Disclosure Report Cover

Amendment ☐ Yes ☑ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

1. Committee Information

a. Full Name: RENEE 2012

c. ID Number: 1HDD9A

b. Mailing Address (include City, State and Zip Code): JOSEPHINE ARLOTTA, PO BOX 1633, CARRBORO NC 27510

d. Date Filed:

e. Phone Number: 919-370-4329

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2012	01/01/2012	04/21/2012	Josephine ARLOTTA

6. Type of Committee (Check One)

- ☑ Candidate Campaign
- ☐ Party
- ☐ PAC
- ☐ Referendum
- ☐ Independent Expenditure
- ☐ Joint Fundraiser
- ☐ Legal Expense Fund

7. Type of Fund *(if applicable, check one)*

- ☐ Booster Fund
- ☐ Building Fund
- ☐ Other:

8. Number of Fundraisers this Report: 1

9. Type of Report *(check only one type of report from one category)*

Municipal	State/County	Referendum
☐ Organizational	☐ Organizational	☐ Organizational
☐ Thirty-five day	Quarterly	☐ Pre-referendum
☑ Pre-primary jn	☑ First	☐ Final
☐ Pre-election	☐ Second	☐ Supplemental Final
☐ Pre-runoff	☐ Third	☐ Annual
Semi-annual	☐ Fourth	☐ Special
☐ Mid Year	Semi-annual	
☐ Year End	☐ Mid Year	**10. Special Report Name**
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

11. Account Information

a. Financial Institution Full Name: RBC Bank *

b. Purpose: OPERATING

c. Account Code: 2

d. Period Begin Balance: $ 174.63

* Bank Acquired by PNC Bank

11. Account Information

a. Financial Institution Full Name: PNC Bank

b. Purpose: Operating

c. Account Code: 3

d. Period Begin Balance: $ 1303.67

CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

Printed Name of Signer	Signature of Appointed Treasurer	Date
JOSEPHINE ARLOTTA		4-24-12

FOR OFFICE USE ONLY

Date Received:	4/25/12	Employee:	[redacted]
Date Postmarked:		Employee:	
Date Scanned:	5/3/12	Employee:	[redacted]
Date Data Entered:		Employee:	

Delivery Method
- ☐ Normal Mail
- ☐ Registered Mail
- ☒ Hand Delivered
- ☐ Electronically Filed
- ☐ Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.
You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Received MAR 25 2012 Orange Co. Bd. Of Elections

April 21 + front of all report

Detailed Summary

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

Amendment ☐ Yes ☑ No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
RENEE 2012	1ST QUARTER 2012	1HDD9A

Start of Election Cycle: January 1, 2012		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 174.63	$ 174.63
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	$ 1096.00	$ 1096.00
6) Contributions from Individuals	(CRO-1210)	$ 4873.00	$ 4873.00
7) Contributions from Political Party Committees	(CRO-1220)	$	$
8) Contributions from Other Political Committees	(CRO-1230)	$	$
9) Loan Proceeds	(CRO-1410)	$	$
10) Refunds/Reimbursements to the Committee	(CRO-1240)	$	$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	$	$
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	$	$
11c) Outside Sources of Income	(CRO-1250)	$	$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	$	$
11e) Exempt Purchase Price Sales	(CRO-1265)	$	$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		$ 5969.00	$ 5969.00
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	$ 3149.05	$ 3149.05
13b) Contributions to Candidates/Political Committees	(CRO-1310)	$	$
13c) Coordinated Party Expenditures	(CRO-1310)	$	$
14) Aggregated Non-Media Expenditures	(CRO-1315)	$	$
15) Loan Repayments	(CRO-1420)	$	$
16) Refunds/Reimbursements from the Committee	(CRO-1320)	$	$
17) In-Kind Contributions	(CRO-1510)	$ 100.00	$ 100.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 3249.05	$ 3249.05
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 2894.58	$ 2894.58
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	$	
22) Debts and Obligations owed by the Committee	(CRO-1610)	$	
23) Debts and Obligations owed to the Committee	(CRO-1620)	$	
24) Account Transfers Within the Committee	(CRO-1720)	$	
25) Administrative Support	(CRO-1710)	$	$
26) Forgiven Loans	(CRO-1440)	$	$
27) 48-Hour Notice Reports Sum	(CRO-2220)	$	$
28) Contributions to be Refunded	(CRO-1215)	$	$

