

# Disclosure Report Cover

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

IN-PERSON

Amendment

☒ Yes

☒ No

APR 26 2012

|                                                                                                                                                                                                                                                             |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|
| <b>1. Committee Information</b>                                                                                                                                                                                                                             |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                |
| <b>a. Full Name</b>                                                                                                                                                                                                                                         |                                        | <b>c. ID Number</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                |
| Committee To Reelect Ellen Reckhow County Commissioner                                                                                                                                                                                                      |                                        | DURHAM BOE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                |
| <b>b. Mailing Address (include City, State and Zip Code)</b>                                                                                                                                                                                                |                                        | <b>d. Date Filed</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                |
| 5309 Ventura Drive<br>Durham NC 27712                                                                                                                                                                                                                       |                                        | 04-26-2012                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                |
|                                                                                                                                                                                                                                                             |                                        | <b>e. Phone Number</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                |
|                                                                                                                                                                                                                                                             |                                        | 919-471-9625                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                |
| <b>2. Report Year</b>                                                                                                                                                                                                                                       | <b>3. Period Start Date (mm/dd/yy)</b> | <b>4. Period End Date (mm/dd/yy)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>5. Treasurer Full Name</b>  |
| 2012                                                                                                                                                                                                                                                        | 01/01/2012                             | 04/21/12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | George M Kolasa                |
| <b>6. Type of Committee (Check One)</b>                                                                                                                                                                                                                     |                                        | <b>9. Type of Report (check only one type of report from one category)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                |
| <input checked="" type="checkbox"/> Candidate Campaign<br><input type="checkbox"/> Joint Fundraiser<br><input type="checkbox"/> Referendum<br><input type="checkbox"/> Party<br><input type="checkbox"/> PAC<br><input type="checkbox"/> Legal Expense Fund |                                        | <b>Municipal</b><br><input type="checkbox"/> Organizational<br><input type="checkbox"/> Thirty-five day<br><input type="checkbox"/> Pre-primary<br><input type="checkbox"/> Pre-election<br><input type="checkbox"/> Pre-runoff<br><input type="checkbox"/> Semi-annual<br><input type="checkbox"/> Mid Year<br><input type="checkbox"/> Year End<br><input type="checkbox"/> Final<br><input type="checkbox"/> Special<br><b>State/County</b><br><input type="checkbox"/> Organizational<br><input type="checkbox"/> Quarterly<br><input checked="" type="checkbox"/> First<br><input type="checkbox"/> Second<br><input type="checkbox"/> Third<br><input type="checkbox"/> Fourth<br><input type="checkbox"/> Semi-annual<br><input type="checkbox"/> Mid Year<br><input type="checkbox"/> Year End<br><input type="checkbox"/> Final<br><input type="checkbox"/> Special<br><b>Referendum</b><br><input type="checkbox"/> Organizational<br><input type="checkbox"/> Pre-referendum<br><input type="checkbox"/> Final<br><input type="checkbox"/> Supplemental Final<br><input type="checkbox"/> Annual<br><input type="checkbox"/> Special |                                |
| <b>7. Type of Fund (if applicable, check one)</b>                                                                                                                                                                                                           |                                        | <b>10. Special Report Name</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                |
| <input type="checkbox"/> "Booster Fund"<br><input type="checkbox"/> Building Fund<br><input type="checkbox"/> Presidential Election Year Candidates Fund<br><input type="checkbox"/> NC Public Campaign Financing Fund<br><input type="checkbox"/> Other:   |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                |
| <b>8. Number of Fundraisers this Report</b>                                                                                                                                                                                                                 |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                |
|                                                                                                                                                                                                                                                             |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                |
| <b>11. Account Information</b>                                                                                                                                                                                                                              |                                        | <b>11. Account Information</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                |
| <b>a. Financial Institution Full Name</b>                                                                                                                                                                                                                   |                                        | <b>a. Financial Institution Full Name</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                |
| Wells Fargo Ba                                                                                                                                                                                                                                              |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                |
| <b>b. Purpose</b>                                                                                                                                                                                                                                           | <b>c. Account Code</b>                 | <b>b. Purpose</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>c. Account Code</b>         |
| Campaign contributi expenses                                                                                                                                                                                                                                | RB                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                |
|                                                                                                                                                                                                                                                             | <b>d. Period Begin Balance</b>         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>d. Period Begin Balance</b> |
|                                                                                                                                                                                                                                                             | \$ 2,955.68                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | \$                             |

## CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 if 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 according to N.C.G.S. 163-278.7(f).

George Kolasa

Printed Name of Signer

Signature of Appointed Treasurer

04-26-2012

Date

## FOR OFFICE USE ONLY

Date Received:

4/26/12

Employee:

mp

Date Postmarked:

Employee:

Date Scanned:

Employee:

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.

# 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 Reelect Ellen Reckhow                                           | 1 <sup>st</sup> Quarter     |                           |
| Start of Election Cycle: January 1, 2012                                     | Total this Reporting Period | Total this Election Cycle |
| 4) Cash on Hand at Start                                                     | \$ 2,955.68                 | \$ 2,955.68               |
| 5) Aggregated Contributions from Individuals (CRO-1205)                      | \$ 6,830.00                 | \$ 6,830.00               |
| 6) Contributions from Individuals (CRO-1210)                                 | \$ 7,450.00                 | \$ 7,450.00               |
| 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)                           | \$                          | \$                        |
| 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c and 11d)      | \$ 14,280.00                | \$ 14,280.00              |
| 13) Disbursements                                                            |                             |                           |
| 13a) Operating Expenditures (CRO-1310)                                       | \$ 10,263.45                | \$ 10,263.45              |
| 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)                                         | \$                          | \$                        |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)          | \$ 10,263.45                | \$ 10,263.45              |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) | \$ 6,972.23                 | \$ 6,972.23               |
| 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-2200)                                    | \$                          | \$                        |
| 27) Contributions to be refunded (CRO-1215)                                  | \$                          | \$                        |

☐ **Yes**    ☒ **No**

| 1. Committee Full Name (and Fund if applicable)           | 2. ID Number |
|-----------------------------------------------------------|--------------|
| Committee To Reelect Ellen Reckhow<br>County Commissioner |              |

| a. Amend                            |        | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount |
|-------------------------------------|--------|-----------------|--------------------|------------------------|----------------------|-----------|
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/21/2012           | \$ 10.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/21/2012           | \$ 25.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/21/2012           | \$ 35.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/21/2012           | \$ 35.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/21/2012           | \$ 50.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/21/2012           | \$ 50.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/21/2012           | \$ 50.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/21/2012           | \$ 50.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/21/2012           | \$ 50.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/21/2012           | \$ 50.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/21/2012           | \$ 50.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/21/2012           | \$ 50.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/21/2012           | \$ 50.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/21/2012           | \$ 50.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/22/2012           | \$ 50.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/22/2012           | \$ 50.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/22/2012           | \$ 35.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/22/2012           | \$ 50.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/22/2012           | \$ 50.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/22/2012           | \$ 50.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> | Add    | RB              | Check              |                        | 02/22/2012           | \$ 25.00  |
| <input type="checkbox"/>            | Remove |                 |                    |                        |                      |           |

|                                |  |           |
|--------------------------------|--|-----------|
| <b>4. Total only this Page</b> |  | \$ 965.00 |
|--------------------------------|--|-----------|

|                                                                 |             |
|-----------------------------------------------------------------|-------------|
| 5. Total of ALL CRO-1205 Pages                                  | \$ 6,830.00 |
| (This line must be on line 5 of Detailed Summary Page CRO-1100) | \$ 6,830.00 |

# Aggregated Contributions from Individuals

Page

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Amendment

☐

Yes

☒

No

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

|                                                                        |  |                        |                           |                               |                             |                  |
|------------------------------------------------------------------------|--|------------------------|---------------------------|-------------------------------|-----------------------------|------------------|
| <b>1. Committee Full Name (and Fund if applicable)</b>                 |  |                        |                           |                               | <b>2. ID Number</b>         |                  |
| Committee To Reelect Ellen Reckhow<br>County Commissioner              |  |                        |                           |                               |                             |                  |
| <b>3. Contributor Information</b>                                      |  |                        |                           |                               |                             |                  |
| <b>a. Amend</b>                                                        |  | <b>b. Account Code</b> | <b>c. Form of Payment</b> | <b>d. In-Kind Description</b> | <b>e. Date (mm/dd/yyyy)</b> | <b>f. Amount</b> |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/23/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/23/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/23/2012                  | \$ 20.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/23/2012                  | \$ 35.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/23/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/23/2012                  | \$ 25.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/23/2012                  | \$ 35.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/23/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/23/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/23/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/23/2012                  | \$ 35.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/23/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/23/2012                  | \$ 35.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/23/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/23/2012                  | \$ 25.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/23/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/23/2012                  | \$ 35.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/23/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/23/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/24/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/24/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <b>4. Total only this Page</b>                                         |  |                        |                           |                               | \$ 930.00                   |                  |
| <b>5. Total of ALL CRO-1205 Pages</b>                                  |  |                        |                           |                               | \$                          |                  |
| <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> |  |                        |                           |                               |                             |                  |

# Aggregated Contributions from Individuals

Page

3 of 8

Amendment

☐

Yes

☒

No

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

|                                                           |                     |
|-----------------------------------------------------------|---------------------|
| <b>1. Committee Full Name (and Fund if applicable)</b>    | <b>2. ID Number</b> |
| Committee To Reelect Ellen Reckhow<br>County Commissioner |                     |

