



# 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	
COMMITTEE TO ELECT LEE STORROW	2015 Thirty-five-day	089-KICD3K-C-001	
Start of Election Cycle: January 1, 2012		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 10,879.70	\$ 550.00
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 0.00	\$ 0.00	
6) Contributions from Individuals (CRO-1210)	\$ 8,831.00	\$ 19,885.00	
7) Contributions from Political Party Committees (CRO-1220)	\$ 0.00	\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)	\$ 0.00	\$ 836.00	
9) Loan Proceeds (CRO-1410)	\$ 0.00	\$ 0.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$ 0.00	\$ 0.00	
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	\$ 0.00	
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)	\$ 8,831.00	\$ 20,721.00	
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 2,804.46	\$ 3,514.76	
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 250.00	\$ 250.00	
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)	\$ 145.00	\$ 445.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 3,199.46	\$ 4,209.76	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 16,511.24	\$ 17,061.24	
<b>ADDITIONAL INFORMATION</b>			
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	

# Contributions from Individuals

Pg 1 of 42

Amendment  
 Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
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<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) BEN ABRAM 109 CATAWBA CT CHAPEL HILL, NC 27514		<b>b. Job Title/Profession</b> ENERGY SERVICES		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> WYLAN ENERGY		<b>e. Election Sum to Date</b> \$ 180.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		08/13/2015	\$ 180.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) EMILY ADAMS 5646 WILLOW BLAIR PL CHAPEL HILL, NC 27516		<b>b. Job Title/Profession</b> NONPROFIT ADMINISTRATOR		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> PPSAT		<b>e. Election Sum to Date</b> \$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		07/28/2015	\$ 10.00
<input type="checkbox"/>	9140311	Credit Card		08/28/2015	\$ 10.00
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) CARLA BAKER 140 WEST FRANKLIN ST CHAPEL HILL, NC 27514		<b>b. Job Title/Profession</b> PRESIDENT		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> SOUTHEASTERN EMERGENCY EQUIPMENT		<b>e. Election Sum to Date</b> \$ 276.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		07/03/2015	\$ 26.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 226.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 8,831.00

CRO-1210

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
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<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
TODD BAKER 140 W FRANKLIN ST CHAPEL HILL, NC 27514		TRAINING DIRECTOR			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
		SOUTHEASTERN EMERGENCY		\$ 52.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		07/06/2015	\$ 52.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
AMY BARKLEY 220 FAIRMEADE RD LOUISVILLE, KY 40207		DIRECTOR			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
		CAMPAIGN FOR TOBACCO FREE KIDS		\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Check		08/01/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
DOROTHY BARTHELMES NC		RETIRED			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
		RETIRED		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Check		07/26/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 202.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 8,831.00

CRO-1210

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
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<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
MARK BELL 168 W KING ST HILLSBOROUGH, NC 27278		IT EXECUTIVE			
		<b>c. Employer's Name/Specific Field</b> NCHA			
				<b>e. Election Sum to Date</b>	
				\$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Check		08/13/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
BETSY BENNETT 1779 PURPLE SAGE LN CHAPEL HILL, NC 27516		STRATEGIC COUNSEL			
		<b>c. Employer's Name/Specific Field</b> CAPDEV			
				<b>e. Election Sum to Date</b>	
				\$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		08/08/2015	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
DONNA BICKFORD 10 BANBURY LN CHAPEL HILL, NC 27517		ADMINISTRATOR			
		<b>c. Employer's Name/Specific Field</b> UNC			
				<b>e. Election Sum to Date</b>	
				\$ 25.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		07/31/2015	\$ 25.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 325.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 8,831.00

Orange County B.I. of Election

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
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<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
CHARLES BINGHAM 3018 GOLDMIRE RD MONROE, NC 28110		RETIRED			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
		RETIRED		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input checked="" type="checkbox"/>	9140311	Credit Card		03/17/2015	\$ 50.00
<input type="checkbox"/>	9140311	Credit Card		07/03/2015	\$ 50.00
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
KENNETH BRANDON 808 GLENDALE DRIVE GREENSBORO, NC 27406		EXECUTIVE DIRECTOR			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
		CAROLINACAN		\$ 125.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		08/30/2015	\$ 25.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
MARY HUGHES BROOKHART 105 ROCKY PT CARRBORO, NC 27510		RETIRED			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
		RETIRED		\$ 75.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Check		08/11/2015	\$ 75.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>					\$ 150.00
<b>5. Total of ALL CRO-1210 Pages</b>					\$ 8,831.00
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					

CRO-1210

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) SUZANNE BUCKLEY 4129 TROTTER RIDGE RD DURHAM, NC 27707		<b>b. Job Title/Profession</b> STATE STRATEGIST		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> SELF		<b>e. Election Sum to Date</b> \$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		09/22/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) AMBER BULLOCK PO BOX 339 BOYDS, MD 20841		<b>b. Job Title/Profession</b> HEALTH EDUCATOR		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> AMERICAN LEGACY FOUNDATION		<b>e. Election Sum to Date</b> \$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		07/30/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) STEVEN BURKE 214 W TYRON ST HILLSBOROUGH, NC 27278		<b>b. Job Title/Profession</b> RETIRED		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> RETIRED		<b>e. Election Sum to Date</b> \$ 150.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	In-Kind	FOOD AT EVENT	08/13/2015	\$ 50.00
<input type="checkbox"/>	9140311	Check		08/13/2015	\$ 100.00
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 350.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 8,831.00

CRO-1210

Orange County Bd. of Elections

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

3. Contributor Information <span style="float: right;"><input type="checkbox"/> Add <input type="checkbox"/> Remove</span>					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) ANDY CAGLE 3420 MT WILLING RD EFLAND, NC	<b>b. Job Title/Profession</b> N/A	<b>d. Comments</b>		<b>e. Election Sum to Date</b> \$ 45.00	
	<b>c. Employer's Name/Specific Field</b> SELF				
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	9140311	Credit Card		08/13/2015	\$ 45.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <span style="float: right;"><input type="checkbox"/> Add <input type="checkbox"/> Remove</span>					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) HODDING CARTER 211 FRIENDLY LN CHAPEL HILL, NC 27514	<b>b. Job Title/Profession</b> RETIRED	<b>d. Comments</b>		<b>e. Election Sum to Date</b> \$ 100.00	
	<b>c. Employer's Name/Specific Field</b> NON PROFIT				
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	9140311	Credit Card		07/18/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <span style="float: right;"><input type="checkbox"/> Add <input type="checkbox"/> Remove</span>					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) RITNEY CASTINE 5403 9TH ST NW WASHINGTON, DC 20011	<b>b. Job Title/Profession</b> MANAGING DIRECTOR	<b>d. Comments</b>		<b>e. Election Sum to Date</b> \$ 80.00	
	<b>c. Employer's Name/Specific Field</b> AMERICAN LEGACY FOUNDATION				
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input checked="" type="checkbox"/>	9140311	Credit Card		02/18/2015	\$ 10.00
<input checked="" type="checkbox"/>	9140311	Credit Card		03/18/2015	\$ 10.00
<input checked="" type="checkbox"/>	9140311	Credit Card		04/19/2015	\$ 10.00