Received APR 25 2012

Carry total from all worksheets April 27

Orange Co. Bd. Of Elections

Aggregated Contributions from Individuals

Page 1 of 2

Amendment ☐ Yes ☑ No

Optional form used to report NC Contributions From Individuals of $50 or less

1. Committee Full Name (and Fund if applicable)	2. ID Number
RENEE 2012	1HDD9A

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	2	CHECK 7317 ✓		01/28/2012	$ 50.00
☐ Add ☐ Remove		~~CHECK~~ jm	CRO1210 - PAGE 9 TRANSFERRED TO		$ ~~108.00~~ jm
☐ Add ☐ Remove	~~2~~ 3 jm	CASH ✓		03/17/2012	$ 20.00
☐ Add ☐ Remove	3	CHECK 1590 ✓		03/17/2012	$ 10.00
☐ Add ☐ Remove	3	CHECK 7376 ✓		03/16/2012	$ 25.00
☐ Add ☐ Remove	2	CHECK 1060 ✓		02/05/2012	$ 50.00
☐ Add ☐ Remove	2	CHECK 1993 ✓		02/04/2012	$ 50.00
☐ Add ☐ Remove	3	CHECK 4036 ✓		03/12/2012	$ 25.00
☐ Add ☐ Remove	3	CHECK 1074 ✓		03/20/2012	$ 25.00
☐ Add ☐ Remove	3	CHECK 2966 ✓		03/24/2012	$ 25.00
☐ Add ☐ Remove	3	CHECK 7529 ✓		04/01/2012	$ 50.00
☐ Add ☐ Remove	3	CHECK 1268 ✓		04/01/2012	$ 15.00
☐ Add ☐ Remove	3	CHECK 2245 ✓		03/20/2012	$ 50.00
☐ Add ☐ Remove	3	CHECK 2821 ✓		03/16/2012	$ 50.00
☐ Add ☐ Remove	3	CHECK 2950 ✓		04/04/2012	$ 50.00
☐ Add ☐ Remove	3	CHECK 5293 ✓		04/09/2012	$ 50.00
☐ Add ☐ Remove	3	CHECK 1038 ✓		04/09/2012	$ 36.00
☐ Add ☐ Remove	3	CASH ✓		04/04/2012	$ 5.00
☐ Add ☐ Remove	3	CHECK 119 ✓		04/15/2012	$ 50.00
☐ Add ☐ Remove	3	CHECK 6429 ✓		04/14/2012	$ 25.00
☐ Add ☐ Remove	2	CHECK 1242 ✓		02/05/2012	$ 25.00
☐ Add ☐ Remove	2	CASH ✓		02/05/2012	$ 20.00
☐ Add ☐ Remove		~~CHECK~~			$ ~~25.00~~

Goodwin SEE p.6/CR1210 p.6

~~Rosetta Moore~~

4. Total only this Page	$ 756.00 ~~781.00~~ jm
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$

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CRO-1205 NC State Board of Elections April 2007

April 27

Aggregated Contributions from Individuals

Page 2 of 2

Amendment ☐ Yes ☑ No

Optional form used to report NC Contributions From Individuals of $50 or less

1. Committee Full Name (and Fund if applicable)	2. ID Number
RENEE 2012	1HDD9A

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
KINNARD ☐ Add ☐ Remove	2	CHECK 4440 ✓		02/05/2012	$ 50.00
☐ Add ☐ Remove	2	CHECK 4201 ✓			$ 50.00
☐ Add ☐ Remove	2	CASH ✓		02/05/2012 ~~04/19/2012~~	$ 20.00
☐ Add ☐ Remove	3	CASH ✓		04/19/2012	$ 20.00
☐ Add ☐ Remove	3	CHECK 1351 ✓		04/19/2012	$ 25.00
☐ Add ☐ Remove	3	CHECK 6603 ✓		04/19/2012	$ 25.00
☐ Add ☐ Remove	3	CHECK 5630 ✓		04/18/2012	$ 50.00
☐ Add ☐ Remove	3	PAYPAL 3E2389 4R426600T ✓		04/09/2012	$ 50.00
☐ Add ☐ Remove	3	PAYPAL 8MY ✓ 3202572169030		03/30 ~~04/09~~/2012	$ 50.00
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove				Received	$

4. Total only this Page	$ 340.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 1096.00

APR 25 2012

Orange Co. Bd. Of Elections

April 27

Contributions from Individuals

Pg 1 of 11 Amendment ☐ Yes ☑ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
RENEE 2012	1HDD9A