## 3. Contributor Information

| a. Amend                                | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount |
|-----------------------------------------|-----------------|--------------------|------------------------|----------------------|-----------|
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/24/2012           | \$ 25.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/24/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/24/2012           | \$ 10.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/25/2012           | \$ 20.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/25/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/25/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/25/2012           | \$ 35.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/25/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/25/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/27/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/27/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/27/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/29/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/29/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/29/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/29/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/29/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/29/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/29/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/29/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/29/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 02/29/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |

## 4. Total only this Page

\$ 990.00

## 5. Total of ALL CRO-1205 Pages

\$

(This line must be on line 5 of Detailed Summary Page CRO-1100)

# Aggregated Contributions from Individuals

Page

4 of 8

Amendment

☐ Yes ☒ No

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

|                                                                        |  |                        |                           |                               |                             |                  |
|------------------------------------------------------------------------|--|------------------------|---------------------------|-------------------------------|-----------------------------|------------------|
| <b>1. Committee Full Name (and Fund if applicable)</b>                 |  |                        |                           | <b>2. ID Number</b>           |                             |                  |
| Committee To Reelect Ellen Reckhow<br>County Commissioner              |  |                        |                           |                               |                             |                  |
| <b>3. Contributor Information</b>                                      |  |                        |                           |                               |                             |                  |
| <b>a. Amend</b>                                                        |  | <b>b. Account Code</b> | <b>c. Form of Payment</b> | <b>d. In-Kind Description</b> | <b>e. Date (mm/dd/yyyy)</b> | <b>f. Amount</b> |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/29/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/29/2012                  | \$ 35.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/29/2012                  | \$ 35.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 02/29/2012                  | \$ 35.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 03/02/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 03/02/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 03/02/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 03/02/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 03/03/2012                  | \$ 25.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 03/03/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 03/03/2012                  | \$ 35.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 03/03/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 03/03/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 03/03/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 03/03/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 03/05/2012                  | \$ 20.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 03/05/2012                  | \$ 35.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 03/05/2012                  | \$ 35.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 03/06/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/> Add                                |  | RB                     | Check                     |                               | 03/06/2012                  | \$ 50.00         |
| <input type="checkbox"/> Remove                                        |  |                        |                           |                               |                             |                  |
| <b>4. Total only this Page</b>                                         |  |                        |                           |                               | \$ 955.00                   |                  |
| <b>5. Total of ALL CRO-1205 Pages</b>                                  |  |                        |                           |                               | \$ .                        |                  |
| <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i> |  |                        |                           |                               |                             |                  |

# Aggregated Contributions from Individuals

Page

5 of 8

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         |           |
|-----------------------------------------------------------------|-----------------|--------------------|------------------------|----------------------|-----------|
| Committee To Reelect Ellen Reckhow<br>County Commissioner       |                 |                    |                        |                      |           |
| 3. Contributor Information                                      |                 |                    |                        |                      |           |
| a. Amend                                                        | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/06/2012           | \$ 35.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/07/2012           | \$ 25.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/07/2012           | \$ 35.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/07/2012           | \$ 25.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/07/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/07/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/07/2012           | \$ 25.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/07/2012           | \$ 25.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/09/2012           | \$ 25.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/09/2012           | \$ 35.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/09/2012           | \$ 35.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/09/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/09/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/10/2012           | \$ 20.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/10/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/10/2012           | \$ 35.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/10/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/10/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/10/2012           | \$ 35.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/10/2012           | \$ 25.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/14/2012           | \$ 25.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add                         | RB              | Check              |                        | 03/14/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove                                 |                 |                    |                        |                      |           |
| 4. Total only this Page                                         |                 |                    |                        |                      | \$ 805.00 |
| 5. Total of ALL CRO-1205 Pages                                  |                 |                    |                        |                      | \$        |
| (This line must be on line 5 of Detailed Summary Page CRO-1100) |                 |                    |                        |                      |           |

# Aggregated Contributions from Individuals

Page

6 of 8

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 |
|-----------------------------------------------------------|--------------|
| Committee To Reelect Ellen Reckhow<br>County Commissioner |              |

## 3. Contributor Information

| a. Amend                                | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount |
|-----------------------------------------|-----------------|--------------------|------------------------|----------------------|-----------|
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/19/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/19/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/19/2012           | \$ 40.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/20/2012           | \$ 30.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/22/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/22/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/22/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/22/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/22/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/22/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/22/2012           | \$ 35.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/23/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/23/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/23/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/24/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/24/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/24/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/24/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/27/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/30/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/30/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |
| <input checked="" type="checkbox"/> Add | RB              | Check              |                        | 03/30/2012           | \$ 50.00  |
| <input type="checkbox"/> Remove         |                 |                    |                        |                      |           |

## 4. Total only this Page

\$ 1055.00

## 5. Total of ALL CRO-1205 Pages

\$

(This line must be on line 5 of Detailed Summary Page CRO-1100)



# Aggregated Contributions from Individuals

Page

2 of 8

Amendment

☐ Yes ☒ No

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

|                                                                 |        |                        |                           |                               |                             |                  |
|-----------------------------------------------------------------|--------|------------------------|---------------------------|-------------------------------|-----------------------------|------------------|
| <b>1. Committee Full Name (and Fund if applicable)</b>          |        |                        |                           |                               | <b>2. ID Number</b>         |                  |
| Committee To Reelect Ellen Reckhow<br>County Commissioner       |        |                        |                           |                               |                             |                  |
| <b>3. Contributor Information</b>                               |        |                        |                           |                               |                             |                  |
| <b>a. Amend</b>                                                 |        | <b>b. Account Code</b> | <b>c. Form of Payment</b> | <b>d. In-Kind Description</b> | <b>e. Date (mm/dd/yyyy)</b> | <b>f. Amount</b> |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/06/2012                  | \$ 50.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/10/2012                  | \$ 35.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/10/2012                  | \$ 50.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/10/2012                  | \$ 50.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/12/2012                  | \$ 35.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/12/2012                  | \$ 35.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/12/2012                  | \$ 50.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/12/2012                  | \$ 50.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/12/2012                  | \$ 50.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/13/2012                  | \$ 50.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/13/2012                  | \$ 50.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/13/2012                  | \$ 30.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/17/2012                  | \$ 50.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/17/2012                  | \$ 50.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/18/2012                  | \$ 25.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/18/2012                  | \$ 35.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/18/2012                  | \$ 50.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/19/2012                  | \$ 50.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/19/2012                  | \$ 50.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/20/2012                  | \$ 50.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/20/2012                  | \$ 50.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <input checked="" type="checkbox"/>                             | Add    | RB                     | Check                     |                               | 04/13/2012                  | \$ 50.00         |
| <input type="checkbox"/>                                        | Remove |                        |                           |                               |                             |                  |
| <b>4. Total only this Page</b>                                  |        |                        |                           |                               | \$ 995.00                   |                  |
| <b>5. Total of ALL CRO-1205 Pages</b>                           |        |                        |                           |                               | \$                          |                  |
| (This line must be on line 5 of Detailed Summary Page CRO-1100) |        |                        |                           |                               |                             |                  |

### Aggregated Contributions from Individuals

8

of

8

4

**Yes**



**No**

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

| <b>1. Committee Full Name (and Fund if applicable)</b>          |        |                 |                    |                        |                      | <b>2. ID Number</b> |
|-----------------------------------------------------------------|--------|-----------------|--------------------|------------------------|----------------------|---------------------|
| Committee To Reelect Ellen Reckhow<br>County Commissioner       |        |                 |                    |                        |                      |                     |
| <b>3. Contributor Information</b>                               |        |                 |                    |                        |                      |                     |
| a. Amend                                                        |        | b. Account Code | c. Form of Payment | d. In-Kind Description | e. Date (mm/dd/yyyy) | f. Amount           |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Check              |                        | 03/23/2012           | \$ 35.00            |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Check              |                        | 02/26/2012           | \$ 50.00            |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Check              |                        | 02/26/2012           | \$ 50.00            |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <input checked="" type="checkbox"/>                             | Add    | RB              | Checks             |                        |                      | \$                  |
| <input type="checkbox"/>                                        | Remove |                 |                    |                        |                      |                     |
| <b>4. Total only this Page</b>                                  |        |                 |                    |                        |                      | \$ 135.00           |
| <b>5. Total of ALL CRO-1205 Pages</b>                           |        |                 |                    |                        |                      | \$                  |
| (This line must be on line 5 of Detailed Summary Page CRO-1100) |        |                 |                    |                        |                      | \$                  |

# Contributions from Individuals

Amendment Pg 1 of 17 ☐ 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 Reelect Ellen Reckhow County Commissioner                                                                                                         |                        |                           |                                                       |                             |                     |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                      |                        |                           |                                                       |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Joe Morgan<br>2601 Vintage Ct<br>Durham NC 27712<br>919-479-8318       |                        |                           | <b>b. Job Title/Profession</b><br>Retired             |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                |                        |                           | <b>c. Employer's Name/Specific Field</b>              |                             |                     |  |
|                                                                                                                                                                |                        |                           |                                                       |                             |                     |  |
|                                                                                                                                                                |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                       | RB                     | Check                     |                                                       | 02/23/2012                  | \$ 250.00           |  |
| <input type="checkbox"/>                                                                                                                                       |                        |                           |                                                       |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                       |                        |                           |                                                       |                             | \$                  |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                      |                        |                           |                                                       |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Donald Pepper<br>2703 Sevier<br>Durham, NC 27705<br>919-489-9767       |                        |                           | <b>b. Job Title/Profession</b><br>Professor           |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Education |                             |                     |  |
|                                                                                                                                                                |                        |                           |                                                       |                             |                     |  |
|                                                                                                                                                                |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                       | RB                     | Check                     |                                                       | 02/20/2012                  | \$ 100.00           |  |
| <input type="checkbox"/>                                                                                                                                       |                        |                           |                                                       |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                       |                        |                           |                                                       |                             | \$                  |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                      |                        |                           |                                                       |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Barker French<br>1005 Monmouth Ave<br>Durham, NC 27701<br>919-688-0997 |                        |                           | <b>b. Job Title/Profession</b><br>Retired             |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                |                        |                           | <b>c. Employer's Name/Specific Field</b>              |                             |                     |  |
|                                                                                                                                                                |                        |                           |                                                       |                             |                     |  |
|                                                                                                                                                                |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                       | RB                     | Check                     |                                                       | 02/23/2012                  | \$ 200.00           |  |
| <input type="checkbox"/>                                                                                                                                       |                        |                           |                                                       |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                       |                        |                           |                                                       |                             | \$                  |  |
| <b>4. Total only this Page</b>                                                                                                                                 |                        |                           |                                                       |                             | \$ 550.00           |  |
| <b>5. Total of ALL CRO-1210 Pages</b><br>(This line must be on line 6 of Detailed Summary Page CRO-1100)                                                       |                        |                           |                                                       |                             | \$ 7,450.00         |  |

