

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 CAMPAIGN TO ELECT AMINAH THOMPSON	c. ID Number
b. Mailing Address (include City, State and Zip Code) 1801 FAYETTEVILLE ST P.O. BOX 20024C DURHAM, NC 27707	d. Date Filed 07/12/2022
	e. Phone Number

2. Report Year 2022	3. Period Start Date (mm/dd/yy) 05/01/2022	4. Period End Date (mm/dd/yy) 06/30/2022	5. Treasurer Full Name L'TANYA DURANTE
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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	Municipal		State/County
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	Referendum
<input type="checkbox"/> Referendum	<input type="checkbox"/> Legal Expense Fund	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Organizational
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input checked="" type="checkbox"/> Second	<input type="checkbox"/> Final
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Annual
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Special
<input type="checkbox"/> Other:		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	10. Special Report Name
8. Number of Fundraisers this Report		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
0		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
		<input type="checkbox"/> Special	<input type="checkbox"/> Special	

3. Account Information		3. Account Information	
a. Financial Institution Full Name MECHANICS AND FARMERS BANK		a. Financial Institution Full Name	
b. Purpose CAMPAIGN CONTRIBUTIONS AND EXPENDITURES	c. Account Code 7	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 1,748.73		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

L'Tanya Durante L'Tanya Durante 07/12/2022
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: _____ Employee MAIL Delivery Method Normal Mail

Date Postmarked: _____ Employee 07 15 2022 Registered Mail

Date Scanned: _____ Employee DURHAM BOE Hand Delivered

Date Data Entered: _____ Employee _____ 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.

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	
CAMPAIGN TO ELECT AMINAH THOMPSON	2022 Second Quarter		
Start of Election Cycle: January 1, <u>2019</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 2,088.40	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 321.09	\$ 2,264.94	
6) Contributions from Individuals (CRO-1210)	\$ 2,730.00	\$ 23,359.79	
7) Contributions from Political Party Committees (CRO-1220)	\$ 0.00	\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)	\$ 0.00	\$ 1,127.86	
9) Loan Proceeds (CRO-1410)	\$ 0.00	\$ 1,000.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$ 55.00	\$ 55.00	
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	\$ 0.22	
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)	\$ 3,106.09	\$ 27,807.81	
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 1,103.12	\$ 16,608.06	
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 3,000.00	\$ 4,000.00	
13c) Coordinated Party Expenditures (CRO-1310)	\$ 0.00	\$ 0.00	
14) Aggregated Non-Media Expenditures (CRO-1315)	\$ 187.14	\$ 610.13	
15) Loan Repayments (CRO-1420)	\$ 0.00	\$ 0.00	
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$ 0.00	\$ 200.00	
17) In-Kind Contributions (CRO-1510)	\$ 0.00	\$ 5,485.39	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 4,290.26	\$ 26,903.58	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 904.23	\$ 904.23	
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$ 0.00		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ 1,000.00		
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	

MAIL

JUL 15 2022

DURHAM BOE

Aggregated Contributions from Individuals

Page 1 of 1

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	
CAMPAIGN TO ELECT AMINAH THOMPSON						
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	7	Cash		06/16/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	7	Credit Card		05/07/2022	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	7	Credit Card		05/07/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	7	Cash		05/16/2022	\$	45.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	7	Credit Card		05/06/2022	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	7	Credit Card		05/06/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	7	Credit Card		05/09/2022	\$	25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	7	Credit Card		06/20/2022	\$	3.09
<input type="checkbox"/> Add <input type="checkbox"/> Remove	7	Credit Card		06/27/2022	\$	3.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	7	Credit Card		05/06/2022	\$	50.00
4. Total only this Page					\$	\$321.09
5. Total of ALL CRO-1205 Pages					\$	\$321.09
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

CRO-1205

NC State Board of Elections

April 2007

MAIL

JUL 15 2022

DURHAM BOE

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	
CAMPAIGN TO ELECT AMINAH THOMPSON							
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 CLARKE 579 SILVERBROOK CT WIINSTON SALEM, NC 27106				NOT EMPLOYED			
				c. Employer's Name/Specific Field			
				NOT EMPLOYED			
						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"/>	7	Credit Card		05/10/2022	\$ 100.00		
<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	
RANDY GRIMES 226 BRAILSFORD RD SUMMERVILLE, SC 29485				DEPARTMENT CHAIR			
				c. Employer's Name/Specific Field			
				TRIDENT TECHNICAL COLLEGE			
						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"/>	7	Credit Card		05/04/2022	\$ 100.00		
<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	
AIDAN KOSTER 1815 E 800 RD LECOMPTON, KS 66050				LEGAL ADMINISTRATOR			
				c. Employer's Name/Specific Field			
				SECURITY BENEFIT			
						e. Election Sum to Date	
						\$ 175.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	7	Credit Card	MAIL	05/01/2022	\$ 25.00		
<input type="checkbox"/>	7	Credit Card		06/01/2022	\$ 25.00		
<input type="checkbox"/>			JUL 15 2022		\$		
4. Total only this Page						\$ 250.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 2,730.00	

