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Amendment

Detailed SummaryUse this form to summarize all disclosure reporting forms and to total monetary information.

Durham Transit Tax Referendum Committee	Pre-referendum		
Start of Election Cycle: January 1,	2011	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 2850.00	\$ 0.00
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 200.00	\$ 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)	\$	\$
I1) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Organization	ons (CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$ 3000.00	\$ 6250.00
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c	c, 11d and 11e)	\$ 3200.00	\$ 6700.00
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 4881.61	\$ 5531.61
13b) Contributions to Candidates/Political Commit	tees (CRO-1310)	\$	\$ <u></u>
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)	\$ 970.87	\$ 970.87
17) In-Kind Contributions	(CRO-1510)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 13	5. 16 and 17)	\$ 5852.48	\$ 6502.48
19) Cash on Hand at End (Add lines 4 and 12 together, then subt	ract line 18)	\$ 197.52	\$ 197.52
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ IN-PERSON	
21) Outstanding Loans (incl. ones from other campaign	(CRO-1430)	\$	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$ 001 2 8 7011	
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$ DURHAM BOE	
24) Account Transfers Within the Committee	(CRO-1720)	\$	
25) Administrative Support	(CRO-1710)	\$	\$
26) Forgiven Loans	(CRO-1440)	<u> </u>	\$
27) 48-Hour Notice Reports Sum	(CRO-2200)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$ 970 87	<u> </u>

Amendment

Yes

		m Individuals vidual contributions o	ver \$50	Pg Or contributions unde	<u>1</u> of r \$50 if form CR	<u>1</u> O 1205 is not	Yes t used	⊠ No
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Durham 1	Fransit Tax Refere	endum committee						
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	ne, Mailing Address a city, state, & zip)			b. Job Title/Profession Director of Bill Dra		d. Comments		·
Gerry Co		<u> </u>	` ;	Director of Bill Dra	ıtıng			
8909 Tay	mouth Ct			c. Employer's Name/Spe	etiic Kield			
Raleigh, I	NC 27613			NC General Assemb	<u> </u>	_		
				State Capitol	лу	e. Election Si	um to Date	
				Raleigh NC		\$	100.00	
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	oe, Mailing Address &	& Phone		b. Job Title/Profession	A Ser San Stanfordings	d. Comments		. , , , , , , , , , , , , , , , , , , ,
David Ki	city, state, & zip)		,	General Manager				
	thhampton Dr			c. Employer's Name/Spe	cific Field			
Raleigh,	NC 27615			Triangle Transit				
				4600 Emperor Blvd Durham, NC 27703		e. Election Sum to Date		
				Bullium, Ne 27703		\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-R	and Description	j. Date (mm/dd/yy	уу)	k. Amount	
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	ne, Mailing Address of city, state, & zip)	Phone IN-PERS	N∩	b. Job Title/Profession		d. Comment		
fincings	city, state, & zip)	. 1115 2.1-110	<u> </u>					
		OCT 2 8 2	2011	c. Employer's Name/Spe	effic Field]		
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DURHAM BOE		BOE			\$			
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Amendment

Amendment

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Contributions to be Reimbursed

. 1

Yes

 \boxtimes

No

Use this form to report Contributions of \$1,000 or less to be reimbursed within 7 days. Reimbursements must be disclosed on the Refunds/Reimbursements Form (CRO-1320).

Durham Tax Referendum Committee		_		· · · · · · · · · · · · · · · · · · ·
free grant and the second				
Full Name & Mailing Address of the Payee (the original vendor)	,		ailing Address of the	
Office Depot		John White	nom the campaign (HECK IS WILLER)
5600 S. Miami Bl			ın St. Ste 1400	
Morrisville, NC 27560		Durham, NC		
,				
a. Contribution Description	b. Dat	e (mm/đđ/yyyy)	c. Credit Card Y/N	d. Amount
address labels	10/1	19/2011	v	\$ 102.44
	10/1		y	3 102.44
Full Name & Mailing Address of the Payee	and the second		ailing Address of the	
(the original vendor)		E) Storm 6.7 (350	nung Augress or mo hom the campaign o	
Printing Factory	1.	Carver Weave		
1940 Utica Ave		300 W. Morga	ın St Ste 1400	
Brooklyn, NY 11234		Durham, NC		
a. Contribution Description	b. Dat	e (mm/dd/yyyy)	c. Credit Card Y/N	d. Amount
yard signs				
	10/0	03/2011	У	\$ 868.43
cost (suvering a process				
Full Name & Mailing Address of the Payee (the original vendor)	JE		ailing Address of the hom the campaign o	
N-PERSON				
OCT 2 8 2011				
307 6 2011				
a. Contribution Description DURHAM BOE	b. Dat	e (mm/dd/yyyy)	c. Credit Card Y/N	d. Amount
		<u> </u>		
				\$
	· comment			
Full Name & Mailing Address of the Payee (the original vendor)			alling Address of the hom the campaign o	
	:		Harrie of Ann Bush	mayar is without
a. Contribution Description	b. Dat	e (mm/dd/yyyy)	c. Credit Card Y/N	d. Amount
				\$
71 - 21 48 3419 - 8494 - 1 June			\$	G70.87
				11001
			\$ 4	970.87

