ′es 🔽 No)
	ull Name (and Fund if a		Training and or good or re		2. ID Numb	oer	
Charlie Reed	ce for Durham					PCL-388	
3. Contributo	or Information						
a. Amend	b. Account Code	c. Form of Payment	d. In Kind Description	e. Date (mn	n/dd/yyyy)	f. Amount	
Add Remove	CR01	Credit Card		10/06/	2019		\$25.00
Add		In-Kind	Pizza for Team Party	10/13/	2019		\$1.67

\$50.00

10/07/2019

Credit Card

Remove

Remove

Add

CR01

4. Total only this Page	\$76.67
5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)	\$76.67

			0 or	Page 4 of 1 contributions under \$50 if form CR		_ Amendm _ Yes	ent ✓ No
1. Commi	1. Committee Full Name (and Fund if applicable) 2. ID Number						umber
Charlie Re	eece for Durham					PCL-38	8
3. Contri	ibutor Information		Add	Remove			
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d	l. Comments	
(includ	e city, state, & zip)		Ar	nalyst			
Patricia Bi	layes Ave		C.	Employer's Name/Specific Field			
(678) 358-	97702-2112 -7385		St	. Charles Health System			
				·	е	. Election Sum	to Date
							\$140.00
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description		j. Date	k. Amount
	CR01	Credit Card				09/28/2019	\$20.00
3. Contributor Information Add Remove							
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d	. Comments	
(include city, state, & zip)			Director of Delegate Selection				
Lainey Edmisten							
2112 Dee	rfield Rd C 28607-9662		c. Employer's Name/Specific Field				
(828) 773			Amy for America		L		
					Le	. Election Sum	
					L		\$55.55
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description		j. Date	k. Amount
	CR01	Credit Card				10/15/2019	\$55.55
3. Contri	ibutor Information		Add	Remove			
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d	. Comments	
(includ	e city, state, & zip)		Attorney				
Rochelle S	Sparko		1				
907 Cleveland St Durham, NC 27701-2433 (919) 410-7645		C.	Employer's Name/Specific Field				
		ı	enter for Responible Lending				
				e. Election Sum to Date		to Date	
							\$54.35
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description		j. Date	k. Amount
		In-Kind		Ice Cream for Pollworkers		10/06/2019	\$2.72

4. Total only this page	\$78.27
5. Total of ALL CRO-1210 Pages	\$124.16
(This line must be on line 6 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 Amendment Yes No							
1. Commi	ttee Full Name (and F	und if applicable)				2. ID Nu	umber
Charlie Re	eece for Durham					PCL-38	8
3. Contr	ibutor Information		Add	Remove			
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d. Co	mments	
(includ	e city, state, & zip)		At	torney	.,	ost of Food	for Slate
Rochelle Sparko 907 Cleveland St Durham, NC 27701-2433 (919) 410-7645		c. Employer's Name/Specific Field Center for Responible Lending			ection Sum	n to Date	
							\$54.35
f. Prior	g. Account Code	h. Form of Payment		i. In-Kind Description	j. C	ate	k. Amount
		In-Kind		Pizza for Canvassers	10/	06/2019	\$26.39
3. Contr	3. Contributor Information Add Remove						
a. Full Na	me, Mailing Address	& Phone	b.	Job Title/Profession	d. Co	mments	
(include city, state, & zip)		Attorney		Two Receipts			
Rochelle Sparko 907 Cleveland St Durham, NC 27701-2433 (919) 410-7645		l	Employer's Name/Specific Field enter for Responible Lending	e. Ele	ection Sum	1 to Date \$54.35	

i. In-Kind Description

Pizza for Poll workers

j. Date

10/08/2019

k. Amount

\$19.50

f. Prior

g. Account Code

h. Form of Payment

In-Kind

4. Total only this page	\$45.89
5. Total of ALL CRO-1210 Pages	\$124.16
(This line must be on line 6 of Detailed Summary Page CRO-1100)	