<b>4. Total only this Page</b>	\$ 145.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 8,831.00

CRO-1210

RECEIVED

Orange County Bd. of Elections

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
RITNEY CASTINE 5403 9TH ST NW WASHINGTON, DC 20011		MANAGING DIRECTOR			
		<b>c. Employer's Name/Specific Field</b> AMERICAN LEGACY FOUNDATION			
				<b>e. Election Sum to Date</b> \$ 80.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input checked="" type="checkbox"/>	9140311	Credit Card		05/19/2015	\$ 10.00
<input checked="" type="checkbox"/>	9140311	Credit Card		06/19/2015	\$ 10.00
<input type="checkbox"/>	9140311	Credit Card		07/19/2015	\$ 10.00

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
RITNEY CASTINE 5403 9TH ST NW WASHINGTON, DC 20011		MANAGING DIRECTOR			
		<b>c. Employer's Name/Specific Field</b> AMERICAN LEGACY FOUNDATION			
				<b>e. Election Sum to Date</b> \$ 80.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		08/19/2015	\$ 10.00
<input type="checkbox"/>	9140311	Credit Card		09/19/2015	\$ 10.00
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
VIVEK CHILUKURI 1515 PARK RD NW WASHINGTON, DC 20010		SPECIAL ASSISTANT			
		<b>c. Employer's Name/Specific Field</b> STATE DEPARTMENT			
				<b>e. Election Sum to Date</b> \$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		07/22/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 130.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 8,831.00

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) CHRISTINE CIANCIOLO 7704 AMESBURY DR CHAPEL HILL, NC 27514		<b>b. Job Title/Profession</b> RETIRED		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> RETIRED		<b>e. Election Sum to Date</b> \$ 336.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Check		07/11/2015	\$ 236.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) GEORGE CIANCIOLO 7704 AMESBURY DRIVE CHAPEL HILL, NC 27514		<b>b. Job Title/Profession</b> PROFESSOR		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> DUKE UNIVERSITY		<b>e. Election Sum to Date</b> \$ 336.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Check		07/11/2015	\$ 236.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) PAM CLARKSON 25 LONGVIEW RD ASHEVILLE, NC 28806		<b>b. Job Title/Profession</b> SOCIAL WORKER		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> BUNCOMBE CO HEALTH AND HUMAN		<b>e. Election Sum to Date</b> \$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		09/22/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 572.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 8,831.00

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) JONATHAN COBY 1516 HERITAGE CLUB AVE WAKE FOREST, NC 27587			<b>b. Job Title/Profession</b> STUDENT		<b>d. Comments</b>
			<b>c. Employer's Name/Specific Field</b> STUDENT		
					<b>e. Election Sum to Date</b> \$ 50.00
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		08/20/2015	\$ 25.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) GERRY COHEN 8909 TAYMOUTH CT RALEIGH, NC 27613			<b>b. Job Title/Profession</b> ATTORNEY		<b>d. Comments</b>
			<b>c. Employer's Name/Specific Field</b> SELF		
					<b>e. Election Sum to Date</b> \$ 336.00
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		07/23/2015	\$ 136.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) MARC COHEN 732 SHADY LAWN CT CHAPEL HILL, NC 27514			<b>b. Job Title/Profession</b> PROFESSOR		<b>d. Comments</b>
			<b>c. Employer's Name/Specific Field</b> UNC		
					<b>e. Election Sum to Date</b> \$ 50.00
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		08/21/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 211.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 8,831.00

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

**3. Contributor Information**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) PAMELA COHEN 8909 TAYMOUTH CT RALEIGH, NC 27613	<b>b. Job Title/Profession</b> NA	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> NA	
		<b>e. Election Sum to Date</b> \$ 36.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	9140311	Credit Card		09/04/2015	\$ 36.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

**3. Contributor Information**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) ERIC CONRAD 1014 DOUGLAS ST WASHINGTON, DC 20018	<b>b. Job Title/Profession</b> COMMUNICATIONS	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> NA	
		<b>e. Election Sum to Date</b> \$ 25.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	9140311	Credit Card		08/01/2015	\$ 25.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

**3. Contributor Information**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) TRAVIS CRAYTON 208 BARCLAY RD CHAPEL HILL, NC 27516	<b>b. Job Title/Profession</b> RESEARCH ASSISTANT	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> DUKE UNIVERSITY	
		<b>e. Election Sum to Date</b> \$ 26.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	9140311	Credit Card		07/06/2015	\$ 26.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

**4. Total only this Page** \$ 87.00

**5. Total of ALL CRO-1210 Pages** \$ 8,831.00  
*(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 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
COMMITTEE TO ELECT LEE STORROW						089-KICD3K-C-001	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ERIN CROUSE PO BOX 14 CHAPEL HILL, NC 27514				GRAD STUDENT			
				<b>c. Employer's Name/Specific Field</b> NCSU			
				<b>e. Election Sum to Date</b>		\$ 20.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Check		07/08/2015	\$ 20.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ALLISON DE MARCO 120 JUSTICE ST CHAPEL HILL, NC 27516				SOCIAL SCIENTEST			
				<b>c. Employer's Name/Specific Field</b> UNC - CHAPEL HILL			
				<b>e. Election Sum to Date</b>		\$ 26.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Credit Card		07/03/2015	\$ 26.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
MOLLY DEMARCO 120 JUSTICE ST CHAPEL HILL, NC 27516				PROFESSOR			
				<b>c. Employer's Name/Specific Field</b> UNC			
				<b>e. Election Sum to Date</b>		\$ 26.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Credit Card		07/03/2015	\$ 26.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 72.00	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 8,831.00	

# 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

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

**3. Contributor Information**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) NATE DENNY 1224 INDEPENDANCE AVE SE WASHINGTON, DC 20003	<b>b. Job Title/Profession</b> INTERGOVERNMENTAL AFFAIRS	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> GSA	
		<b>e. Election Sum to Date</b> \$ 50.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	9140311	Credit Card		08/01/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

**3. Contributor Information**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) ROBBIE DIRCKS 600 COPPERLINE DRIVE CHAPEL HILL, NC 27516	<b>b. Job Title/Profession</b> CFO	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> UNC PRESS	
		<b>e. Election Sum to Date</b> \$ 300.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	9140311	Credit Card		09/17/2015	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