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
KATHLEEN MARY PONDER 2 WINNAWA WALK HILLSBOROUGH, NC 27278 919-732-8576	RETIRED	DUKE UNIVERSITY		$ ~~100.00~~ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 1241		03/17/2012	$ 100.00
☐					$
☐					$

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ELIZABETH WOODMAN 116 West Queen ST HILLSBOROUGH, NC 27278 919-732-9668	SELF-EMPLOYED	PUBLISHING		$ ~~70.00~~ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2	CHECK 2910		02/05/2012	$ 100.00
☐					$
☐					$

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MARGARETA. RAFFERTY 8227 ALLISON RD CEDAR GROVE, NC 27231 919-732-7040	RETIRED	NURSE		$ ~~60.00~~ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2	CHECK 3661		02/05/2012	$ 60.00
☑	2	CASH		02/05/2012	$ 5.00
☐					$

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4. Total only this Page	$ 235.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$

April 27

Contributions from Individuals

Pg 2 of 11 | Amendment ☐ Yes ☑ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
RENEE 2012	1HDD9A

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ELIZABETH H. RUSSELL 202 SAPONI DRIVE HILLSBOROUGH, NC 27278 919-644-0869	RETIRED	EDUCATOR		$ ~~200.00~~ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2	CHECK 2970		02/05/2012	$ 200.00
☐					$
☐					$

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
HENRY G ELKINS JR 750 WEAVER DAIRY RD, APT 199 CHAPEL HILL, NC 27514 919-918-3504	RETIRED			$ ~~50.00~~ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2	CHECK 1716		02/05/2012	$ 50.00
☐					$
☐					$

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MICHAEL W CARMICHAEL DBA PLANETARY 1818 MARTIN LUTHER KING BLVD SUITE 111 CHAPEL HILL, NC 27514	SELF-EMPLOYED CONSULTANT	SELF-EMPLOYED		$ ~~250.00~~ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 501		03/12/2012	$ ~~250.00~~ 250.00
☐					$
☐					$

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4. Total only this Page	$ 500.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$

April 27

Contributions from Individuals

Pg 3 of 11 Amendment ☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
RENEE 2012	1 H DD9A

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DEBBIE L. HILL 176 WEST KING ST HILLSBOROUGH, NC 27278-2544 919-643-2025	SOCIAL WORKER	SELF-EMPLOYED PSYCHOTHERAPIST		$ ~~250.00~~ 0 jn

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 1194		03/20/2012	$ 250.00
☐					$
☐					$

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
LETO COPELEY (COPELEY) 100 VIREO LANE HILLSBOROUGH, NC 27278 919-643-2676	ATTORNEY	SELF-EMPLOYED		$ ~~250.00~~ 0 jn

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 2159	~~CHECK~~ jn ~~2159~~ jn	03/25/2012	$ 250.00
☐					$
☐					$

3. Contributor Information ☒ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DEWEY B. SHEFFIELD PO BOX 68 WILSON, NC 27893	SELF-EMPLOYED	INSURANCE		$ ~~100.00~~ 0 jn

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 7438		03/23/2012	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 600.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$

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April 27

Contributions from Individuals

Pg 4 of 11 | Amendment ☐ Yes ☑ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
RENEE 2012	1HDD9A

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ALICE D. MOORE 392 ST. MARY'S ROAD HILLSBOROUGH, NC 27278 919-732-7540	N/A			$ ~~235.00~~ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK		04/01/2012	$ 235.00
☐					$
☐					$

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MARY ANN R. PETER 118 W TRYON ST HILLSBOROUGH, NC 27278 919-732-6073	~~[illegible]~~ HOMEMAKER			$ ~~100.00~~ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 7189		04/01/2012	$ 100.00
☐					$
☐					$

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JANE T GAEDE, MD PO BOX 747 HILLSBOROUGH, NC 27278-0747	M.D.	DUKE		$ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 2443		04/02/2012	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 435.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$

Received APR 25 2012

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Orange Co. Bd. Of Elections

Contributions from Individuals

Pg 5 of 11 Amendment ☐ Yes ☑ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
RENEE 2012	1HDD9A

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ELIZABETH MATHESON 173 W MARGARET LANE HILLSBOROUGH NC 27278-2547 919-732-4311	PHOTOGRAPHER	SELF-EMPLOYED		$ ~~125.00~~ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 9025		03/25/2012	$ 125.00
☐					$
☐					$