Disbursements	Pa
Dispuiscilicitis	

				Amendmen	nt	
Page	6	of	11	Yes	✓ No	

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.)									
✓ Operating Expenses									
4. Payee Information Add Remove									
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name	9	d. Commen	ts		
(include city, state,	& zip)					1/3 cost for	intial round of texting outreach		
Committee to Elect Ji	llian Johnson		c. Level Reai	stered (Specify)		1			
PO Box 3502 Durham, NC 27702-3	502		Federal	County:					
(919) 593-3176			State	Municipalit	V:	e. Election	Sum to Date		
	- 15	1. 5		1. 5	\ I.	<u> </u>	\$1,317.78		
	g. Form of Payment		rpose Code	i. Date (mm/dd/yyy	yy) j.		k. Required Remarks		
CR01	Check	0		10/19/2019		\$33.33	1/3 of Texting service		
4. Payee Informati	on		Add R	emove					
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name)	d. Commen	ts		
(include city, state,	& zip)					1/3 cost de	sign work on Indy Weekly Ad		
Committee to Elect Ji	llian Johnson		c. Level Regi	stered (Specify)		1			
PO Box 3502			Federal	County:		1			
Durham, NC 27702-3 (919) 593-3176	502		State	Municipality	y:	e. Election	Sum to Date		
(313) 333 3170					-		\$1,317.78		
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	yy) j.	Amount	k. Required Remarks		
CR01	Check	А		10/19/2019		\$118.75	1/3 Cost Design work for advertisment		
4. Payee Informati	on		Add R	emove					
a. Full Name, Mailing	Address & Phone			ed Committee Name		d. Commen	ts		
(include city, state,									
	. ,		<u> </u>			1/3 Cost B0	CT as in the Tringle Tribune		
Committee to Elect Ji PO Box 3502	llian Johnson			stered (Specify)		1			
Durham, NC 27702-3	502		Federal	County:		o Floction	Sum to Date		
(919) 593-3176			State	Municipality	у.	e. Liection	\$1,317.78		
f. Account Code	g. Form of Payment	h Pu	rpose Code	i. Date (mm/dd/yy)	/v) i	Amount	k. Required Remarks		
CR01	Check	Α	. pood oodo	10/19/2019	, , , ,	\$373.67	•		
GIVE!	Gliodik	,					170 Cook B TO Advoid Comonic		
5. Total only this p	page						\$525.75		
6. Total of ALL CR	O-1310 Pages								
(This line goes in line	13a of Detailed Summary	Page	CRO-1100 if O	perating Expenses)			\$8,691.31		
	13b of Detailed Summary	_			/Politi	cal Comm)			
, ,	13c of Detailed Summary	-				1			
7. Purpose Codes	(List detailed Expend	iture	code in (h.) a	above)					
A* - Media	B* - Printing		C* - Fun	<u> </u>	D - ⁻	To Another C	Candidate		
E - salaries	F* - Equipment			cal Party	H* -	Holding Pul	blic Office Expenses		
I - postage	J - Penalties			ce Expenses		=	Legal Expense Fund		
O* - Other							- •		
*Codes require detailed explanation in required remarks field (k)									