**3. Contributor Information**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) GARRETT DIXON 1012 VIRGIE ST DURHAM, NC 27705	<b>b. Job Title/Profession</b> DIGITAL MARKETING CONSULTANT	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> NETSERVIVE	
		<b>e. Election Sum to Date</b> \$ 150.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	9140311	Credit Card		07/06/2015	\$ 50.00
<input type="checkbox"/>	9140311	Credit Card		07/31/2015	\$ 100.00
<input type="checkbox"/>					\$

**4. Total only this Page** \$ 400.00

**5. Total of ALL CRO-1210 Pages** \$ 8,831.00  
*(This line must be on line 6 of Detailed Summary Page CRO-1100)*

Orange County Bd. of Elections

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) JONATHAN EDELMAN 1313 FLORIDA AVE NE WASHINGTON, DC 20002		<b>b. Job Title/Profession</b> LEGISLATIVE ASSISTANT		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> RELIGIOUS ACTION CENTER		<b>e. Election Sum to Date</b> \$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		08/01/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) JULIA FAHL 2129 1ST ST NW WASHINGTON, DC 20001		<b>b. Job Title/Profession</b> LGBT DIRECTOR		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> DNC		<b>e. Election Sum to Date</b> \$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		08/01/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) KATHLEEN FERGUSON 517 CENTRAL AVE HILLSBOROUGH, NC 27278		<b>b. Job Title/Profession</b> DIRECTOR		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> QUINTILES		<b>e. Election Sum to Date</b> \$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	In-Kind	FOOD AT EVENT	08/13/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 150.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 8,831.00

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>
BRIAN FITZSIMMONS 5400 GLENWOOD AVE SUITE G-11 RALEIGH, NC 27612			INSURANCE SALES		
			<b>c. Employer's Name/Specific Field</b>		
			THE SORIN INSURANCE GROUP		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		07/08/2015	\$ 30.00
<input type="checkbox"/>	9140311	Credit Card		08/08/2015	\$ 30.00
<input type="checkbox"/>	9140311	Credit Card		09/08/2015	\$ 30.00

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>
KATIE GAMMON 2404 37TH ST NW WASHINGTON, DC 20007			MARKETING COORDINATOR		
			<b>c. Employer's Name/Specific Field</b>		
			DNC		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		07/21/2015	\$ 25.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>
CLARISSA GARCIA 1989 KOSTKA LN GERMANTOWN, TN 38139			GRASSROOTS ADVOCACY		
			<b>c. Employer's Name/Specific Field</b>		
			AMERICAN HEART ASSOCIATION		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		07/10/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>					\$ 165.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 8,831.00

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
COMMITTEE TO ELECT LEE STORROW						089-KICD3K-C-001	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
DAVE GEPHART 1401 POPLAR LN HILLSBOROUGH, NC 27278				SALES			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				GEPHART MARKETING		\$ 40.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Check		08/13/2015	\$ 40.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
DESIREE GOLDMAN 612 IVES CT CHAPEL HILL, NC 27514				REALTOR			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				SELF		\$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Credit Card		07/22/2015	\$ 50.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
CRAUFORD GOODWIN PO BOX 957 CHAPEL HILL, NC 27514				PROFESSOR			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				DUKE		\$ 20.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Check		08/13/2015	\$ 20.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 110.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$ 8,831.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

# 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

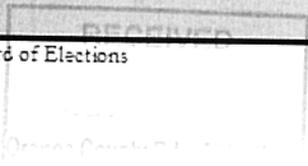
<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) SALLY GREENE 406 MORGAN CREEK RD CHAPEL HILL, NC 27514	<b>b. Job Title/Profession</b> COUNCIL MEMBER	<b>d. Comments</b>		<b>e. Election Sum to Date</b> \$ 20.00	
	<b>c. Employer's Name/Specific Field</b> TOWN OF CHAPEL HILL				
	f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)
<input type="checkbox"/>	9140311	Check		08/13/2015	\$ 20.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) ERIC HALLMAN 307 W KING ST HILLSBOROUGH, NC 27278	<b>b. Job Title/Profession</b> EXECUTIVE DIRECTOR	<b>d. Comments</b>		<b>e. Election Sum to Date</b> \$ 20.00	
	<b>c. Employer's Name/Specific Field</b> LIVESTOCK CONSERVANCY				
	f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)
<input type="checkbox"/>	9140311	Cash		08/13/2015	\$ 20.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) JOHN HAMMOND 114 ESSEX DRIVE CHAPEL HILL, NC 27514	<b>b. Job Title/Profession</b> RETIRED	<b>d. Comments</b>		<b>e. Election Sum to Date</b> \$ 336.00	
	<b>c. Employer's Name/Specific Field</b> PROFESSOR EMERITUS				
	f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)
<input type="checkbox"/>	9140311	Credit Card		07/03/2015	\$ 50.00
<input type="checkbox"/>	9140311	Credit Card		08/29/2015	\$ 36.00
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 126.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 8,831.00



# 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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
COMMITTEE TO ELECT LEE STORROW						089-KICD3K-C-001	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
CHERYL HEALTON 3658 UPTON ST WASHINGTON, DC 20008				DIRECTOR			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				NYU GLOBAL INSTITUTE OF HEALTH		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Check		07/26/2015	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ELIZA HERNANDEZ 1155 RIPLEY ST SILVER SPRING, MD 20005				DIRECTOR			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				US HISPANIC CHAMBER OF COMMERCE		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Credit Card		07/29/2015	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
LIBBIE HOUGH 5401 HOUGH RD HILLSBOROUGH, NC 27278				COMMUNICATIONS			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				ORANGE COUNTY GOVERNMENT		\$ 280.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input checked="" type="checkbox"/>	9140311	Credit Card		03/28/2015	\$ 35.00		
<input type="checkbox"/>	9140311	Check		08/02/2015	\$ 200.00		
<input type="checkbox"/>	9140311	In-Kind	FOOD AT EVENT	08/13/2015	\$ 45.00		
<b>4. Total only this Page</b>						\$ 445.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 8,831.00	

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

3. Contributor Information <span style="float: right;"><input type="checkbox"/> Add <input type="checkbox"/> Remove</span>					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  DUSTIN INGALLS 1010 TOPSAIL COMMON DRIVE KNIGHTDALE, NC 27545	<b>b. Job Title/Profession</b> POLLSTER	<b>d. Comments</b>  		<b>e. Election Sum to Date</b> \$ 125.00	
	<b>c. Employer's Name/Specific Field</b> NONE				
	f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)
<input checked="" type="checkbox"/>	9140311	Credit Card		03/19/2015	\$ 25.00
<input type="checkbox"/>	9140311	Credit Card		08/21/2015	\$ 100.00
<input type="checkbox"/>					\$