Other Receipt Sources

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of

1

Amendment

Yes

Use this form to report income not reported on another form, i.e. interest income, not for profit contributions etc.

	t Tax Referendum Comm				;
Interest		Contributions from Not-for-			
	1	Condibutions not 140t-301-1	Total Olgan	inzanions 🔼 Oi	itside Sources of Income
	ing Address & Phone	A silver waster & advantage of 1 × 4 4 3	l a se se se		
a. run (value, avalue)	ing Augress & Phone ie & zip)		b. Not-10	r-Profit Federal ID#	d. Comments
First Citizens B					
3200 Hillsboro				e Source Explanation	<u>.</u>
Durham, NC 2	- 1 1		- Cold Application	A CONTRACTOR OF THE STATE OF TH	4
Dulliani, NC 2	7105		Согро	ale	
					e. Election Sum to Date
					\$ 1000.00
f. Account Code	g. Form of Payment	h. In-Kind Description	<u> </u>	l. Date (mm/dd/yyyy)	j. Amount
1	check			1	
•	oneck .			09/09/2011	\$ 1000.00
					\$
44.0	7. V. V. V. V.				
	ing Address & Phone		b. Not-fn	r-Profit Federal ID #	d. Comments
(include city, sta	- "		3. 4 sole 2010		
Teer Associates	- /- /				
POB 13508			e. Outsid	Source Explanation	
Durham, NC 2	7709		Согрог	C	<u>3</u>
,			00.70.		6. Election Sum to Date
					\$ 1000.00
f. Account Code	g, Form of Payment	h. In-Kind Description	7. "	i. Date (mm/dd/yyyy)	j. Amount
1	check			00/20/2011	ft 1000.00
				09/20/2011	\$ 1000.00
					\$
					J
a. Full Name, Mail	ing Address & Phone	JNLPERSON	b, Not-fo	r-Profit Federal ID#	d. Comments
	te, & zip)	N-PERSON			
Kimley Horn					_
POB 1086		OCT 2 8 2011		e Source Explanation	_
Durham, NC 2	7702		Согрог	ate	
		DURHAM BOE			e, Election Sum to Date
					\$ 500.00
1. Account Code	g. Form of Payment	h In-Kind Description	112741	L Date (mm/dd/yyyy)	j. Amount
1	check		-	10/10/2011	\$ 500.00
					\$
	1 .				\$ 2500.00
					2200,00
					\$ 3000.00

Ot	her	Recei	pt S	ources
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of

<u>2</u>

Amendment
Yes

M

No

Use this form to report income not reported on another form, i.e. interest income, not for profit contributions etc.

	t Tax Referendum Comm	littee			
	· ·	Carrier West			
Interest		Contributions from Not-for-I			outside Sources of Income
			-		··· p······
a. Full Name, Maili (include city, stat	ing water cas of ratefic		b. Not-fo	r-Profit Federal ID#	d. Comments
PSNC	ie, & zipi		,		
2541 Whilden F	Rd		c. Quitaid	k Source Explanation	
Durham, NC 27	7713		Corpor	rate	· ·
					e. Election Sum to Date
					\$ 500.00
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yyyy)	j. Amount
1	check			10/17/11	\$ 500.00
					\$
	ing Address & Phone	4.5	b. Not-fo	r-Profit Federal ID#	d. Comments
(include city, stat	e, & z p)		ļ		
			c Outsid	le Source Explanation	\dashv
			c. outain	e course trapianation	-
					e. Election Sum to Date
					\$
L Account Code	g. Rozm of Psyment	h, In-Kind Description		f. Date (mm/dd/yyyy)	j Amount
			_		\$
					\$
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a. Bull Name, Maill	ve A Cilean & Dinne		k Not to	r-Droffit Voltaral ID #	A Continuation
(include city, stat	isg Address & Phone :: te, & zip)	IN-PERSON	D, 1301-10	(Arthur Sederal ID #	u. Comments
	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	OCT 2 8 2011			
		በር ነ ድ ው ደሀ ነ	c. Outsid	e Source Explanation	
		DURHAM BOL			
		501 W W W W			e. Election Sum to Date
					\$
f. Account Code	g. Rorm of Payment	h. In-Kind-Description		i. Date (mm/dd/yyyy)	j, Amount
					\$
					\$
					\$ 500.00
					\$ 3000.00
					ψ 3000.00

Disburseme	nts
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of 2

Amendment Yes

No :