# Contributions from Individuals

Pg 2 of 1 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 Reelect Ellen Reckhow County Commissioner                                                    |                        |                           |                                          |                             |                                |                  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |                        |                           |                                          |                             |                                |                  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                          |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |                  |
| Tommy Hunt<br>1115 Donphil Rd<br>Durham NC 27712<br>919-620-7812                                          |                        |                           | Retired                                  |                             |                                |                  |
|                                                                                                           |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |                  |
|                                                                                                           |                        |                           |                                          |                             |                                |                  |
|                                                                                                           |                        |                           |                                          |                             | <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"/>                                                                                  | RB                     | Check                     |                                          | 02/22/2012                  |                                | \$ 100.00        |
| <input type="checkbox"/>                                                                                  |                        |                           |                                          |                             |                                | \$               |
| <input type="checkbox"/>                                                                                  |                        |                           |                                          |                             |                                | \$               |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |                        |                           |                                          |                             |                                |                  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                          |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |                  |
| David Beischer<br>2904 Trial Wood Dr<br>Durham, NC 27705<br>919-382-2848                                  |                        |                           | Real Estate                              |                             |                                |                  |
|                                                                                                           |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |                  |
|                                                                                                           |                        |                           | GardenView Realty                        |                             |                                |                  |
|                                                                                                           |                        |                           |                                          |                             | <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"/>                                                                                  | RB                     | Check                     |                                          | 02/23/2012                  |                                | \$ 250.00        |
| <input type="checkbox"/>                                                                                  |                        |                           |                                          |                             |                                | \$               |
| <input type="checkbox"/>                                                                                  |                        |                           |                                          |                             |                                | \$               |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |                        |                           |                                          |                             |                                |                  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                          |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |                  |
| Charles Wilson<br>25 Pennington Pl<br>Durham, NC 27707<br>919-382-2535                                    |                        |                           | General Contractor                       |                             |                                |                  |
|                                                                                                           |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |                  |
|                                                                                                           |                        |                           | C.T. Wilson Construction                 |                             |                                |                  |
|                                                                                                           |                        |                           |                                          |                             | <b>e. Election Sum to Date</b> |                  |
|                                                                                                           |                        |                           |                                          |                             | \$ 300.00                      |                  |
| <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"/>                                                                                  | RB                     | Check                     |                                          | 02/24/2012                  |                                | \$ 300.00        |
| <input type="checkbox"/>                                                                                  |                        |                           |                                          |                             |                                | \$               |
| <input type="checkbox"/>                                                                                  |                        |                           |                                          |                             |                                | \$               |
| <b>4. Total only this Page</b>                                                                            |                        |                           |                                          |                             | \$ 650.00                      |                  |
| <b>5. Total of ALL CRO-1210 Pages</b><br>(This line must be on line 6 of Detailed Summary Page CRO-1100)  |                        |                           |                                          |                             | \$                             |                  |

# Contributions from Individuals

Amendment  
Pg 3 of 17 ☐ 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 Reelect Ellen Reckhow County Commissioner                                                                                                         |                        |                           |                                                         |                             |                     |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                      |                        |                           |                                                         |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>George A Brine<br>6505 Hunters Lane<br>Durham NC 27712<br>919-544-3212 |                        |                           | <b>b. Job Title/Profession</b><br>Retired               |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                |                        |                           | <b>c. Employer's Name/Specific Field</b>                |                             |                     |  |
|                                                                                                                                                                |                        |                           |                                                         |                             |                     |  |
|                                                                                                                                                                |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                       | RB                     | Check                     |                                                         | 02/22/2012                  | \$ 100.00           |  |
| <input type="checkbox"/>                                                                                                                                       |                        |                           |                                                         |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                       |                        |                           |                                                         |                             | \$                  |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                      |                        |                           |                                                         |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Robert Gutman<br>310 Watts St<br>Durham, NC 27701<br>919-667-1306      |                        |                           | <b>b. Job Title/Profession</b><br>Physician             |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Health Care |                             |                     |  |
|                                                                                                                                                                |                        |                           |                                                         |                             |                     |  |
|                                                                                                                                                                |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                       | RB                     | Check                     |                                                         | 02/21/2012                  | \$ 100.00           |  |
| <input type="checkbox"/>                                                                                                                                       |                        |                           |                                                         |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                       |                        |                           |                                                         |                             | \$                  |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                      |                        |                           |                                                         |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Leann Nelson<br>2404 Indian Trail<br>Durham, NC 27705<br>919-286-4898  |                        |                           | <b>b. Job Title/Profession</b><br>Physician             |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Health care |                             |                     |  |
|                                                                                                                                                                |                        |                           |                                                         |                             |                     |  |
|                                                                                                                                                                |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                       | RB                     | Check                     |                                                         | 02/21/2012                  | \$ 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><br>(This line must be on line 6 of Detailed Summary Page CRO-1100)                                                       |                        |                           |                                                         |                             | \$                  |  |

# Contributions from Individuals

Amendment  
Pg 4 of 17 ☐ 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 Reelect Ellen Reckhow County Commissioner                                                                                                                  |                        |                           |                                                         |                             |                     |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                               |                        |                           |                                                         |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Patricia Robertson<br>2701 Pickett, Apt 4049<br>Durham NC 27705<br>919-489-1475 |                        |                           | <b>b. Job Title/Profession</b><br>Retired               |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                         |                        |                           | <b>c. Employer's Name/Specific Field</b>                |                             |                     |  |
|                                                                                                                                                                         |                        |                           |                                                         |                             |                     |  |
|                                                                                                                                                                         |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                                | RB                     | Check                     |                                                         | 02/23/2012                  | \$ 100.00           |  |
| <input type="checkbox"/>                                                                                                                                                |                        |                           |                                                         |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                                |                        |                           |                                                         |                             | \$                  |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                               |                        |                           |                                                         |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Dorothy Bevan<br>10 Boardman Ct<br>Durham, NC 27705                             |                        |                           | <b>b. Job Title/Profession</b><br>Retired               |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                         |                        |                           | <b>c. Employer's Name/Specific Field</b>                |                             |                     |  |
|                                                                                                                                                                         |                        |                           |                                                         |                             |                     |  |
|                                                                                                                                                                         |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                                | RB                     | Check                     |                                                         | 02/23/2012                  | \$ 100.00           |  |
| <input type="checkbox"/>                                                                                                                                                |                        |                           |                                                         |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                                |                        |                           |                                                         |                             | \$                  |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                               |                        |                           |                                                         |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Charles Cooperberg<br>3010 Devon Rd<br>Durham, NC 27707<br>919-490-5736         |                        |                           | <b>b. Job Title/Profession</b><br>Physician             |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                         |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Health Care |                             |                     |  |
|                                                                                                                                                                         |                        |                           |                                                         |                             |                     |  |
|                                                                                                                                                                         |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                                | RB                     | Check                     |                                                         | 02/23/2012                  | \$ 150.00           |  |
| <input type="checkbox"/>                                                                                                                                                |                        |                           |                                                         |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                                |                        |                           |                                                         |                             | \$                  |  |
| <b>4. Total only this Page</b>                                                                                                                                          |                        |                           |                                                         |                             | \$ 350.00           |  |
| <b>5. Total of ALL CRO-1210 Pages</b><br>(This line must be on line 6 of Detailed Summary Page CRO-1100)                                                                |                        |                           |                                                         |                             | \$                  |  |

# Contributions from Individuals

Amendment  
Pg 5 of 17 ☐ 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 Reelect Ellen Reckhow County Commissioner                                                                                                            |                        |                           |                               |                                                                                                                        |                     |                                                                                 |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                         |                        |                           |                               |                                                                                                                        |                     |                                                                                 |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br>Jane Bohannon Thorn<br>3125 Manchaester Dr<br>Durham NC 27707<br>919-490-1834 |                        |                           |                               | <b>b. Job Title/Profession</b><br>Information Technology<br><hr/> <b>c. Employer's Name/Specific Field</b><br>EMC Corp |                     | <b>d. Comments</b><br><br><br><hr/> <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                          | RB                     | Check                     |                               | 02/22/2012                                                                                                             | \$ 100.00           |                                                                                 |
| <input type="checkbox"/>                                                                                                                                          |                        |                           |                               |                                                                                                                        | \$                  |                                                                                 |
| <input type="checkbox"/>                                                                                                                                          |                        |                           |                               |                                                                                                                        | \$                  |                                                                                 |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                         |                        |                           |                               |                                                                                                                        |                     |                                                                                 |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br>Robert VanDewoestine<br>2 Pine Top Place<br>Durham, NC 27705<br>919-309-4517  |                        |                           |                               | <b>b. Job Title/Profession</b><br>Engineer<br><hr/> <b>c. Employer's Name/Specific Field</b><br>PRO Unlimited          |                     | <b>d. Comments</b><br><br><br><hr/> <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                          | RB                     | Check                     |                               | 02/23/2012                                                                                                             | \$ 100.00           |                                                                                 |
| <input type="checkbox"/>                                                                                                                                          |                        |                           |                               |                                                                                                                        | \$                  |                                                                                 |
| <input type="checkbox"/>                                                                                                                                          |                        |                           |                               |                                                                                                                        | \$                  |                                                                                 |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                         |                        |                           |                               |                                                                                                                        |                     |                                                                                 |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br>Martha Penny<br>304 Cedar Ridge Way<br>Durham, NC 27705<br>919-309-9418       |                        |                           |                               | <b>b. Job Title/Profession</b><br>Retired<br><hr/> <b>c. Employer's Name/Specific Field</b><br><br>                    |                     | <b>d. Comments</b><br><br><br><hr/> <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                          | RB                     | Check                     |                               | 02/24/2012                                                                                                             | \$ 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><br><small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>                                           |                        |                           |                               |                                                                                                                        | \$                  |                                                                                 |