3. Contributor Information <span style="float: right;"><input type="checkbox"/> Add <input type="checkbox"/> Remove</span>					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  SUE JACKSON 221 IRONWOODS DR CHAPEL HILL, NC 27516	<b>b. Job Title/Profession</b> COMPLIANCE CONSULTANT	<b>d. Comments</b>  		<b>e. Election Sum to Date</b> \$ 176.00	
	<b>c. Employer's Name/Specific Field</b> SELF				
	f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)
<input type="checkbox"/>	9140311	Check		07/08/2015	\$ 26.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <span style="float: right;"><input type="checkbox"/> Add <input type="checkbox"/> Remove</span>					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  CARI JEFFRIES 2886 BUTTER CREEK DR PASEDNA, CA 91107	<b>b. Job Title/Profession</b> STUDENT	<b>d. Comments</b>  		<b>e. Election Sum to Date</b> \$ 26.00	
	<b>c. Employer's Name/Specific Field</b> NA				
	f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)
<input type="checkbox"/>	9140311	Credit Card		07/04/2015	\$ 26.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 152.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 8,831.00

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) PAIGE JOHNSON 4601 BRODOG TERRACE HURDLE MILLS, NC 27541		<b>b. Job Title/Profession</b> DIRECTOR		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> PP SOUTH ATLANTIC		<b>e. Election Sum to Date</b> \$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		08/06/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) LEAH JOSEPHSON 712 S BUCHANAN BLVD DURHAM, NC 27701		<b>b. Job Title/Profession</b> DEVELOPMENT DIRECTOR		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> NC HILLEL		<b>e. Election Sum to Date</b> \$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		08/04/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) EMILY KASS 613 MORGAN CREEK RD CHAPEL HILL, NC 27517		<b>b. Job Title/Profession</b> RETIRED		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> RETIRED		<b>e. Election Sum to Date</b> \$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Check		09/03/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>					\$ 300.00
<b>5. Total of ALL CRO-1210 Pages</b>					\$ 8,831.00
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					

CRO-1210

RECEIVED

NC State Board of Elections

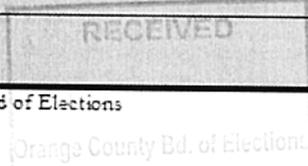
# Contributions from Individuals

Amendment

Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
COMMITTEE TO ELECT LEE STORROW						089-KICD3K-C-001	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
DANIEL KEDEM 602 SURRY ROAD CHAPEL HILL, NC 27514				VP			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				HAMBURGER GIBSON CREATIVE		\$ 25.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	9140311	Credit Card		07/10/2015		\$ 25.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
CAROL KELLY 104 WOODKIRK LN CHAPEL HILL, NC 27514				EDUCATION			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				RETIRED		\$ 26.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	9140311	Credit Card		07/03/2015		\$ 26.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
BRAD KENNEDY 407 STARKEY ST RALEIGH, NC 27603				FUNDRAISER			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				SELF		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	9140311	Credit Card		08/21/2015		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$ 151.00	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 8,831.00	



# 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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
COMMITTEE TO ELECT LEE STORROW						089-KICD3K-C-001	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JEFF KINZEL 5 RAVENNA ST ASHEVILLE, NC 28803				ARTIST			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				SELF		\$ 30.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Credit Card		07/03/2015	\$ 30.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
LYNN KNAUFF 205 DEEPWOOD RD CHAPEL HILL, NC 27514				RETIRED			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				RETIRED		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Check		07/27/2015	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ROBIN KORNHABER NY				VP OF PROGRAM SERVICES			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				AMERICAN PARKINSONS ASSOCIATION		\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Check		07/13/2015	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 330.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$ 8,831.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) BRUCE LADD 331 CAROLINA MEADOWS CHAPEL HILL, NC 27517		<b>b. Job Title/Profession</b> RETIRED		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> RETIRED		<b>e. Election Sum to Date</b> \$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Check		07/08/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) LAURENCE LILLEY 236 RHODE ISLAND AVE NW WASHINGTON, DC 20001		<b>b. Job Title/Profession</b> CONSULTANT		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> MCGUIRE WOODS		<b>e. Election Sum to Date</b> \$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		07/28/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) JULIE LINDSEY 408 SIMERVILLE CHAPEL HILL, NC 27517		<b>b. Job Title/Profession</b> PHYSICIAN		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> DUKE PRIMARY CARE		<b>e. Election Sum to Date</b> \$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		07/03/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>					\$ 250.00
<b>5. Total of ALL CRO-1210 Pages</b>					\$ 8,831.00
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					

RECEIVED

# 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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
COMMITTEE TO ELECT LEE STORROW						089-KICD3K-C-001	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
AMY LITTLETON 3014 13TH ST NW WASHINGTON, DC 20009				ASDC OPERATIONS DIRECTOR			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				DNC		\$ 25.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Credit Card		07/27/2015	\$ 25.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
EVELYN LLOYD 169 W TRYON ST HILLSBOROUGH, NC 27278				NA			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				NA		\$ 25.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Check		08/13/2015	\$ 25.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
PAT LOWRY 407 NORTH ST CHAPEL HILL, NC 27514				RETIRED			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				RETIRED		\$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Check		08/11/2015	\$ 50.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 100.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$ 8,831.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

RECEIVED

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
COMMITTEE TO ELECT LEE STORROW						089-KICD3K-C-001	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
NANCY LUBEROFF 2109 N LAKESHORE DR CHAPEL HILL, NC 27514				SOCIAL WORKER			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				NA		\$ 25.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Credit Card		08/04/2015	\$ 25.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
HANNAH MARTIN 4621 4TH ST NW WASHINGTON, DC 20011				POLICY ANALYST			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				BIPARTISAN POLICY CENTER		\$ 25.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Credit Card		07/10/2015	\$ 25.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JOHN MARTIN 4 BOLIN HT'S APT B CHAPEL HILL, NC 27514				TEACHING FELLOW			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				UNC		\$ 5.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Credit Card		08/16/2015	\$ 5.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 55.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$ 8,831.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