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) CAMPAIGN TO ELECT AMINAH THOMPSON	2. ID Number
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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	
JANAKA LEWIS 754 WISHAM RD, SE THOMPSON, GA 30824		EDUCATOR			
		c. Employer's Name/Specific Field		e. Election Sum to Date	
		UNC CHARLOTTE		\$ 280.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	7	Credit Card		05/18/2022	\$ 40.00
<input type="checkbox"/>	7	Credit Card		06/18/2022	\$ 40.00
<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	
KALIK REECE PO BOX 56329 PHILADELPHIA, PA 19130		SALES			
		c. Employer's Name/Specific Field		e. Election Sum to Date	
		ORACLE		\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	7	Credit Card		05/10/2022	\$ 50.00
<input type="checkbox"/>	7	Credit Card		06/10/2022	\$ 50.00
<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	
SYLVIA RICHARDSON 2901 NC HWY 55 DURHAM, NC 27713		NOT EMPLOYED			
		c. Employer's Name/Specific Field		e. Election Sum to Date	
		NOT EMPLOYED		\$ 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"/>	7	Check	MAIL	05/16/2022	\$ 100.00
<input type="checkbox"/>			JUL 15 2022		\$
<input type="checkbox"/>			DURHAM BOE		\$

4. Total only this Page	\$ 280.00
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5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$ 2,730.00
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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) CAMPAIGN TO ELECT AMINAH THOMPSON	2. ID Number
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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	
TADENA SIMPSON 9591 SEDGEWOOD DR LAKE WORTH, FL 33467		ASSISTANT GENERAL COUNSEL			
		c. Employer's Name/Specific Field		e. Election Sum to Date	
		ELIXIR		\$ 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"/>	7	Credit Card		05/01/2022	\$ 100.00
<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	
AMINAH THOMPSON 1801 FAYETTEVILLE ST P.O. BOX 20024C DURHAM, NC 27707		MAGISTRATE			
		c. Employer's Name/Specific Field		e. Election Sum to Date	
		DURHAM COUNTY		\$ 7,653.74	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	7	Money Order		05/16/2022	\$ 2,000.00
<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	
TYLER WONG 7707 ADAMS ST FOREST PARK, IL 60130		NOT EMPLOYED			
		c. Employer's Name/Specific Field		e. Election Sum to Date	
		NOT EMPLOYED		\$ 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"/>	7	Credit Card	MAIL	05/09/2022	\$ 50.00
<input type="checkbox"/>	7	Credit Card	JUL 1 5 2022	05/09/2022	\$ 50.00
<input type="checkbox"/>			DURHAM BOE		\$

4. Total only this Page	\$ 2,200.00
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5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$ 2,730.00
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Refunds/Reimbursements To the Committee

Pg 1 of 1

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	
CAMPAIGN TO ELECT AMINAH THOMPSON				
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		g. Comments
CONSTANT CONTACT 1601 TRAPELO RD WALTHAM, MA 02451		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		e. Level Registered (Specify)		h. Original Expenditure Date
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		06/02/2022
				i. Original Expenditure Amt
				\$ 55.00
b. Job Title/Profession	c. Employer's Name/Specific Field	f. Purpose		j. Election Sum to Date
		REFUND FOR OVERPAYMENT		\$ 172.51
k. Account Code	l. Form of Payment	m. In-Kind Description	n. Date (mm/dd/yyyy)	o. Amount
7	Electric Funds Tran		06/06/2022	\$ 55.00
4. Total only this Page				\$ 55.00
5. Total of ALL CRO-1240 Pages (This line must be on line 10 of Detailed Summary Page CRO-1100)				\$ 55.00

CRO-1240

NC State Board of Elections

December 2007

MAIL

JUL 15 2022

DURHAM BOE

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
CAMPAIGN TO ELECT AMINAH THOMPSON						
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input checked="" 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. Coordinated Committee Name		d. Comments
DURHAM COMMITTEE ON THE AFFAIRS OF BLACK PEOPLE PAC PO BOX 1843 DURHAM, NC 27705						
				c. Level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						\$ 1,000.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
7	Check	O	05/12/2022	\$ 500.00	CONTRIBUTION	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments
PEOPLE'S ALLIANCE PAC PO BOX 3221 DURHAM, NC 27715						
				c. Level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input checked="" 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	
7	Check	O	05/06/2022	\$ 500.00	CONTRIBUTION	
7	Check	O	05/16/2022	\$ 2,000.00	CONTRIBUTION	
5. Total only this Page						\$ 3,000.00
6. Total of ALL CRO-1310 Pages						\$ 3,000.00
<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 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)						