# Contributions from Individuals

Pg 6 of 17 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 Reelect Ellen Reckhow County Commissioner                                                                                                               |                        |                           |                                                             |                             |                     |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                            |                        |                           |                                                             |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Patricia Bocckino<br>7340Abron Drive<br>Durham NC 27713<br>919-544-1997      |                        |                           | <b>b. Job Title/Profession</b><br>Retired                   |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                      |                        |                           | <b>c. Employer's Name/Specific Field</b>                    |                             |                     |  |
|                                                                                                                                                                      |                        |                           |                                                             |                             |                     |  |
|                                                                                                                                                                      |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                             | RB                     | Check                     |                                                             | 02/22/2012                  | \$ 100.00           |  |
| <input type="checkbox"/>                                                                                                                                             |                        |                           |                                                             |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                             |                        |                           |                                                             |                             | \$                  |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                            |                        |                           |                                                             |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Robert Dillard Teer Jr<br>PO Box 13508<br>RTP, NC 27709<br>919-549-9506      |                        |                           | <b>b. Job Title/Profession</b><br>Realtor                   |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                      |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Teer Associates |                             |                     |  |
|                                                                                                                                                                      |                        |                           |                                                             |                             |                     |  |
|                                                                                                                                                                      |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                             | RB                     | Check                     |                                                             | 02/24/2012                  | \$ 250.00           |  |
| <input type="checkbox"/>                                                                                                                                             |                        |                           |                                                             |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                             |                        |                           |                                                             |                             | \$                  |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                            |                        |                           |                                                             |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Becky Heron Campaign Fund<br>4425 Kerley<br>Durham, NC 27705<br>919-489-4402 |                        |                           | <b>b. Job Title/Profession</b><br>Retired                   |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                      |                        |                           | <b>c. Employer's Name/Specific Field</b>                    |                             |                     |  |
|                                                                                                                                                                      |                        |                           |                                                             |                             |                     |  |
|                                                                                                                                                                      |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                             | RB                     | Check                     |                                                             | 02/24/2012                  | \$ 100.00           |  |
| <input type="checkbox"/>                                                                                                                                             |                        |                           |                                                             |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                             |                        |                           |                                                             |                             | \$                  |  |
| <b>4. Total only this Page</b>                                                                                                                                       |                        |                           |                                                             |                             | \$ 450.00           |  |
| <b>5. Total of ALL CRO-1210 Pages</b><br>(This line must be on line 6 of Detailed Summary Page CRO-1100)                                                             |                        |                           |                                                             |                             | \$                  |  |



# Contributions from Individuals

Pg 7 of 17 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 Reelect Ellen Reckhow County Commissioner                                                    |                        |                           |                                          |                             |                                |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |                        |                           |                                          |                             |                                |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                          |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |  |
| Carolyn Aaronson<br>7324 Abron<br>Durham NC 27713<br>919-572-2865                                         |                        |                           | Artist                                   |                             |                                |  |
|                                                                                                           |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |  |
|                                                                                                           |                        |                           | Retail                                   |                             | <b>e. Election Sum to Date</b> |  |
|                                                                                                           |                        |                           |                                          | \$ 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"/>                                                                                  | RB                     | Check                     |                                          | 02/26/2012                  | \$ 200.00                      |  |
| <input type="checkbox"/>                                                                                  |                        |                           |                                          |                             | \$                             |  |
| <input type="checkbox"/>                                                                                  |                        |                           |                                          |                             | \$                             |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |                        |                           |                                          |                             |                                |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                          |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |  |
| Cynthia Kuhn<br>2821 Wade Road<br>Durham, NC 27705                                                        |                        |                           | Professor                                |                             |                                |  |
|                                                                                                           |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |  |
|                                                                                                           |                        |                           | Duke University                          |                             | <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"/>                                                                                  | RB                     | Check                     |                                          | 03/20/2012                  | \$ 250.00                      |  |
| <input type="checkbox"/>                                                                                  |                        |                           |                                          |                             | \$                             |  |
| <input type="checkbox"/>                                                                                  |                        |                           |                                          |                             | \$                             |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |                        |                           |                                          |                             |                                |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                          |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |  |
| Wade Penny<br>4105 Pickett Road<br>Durham, NC 27705<br>919-493-8267                                       |                        |                           | Business Executive                       |                             |                                |  |
|                                                                                                           |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |  |
|                                                                                                           |                        |                           | D&W Investment                           |                             | <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"/>                                                                                  | RB                     | Check                     |                                          | 03/21/2012                  | \$ 250.00                      |  |
| <input type="checkbox"/>                                                                                  |                        |                           |                                          |                             | \$                             |  |
| <input type="checkbox"/>                                                                                  |                        |                           |                                          |                             | \$                             |  |
| <b>4. Total only this Page</b>                                                                            |                        |                           |                                          |                             | \$ 700.00                      |  |
| <b>5. Total of ALL CRO-1210 Pages</b><br>(This line must be on line 6 of Detailed Summary Page CRO-1100)  |                        |                           |                                          |                             | \$                             |  |

# Contributions from Individuals

Amendment  
Pg 8 of 17 ☐ 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 Reelect Ellen Reckhow County Commissioner                                                                                                            |                        |                           |                                                             |                             |                     |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                         |                        |                           |                                                             |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>William Holman<br>4074 Dixie Trail<br>Raleigh NC 27607<br>919-613-8737    |                        |                           | <b>b. Job Title/Profession</b><br>Professor                 |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                   |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Duke University |                             |                     |  |
|                                                                                                                                                                   |                        |                           |                                                             |                             |                     |  |
|                                                                                                                                                                   |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                          | RB                     | Check                     |                                                             | 02/27/2012                  | \$ 100.00           |  |
| <input type="checkbox"/>                                                                                                                                          |                        |                           |                                                             |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                          |                        |                           |                                                             |                             | \$                  |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                         |                        |                           |                                                             |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Barbara Bell<br>3705 Dairy Pond Place<br>Durham, NC 27705<br>919-382-0119 |                        |                           | <b>b. Job Title/Profession</b><br>Retired                   |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                   |                        |                           | <b>c. Employer's Name/Specific Field</b>                    |                             |                     |  |
|                                                                                                                                                                   |                        |                           |                                                             |                             |                     |  |
|                                                                                                                                                                   |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                          | RB                     | Check                     |                                                             | 02/27/2012                  | \$ 100.00           |  |
| <input type="checkbox"/>                                                                                                                                          |                        |                           |                                                             |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                          |                        |                           |                                                             |                             | \$                  |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                         |                        |                           |                                                             |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Carol Rist<br>1 Barratts Chapel Court<br>Durham, NC 27705<br>919-384-2816 |                        |                           | <b>b. Job Title/Profession</b><br>Retired                   |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                   |                        |                           | <b>c. Employer's Name/Specific Field</b>                    |                             |                     |  |
|                                                                                                                                                                   |                        |                           |                                                             |                             |                     |  |
|                                                                                                                                                                   |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                          | RB                     | Check                     |                                                             | 02/27/2012                  | \$ 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><br>(This line must be on line 6 of Detailed Summary Page CRO-1100)                                                          |                        |                           |                                                             |                             | \$                  |  |