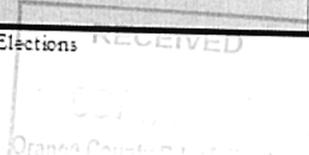
<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) BEVERLY MAY 2141 DEBEERS DR SANDY, UT 84093	<b>b. Job Title/Profession</b> DIRECTOR, WESTERN REGION	<b>c. Employer's Name/Specific Field</b> CAMPAIGN FOR TOBACCO FREE KIDS	<b>d. Comments</b>	<b>e. Election Sum to Date</b> \$ 50.00	
<b>f. Prior</b> <input type="checkbox"/>	<b>g. Account Code</b> 9140311	<b>h. Form of Payment</b> Check	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b> 08/01/2015	<b>k. Amount</b> \$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) PETER MCCUBBIN 329 TENNEY CIR CHAPEL HILL, NC 27514	<b>b. Job Title/Profession</b> RETIRED	<b>c. Employer's Name/Specific Field</b> RETIRED	<b>d. Comments</b>	<b>e. Election Sum to Date</b> \$ 50.00	
<b>f. Prior</b> <input type="checkbox"/>	<b>g. Account Code</b> 9140311	<b>h. Form of Payment</b> Credit Card	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b> 08/28/2015	<b>k. Amount</b> \$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) JOHN MCDERMOTT 8500 BRONNES POND WASHINGTON, DC	<b>b. Job Title/Profession</b> LAW STUDENT	<b>c. Employer's Name/Specific Field</b> LAW STUDENT	<b>d. Comments</b>	<b>e. Election Sum to Date</b> \$ 125.00	
<b>f. Prior</b> <input checked="" type="checkbox"/>	<b>g. Account Code</b> 9140311	<b>h. Form of Payment</b> Credit Card	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b> 03/28/2015	<b>k. Amount</b> \$ 25.00
<input type="checkbox"/>	9140311	Credit Card		08/01/2015	\$ 100.00
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 200.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 8,831.00



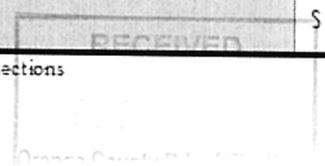
# Contributions from Individuals

Amendment

Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
COMMITTEE TO ELECT LEE STORROW						089-KICD3K-C-001	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
EARL MCKEE 5200 KIGER RD ROUGEMONT, NC 27526				FARMER			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				SELF		\$ 25.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Check		08/13/2015	\$ 25.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
TUCKER MIDDLETON 3014 13TH ST NW WASHINGTON, DC 20009				ASSOCIATE			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				PUTNAM PARTNERS		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Credit Card		08/01/2015	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
SALLY MIGLIORE 4613 GRENADINE CT RALEIGH, NC 27612				DIRECTOR OF COMMUNITY LEADERSHIP			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				NCCF		\$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Credit Card		08/01/2015	\$ 50.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 175.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$ 8,831.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							



# 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

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

**3. Contributor Information**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) SUE NELSON 3637 N NELSON ARLINGTON, VA 22207	<b>b. Job Title/Profession</b> ADVOCACY DIRECTOR	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> AMERICAN HEART ASSOCIATION	
		<b>e. Election Sum to Date</b> \$ 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"/>	9140311	Credit Card		08/01/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

**3. Contributor Information**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) ALLISON NORMAN 414 COLONY WOODS CHAPEL HILL, NC 27517	<b>b. Job Title/Profession</b> EXECUTIVE DIRECTOR	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> MADE WITH LOVE BAKERY	
		<b>e. Election Sum to Date</b> \$ 25.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	9140311	Credit Card		09/22/2015	\$ 25.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

**3. Contributor Information**  Add  Remove

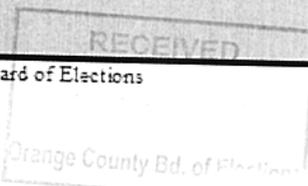
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) LAURIE NORMAN 205 W POPLAR AVE CARRBORO, NC 27510	<b>b. Job Title/Profession</b> ALUMNI AFFIARS	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> UNC SCHOOL OF EDU	
		<b>e. Election Sum to Date</b> \$ 50.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	9140311	Check		07/13/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

**4. Total only this Page** \$ 175.00

**5. Total of ALL CRO-1210 Pages** \$ 8,831.00  
(This line must be on line 6 of Detailed Summary Page CRO-1100)

CRO-1210



# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) PEG O'CONNELL 5000 BIRCHLEAF RALEIGH, NC 27606		<b>b. Job Title/Profession</b> SENIOR ADVISOR		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> FUQUAY SOLUTIONS		<b>e. Election Sum to Date</b> \$ 336.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Check		08/11/2015	\$ 336.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) MELVA FAGER OKUN 108 HIGH ST CARRBORO, NC 27278		<b>b. Job Title/Profession</b> PUBLIC HEALTH		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> NA		<b>e. Election Sum to Date</b> \$ 25.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Check		08/13/2015	\$ 25.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) ARTHUR PARKER 10 NORTHWOOD RD ASHEVILLE, NC 28804		<b>b. Job Title/Profession</b> N/A		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> N/A		<b>e. Election Sum to Date</b> \$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		09/13/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 411.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 8,831.00



# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

**3. Contributor Information**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) WILSON PARKER 10 NORTHWOOD RD ASHEVILLE, NC 28804	<b>b. Job Title/Profession</b> STUDENT	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> STUDENT	
		<b>e. Election Sum to Date</b> \$ 40.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	9140311	Cash		08/01/2015	\$ 20.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

**3. Contributor Information**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) TROY PATTERSON 1836 METZEROTT RD ADELPHI, MD 20783	<b>b. Job Title/Profession</b> ASSOCIATE	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> M SQUARED	
		<b>e. Election Sum to Date</b> \$ 50.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	9140311	Credit Card		07/29/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

**3. Contributor Information**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) BERNADETTE PELLISSER 4516 MYSTIC LN HILLSBOROUGH, NC 27278	<b>b. Job Title/Profession</b> RETIRED	<b>d. Comments</b>
	<b>c. Employer's Name/Specific Field</b> RETIRED	
		<b>e. Election Sum to Date</b> \$ 50.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	9140311	Credit Card		08/13/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 120.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 8,831.00

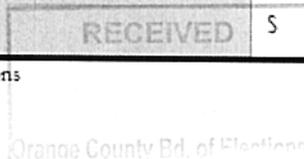
# Contributions from Individuals

Amendment

Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
COMMITTEE TO ELECT LEE STORROW						089-KICD3K-C-001	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
HATHAWAY PENDERGRASS 1005 MAIN ST CARRBORO, NC 27510				ATTORNEY			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				EPTING HACKNEY		\$ 70.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input checked="" type="checkbox"/>	9140311	Credit Card		03/28/2015	\$	50.00	
<input type="checkbox"/>	9140311	Check		08/13/2015	\$	20.00	
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
DAVID PRICE 2200 N LAKESHORE DR CHAPEL HILL, NC 27514				CONGRESSMAN			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				US CONGRESS		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Check		08/01/2015	\$	100.00	
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
SANDRA RICH 603 E FRANKLIN ST CHAPEL HILL, NC 27514				FINANCE			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				SELF		\$ 25.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Credit Card		07/10/2015	\$	25.00	
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$	145.00
<b>5. Total of ALL CRO-1210 Pages</b>						\$	8,831.00
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							