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ELIZABETH M HAYS 324 W King ST HILLSBOROUGH NC 27278-2420	~~N/A~~			$ ~~250.00~~ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 5585		03/12/2012	$ 250.00
☐					$
☐					$

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MAUREEN QUILLIGAN 301 S. CAMERON ST HILLSBOROUGH NC 27278	PROFESSOR	DUKE		$ ~~250.00~~ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 5727		04/01/2012	$ 250.00
☐					$
☐					$

4. Total only this Page	$ 625.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$

Received APR 25 2012 Orange Co. Bd. Of Elections

April 27

Contributions from Individuals

Pg 6 of 11 Amendment ☐ Yes ☑ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
RENEE 2012	1HDD9A

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CRAWFORD D GOODWIN PO BOX 957 HILLSBOROUGH NC 27278	PROFESSOR	DUKE ECONOMICS	$50 - CK 1993 Pg 1 — CRO 1205	$ ~~200.00~~ 50.00

SEE AGGREGATE P. 1

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 2016		04/01/2012	$ 150.00
☐					$
☐					$

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
PHILIP C COOLEY 424 STONE CURRIE DR HILLSBOROUGH NC 27278-9002 919-969-8478	~~RETIRED~~ SCIENTIST	RTI		$ ~~250.00~~ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 2619		04/01/2012	$ 250.00
☐					$
☐					$

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
SUSAN C. FRANKENBERG 131 E QUEEN ST HILLSBOROUGH NC 27278-2137	RETIRED			$ ~~125.00~~

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 5429		03/29/2012	$ 125.00
☐					$
☐					$

4. Total only this Page	$ 525.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$

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April 27

Contributions from Individuals

Pg 7 of 11 Amendment ☐ Yes ☑ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
RENEE 2012	1H DD9A

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
GAIL H. COOLEY 424 STONE CURRIE DR HILLSBOROUGH NC 27278-9002 919-969-8478	RETIRED	H.R.		$ ~~250.00~~ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 7940		04/01/2012	$ 250.00
☐					$
☐					$

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DOUGLAS A. JOHNSTON 120 FOREST RD RALEIGH, NC 27605	ATTORNEY	RETIRED - LAW		$ ~~100.00~~ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 1036		04/01/2012	$ 100.00
☐					$
☐					$

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ELIZABETH RUSSELL 202 SAPONI DR HILLSBOROUGH NC 27278 919-644-0869	RETIRED EDUCATOR		CRO-1210 PAGE 2 CHECK 2970 $200.00	$ ~~200.00~~ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 3047		04/01/2012	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 450.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$

Received APR 25 2012 Orange Co. Bd. Of Elections

April 27

Contributions from Individuals

Pg 8 of 11 Amendment ☐ Yes ☑ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
RENEE 2012	1H DD9A

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DAVID LYBROOK NEAL 323 N QUEEN ST HILLSBOROUGH NC 27278	ATTORNEY	SELF-EMPLOYED		$ ~~250.00~~ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 3039		04/14/2012	$ 250.00
☐					$
☐					$

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
FLORENCE F. PEACOCK 306 N BOUNDARY ST CHAPEL HILL NC 27514	RETIRED			$ ~~300.00~~ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2	CHECK 5433		02/13/2012	$ 300.00
☐					$
☐					$

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
TOM O'DWYER 105 BOULDER LANE CHAPEL HILL, NC 27514	BUILDER	SELF-EMPLOYED		$ ~~100.00~~ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2	CHECK		02/06/2012	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 650.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$

Received APR 25 2012 Orange Co. Bd. Of Elections

April 27

Contributions from Individuals

Pg 9 of 11 Amendment ☐ Yes ☑ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
RENEE 2012	1HDD9A

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ELIZABETH GILSON AARON ~~[illegible]~~ ~~LATIMER~~ fn 724 LATIMER ST HILLSBOROUGH, NC 27278 919-619-0886	EXEC. DIRECTOR	HEALTH CENTER		$ ~~108.00~~ 0 fn

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 1247		03/14/2012	$ 108.00
☐					$
☐					$

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
BONNICA A HAUSER 4301 SUGAR RIDGE ROAD HILLSBOROUGH NC 27278 919-732-9316	RETIRED			$ ~~[illegible]~~ 20.00 fn

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2	CHECK 2586		02/05/2012	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
SUE JACKSON 221 IRONWOODS DR CHAPEL HILL NC 404-310-6163	COMPLIANCE CONSULTANT	SELF	supg 1 CRO 1510	$ ~~[illegible]~~ 0 fn