# Contributions from Individuals

Amendment  
Pg 9 of 17 ☐ 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 Reelect Ellen Reckhow County Commissioner                                                                                                        |                        |                           |                                                                  |                             |                     |                  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                     |                        |                           |                                                                  |                             |                     |                  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Larry Crane<br>3905 Darby<br>Durham NC 27707<br>919-489-4903          |                        |                           | <b>b. Job Title/Profession</b><br>Physician                      |                             | <b>d. Comments</b>  |                  |
|                                                                                                                                                               |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Health Care          |                             |                     |                  |
|                                                                                                                                                               |                        |                           |                                                                  |                             |                     |                  |
|                                                                                                                                                               |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                      | RB                     | Check                     |                                                                  | 02/27/2012                  |                     | \$ 100.00        |
| <input type="checkbox"/>                                                                                                                                      |                        |                           |                                                                  |                             |                     | \$               |
| <input type="checkbox"/>                                                                                                                                      |                        |                           |                                                                  |                             |                     | \$               |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                     |                        |                           |                                                                  |                             |                     |                  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>John L. Atkins III<br>PO Box 12037<br>RTP, NC 27709<br>919-941-9000   |                        |                           | <b>b. Job Title/Profession</b><br>Architect                      |                             | <b>d. Comments</b>  |                  |
|                                                                                                                                                               |                        |                           | <b>c. Employer's Name/Specific Field</b><br>O'Brien/Atkins       |                             |                     |                  |
|                                                                                                                                                               |                        |                           |                                                                  |                             |                     |                  |
|                                                                                                                                                               |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                      | RB                     | Check                     |                                                                  | 02/27/2012                  |                     | \$ 250.00        |
| <input type="checkbox"/>                                                                                                                                      |                        |                           |                                                                  |                             |                     | \$               |
| <input type="checkbox"/>                                                                                                                                      |                        |                           |                                                                  |                             |                     | \$               |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                     |                        |                           |                                                                  |                             |                     |                  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Don Moffitt<br>2114 Wilson Street<br>Durham, NC 27705<br>919-286-1717 |                        |                           | <b>b. Job Title/Profession</b><br>Consultant                     |                             | <b>d. Comments</b>  |                  |
|                                                                                                                                                               |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Business Development |                             |                     |                  |
|                                                                                                                                                               |                        |                           |                                                                  |                             |                     |                  |
|                                                                                                                                                               |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                      | RB                     | Check                     |                                                                  | 02/29/2012                  |                     | \$ 100.00        |
| <input type="checkbox"/>                                                                                                                                      |                        |                           |                                                                  |                             |                     | \$               |
| <input type="checkbox"/>                                                                                                                                      |                        |                           |                                                                  |                             |                     | \$               |
| <b>4. Total only this Page</b>                                                                                                                                |                        |                           |                                                                  |                             | \$ 450.00           |                  |
| <b>5. Total of ALL CRO-1210 Pages</b><br>(This line must be on line 6 of Detailed Summary Page CRO-1100)                                                      |                        |                           |                                                                  |                             | \$                  |                  |

# Contributions from Individuals

Pg 10 of 17 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 Reelect Ellen Reckhow County Commissioner                                                                                                               |                        |                           |                                                                 |                             |                     |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                            |                        |                           |                                                                 |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Arnold Ray Spell<br>1 Beckford Place<br>Durham NC 27705<br>919-383-7211      |                        |                           | <b>b. Job Title/Profession</b><br>Real Estate                   |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                      |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Allenton Management |                             |                     |  |
|                                                                                                                                                                      |                        |                           |                                                                 |                             |                     |  |
|                                                                                                                                                                      |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                             | RB                     | Check                     |                                                                 | 02/22/2012                  | \$ 200.00           |  |
| <input type="checkbox"/>                                                                                                                                             |                        |                           |                                                                 |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                             |                        |                           |                                                                 |                             | \$                  |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                            |                        |                           |                                                                 |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Barry Poss<br>3726 Fox wood<br>Durham, NC 27705<br>919-382-6324              |                        |                           | <b>b. Job Title/Profession</b><br>Retired                       |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                      |                        |                           | <b>c. Employer's Name/Specific Field</b>                        |                             |                     |  |
|                                                                                                                                                                      |                        |                           |                                                                 |                             |                     |  |
|                                                                                                                                                                      |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                             | RB                     | Check                     |                                                                 | 03/02/2012                  | \$ 250.00           |  |
| <input type="checkbox"/>                                                                                                                                             |                        |                           |                                                                 |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                             |                        |                           |                                                                 |                             | \$                  |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                            |                        |                           |                                                                 |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Lorraine Salois-Deane<br>3420 Ridge Road<br>Durham, NC 27705<br>919-403-8182 |                        |                           | <b>b. Job Title/Profession</b><br>Homemaker                     |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                      |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Services            |                             |                     |  |
|                                                                                                                                                                      |                        |                           |                                                                 |                             |                     |  |
|                                                                                                                                                                      |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                             | RB                     | Check                     |                                                                 | 03/02/2012                  | \$ 100.00           |  |
| <input type="checkbox"/>                                                                                                                                             |                        |                           |                                                                 |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                             |                        |                           |                                                                 |                             | \$                  |  |
| <b>4. Total only this Page</b>                                                                                                                                       |                        |                           |                                                                 |                             | \$ 550.00           |  |
| <b>5. Total of ALL CRO-1210 Pages</b><br>(This line must be on line 6 of Detailed Summary Page CRO-1100)                                                             |                        |                           |                                                                 |                             | \$                  |  |

# Contributions from Individuals

Pg 11 of 17 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 Reelect Ellen Reckhow County Commissioner                                                                                                            |                        |                           |                                                               |                             |                     |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                         |                        |                           |                                                               |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Edward Pritchett<br>202 Villa Drive<br>Durham NC 27712<br>919-479-8218    |                        |                           | <b>b. Job Title/Profession</b><br>Physician                   |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                   |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Health Care       |                             |                     |  |
|                                                                                                                                                                   |                        |                           |                                                               |                             |                     |  |
|                                                                                                                                                                   |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                          | RB                     | Check                     |                                                               | 03/05/2012                  | \$ 100.00           |  |
| <input type="checkbox"/>                                                                                                                                          |                        |                           |                                                               |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                          |                        |                           |                                                               |                             | \$                  |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                         |                        |                           |                                                               |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Andrew Widmark<br>809 Hermitage Court<br>Durham, NC 27707<br>919-493-8597 |                        |                           | <b>b. Job Title/Profession</b><br>Executive                   |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                   |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Mark Properties   |                             |                     |  |
|                                                                                                                                                                   |                        |                           |                                                               |                             |                     |  |
|                                                                                                                                                                   |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                          | RB                     | Check                     |                                                               | 03/05/2012                  | \$ 100.00           |  |
| <input type="checkbox"/>                                                                                                                                          |                        |                           |                                                               |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                          |                        |                           |                                                               |                             | \$                  |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                         |                        |                           |                                                               |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Gary Hock<br>4321 Medical Park Drive<br>Durham, NC 27704<br>919-471-2895  |                        |                           | <b>b. Job Title/Profession</b><br>Real Estate                 |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                   |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Gary Hock Company |                             |                     |  |
|                                                                                                                                                                   |                        |                           |                                                               |                             |                     |  |
|                                                                                                                                                                   |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                          | RB                     | Check                     |                                                               | 03/06/2012                  | \$ 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><br>(This line must be on line 6 of Detailed Summary Page CRO-1100)                                                          |                        |                           |                                                               |                             | \$                  |  |

# Contributions from Individuals

Amendment  
Pg 12 of 17 ☐ 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 Reelect Ellen Reckhow County Commissioner                                                                                                                               |                        |                           |                                                                                       |                             |                                             |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                                            |                        |                           |                                                                                       |                             |                                             |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br><small>(include city, state, &amp; zip)</small><br>Richard Weinberg<br>2516 Alpine<br>Durham NC 27707<br>919-493-3139            |                        |                           | <b>b. Job Title/Profession</b><br>Biologist                                           |                             | <b>d. Comments</b><br>                      |  |
|                                                                                                                                                                                      |                        |                           | <b>c. Employer's Name/Specific Field</b><br>UNC-CH                                    |                             | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                                             | RB                     | Check                     |                                                                                       | 03/07/2012                  | \$ 100.00                                   |  |
| <input type="checkbox"/>                                                                                                                                                             |                        |                           |                                                                                       |                             | \$                                          |  |
| <input type="checkbox"/>                                                                                                                                                             |                        |                           |                                                                                       |                             | \$                                          |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                                            |                        |                           |                                                                                       |                             |                                             |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br><small>(include city, state, &amp; zip)</small><br>Harriet Sayre McCord<br>3301 W Cornwallis<br>Durham, NC 27705<br>919-403-2415 |                        |                           | <b>b. Job Title/Profession</b><br>Head of School                                      |                             | <b>d. Comments</b><br>                      |  |
|                                                                                                                                                                                      |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Montessori Children's<br>School of Durham |                             | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                                             | RB                     | Check                     |                                                                                       | 03/07/2012                  | \$ 100.00                                   |  |
| <input type="checkbox"/>                                                                                                                                                             |                        |                           |                                                                                       |                             | \$                                          |  |
| <input type="checkbox"/>                                                                                                                                                             |                        |                           |                                                                                       |                             | \$                                          |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                                            |                        |                           |                                                                                       |                             |                                             |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br><small>(include city, state, &amp; zip)</small><br>John E Bugg<br>5118 Piney Creek Lane<br>Durham, NC 27705<br>919-383-7675      |                        |                           | <b>b. Job Title/Profession</b><br>Attorney                                            |                             | <b>d. Comments</b><br>                      |  |
|                                                                                                                                                                                      |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Services                                  |                             | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                                             | RB                     | Check                     |                                                                                       | 03/07/2012                  | \$ 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><br><small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>                                                              |                        |                           |                                                                                       |                             | \$                                          |  |

