

# Independent Expenditure Report

This form should be accompanied by forms CRO-2210B and CRO-2210C. For statutory guidance, please refer to N.C.G.S. § 163-278.12 & 163-278.6(9a).

Amendment  
 Yes  No

## 1. Reporting Entity Information

a. Full Name of Entity Making Disbursement DURHAM CHAMBER LEGACY FOUNDATION		d. Entity Type (Check One) <input type="checkbox"/> Individual <input type="checkbox"/> Other Organization <input checked="" type="checkbox"/> Nonprofit Organization		e. Federal ID Number (if applicable) 33-1132250	
b. Mailing Address (include City, State and Zip Code) and Phone Number DURHAM CHAMBER LEGACY FOUNDATION PO BOX 3829 DURHAM, NC 27702 (919) 328-8724				f. Date Filed 12/13/2022	
c. Report Type <input checked="" type="checkbox"/> Initial <input type="checkbox"/> 48 Hour Quarterly: <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth Semi-Annual: <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End				g. Employer's Name or Principal Place of Business	
2. Report Year 2022				3. Period Start Date (mm/dd/yyyy) 11/03/2022	
				4. Period End Date (mm/dd/yyyy) 12/02/2022	

## 5. Custodian of Books

a. Full Name of Entity's Custodian of Books and Accounts

b. Mailing Address (include City, State and Zip Code) and Phone Number

c. Employer's Name or Principal Place of Business

d. Occupation

6. Total Contributions ALL Pages

\$ 0.00

7. Total Expenditures ALL Pages

\$ 22,028.13

## CERTIFICATION

I certify that this statement is complete, true and correct.

Bryan D. Fox Sr.

Signature

Date

DEC 15 2022  
 DURHAM BOE