Disbursements	Page	7	0

			Amendment	
'	of _	11	Yes	✓ No

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.)									
✓ Operating Expenses									
4. Payee Information Add Remove									
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts		
(include city, state,	& zip)					1/3 of BTC	Mailer printing		
Committee to Elect Ji	Ilian Johnson		c. Level Reai	stered (Specify)					
PO Box 3502 Durham, NC 27702-3	1502		Federal	County:					
(919) 593-3176	3302		State	Municipality	:	e. Election	Sum to Date		
							\$1,317.78		
	g. Form of Payment		rpose Code	i. Date (mm/dd/yyy	y) j.		k. Required Remarks		
CR01	Check	В		10/19/2019		\$792.03	1/3 of BTC Mailer printing		
4. Payee Informati	ion		Add R	emove					
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts		
(include city, state,	& zip)					1/6th page	ran on 9/18/2019		
Indy Weekly			c. Level Reai	stered (Specify)		' "			
PO Box 1772	770		Federal	County:]			
Durham, NC 27702-1 (919) 286-1972	112		State	Municipality	:	e. Election	Sum to Date		
							\$383.33		
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	y) j.		k. Required Remarks		
CR01	Check	Α		10/18/2019		\$383.33	Indy Campaign Ad		
4. Payee Informati	ion		Add R	emove					
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts		
(include city, state,	& zip)					Bank Card	Merchant Fees		
Mechanics and Farm	ers Bank		c. Level Reai	stered (Specify)		1			
116 W Parrish St	1004		Federal	County:]			
Durham, NC 27701-3 (919) 687-7800	3321		State	Municipality	:	e. Election	Sum to Date		
,							\$1,288.15		
	g. Form of Payment		rpose Code	i. Date (mm/dd/yyy	y) j.		k. Required Remarks		
CR01	Electronic Funds Transfer	С		10/02/2019		\$121.93	Bank Card Merchant Fees		
5. Total only this p	page						\$1,297.29		
6. Total of ALL CF	RO-1310 Pages								
(This line goes in line	13a of Detailed Summary	Page	CRO-1100 if C	perating Expenses)			\$8,691.31		
(This line goes in line	13b of Detailed Summary	Page	CRO-1100 if C	ontrib to Candidates/	Politi	cal Comm)			
(This line goes in line	13c of Detailed Summary	Page	CRO-1100 if C	oordinated Party Exp	endit	ures)			
·	(List detailed Expend	liture	code in (h.) a	above)					
A* - Media	B* - Printing		C* - Fun	draising	D - 1	Γο Another C	andidate		
E - salaries	F* - Equipment		G - Politi	ical Party	H* -	Holding Pul	blic Office Expenses		
I - postage	J - Penalties		K* - Offi	ce Expenses	Q* -	Donation to	Legal Expense Fund		
O* - Other *Codes require de	tailed explanation in r	eguir	ed remarks f	ield (k)					
couce .equile de	Ja onplanation in i	2 4 MIL		(,					