# 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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
COMMITTEE TO ELECT LEE STORROW						089-KICD3K-C-001	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
KEYLIN RIVERA 452 M ST NW WASHINGTON, DC 20001				DC GOVT			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				DC GOVT		\$ 30.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Credit Card		08/01/2015	\$ 30.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
CLAUDIA RODAS 215 W NORTH HILL DR SPRING, TX 77388				DIRECTOR			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				CAMPAIGN FOR TOBACCO FREE KIDS		\$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Credit Card		08/01/2015	\$ 50.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
GUILLERMO RODRIGUEZ 406 WINDSWEEP DR ASHEVILLE, NC 28801				LANDSCAPE ARCHITECT			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				SELF		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	9140311	Credit Card		08/05/2015	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 180.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$ 8,831.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

# 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

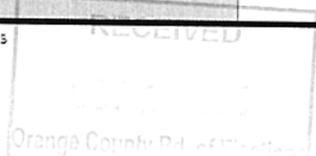
<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
COMMITTEE TO ELECT LEE STORROW						089-KICD3K-C-001	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
EVAN ROSS 12 HANNOVER PL NW WASHINGTON, DC 20001				DIGITAL DATA ANALYST			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				CRAFT MEDIA		\$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	9140311	Credit Card		07/28/2015		\$ 50.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ROLLIN RUSSEL 202 SAPONI DR HILLSBOROUGH, NC 27278				NA			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				NA		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	9140311	Check		08/13/2015		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
MARGARET SAMUELS 107 GREEN WILLOW CT CHAPEL HILL, NC 27514				SOCIAL WORKER			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				OE ENTERPRISES		\$ 20.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	9140311	Credit Card		08/12/2015		\$ 20.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$ 170.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$ 8,831.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

# 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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
COMMITTEE TO ELECT LEE STORROW						089-KICD3K-C-001	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ROBERT SAUNDERS 1547 PATHWAY DR CARRBORO, NC 27607				LAWYER			
				<b>c. Employer's Name/Specific Field</b> BROOKS PIERCE			
						<b>e. Election Sum to Date</b>	
						\$ 336.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	9140311	Check		08/13/2015		\$ 336.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
DAMON SELLS 601 JONES FERRY RD CARRBORO, NC 27510				RESEARCH MANAGER			
				<b>c. Employer's Name/Specific Field</b> DUKE UNIVERSITY			
						<b>e. Election Sum to Date</b>	
						\$ 20.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	9140311	Credit Card		08/08/2015		\$ 20.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
CHARLIE SELLEW 1315 WEST ST WASHINGTON, DC 20020				STUDENT			
				<b>c. Employer's Name/Specific Field</b> HARVARD			
						<b>e. Election Sum to Date</b>	
						\$ 25.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	9140311	Cash		08/01/2015		\$ 25.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$ 381.00	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 8,831.00	



# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

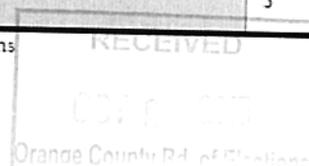
<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) YUUKI SHINOMIYA 2325 HUIDEKOPER PL NW WASHINGTON, DC 20007		<b>b. Job Title/Profession</b> DIRECTOR OF STRATEGY		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> SEPTENI AMERICA		<b>e. Election Sum to Date</b> \$ 25.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		07/27/2015	\$ 25.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) DEBORAH SIMMERS 213 W TRYON ST HILLSBOROUGH, NC 27278		<b>b. Job Title/Profession</b> RETIRED		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> RETIRED		<b>e. Election Sum to Date</b> \$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Check		08/13/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) NEIL SMITH 416 OLD BUGGY TRAIL HILLSBOROUGH, NC 27278		<b>b. Job Title/Profession</b> VOLUNTEER		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> HUMAN RIGHTS CAMPAIGN		<b>e. Election Sum to Date</b> \$ 85.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input checked="" type="checkbox"/>	9140311	Check		03/28/2015	\$ 35.00
<input type="checkbox"/>	9140311	Credit Card		08/01/2015	\$ 50.00
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 125.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 8,831.00



# 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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
COMMITTEE TO ELECT LEE STORROW						089-KICD3K-C-001	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
KATIE SPEARS 10902 BARTON HILL CT RESTON, VA 20191				NON PROFIT			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				YOUTH EMPOWERED SOLUTIONS		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	9140311	Credit Card		07/24/2015		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
SARA STEPHENS 508 CRAIG RD DURHAM, NC 27712				EXECUTIVE DIRECTOR			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				HILLSBOROUGH CHAMBER OF COMMERCE		\$ 20.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	9140311	Credit Card		08/13/2015		\$ 20.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
FRED STEWART 2707 HARMONY CHURCH HILLSBOROUGH, NC 27278				ARCHITECT			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				SELF		\$ 25.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	9140311	Credit Card		08/13/2015		\$ 25.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$ 145.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$ 8,831.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							



# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

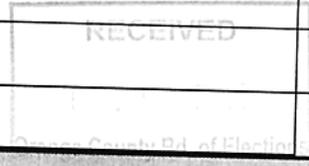
<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ELIZABETH STUCKEY 115 VIRGINIA DR CHAPEL HILL, NC 27514		OFFICE MANAGER			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
		TRIANGLE POOL AND SPA		\$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Check		08/24/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JOHN SWEET 208 GLENBURNIE ST CHAPEL HILL, NC 27514		FACULTY			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
		UNC		\$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		07/13/2015	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
SCOTT TAYLOR 501 WEAVER MINE TRAIL CHAPEL HILL, NC 27517		ATTORNEY			
		<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
		SELF		\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		07/03/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>					\$ 400.00
<b>5. Total of ALL CRO-1210 Pages</b>					\$ 8,831.00
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					



# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
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<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
VICTORIA TAYLOR 95 DOGWOOD CT TAYLORSVILLE, NC 28681		MANAGER OF STATE AND LOCAL CAMPAIGNS			
		<b>c. Employer's Name/Specific Field</b> EMILYS LIST			
				<b>e. Election Sum to Date</b>	
				\$ 231.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		07/08/2015	\$ 33.00
<input type="checkbox"/>	9140311	Credit Card		08/08/2015	\$ 33.00
<input type="checkbox"/>	9140311	Credit Card		09/08/2015	\$ 33.00

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
DALLAS THOMPSON 920 WAKE TOWNE DR RALEIGH, NC 27604		CONSULTANT			
		<b>c. Employer's Name/Specific Field</b> SELF			
				<b>e. Election Sum to Date</b>	
				\$ 25.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		07/20/2015	\$ 25.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ANNIE THORNHILL 833 BURCH AVE DURHAM, NC 27701		VP			
		<b>c. Employer's Name/Specific Field</b> AMERICAN HEART ASSOCIATION			
				<b>e. Election Sum to Date</b>	
				\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Credit Card		08/13/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>					\$ 224.00
<b>5. Total of ALL CRO-1210 Pages</b>					\$ 8,831.00
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					