# Contributions from Individuals

Pg 13 of 17 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 Reelect Ellen Reckhow County Commissioner                                                                                                                                   |                        |                           |                                          |                             |                                |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                                                |                        |                           |                                          |                             |                                |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Barbara Strohbehn<br>41 Davisson Drive<br>Croasdaile Village<br>Durham, NC 27705<br>919-384-2035 |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |  |
|                                                                                                                                                                                          |                        |                           | Retired                                  |                             |                                |  |
|                                                                                                                                                                                          |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |  |
|                                                                                                                                                                                          |                        |                           |                                          |                             | <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"/>                                                                                                                                                                 | RB                     | Check                     |                                          | 03/07/2012                  | \$ 100.00                      |  |
| <input type="checkbox"/>                                                                                                                                                                 |                        |                           |                                          |                             | \$                             |  |
| <input type="checkbox"/>                                                                                                                                                                 |                        |                           |                                          |                             | \$                             |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                                                |                        |                           |                                          |                             |                                |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>James Cox<br>3946 Saint Marks<br>Durham, NC 27707<br>919-493-3935                                |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |  |
|                                                                                                                                                                                          |                        |                           | Law Professor                            |                             |                                |  |
|                                                                                                                                                                                          |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |  |
|                                                                                                                                                                                          |                        |                           |                                          |                             | Duke University                |  |
|                                                                                                                                                                                          |                        |                           |                                          | \$ 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"/>                                                                                                                                                                 | RB                     | Check                     |                                          | 03/17/2012                  | \$ 250.00                      |  |
| <input type="checkbox"/>                                                                                                                                                                 |                        |                           |                                          |                             | \$                             |  |
| <input type="checkbox"/>                                                                                                                                                                 |                        |                           |                                          |                             | \$                             |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                                                |                        |                           |                                          |                             |                                |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Mindy Solie<br>15 Oak Drive<br>Durham, NC 27707<br>919-419-0550                                  |                        |                           | <b>b. Job Title/Profession</b>           |                             | <b>d. Comments</b>             |  |
|                                                                                                                                                                                          |                        |                           | Realtor                                  |                             |                                |  |
|                                                                                                                                                                                          |                        |                           | <b>c. Employer's Name/Specific Field</b> |                             |                                |  |
|                                                                                                                                                                                          |                        |                           |                                          |                             | Real Estate                    |  |
|                                                                                                                                                                                          |                        |                           |                                          | \$ 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"/>                                                                                                                                                                 | RB                     | Check                     |                                          | 03/17/2012                  | \$ 200.00                      |  |
| <input type="checkbox"/>                                                                                                                                                                 |                        |                           |                                          |                             | \$                             |  |
| <input type="checkbox"/>                                                                                                                                                                 |                        |                           |                                          |                             | \$                             |  |
| <b>4. Total only this Page</b>                                                                                                                                                           |                        |                           |                                          |                             | \$ 550.00                      |  |
| <b>5. Total of ALL CRO-1210 Pages</b>                                                                                                                                                    |                        |                           |                                          |                             | \$                             |  |
| <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>                                                                                                                   |                        |                           |                                          |                             |                                |  |

# Contributions from Individuals

Pg 14 of 17 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 Reelect Ellen Reckhow County Commissioner                                                                                                                       |                        |                           |                                                                           |                             |                                             |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                                    |                        |                           |                                                                           |                             |                                             |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>George Lawrence<br>2505 Perkins<br>Durham NC 27705<br>919-452-6086                   |                        |                           | <b>b. Job Title/Profession</b><br>Consultant                              |                             | <b>d. Comments</b>                          |  |
|                                                                                                                                                                              |                        |                           | <b>c. Employer's Name/Specific Field</b><br>G H Lawrence & Assoc          |                             |                                             |  |
|                                                                                                                                                                              |                        |                           |                                                                           |                             |                                             |  |
|                                                                                                                                                                              |                        |                           |                                                                           |                             | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                                     | RB                     | Check                     |                                                                           | 04/14/2012                  | \$ 100.00                                   |  |
| <input type="checkbox"/>                                                                                                                                                     |                        |                           |                                                                           |                             | \$                                          |  |
| <input type="checkbox"/>                                                                                                                                                     |                        |                           |                                                                           |                             | \$                                          |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                                    |                        |                           |                                                                           |                             |                                             |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Virginia Cassell<br>2800 Trailwood Drive<br>Durham, NC 27705<br>919-383-8119         |                        |                           | <b>b. Job Title/Profession</b><br>Marketing Exec                          |                             | <b>d. Comments</b>                          |  |
|                                                                                                                                                                              |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Duke Nicotine Research Center |                             |                                             |  |
|                                                                                                                                                                              |                        |                           |                                                                           |                             |                                             |  |
|                                                                                                                                                                              |                        |                           |                                                                           |                             | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                                     | RB                     | Check                     |                                                                           | 04/14/2012                  | \$ 100.00                                   |  |
| <input type="checkbox"/>                                                                                                                                                     |                        |                           |                                                                           |                             | \$                                          |  |
| <input type="checkbox"/>                                                                                                                                                     |                        |                           |                                                                           |                             | \$                                          |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                                    |                        |                           |                                                                           |                             |                                             |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Evelyn Schmidt<br>1501 Fayetteville Rd, apt 1207<br>Durham, NC 27713<br>919-489-9793 |                        |                           | <b>b. Job Title/Profession</b><br>Retired                                 |                             | <b>d. Comments</b>                          |  |
|                                                                                                                                                                              |                        |                           | <b>c. Employer's Name/Specific Field</b>                                  |                             |                                             |  |
|                                                                                                                                                                              |                        |                           |                                                                           |                             |                                             |  |
|                                                                                                                                                                              |                        |                           |                                                                           |                             | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                                     | RB                     | Check                     |                                                                           | 04/14/2012                  | \$ 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><br>(This line must be on line 6 of Detailed Summary Page CRO-1100)                                                                     |                        |                           |                                                                           |                             | \$                                          |  |



# Contributions from Individuals

Amendment  
Pg 15 of 17 ☐ 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 Reelect Ellen Reckhow County Commissioner                                                                                                                     |                        |                           |                                                     |                             |                     |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                                  |                        |                           |                                                     |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Benjamin Speller<br>1004 Shepherd<br>Durham NC 27707                               |                        |                           | <b>b. Job Title/Profession</b><br>Retired           |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                            |                        |                           | <b>c. Employer's Name/Specific Field</b>            |                             |                     |  |
|                                                                                                                                                                            |                        |                           |                                                     |                             |                     |  |
|                                                                                                                                                                            |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                                   | RB                     | Check                     |                                                     | 03/28/2012                  | \$ 100.00           |  |
| <input type="checkbox"/>                                                                                                                                                   |                        |                           |                                                     |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                                   |                        |                           |                                                     |                             | \$                  |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                                  |                        |                           |                                                     |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Larson Sid Stroupe<br>5102 N Willowhaven Drive<br>Durham, NC 27712                 |                        |                           | <b>b. Job Title/Profession</b><br>Retired CPA       |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                            |                        |                           | <b>c. Employer's Name/Specific Field</b>            |                             |                     |  |
|                                                                                                                                                                            |                        |                           |                                                     |                             |                     |  |
|                                                                                                                                                                            |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                                   | RB                     | Check                     |                                                     | 04/04/2012                  | \$ 250.00           |  |
| <input type="checkbox"/>                                                                                                                                                   |                        |                           |                                                     |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                                   |                        |                           |                                                     |                             | \$                  |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                                  |                        |                           |                                                     |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>William Bell<br>Campaign Fund<br>1003 Huntsman<br>Durham, NC 27713<br>919-544-5597 |                        |                           | <b>b. Job Title/Profession</b><br>VP/COO            |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                            |                        |                           | <b>c. Employer's Name/Specific Field</b><br>UDI/CDC |                             |                     |  |
|                                                                                                                                                                            |                        |                           |                                                     |                             |                     |  |
|                                                                                                                                                                            |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                                   | RB                     | Check                     |                                                     | 03/28/2012                  | \$ 100.00           |  |
| <input type="checkbox"/>                                                                                                                                                   |                        |                           |                                                     |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                                   |                        |                           |                                                     |                             | \$                  |  |
| <b>4. Total only this Page</b>                                                                                                                                             |                        |                           |                                                     |                             | \$ 450.00           |  |
| <b>5. Total of ALL CRO-1210 Pages</b><br>(This line must be on line 6 of Detailed Summary Page CRO-1100)                                                                   |                        |                           |                                                     |                             | \$                  |  |

# Contributions from Individuals

Amendment  
Pg 16 of 17 ☐ 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 Reelect Ellen Reckhow County Commissioner                                                                                                  |                        |                           |                               |                                                          |                     |                    |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                               |                        |                           |                               |                                                          |                     |                    |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Ellen Dagenhart<br>1409 Dollar Street<br>Durham NC 27701        |                        |                           |                               | <b>b. Job Title/Profession</b><br>Realtor                |                     | <b>d. Comments</b> |
|                                                                                                                                                         |                        |                           |                               | <b>c. Employer's Name/Specific Field</b><br>Marie Austin |                     |                    |
|                                                                                                                                                         |                        |                           |                               |                                                          |                     |                    |
|                                                                                                                                                         |                        |                           |                               | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                | RB                     | Check                     |                               | 04/02/2012                                               |                     | \$ 100.00          |
| <input type="checkbox"/>                                                                                                                                |                        |                           |                               |                                                          |                     | \$                 |
| <input type="checkbox"/>                                                                                                                                |                        |                           |                               |                                                          |                     | \$                 |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                               |                        |                           |                               |                                                          |                     |                    |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>James Weaver<br>2102 Bahama<br>Bahama, NC 27503<br>919-620-5750 |                        |                           |                               | <b>b. Job Title/Profession</b><br>Physician              |                     | <b>d. Comments</b> |
|                                                                                                                                                         |                        |                           |                               | <b>c. Employer's Name/Specific Field</b><br>Health Care  |                     |                    |
|                                                                                                                                                         |                        |                           |                               |                                                          |                     |                    |
|                                                                                                                                                         |                        |                           |                               | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                | RB                     | Check                     |                               | 04/13/2012                                               |                     | \$ 200.00          |
| <input type="checkbox"/>                                                                                                                                |                        |                           |                               |                                                          |                     | \$                 |
| <input type="checkbox"/>                                                                                                                                |                        |                           |                               |                                                          |                     | \$                 |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                               |                        |                           |                               |                                                          |                     |                    |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Mark Trustin<br>221 Deer Chase Ln<br>Durham, NC 27705           |                        |                           |                               | <b>b. Job Title/Profession</b><br>Attorney               |                     | <b>d. Comments</b> |
|                                                                                                                                                         |                        |                           |                               | <b>c. Employer's Name/Specific Field</b><br>Services     |                     |                    |
|                                                                                                                                                         |                        |                           |                               |                                                          |                     |                    |
|                                                                                                                                                         |                        |                           |                               | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                | RB                     | Check                     |                               | 04/13/2012                                               |                     | \$ 200.00          |
| <input type="checkbox"/>                                                                                                                                |                        |                           |                               |                                                          |                     | \$                 |
| <input type="checkbox"/>                                                                                                                                |                        |                           |                               |                                                          |                     | \$                 |
| <b>4. Total only this Page</b>                                                                                                                          |                        |                           |                               |                                                          | \$ 500.00           |                    |
| <b>5. Total of ALL CRO-1210 Pages</b><br>(This line must be on line 5 of Detailed Summary Page CRO-1100)                                                |                        |                           |                               |                                                          | \$                  |                    |