MAIL

JUL 15 2022

DURHAM BOE

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
CAMPAIGN TO ELECT AMINAH THOMPSON						
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. Coordinated Committee Name		d. Comments	
CONSTANT CONTACT 1601 TRAPELO RD WALTHAM, MA 02451						
			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:		\$ 172.51	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
7	Debit Card	O	05/01/2022	\$ 55.00	EMAIL MARKETING	
7	Debit Card	O	06/02/2022	\$ 55.00	EMAIL MARKETING	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments	
L'TANYA DURANTE 3309 ORISKONY WAY DURHAM, NC 27703						
			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	
7	Check	E	05/31/2022	\$ 800.00		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments	
FACEBOOK 1 HACKER WAY MENLO PARJ, CA 94025						
			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:		\$ 30.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
7	Debit Card	A	05/16/2022	\$ 10.00	ADVERTISEMENT	
7	Debit Card	A	05/16/2022	\$ 10.00	ADVERTISEMENT	
5. Total only this Page						\$ 930.00
6. Total of ALL CRO-1310 Pages						\$ 1,103.12
<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)						

MAR
 JUL 15 2022
 DURHAM

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	
CAMPAIGN TO ELECT AMINAH THOMPSON							
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	
FACEBOOK 1 HACKER WAY MENLO PARJ, CA 94025							
				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:		\$ 30.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
7	Debit Card	A	05/17/2022	\$ 10.00	ADVERTISEMENT		
				\$			
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	
TEXTING FOR LESS P.O. BOX 348 RUTHERFORD, NJ 07070							
				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:		\$ 158.79	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
7	Debit Card	O	05/23/2022	\$ 158.79	MARKETING		
				\$			
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 1100 N MIAMI BLVD DURHAM, NC 27703							
				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:		\$ 4.33	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
7	Debit Card	I	05/20/2022	\$ 4.33			
				\$			
5. Total only this Page						\$ 173.12	
6. Total of ALL CRO-1310 Pages						\$ 1,103.12	
(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)							

MAY
JUL 15 2023
DURHAM

Aggregated Non-Media Expenditures

Page 1 of 1

Amendment

Yes No

Optional form used to report NC Non-Media Expenditures of \$50 or less.

1. Committee Full Name (and Fund if applicable)						2. ID Number
CAMPAIGN TO ELECT AMINAH THOMPSON						
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	7	Draft	K	05/04/2022	\$ 47.01	PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	7	Draft	K	06/03/2022	\$ 11.04	PROCESSING FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	7	Debit Card	B	05/09/2022	\$ 12.99	ENVELOPES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	7	Debit Card	O	05/25/2022	\$ 24.00	TEXTING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	7	Debit Card	O	06/27/2022	\$ 24.00	TEXTING
<input type="checkbox"/> Add <input type="checkbox"/> Remove	7	Draft	K	06/30/2022	\$ 6.00	SERVICE FEE
<input type="checkbox"/> Add <input type="checkbox"/> Remove	7	Debit Card	O	05/06/2022	\$ 25.77	VOLUNTEER SUPPLIES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	7	Debit Card	O	05/16/2022	\$ 36.33	FOOD FOR POLL WORKERS
4. Total only this Page					\$	187.14
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$	187.14
6. Purpose Codes (List detailed expenditure code in (d) above)						
	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* - Donations to Legal Expense Fund			
O* - Other						
* Codes require detailed explanation in required remarks field (g)						

CRO-1315

NC State Board of Elections

December 2009

MAIL

JUL 15 2022

DURHAM BOE

Outstanding Loans

Pg 1 of 1

Amendment
 Yes No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
CAMPAIGN TO ELECT AMINAH THOMPSON			
3. Lender 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
AMINAH THOMPSON 1801 FAYETTEVILLE ST P.O. BOX 20024C DURHAM, NC 27707		MAGISTRATE	
		e. Start Date (mm/dd/yyyy)	11/22/2021
		c. Employer's Name/Specific Field	DURHAM COUNTY
f. End Date (mm/dd/yyyy)			
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$ 1,000.00	\$ 1,000.00
k. Full Name of Lending Institution			l. Loan Number
4. Total only this Page			\$ 1,000.00
5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>			\$ 1,000.00

CRO-1430

NC State Board of Elections

December 2007

MAIL

JUL 15 2022

DURHAM BOE