Disbursements	Page	8	of	11
Dispursements	_			

				Amendmen	it
Page	8	of	11	Yes	✓ No

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.)									
✓ Operating Expenses									
4. Payee Informati				emove			, , , , , , , , , , , , , , , , , , ,		
a. Full Name, Mailing	Address & Phone		b. Coordinate	ed Committee Name	<u> </u>	d. Comment	ts		
(include city, state,									
	17		. I would be ad	-11 (0'(-)		Monthly Sur	bscription Fee		
NGP VAN, Inc. 1101 15th St NW				stered (Specify)					
Ste 500			Federal State	County: Municipality	,.	e. Election S	Sum to Date		
Washington, DC 2000 (202) 686-9330	05-5006			iviuriicipality	<i>/</i> .	C. Licotion C	\$900.00		
	g. Form of Payment	h. Pu	<u>I</u> rpose Code	i. Date (mm/dd/yyy	/v) li.	<u>I</u> Amount	k. Required Remarks		
CR01	Electronic Funds	К		10/02/2019	7 / 1-	\$150.00	•		
3	Transfer	'`					monany Casconpliant co		
4. Payee Informati	on		Add Re	emove					
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name	:	d. Comment	ts		
(include city, state,	& zip)					Sept Salary	,		
Dolly C Reaves			o Lovel Bogi	stered (Specify)		Sept Salary			
121 Rocky Knob Trai	l		Federal	County:					
Sugar Grove, NC 286	379		State	Municipality	,-	e. Election S	Sum to Date		
(828) 964-7000			State	ividilicipality	<u>'-</u>	o. Libotion c	\$3,500.00		
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	/y) li.	<u>I</u> Amount	k. Required Remarks		
CR01	Check	E	•	09/30/2019	,,,	\$500.00			
4. Payee Informati	on		Add R	emove					
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name	:	d. Comment	ts		
(include city, state,	& zip)		Salary fo			Salary for S	ept		
Phillip Seib			c. Level Regi	stered (Specify)					
618 E Hammond St			Federal	County:		1			
Durham, NC 27704-4 (919) 696-4932	522		State	Municipality	<i>r</i> :	e. Election S	Sum to Date		
(0.10) 000 1002							\$3,500.00		
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	⁄y) j.		k. Required Remarks		
CR01	Check	Е		09/30/2019		\$500.00	Salary		
5. Total only this p	page						\$1,150.00		
6. Total of ALL CR	RO-1310 Pages								
(This line goes in line	13a of Detailed Summary	Page	CRO-1100 if O	perating Expenses)			\$8,691.31		
(This line goes in line	13b of Detailed Summary	Page	CRO-1100 if C	ontrib to Candidates/	Politi	cal Comm)			
(This line goes in line	13c of Detailed Summary	Page	CRO-1100 if C	oordinated Party Exp	endit	ures)			
7. Purpose Codes	(List detailed Expend	iture	code in (h.) a	above)					
A* - Media	B* - Printing		C* - Fun	draising	D - 1	To Another Ca	andidate		
E - salaries	F* - Equipment		G - Politi	cal Party	H* -	Holding Pub	olic Office Expenses		
I - postage	J - Penalties		K* - Offi	ce Expenses	Q* -	Donation to	Legal Expense Fund		
O* - Other									
	tailed explanation in r	equir	ed remarks f	ield (k)					

Disbursements	Page
DISDUISEIIIEIIIS	. ~90 _

				Amendmen	t	
Page	9	of	11	Yes	✓ No	

1. Committee Full Name (and Fund if applicable)									
Charlie Reece for Durham PCL-388									
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)									
✓ Operating Expenses									
4. Payee Information Add Remove									
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts		
(include city, state,	& zip)					Part 1 of 2	Monthly Subsritption Costs		
Squarespace Inc			c. Level Reai	stered (Specify)					
225 Varick St Fl 12			Federal	County:					
12th Floor	4000		State	Municipality	' :	e. Election :	Sum to Date		
New York, NY 10014		h Du	rnaga Cada	i Data (mm/dd/sss		Amount	\$22.00		
f. Account Code CR01	g. Form of Payment Electronic Funds	n. Pu A	rpose Code	i. Date (mm/dd/yyy 10/09/2019	y) J. <i>i</i>	\$6.00	k. Required Remarks		
CRUT	Transfer	A		10/03/2013		ψ0.00	Squarespace Monthly Subscription		
4. Payee Informati	on		Add Re	emove					
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts		
(include city, state,	& zip)					Part 2 of 2	Monthly Subscription Fee.		
Squarespace Inc			c. Level Reai	stered (Specify)					
225 Varick St FI 12			Federal	County:					
12th Floor			State	Municipality	' :	e. Election :	Sum to Date		
New York, NY 10014	-4383						\$22.00		
	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	y) j. <i>i</i>		k. Required Remarks		
CR01	Electronic Funds Transfer	Α		10/09/2019		\$16.00	Monthly Subscription Fee		
4. Payee Informati	on		Add Re	emove					
a. Full Name, Mailing	g Address & Phone		b. Coordinate	ed Committee Name		d. Commen	ts		
(include city, state,	& zip)					Postage for	Charlie Reece Mailers		
USPS			c. Level Regi	stered (Specify)		. colago lo	Chaine Roose Manere		
33. 3			Federal	County:					
			State	Municipality	<i>'</i> :	e. Election :	Sum to Date		
							\$5,776.27		
f. Account Code	g. Form of Payment	h. Pu	rpose Code	i. Date (mm/dd/yyy	y) j. <i>i</i>		k. Required Remarks		
CR01	Check	ı		10/07/2019		\$5,696.27	Postage		
F. Total anly this r	2000						ФГ 740 O7		
5. Total only this p							\$5,718.27		
6. Total of ALL CR		_		,			.		
-	13a of Detailed Summary	_					\$8,691.31		
, ,	13b of Detailed Summary	•				1			
· -	13c of Detailed Summary (List detailed Expend				enaill	ures)			
A* - Media	•	iture	` ,	•	ь т	- Anothor C	andidata		
E - salaries	B* - Printing		C* - Fun	9		o Another C			
	F* - Equipment			cal Party		=	olic Office Expenses		
I - postage	J - Penalties		K" - UIII	ce Expenses	u" -	Donation to	Legal Expense Fund		
O* - Other 'Codes require detailed explanation in required remarks field (k)									