# Contributions from Individuals

Amendment  
Pg 17 of 17 ☐ 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 Reelect Ellen Reckhow County Commissioner                                                                                                          |                        |                           |                                                             |                             |                     |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                       |                        |                           |                                                             |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Curtis Richardson<br>717 Anderson St<br>Durham NC 27705<br>919-493-2802 |                        |                           | <b>b. Job Title/Profession</b><br>Professor                 |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                 |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Duke University |                             |                     |  |
|                                                                                                                                                                 |                        |                           |                                                             |                             |                     |  |
|                                                                                                                                                                 |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                        | RB                     | Check                     |                                                             | 04/19/2012                  | \$ 100.00           |  |
| <input type="checkbox"/>                                                                                                                                        |                        |                           |                                                             |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                        |                        |                           |                                                             |                             | \$                  |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                       |                        |                           |                                                             |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Fluke Pepper<br>2703 Sevier<br>Durham, NC 27705<br>919-489-9767         |                        |                           | <b>b. Job Title/Profession</b><br>Potter                    |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                 |                        |                           | <b>c. Employer's Name/Specific Field</b><br>Retail          |                             |                     |  |
|                                                                                                                                                                 |                        |                           |                                                             |                             |                     |  |
|                                                                                                                                                                 |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                        | RB                     | Check                     |                                                             | 02/20/2012                  | \$ 100.00           |  |
| <input type="checkbox"/>                                                                                                                                        |                        |                           |                                                             |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                        |                        |                           |                                                             |                             | \$                  |  |
| <b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove                                                       |                        |                           |                                                             |                             |                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br><br>Carolyn Penny<br>4105 Pickett Road<br>Durham, NC 27705<br>919-493-8267  |                        |                           | <b>b. Job Title/Profession</b><br>Retired                   |                             | <b>d. Comments</b>  |  |
|                                                                                                                                                                 |                        |                           | <b>c. Employer's Name/Specific Field</b>                    |                             |                     |  |
|                                                                                                                                                                 |                        |                           |                                                             |                             |                     |  |
|                                                                                                                                                                 |                        |                           | <b>e. Election Sum to Date</b><br>\$ 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"/>                                                                                                                                        | RB                     | Check                     |                                                             | 03/21/2012                  | \$ 250.00           |  |
| <input type="checkbox"/>                                                                                                                                        |                        |                           |                                                             |                             | \$                  |  |
| <input type="checkbox"/>                                                                                                                                        |                        |                           |                                                             |                             | \$                  |  |
| <b>4. Total only this Page</b>                                                                                                                                  |                        |                           |                                                             |                             | \$ 450.00           |  |
| <b>5. Total of ALL CRO-1210 Pages</b><br>(This line must be on line 6 of Detailed Summary Page CRO-1100)                                                        |                        |                           |                                                             |                             | \$                  |  |

# Disbursements

Amendment Pg 1 of 4 ☒ 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>              |  |
| Comm To Reelect Ellen Reckhow County Commissioner                                                                                                                                                                                                                                                                                         |                           |                        |                                                                                                                                                       |                  |                                  |  |
| <b>3. Type of Disbursement</b> <i>(Please use separate CRO-1318 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><br>(include city, state, & zip)<br>Wells Fargo Bank<br>2200 West Main Street<br>Durham, NC 27708<br>919-286-6100                                                                                                                                                                         |                           |                        | <b>b. Coordinated Committee Name</b>                                                                                                                  |                  | <b>d. Comments</b>               |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        |                                                                                                                                                       |                  | Monthly Service Checking account |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        | <b>c. Level Registered (Specify)</b>                                                                                                                  |                  |                                  |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        | <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                  |                                  |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        |                                                                                                                                                       |                  | <b>e. Election Sum to Date</b>   |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        |                                                                                                                                                       |                  | \$ 20.00                         |  |
| <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>       |  |
| RB                                                                                                                                                                                                                                                                                                                                        | Draft                     | K                      | 02/29/2012                                                                                                                                            | \$10.00          | Service fee                      |  |
| RB                                                                                                                                                                                                                                                                                                                                        | Draft                     | K                      | 03/31/2012                                                                                                                                            | \$10.00          | Service fee                      |  |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                                                                                                                                                                                                                                                  |                           |                        |                                                                                                                                                       |                  |                                  |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br>U S Postal Service<br>Main Post Office<br>Durham, NC 27701<br>919-683-8061                                                                                                                                                                            |                           |                        | <b>b. Coordinated Committee Name</b>                                                                                                                  |                  | <b>d. Comments</b>               |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        |                                                                                                                                                       |                  | Campaign Postage                 |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        | <b>c. Level Registered (Specify)</b>                                                                                                                  |                  |                                  |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        | <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                  |                                  |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        |                                                                                                                                                       |                  | <b>e. Election Sum to Date</b>   |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        |                                                                                                                                                       |                  | \$ 5,747.68                      |  |
| <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>       |  |
| RB                                                                                                                                                                                                                                                                                                                                        | Check                     | I                      | 02/10/2012                                                                                                                                            | \$450.00         | Postage                          |  |
| RB                                                                                                                                                                                                                                                                                                                                        | Check                     | I                      | 04/16/2012                                                                                                                                            | \$5,297.68       | Postage                          |  |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                                                                                                                                                                                                                                                  |                           |                        |                                                                                                                                                       |                  |                                  |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br>Speedque<br>301 E Chapel Hill<br>Durham, NC 27701<br>919-683-1307                                                                                                                                                                                     |                           |                        | <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:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                  |                                  |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        |                                                                                                                                                       |                  | <b>e. Election Sum to Date</b>   |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        |                                                                                                                                                       |                  | \$ 388.88                        |  |
| <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>       |  |
| RB                                                                                                                                                                                                                                                                                                                                        | Check                     | B                      | 02/09/2012                                                                                                                                            | \$347.68         | Campaign letter postcards        |  |
| RB                                                                                                                                                                                                                                                                                                                                        | Check                     | B                      | 04/09/2012                                                                                                                                            | \$41.20          | re-elect cards                   |  |
| <b>5. Total only this Page</b>                                                                                                                                                                                                                                                                                                            |                           |                        |                                                                                                                                                       |                  | \$ 6,156.56                      |  |
| <b>6. Total of ALL CRO-1318 Pages</b>                                                                                                                                                                                                                                                                                                     |                           |                        |                                                                                                                                                       |                  |                                  |  |
| <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i><br><i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i><br><i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>                   |                           |                        |                                                                                                                                                       |                  | \$ 10,263.45                     |  |
| <b>7. Purpose Codes</b> <i>(List detailed expenditure code in (h.) above)</i>                                                                                                                                                                                                                                                             |                           |                        |                                                                                                                                                       |                  |                                  |  |
| A* - Media      B* - Printing      C* - Fundraising      D - To Another Candidate<br>E - Salaries      F* - Equipment      G - Political Party      H* - Holding Public Office Expenses<br>I - Postage      J - Penalties      K* - Office Expenses      O* - Other<br>* Codes require detailed explanation in required remarks field (k) |                           |                        |                                                                                                                                                       |                  |                                  |  |

