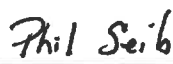

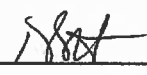


# Disclosure Report Cover

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.

<b>1. Committee Information</b>		<b>a. Full Name</b>		<b>c. ID Number</b>																																					
CHARLIE REECE FOR DURHAM				133-X109FW-C-001																																					
<b>b. Mailing Address (include City, State and Zip Code)</b>		<b>d. Date Filed</b>		<b>e. Phone Number</b>																																					
3604 DARWIN ROAD DURHAM, NC 27707		01/11/2021		(919) 696-4932																																					
<b>2. Report Year</b>	<b>3. Period Start Date (mm/dd/yy)</b>	<b>4. Period End Date (mm/dd/yy)</b>	<b>5. Treasurer Full Name</b>																																						
2020	07/01/2020	12/31/2020	PHIL SEIB																																						
<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>																																							
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;"><b>Municipal</b></td> <td style="width:33%;"><b>State/County</b></td> <td style="width:33%;"><b>Referendum</b></td> </tr> <tr> <td><input type="checkbox"/> Organizational</td> <td><input type="checkbox"/> Organizational</td> <td><input type="checkbox"/> Organizational</td> </tr> <tr> <td><input type="checkbox"/> Thirty-five day</td> <td><input type="checkbox"/> Quarterly</td> <td><input type="checkbox"/> Pre-referendum</td> </tr> <tr> <td><input type="checkbox"/> Pre-primary</td> <td><input type="checkbox"/> First</td> <td><input type="checkbox"/> Final</td> </tr> <tr> <td><input type="checkbox"/> Pre-election</td> <td><input type="checkbox"/> Second</td> <td><input type="checkbox"/> Supplemental Final</td> </tr> <tr> <td><input type="checkbox"/> Pre-runoff</td> <td><input type="checkbox"/> Third</td> <td><input type="checkbox"/> Annual</td> </tr> <tr> <td><input type="checkbox"/> Semi-annual</td> <td><input type="checkbox"/> Fourth</td> <td><input type="checkbox"/> Special</td> </tr> <tr> <td><input type="checkbox"/> Mid Year</td> <td><input type="checkbox"/> Semi-annual</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Year End</td> <td><input type="checkbox"/> Mid Year</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Final</td> <td><input type="checkbox"/> Year End</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Special</td> <td><input type="checkbox"/> Final</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Special</td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>				<b>Municipal</b>	<b>State/County</b>	<b>Referendum</b>	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum	<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final	<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final	<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual	<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special	<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual		<input checked="" 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	<input type="checkbox"/> Special	
<b>Municipal</b>	<b>State/County</b>	<b>Referendum</b>																																							
<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational																																							
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<input type="checkbox"/> Special	<input type="checkbox"/> Final																																								
<input type="checkbox"/> Special	<input type="checkbox"/> Special																																								
<b>7. Type of Fund (if applicable, check one)</b>		<b>10. Special Report Name</b>																																							
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:																																									
<b>8. Number of Fundraisers this Report</b>																																									
0																																									
<b>3. Account Information</b>			<b>3. Account Information</b>																																						
<b>a. Financial Institution Full Name</b>			<b>a. Financial Institution Full Name</b>																																						
MECHANICS AND FARMERS BANK																																									
<b>b. Purpose</b>	<b>c. Account Code</b>	<b>b. Purpose</b>	<b>c. Account Code</b>																																						
RECEIPTS AND EXPEDITURES	CR01																																								
	<b>d. Period Begin Balance</b>		<b>d. Period Begin Balance</b>																																						
	\$ 2,031.07		\$																																						
<b>CERTIFICATION</b>																																									
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																																									
 Printed Name of Signer		 Signature of Appointed Treasurer		01/11/2021 Date																																					
<b>FOR OFFICE USE ONLY</b>																																									
Date Received:	1/11/2021	Employee:		<b>Delivery Method</b>																																					
Date Postmarked:		<b>IN PERSON</b>		<input type="checkbox"/> Normal Mail																																					
Date Scanned:		Employee:		<input type="checkbox"/> Registered Mail																																					
Date Data Entered:		JAN 11 2021		<input checked="" type="checkbox"/> Hand Delivered																																					
		Employee:		<input checked="" type="checkbox"/> Electronically Filed																																					
		DURHAM BOE		<input type="checkbox"/> Signer has not received mandatory training																																					
<b>Please Note:</b> 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.																																									