# 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

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) LAURA STILL THRIFT 201 E ST SE WASHINGTON, DC 20003		<b>b. Job Title/Profession</b> POLICY ADVISOR		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> US HOUSE			
				<b>e. Election Sum to Date</b> \$ 25.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Check		08/01/2015	\$ 25.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) KATE TORREY 501 DOGWOOD DRIVE CHAPEL HILL, NC 27516		<b>b. Job Title/Profession</b> RETIRED		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> BOOK PUBLISHER			
				<b>e. Election Sum to Date</b> \$ 51.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input checked="" type="checkbox"/>	9140311	Check		03/17/2015	\$ 25.00
<input type="checkbox"/>	9140311	Check		07/08/2015	\$ 26.00
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) PAUL TREACY 210 CONMER CHAPEL HILL, NC 27514		<b>b. Job Title/Profession</b> STUDENT		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> STUDENT			
				<b>e. Election Sum to Date</b> \$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Check		08/13/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 101.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 8,831.00

# Contributions from Individuals

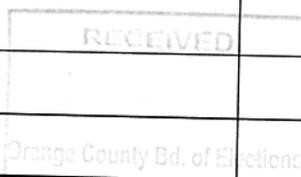
Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
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<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
ELLEN VARGYAS 6112 29TH ST NW WASHINGTON, DC 20015		LAWYER			
		<b>c. Employer's Name/Specific Field</b> AMERICAN LEGACY FOUNDATION			
				<b>e. Election Sum to Date</b> \$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Check		08/01/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
KYLE VILLEMMAIN 108 BUCKEYE LN CHAPEL HILL, NC 27516		STUDENT			
		<b>c. Employer's Name/Specific Field</b> NA			
				<b>e. Election Sum to Date</b> \$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Check		08/01/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JENNIFER AUSTIN WADSWORTH RALEIGH, NC 27605		SOIL AND WATER COMMISSIONER			
		<b>c. Employer's Name/Specific Field</b> WAKE CO			
				<b>e. Election Sum to Date</b> \$ 15.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Check		07/08/2015	\$ 15.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$



<b>4. Total only this Page</b>					\$ 115.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 8,831.00

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

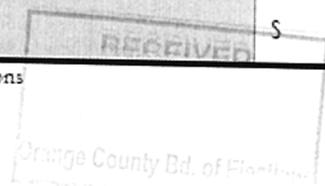
<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) JENNIFER WEAVER 323 W QUEEN ST HILLSBOROUGH, NC 27278		<b>b. Job Title/Profession</b> NON PROJECT RESEARCHER		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> CLEAN WATER FOR NC		<b>e. Election Sum to Date</b> \$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	9140311	Check		08/13/2015	\$ 25.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) ELIZABETH WEBBER 104 CHEROKEE CIRCLE CHAPEL HILL, NC 27514		<b>b. Job Title/Profession</b> REAL ESTATE AGENT		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> KELLER WILLIAMS		<b>e. Election Sum to Date</b> \$ 110.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	9140311	Check		09/22/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) CASS WHEELER 30209 HACIENDA LN GEORGETOWN, TX		<b>b. Job Title/Profession</b> RETIRED		<b>d. Comments</b>	
		<b>c. Employer's Name/Specific Field</b> RETIRED		<b>e. Election Sum to Date</b> \$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	9140311	Credit Card		07/16/2015	\$ 150.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 225.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 8,831.00

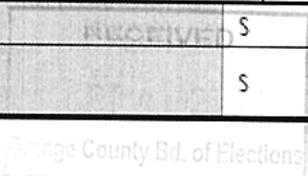


# Contributions from Individuals

Amendment  
 Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
COMMITTEE TO ELECT LEE STORROW						089-KICD3K-C-001	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
REBEKAH WHILDEN 8 BUSBEE ROAD ASHEVILLE, NC 28803				FIELD ORGANIZER			
				<b>c. Employer's Name/Specific Field</b>			
				LCV		<b>e. Election Sum to Date</b>	
						\$ 20.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	9140311	Credit Card		07/30/2015		\$ 5.00	
<input type="checkbox"/>	9140311	Credit Card		08/30/2015		\$ 5.00	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JESSE WHITE 38 MOUNT BOLUS RD CHAPEL HILL, NC 27514				RETIRED			
				<b>c. Employer's Name/Specific Field</b>			
				UNC-CH		<b>e. Election Sum to Date</b>	
						\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	9140311	Check		08/11/2015		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
JEAN WORKMAN 5808 OLD FOX TRAIL GREENSBORO, NC 27407				DEVELOPMENT			
				<b>c. Employer's Name/Specific Field</b>			
				SHIFT NC		<b>e. Election Sum to Date</b>	
						\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	9140311	Check		08/13/2015		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>						\$	210.00
<b>5. Total of ALL CRO-1210 Pages</b>						\$	8,831.00
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							



# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

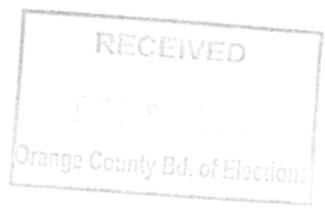
<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
MARIE YANCEY 6888 SADDLE RUN WAY GAINESVILLE, VA 20155		REAL ESTATE			
		<b>c. Employer's Name/Specific Field</b> REAL ESTATE			
				<b>e. Election Sum to Date</b>	
				\$ 25.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	9140311	Check		08/01/2015	\$ 25.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
DYLAN YOUNG 921 ALABAMA AVE DURHAM, NC 27705		RESEARCH SOFTWARE ENGINEER			
		<b>c. Employer's Name/Specific Field</b> UNC			
				<b>e. Election Sum to Date</b>	
				\$ 150.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input checked="" type="checkbox"/>	9140311	Credit Card		03/28/2015	\$ 50.00
<input type="checkbox"/>	9140311	Credit Card		09/16/2015	\$ 100.00
<input type="checkbox"/>					\$

<b>4. Total only this Page</b>	\$ 125.00
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>	\$ 8,831.00

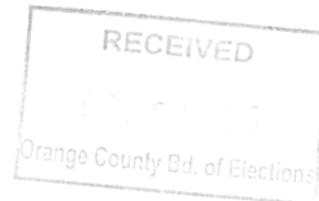
CRO-1210



# Disbursements

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
COMMITTEE TO ELECT LEE STORROW						089-KICD3K-C-001	
<b>3. Type of Disbursement</b> <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							
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
LILLIAN'S LIST NC							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 200.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
9140311	Check	O	09/17/2015	\$ 200.00	CONTRIBUTION		
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
PLANNED PARENTHOOD HEALTH SYSTEMS ACTION FUND NC							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 50.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
9140311	Debit Card	O	08/21/2015	\$ 50.00	CONTRIBUTION		
				\$			
<b>5. Total only this Page</b>						\$ 250.00	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 250.00	
<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>							
<b>7. Purpose Codes</b> (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