# Disbursements

Pg 2 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

|                                                                                                                                                                                                                                                                                                                                           |                           |                        |                                                                                                                                                                                                                                           |                  |                                                                                     |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------------------------------------------------------------------------------|--|
| <b>1. Committee Full Name (and Fund if applicable)</b>                                                                                                                                                                                                                                                                                    |                           |                        |                                                                                                                                                                                                                                           |                  | <b>2. ID Number</b>                                                                 |  |
| Comm To Reelect Ellen Reckhow County Commissioner                                                                                                                                                                                                                                                                                         |                           |                        |                                                                                                                                                                                                                                           |                  |                                                                                     |  |
| <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><br>(include city, state, & zip)<br>Durham Board of Elections<br>706 West Corporation<br>Durham, NC 27701<br>919-560-0700                                                                                                                                                                 |                           |                        | <b>b. Coordinated Committee Name</b><br><br><b>c. Level Registered (Specify)</b><br><input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                  | <b>d. Comments</b><br>Filing Fee<br><br><b>e. Election Sum to Date</b><br>\$ 197.77 |  |
| <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>                                                          |  |
| RB                                                                                                                                                                                                                                                                                                                                        | Check                     | K                      | 02/14/2012                                                                                                                                                                                                                                | \$197.77         | Filing Fee                                                                          |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        |                                                                                                                                                                                                                                           | \$               |                                                                                     |  |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                                                                                                                                                                                                                                                  |                           |                        |                                                                                                                                                                                                                                           |                  |                                                                                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br>PayPal<br>www.paypal.com                                                                                                                                                                                                                              |                           |                        | <b>b. Coordinated Committee Name</b><br><br><b>c. Level Registered (Specify)</b><br><input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                  | <b>d. Comments</b><br><br><b>e. Election Sum to Date</b><br>\$ 19.77                |  |
| <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>                                                          |  |
| RB                                                                                                                                                                                                                                                                                                                                        | Cash                      | K                      | 04/13/2012                                                                                                                                                                                                                                | \$19.77          | Processing fee                                                                      |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        |                                                                                                                                                                                                                                           | \$               |                                                                                     |  |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                                                                                                                                                                                                                                                  |                           |                        |                                                                                                                                                                                                                                           |                  |                                                                                     |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br>Capitol Promotions<br>PO Box 231<br>Glenside, PA 19038<br>800-884-30247                                                                                                                                                                               |                           |                        | <b>b. Coordinated Committee Name</b><br><br><b>c. Level Registered (Specify)</b><br><input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                  | <b>d. Comments</b><br><br><b>e. Election Sum to Date</b><br>\$ 1,408.48             |  |
| <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>                                                          |  |
| RB                                                                                                                                                                                                                                                                                                                                        | Check                     | B                      | 02/29/2012                                                                                                                                                                                                                                | \$1,408.48       | Yard signs                                                                          |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        |                                                                                                                                                                                                                                           | \$               |                                                                                     |  |
| <b>5. Total only this Page</b>                                                                                                                                                                                                                                                                                                            |                           |                        |                                                                                                                                                                                                                                           |                  | \$ 1,626.02                                                                         |  |
| <b>6. Total of ALL CRO-1310 Pages</b>                                                                                                                                                                                                                                                                                                     |                           |                        |                                                                                                                                                                                                                                           |                  | \$                                                                                  |  |
| (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)<br>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)<br>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)                                        |                           |                        |                                                                                                                                                                                                                                           |                  |                                                                                     |  |
| <b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)                                                                                                                                                                                                                                                                    |                           |                        |                                                                                                                                                                                                                                           |                  |                                                                                     |  |
| A* - Media      B* - Printing      C* - Fundraising      D - To Another Candidate<br>E - Salaries      F* - Equipment      G - Political Party      H* - Holding Public Office Expenses<br>I - Postage      J - Penalties      K* - Office Expenses      O* - Other<br>* Codes require detailed explanation in required remarks field (k) |                           |                        |                                                                                                                                                                                                                                           |                  |                                                                                     |  |

# Disbursements

Pg 3 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

|                                                                                                                                                                                                                                                                                                    |                           |                        |                                                                                                                                                                                               |                  |                                                        |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------------------------|--|
| <b>1. Committee Full Name (and Fund if applicable)</b>                                                                                                                                                                                                                                             |                           |                        |                                                                                                                                                                                               |                  | <b>2. ID Number</b>                                    |  |
| Comm To Reelect Ellen Reckhow County Commissioner                                                                                                                                                                                                                                                  |                           |                        |                                                                                                                                                                                               |                  |                                                        |  |
| <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><br>(include city, state, & zip)<br>National Mailing Services<br>3201 Old Chapel Hill Rd<br>Durham, NC 27707<br>919-493-6646                                                                                                                       |                           |                        | <b>b. Coordinated Committee Name</b><br><br>                                                                                                                                                  |                  | <b>d. Comments</b><br><br>                             |  |
|                                                                                                                                                                                                                                                                                                    |                           |                        | <b>c. Level Registered (Specify)</b><br><input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                  | <b>e. Election Sum to Date</b><br>\$ 744.87            |  |
| <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>                             |  |
| RB                                                                                                                                                                                                                                                                                                 | check                     | O                      | 04/16/2012                                                                                                                                                                                    | \$744.87         | Mass mailing Processing                                |  |
|                                                                                                                                                                                                                                                                                                    |                           |                        |                                                                                                                                                                                               | \$               |                                                        |  |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                                                                                                                                                                                                           |                           |                        |                                                                                                                                                                                               |                  |                                                        |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br>J&M Associates<br>5720 Kith Place<br>Durham, NC 27712<br>919-383-1229                                                                                                                                          |                           |                        | <b>b. Coordinated Committee Name</b><br><br>                                                                                                                                                  |                  | <b>d. Comments</b><br><br>                             |  |
|                                                                                                                                                                                                                                                                                                    |                           |                        | <b>c. Level Registered (Specify)</b><br><input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                  | <b>e. Election Sum to Date</b><br>\$ 1,620.00          |  |
| <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>                             |  |
| RB                                                                                                                                                                                                                                                                                                 | check                     | B                      | 04/02/2012                                                                                                                                                                                    | \$1,620.00       | Reelect postcards                                      |  |
|                                                                                                                                                                                                                                                                                                    |                           |                        |                                                                                                                                                                                               | \$               |                                                        |  |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                                                                                                                                                                                                           |                           |                        |                                                                                                                                                                                               |                  |                                                        |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)<br>The Green Room<br>1108 Broad Street<br>Durham, NC 27705<br>919-286-2359                                                                                                                                        |                           |                        | <b>b. Coordinated Committee Name</b><br><br>                                                                                                                                                  |                  | <b>d. Comments</b><br>Campaign reception- 5 candidates |  |
|                                                                                                                                                                                                                                                                                                    |                           |                        | <b>c. Level Registered (Specify)</b><br><input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                  | <b>e. Election Sum to Date</b><br>\$ 16.00             |  |
| <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>                             |  |
| RB                                                                                                                                                                                                                                                                                                 | check                     | O                      | 04/15/2012                                                                                                                                                                                    | \$16.00          | Catering fee fo meet candidates                        |  |
|                                                                                                                                                                                                                                                                                                    |                           |                        |                                                                                                                                                                                               | \$               |                                                        |  |
| <b>5. Total only this Page</b>                                                                                                                                                                                                                                                                     |                           |                        |                                                                                                                                                                                               |                  | \$ 2,380.87                                            |  |
| <b>6. Total of ALL CRO-1310 Pages</b>                                                                                                                                                                                                                                                              |                           |                        |                                                                                                                                                                                               |                  | \$                                                     |  |
| (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)<br>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)<br>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) |                           |                        |                                                                                                                                                                                               |                  |                                                        |  |
| <b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)                                                                                                                                                                                                                             |                           |                        |                                                                                                                                                                                               |                  |                                                        |  |
| A* - Media      B* - Printing      C* - Fundraising      D - To Another Candidate<br>E - Salaries      F* - Equipment      G - Political Party      H* - Holding Public Office Expenses<br>I - Postage      J - Penalties      K* - Office Expenses      O* - Other                                |                           |                        |                                                                                                                                                                                               |                  |                                                        |  |

# 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

|                                                                                                                                                                                                                                                                                                                                           |                           |                        |                                                                                                                                                       |                  |                                                                       |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------|--|
| <b>1. Committee Full Name (and Fund if applicable)</b>                                                                                                                                                                                                                                                                                    |                           |                        |                                                                                                                                                       |                  | <b>2. ID Number</b>                                                   |  |
| Comm To Reelect Ellen Reckhow County Commissioner                                                                                                                                                                                                                                                                                         |                           |                        |                                                                                                                                                       |                  |                                                                       |  |
| <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><br>(include city, state, & zip)<br>CC Design<br>909 Vickers<br>Durham, NC 27701<br>919-309-0343                                                                                                                                                                                          |                           |                        | <b>b. Coordinated Committee Name</b>                                                                                                                  |                  | <b>d. Comments</b><br><br><b>e. Election Sum to Date</b><br>\$ 100.00 |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        | <b>c. Level Registered (Specify)</b>                                                                                                                  |                  |                                                                       |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        | <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                  |                                                                       |  |
| <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>                                            |  |
| RB                                                                                                                                                                                                                                                                                                                                        | Check                     | B                      | 03/15/2012                                                                                                                                            | \$100.00         | Postcard design<br>2-sides                                            |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        |                                                                                                                                                       | \$               |                                                                       |  |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                                                                                                                                                                                                                                                  |                           |                        |                                                                                                                                                       |                  |                                                                       |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                                                                                                                                                                                                                                          |                           |                        | <b>b. Coordinated Committee Name</b>                                                                                                                  |                  | <b>d. Comments</b><br><br><b>e. Election Sum to Date</b><br>\$        |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        | <b>c. Level Registered (Specify)</b>                                                                                                                  |                  |                                                                       |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        | <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                  |                                                                       |  |
| <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>                                            |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        |                                                                                                                                                       | \$               |                                                                       |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        |                                                                                                                                                       | \$               |                                                                       |  |
| <b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove                                                                                                                                                                                                                                                  |                           |                        |                                                                                                                                                       |                  |                                                                       |  |
| <b>a. Full Name, Mailing Address &amp; Phone</b><br>(include city, state, & zip)                                                                                                                                                                                                                                                          |                           |                        | <b>b. Coordinated Committee Name</b>                                                                                                                  |                  | <b>d. Comments</b><br><br><b>e. Election Sum to Date</b><br>\$        |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        | <b>c. Level Registered (Specify)</b>                                                                                                                  |                  |                                                                       |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        | <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:<br><input type="checkbox"/> State <input type="checkbox"/> Municipality: |                  |                                                                       |  |
| <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>                                            |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        |                                                                                                                                                       | \$               |                                                                       |  |
|                                                                                                                                                                                                                                                                                                                                           |                           |                        |                                                                                                                                                       | \$               |                                                                       |  |
| <b>3. Total only this Page</b>                                                                                                                                                                                                                                                                                                            |                           |                        |                                                                                                                                                       |                  | \$ 100.00                                                             |  |
| <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><br><i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i><br><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<br>E - Salaries      F* - Equipment      G - Political Party      H* - Holding Public Office Expenses<br>I - Postage      J - Penalties      K* - Office Expenses      O* - Other<br>* Codes require detailed explanation in required remarks field (k) |                           |                        |                                                                                                                                                       |                  |                                                                       |  |