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		IN KIND LILHAN'S LIST	TICKET	03/21/2012	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 308.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$

Received
APR 25 2012
Orange Co. Bd. Of Elections

April 27

Contributions from Individuals

Pg 10 of 11 Amendment ☐ Yes ☑ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
RENEE 2012	1HDD9A

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JANIE C MORRIS PO BOX 1182 HILLSBOROUGH NC 27278 919-732-7125	RETIRED	DUKE LIBRARIAN		$ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	2	CHECK 940		02/05/2012	$ 70.00
☐					$
☐					$

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JACK P. SANDERS 123 SIDNEY GREEN ST CHAPEL HILL, NC 27516-9038 919-967-5155	RETIRED			$ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 2394		04/17/2012	$ 100.00
☐					$
☐					$

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DR SAM LASRIS 395 S. MAIN ST DANVILLE, VA 24541-2925 919 732-7362	~~MED~~ DDS	SELF-Employed		$ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 3853		04/18/2012	$ 100.00
☐					$
☐					$

4. Total only this Page $ 270.00

5. Total of ALL CRO-1210 Pages $

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Received APR 25 2012 Orange Co. Bd. Of Elections

April 27

Contributions from Individuals

Pg 11 of 11 Amendment ☐ Yes ☑ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
RENEE 2012	11HDD9A

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
LARRY L. WRIGHT 70 20 CAVINESS JORDAN RD CEDAR GROVE, NC 27231 919-732-7362	RETIRED			$ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	CHECK 1349		04/17/2012	$ 100.00
☐					$
☐					$

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JANET FLOWERS 2813 Beckett's Ridge Hillsborough, NC 27278 919-245-2525	RETIRED	UNC		$ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	PAY PAL 5092 253289621008A		03/17/2012	$ 75.00
☐					$
☐					$

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JACK RAMSEY 4131 RED TAIL RUN EFLAND, NC 27243 919-563-0359	RETIRED			$ 0

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	3	PAYPAL 4522G 7E536480437049		04/02/2012	$100.00
☐					$
☐					$

4. Total only this Page	$ 275.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 4873.00

Received APR 25 2012 Orange Co. Bd. Of Elections

April 27

Disbursements

Pg 1 of 4 Amendment ☐ Yes ☑ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
RENEE 2012	1HDD9A

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

a. Full Name, Mailing Address & Phone (include city, state, & zip): THE DEPOT, 246 South NASH ST, HILLSBOROUGH NC 27278, 919-643-3768

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☑ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ ~~80.96~~ 0 pm

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
2	CHECK 1001	C	02/05/2012	$ 80.96	MEETING REFRESHMENTS
				$	

4. Payee Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): Orange County Board of Elections, 208 S. CAMERON ST, HILLSBOROUGH NC 27278, 919-245-2350

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☑ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ ~~140.00~~ 0 pm

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
2	CHECK	~~E~~ 0 pm	02/03/2012	$ 140.00	FILING FEE
				$	RECEIPT 026061

4. Payee Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): THE NEWS of ORange County, 109 E King ST, HILLSBOROUGH, NC 27278, 919-732-2171

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☑ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ ~~200.70~~ 0 pm

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
3	CHECK 1506	A	04/13/2012	$ 200.70	AD PRINTING
				$	

5. Total only this Page $ 421.66

6. Total of ALL CRO-1310 Pages $

(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)**

Received APR 25 2012 Orange Co. Bd. Of Elections

due April 27

Disbursements

Amendment ☐ Yes ☑ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
RENEE 2012	1HDD9A

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

a. Full Name, Mailing Address & Phone (include city, state, & zip): HILLSBOROUGH MAIN P.O. (USPS) HILLSBOROUGH NC 27278-0099 800-275-8777

b. Coordinated Committee Name:

c. Level Registered (Specify): ☑ Federal ☑ County: ☐ State ☐ Municipality:

d. Comments:

e. Election Sum to Date: $ ~~[illegible]~~ 0

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
3	CHECK 1507	I	04/13/2012	$18.00	POSTAGE
				$	

4. Payee Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): A BETTER IMAGE PRINTING 1709 LEGION RD, SUITE 100 CHAPEL HILL 27517 919-967-0319

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☑ County: ☐ State ☐ Municipality:

d. Comments: INVOICE 38084

e. Election Sum to Date: $ ~~[illegible]~~ 0

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
3	CHECK 1501	B	03/21/2012	$38.75	50 FLYERS
				$	