In-Kind Contributions		Page10 of11	/	Amendment
Use this form to report non-monetary contributions, donati	ions, goods or s	services provided to the	com	Yes ✓No nmittee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refu			_	
1. Committee Full Name (and Fund if applicable)				2. ID Number
Charlie Reece for Durham				PCL-388
3. Contributor Information	Add R	emove		
a. Full Name, Mailing Address, & Phone	b. Type of co	ntributor	с. (Comments
(include city, state & zip)	✓ Individual			
Rochelle Sparko	Candidate			
907 Cleveland St Durham, NC 27701-2433	Party PAC			
(919) 410-7645	Referendu	m		
	Other Rec	eipt Source	4 1	Election Sum to Date
			u. i	\$54.35
e. Description		f. Date (mm/dd/yyyy)		g. Fair Market Amount
Ice Cream for Pollworkers		10/06/2019		\$2.72
3. Contributor Information	Add R	emove		
a. Full Name, Mailing Address, & Phone	b. Type of co	ntributor	с. (Comments
(include city, state & zip)	✓ Individual		1/	/3 cost of Food for Slate
Rochelle Sparko	Candidate			anvassers
907 Cleveland St	Party			
Durham, NC 27701-2433 (919) 410-7645	│	m		
	=	eipt Source		
		•	d. l	Election Sum to Date
- Decembring		(D-1 - (/-1 -1 /)		\$54.35
e. Description		f. Date (mm/dd/yyyy)	9	g. Fair Market Amount
Pizza for Canvassers		10/06/2019		\$26.39
3. Contributor Information	Add R	emove		
a. Full Name, Mailing Address, & Phone	b. Type of co	ntributor	с. (Comments
(include city, state & zip)	Individual		T	wo Receipts
Rochelle Sparko	Candidate			
907 Cleveland St Durham, NC 27701-2433	Party PAC			
(919) 410-7645	Referendu	m		
	Other Rec	eipt Source	4 1	Election Sum to Date
			u. I	\$54.35
e. Description		f. Date (mm/dd/yyyy)		g. Fair Market Amount
Pizza for Poll workers		10/08/2019		\$19.50

4. Total only this page	\$48.61
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)	\$50.28

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e. Description

Pizza for Team Party

In-Kind Contributions Page 11 of 11 Amendment 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						
Charlie Reece for Durham		PCL-388					
3. Contributor Information	Add Remove						
a. Full Name, Mailing Address, & Phone	b. Type of contributor	c. Comments					
(include city, state & zip)	✓ Individual	Pizza for Team Party					
Rochelle Sparko 907 Cleveland St Durham, NC 27701-2433 (919) 410-7645	Candidate Party PAC Referendum Other Receipt Source	d. Election Sum to Date					

f. Date (mm/dd/yyyy)

10/13/2019

g. Fair Market Amount

\$1.67

4. Total only this page	\$1.67
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)	\$50.28