Pg 1 of 6  Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
COMMITTEE TO ELECT LEE STORROW						089-KICD3K-C-001	
<b>3. Type of Disbursement</b> <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			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
ALICIA STEMPER PHOTOGRAPHY NC							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 350.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
9140311	Check	A	07/08/2015	\$ 350.00	PHOTOGRAPHY		
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
BANK OF NC NC							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 33.24	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
9140311	Electric Funds Tran	K	08/04/2015	\$ 33.24	CHECKS		
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
BETTER IMAGE PRINTING NC							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 1,484.79	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
9140311	Check	B	08/12/2015	\$ 1,484.79	PALM CARDS		
				\$			
<b>5. Total only this Page</b>						\$ 1,868.03	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 2,804.46	
<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>							
<b>7. Purpose Codes</b> (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)							

RECEIVED  
City Bd. of Election

# Disbursements

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

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

**3. Type of Disbursement** *(Please use separate CRO-1310 forms for each type of Disbursement.)*  
 Operating Expenses   
 Contributions to Candidates/Political Committees   
 Coordinated Party Expenditures

**4. Payee Information**       Add     Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) FACEBOOK NC	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 133.75

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
9140311	Debit Card	K	09/01/2015	\$ 133.75	ADS
				\$	

**4. Payee Information**       Add     Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) FEDEX NC	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 21.74

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
9140311	Debit Card	B	08/24/2015	\$ 21.74	WALK LISTS
				\$	

**4. Payee Information**       Add     Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) HARRIS TEETER NC	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 4.38

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
9140311	Debit Card	O	08/24/2015	\$ 4.38	FOOD FOR EVENT
				\$	

**5. Total only this Page**      \$ 159.87

**6. Total of ALL CRO-1310 Pages**      \$ 2,804.46  
*(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

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
COMMITTEE TO ELECT LEE STORROW						089-KICD3K-C-001	
<b>3. Type of Disbursement</b> <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							
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
NATIONBUILDER NC							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 49.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
9140311	Debit Card	O	08/26/2015	\$ 49.00	WEBSITE		
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
NCDP NC							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 150.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
9140311	Check	O	08/03/2015	\$ 150.00	VAN ACCESS		
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
ORANGE COUNTY BOARD OF ELECTIONS NC							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 5.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
9140311	Check	O	07/24/2015	\$ 5.00	FILING FEE		
				\$			
<b>5. Total only this Page</b>						\$ 204.00	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 2,804.46	
<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>							
<b>7. Purpose Codes</b> (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

Pg 4 of 6  Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW	<b>2. ID Number</b> 089-KICD3K-C-001
--	---

<b>3. Type of Disbursement</b> <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

<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i> ORANGE COUNTY DEMOCRATIC PARTY NC	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
	<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality: Orange	<b>e. Election Sum to Date</b> \$ 25.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
9140311	Check	O	07/23/2015	\$ 25.00	EVENT
				\$	

<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i> PAYPAL NC	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
	<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	<b>e. Election Sum to Date</b> \$ 339.59

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
9140311	Electric Funds Tran	C	09/22/2015	\$ 144.18	FEE
				\$	

<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i> SQUARE NC	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
	<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	<b>e. Election Sum to Date</b> \$ 42.13

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
9140311	Electric Funds Tran	C	09/22/2015	\$ 31.24	FEE
				\$	

<b>5. Total only this Page</b>	\$ 200.42
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<b>6. Total of ALL CRO-1310 Pages</b> <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>	\$ 2,804.46
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- 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

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

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW						<b>2. ID Number</b> 089-KICD3K-C-001
<b>3. Type of Disbursement</b> <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						
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i> LEE STORROW NC				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
				<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 275.33
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
9140311	Check	O	08/17/2015	\$ 275.33	FOOD FOR EVENT	
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i> TRADER JOES NC				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
				<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 39.61
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
9140311	Check	O	08/18/2015	\$ 39.61	FOOD FOR EVENT	
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i> USPS NC				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
				<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 9.20
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
9140311	Check	I	08/04/2015	\$ 9.20		
				\$		
<b>5. Total only this Page</b>						\$ 324.14
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 2,804.46
<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>						
<b>7. Purpose Codes</b> <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)						

# Disbursements

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

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
COMMITTEE TO ELECT LEE STORROW				089-KICD3K-C-001	
<b>3. Type of Disbursement</b> <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	
<b>4. Payee Information</b> <span style="float: right;"><input type="checkbox"/> Add <input type="checkbox"/> Remove</span>					
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
RUTH ZALPH CHAPEL HILL, NC					
			<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 48.00
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
9140311	Check	A	07/28/2015	\$ 48.00	BUTTONS
				\$	
<b>5. Total only this Page</b>					\$ 48.00
<b>6. Total of ALL CRO-1310 Pages</b>					\$ 2,804.46
<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>					
<b>7. Purpose Codes</b> <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)					

# In-Kind Contributions

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.

<b>1. Committee Full Name (and Fund if applicable)</b> COMMITTEE TO ELECT LEE STORROW		<b>2. ID Number</b> 089-KICD3K-C-001	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) STEVEN BURKE 214 W TYRON ST HILLSBOROUGH, NC 27278	<b>b. Type of Contributor</b> <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	<b>c. Comments</b>	
		<b>d. Election Sum to Date</b> \$ 150.00	
<b>e. Description</b> FOOD AT EVENT	<b>f. Date (mm/dd/yyyy)</b> 08/13/2015	<b>g. Fair Market Amount</b> \$ 50.00	
		\$	
		\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) KATHLEEN FERGUSON 517 CENTRAL AVE HILLSBOROUGH, NC 27278	<b>b. Type of Contributor</b> <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	<b>c. Comments</b>	
		<b>d. Election Sum to Date</b> \$ 50.00	
<b>e. Description</b> FOOD AT EVENT	<b>f. Date (mm/dd/yyyy)</b> 08/13/2015	<b>g. Fair Market Amount</b> \$ 50.00	
		\$	
		\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) LIBBIE HOUGH 5401 HOUGH RD HILLSBOROUGH, NC 27278	<b>b. Type of Contributor</b> <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	<b>c. Comments</b>	
		<b>d. Election Sum to Date</b> \$ 280.00	
<b>e. Description</b> FOOD AT EVENT	<b>f. Date (mm/dd/yyyy)</b> 08/13/2015	<b>g. Fair Market Amount</b> \$ 45.00	
		\$	
		\$	
<b>4. Total only this Page</b>		\$ 145.00	
<b>5. Total of ALL CRO-1510 Pages</b> <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 145.00	