4. Payee Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip): GEPHART MARKETING SOLUTIONS, LLC PO BOX 669, 1401 POPLAR LANE HILLSBOROUGH, NC 27278 919-732-6464

b. Coordinated Committee Name:

c. Level Registered (Specify): ☐ Federal ☑ County: ☐ State ☐ Municipality:

d. Comments: SIGNAGE - INVOICE 697

e. Election Sum to Date: $ ~~[illegible]~~ 0

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
3	CHECK 1502	B	03/23/2012	$1706.79	SIGNAGE
				$	

5. Total only this Page $ 1763.54

6. Total of ALL CRO-1310 Pages $

(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)**

due April 27

Received APR 25 2012 Orange Co. Bd. Of Elections

Disbursements

Amendment ☐ Yes ☑ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
RENEE 2012	1H DD 9A

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

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
LATTA DISTRIBUTING COMPANY, INC 7671 CABER RD, PO BOX 172 BROWN SUMMIT NC 27214-0172 336-656-3481		☐ Federal ☑ County: ☐ State ☐ Municipality:	INVOICE 1217	$ ~~336.29~~ 0

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
3	CHECK 1505	B	04/02/2012	$ 336.29	FLYERS +
				$	BUSINESS CARDS

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
A BETTER IMAGE PRINTING (see pg 2)		☐ Federal ☑ County: ☐ State ☐ Municipality:	SEE pg 2 FOR PAYEE INFORMATION INVOICE 38211	$ ~~64.32~~ 38.75

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
3	CHECK 1503	B	04/09/2012	$ 25.57	FUNDRAISING LETTER-
				$	PRINTING

4. Payee Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
NC DEMOCRATIC PARTY 220 HILLSBOROUGH ST RALEIGH NC 27603 919-821-2777 x218 ATT: JAY PARMLEY		☐ Federal ☑ County: ☑ State ☐ Municipality:		$ 150.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
3	CHECK 1504	O	04/11/2012	$ 150.00	VOTEBUILDER
				$	

5. Total only this Page $ 511.86

6. Total of ALL CRO-1310 Pages $

(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)**

Received APR 25 2012

due April 27

Orange Co. Bd. Of Elections

Disbursements

Pg 4 of 4 Amendment ☐ Yes ☑ No

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

1. Committee Full Name (and Fund if applicable)	2. ID Number
RENEE 2012	1HDD9A

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

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
RENEE PRICE PO BOX 1486 HILLSBOROUGH, NC 27278 919-593-1904		☐ Federal ☑ County: ☐ State ☐ Municipality:	GAS 227.08 OFC Supplies 10.66	$ ~~237.74~~ 0

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	CHECK ~~[illegible]~~ 1508	O	04/15/2012	$ 237.74	REIMBURSEMENT -
				$	EXPENSES

4. Payee Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
Independent PO Box 2690 Durham, NC 27715 919-286-1972		☐ Federal ☑ County: ☐ State ☐ Municipality:	Invoice 92690	$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
3	CHECK 1509	A	04/14/2012	$ 207.00	DISPLAY AD
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
PAYPAL		☐ Federal ☑ County: ☐ State ☐ Municipality:		$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
3	DEBITED FROM DEPOSITS	C	04/02/2012 04/13/2012	$ 7.25	TRANSACTION FEES
				$	

5. Total only this Page	$ 451.99
6. Total of ALL CRO-1310 Pages *(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)*	$ 3149.05

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)**

due April 27

Received APR 25 2012 Orange Co. Bd. Of Elections

In-Kind Contributions

Pg 1 of 1 Amendment ☐ Yes ☑ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)	2. ID Number
RENEE 2012	1HDD9A

3. Contributor Information ☑ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
SUE JACKSON 221 IRONWOOD Drive CHAPEL HILL, NC 27516 404-310-6163	☑ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	See pg 9 CRO 1210
		d. Election Sum to Date: $ 100.00

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
TICKET TO LILLIAN'S LIST LUNCHEON	03/12/2012	$ 100.00
Wednesday, March 12, 2012		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
	☐ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
		d. Election Sum to Date: $

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		$
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
	☐ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
		d. Election Sum to Date: $

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
		$
		$
		$

Received APR 25 2012 Orange Co. Bd. Of Elections

4. Total only this Page	$ 100.00
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 100.00

April 27