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

Operating E	хпеляея П	Contributions to Cand	idates/Political Committees		ordinated Party Expenditures
Operating 1	Apprises	Control to Cara	idaes i onion commuces		remained i mey Experimences
(include city, state,			b. Coordinated Committee Na	nie.	d, Comments
Capitol Promoti		3 5.			
249 N. Kenswid Glenside, PA 1		<u>*</u>	e Level Registered (Specify) Federal	County:	
Gielisiae, III I	7030		State	Municipality:	e. Election Sum to Date
					\$ 2448.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	check	В	09/12/2011	\$2448.00	yard signs
				\$	
and the control of th	aja Andreas (2 Phoais		i) Coordinated Committee Sa	ine.	d. Comments
(include city, state, Carolina Banne					
3535 Hillsborou	•	, ·	c. Level Registered (Specify)	**	
Durham, NC 2	7705		Federal	County:	
		_	State	Municipality:	e. Election Sum to Date
					s 183.61
L Account Code	g. Form of Payment	b. Purpose Code	i. Date (mm/dd/yyyy)	J. Amount	k. Required Remarks
1	check	В	10/04/2011	\$183.61	banner
				\$	
					and the second contracts of the second contract of the second contracts of the second contract o
	ng Address & Phone	<u> </u>	b. Coordinated Committee Na	me	d. Comments
(include city, state, NCCU	& zlp)	V-PERSON			
Durham, NC			c. Level Registered (Specify)		
,		OCT 2 8 2011	Federal	County:	
			State	Municipality:	e. Klection Sum to Date
		OURHAM BOE			\$ 50.00
f. Account Code	g. Form of Payment	h. Purposé Code	L Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
I	check	A	10/18/2011	\$50.00	parade entrance fee
				\$	
					\$ 2681.61
,					
=	line 13a of Detailed Sun line 13b of Detailed Sun	\$ 4881.61			
	-		if Coordinated Party Expenditu	•	
¥24.134				D. T.	er Condidate
A* - Media E - Salaries	B* - Printing F* - Equipment	C* - Pundi G - Politica			er Candidate Public Office Expenses
I Postage	J - Penalties	≦I& + Office	Expenses	Q* - Donation	n to Legal Expense Fund
O* - Other	: 3 <u>a / n</u>				444

N'-L					Amendment		
Disbursements	Po	2	of	2	Yes	∇	N
Ise this form to report expenditures from the committee for: operating a	- 6	= 		=		<u> </u>	

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

. 1: *					
Operating 1	Expenses	Contributions to Car	ndidates/Political Committees		pordinated Party Expenditures
a. Fall Name, Nai (include city, state Postmaster	ling Address & Prione , & zip)		b: Coordinated Committee		d. Comments
Durham NC 2	7701		c. Level Registered (Specify)	County:	-
			State	Municipality:	* 2200.00
f. Account Code	g. Form of Payment	h. Purpose Code	L Date (mm/dd/yyyy)	j. Amgunt	k. Required Remarks
1	check	I	10/19/2011	\$2200.00	The second secon
				\$	
a. Full Name, Visil (include city, state	ing Address & Phone		b. Coordinated Committee ?	THE	d. Comments
Amenade Croy, State					5
			e. Level Registered (Specify) Federal	County:	
			State	Municipality:	e Election Sum to Date
					\$
f. Account Code	g. Form of Payment	h. Pürpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				s	
a. Full Name, Mall	ing Address & Phone		b. Coordinated Committee N	ame	d. Comments
(Include city, state, NCCU	& zip) N	-PERSON			
		OCT 2 8 2011	c. Level Registered (Specify)	County:	
	DI	JRHAM BOL	State	Municipality:	e. Election Sum: to Date
					s
f. Account Code	g Form of Payment	h. Parpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
					\$ 2200.00
(This line goes in		mary Page CRO-1100	if Operating Expenses) if Contrib to Candidates/Politic if Coordinated Party Expendit		\$ 4881.61
A* - Media E - Salaries	B* - Printing F* - Equipment	C Fund G - Politica	al Party		Public Office Expenses
I - Postage O*-Other	J - Penalties	K*-Offic	e Expenses	Q* - Donatio	n to Legal Expense Fund

Use this form to report refunds/reimbursements, including contributions returned to the contributor.					
Durham Tax Referendum Committee					
* - 1					
a. Full Name, Mailing Address & Phone					h. Original Receipt Date
(include city, state, & zip)			Candidate	PAC	10/19/2011
John White			Referendum	Party	10/19/2011
300 W. Morgan St Ste 1400			e. Level Registered (Specify	ð.	i, Original Receipt Amount
Durham, NC 27701			Federal State	County: Municipality:	\$ 102.44
			f. Purpose Code		j. Election Sum to Date
			P		\$ 102.44
b. Job Title/Profession		c. Employer's Name/Specific Field	g. Comments		k: Account Code
Public Policy		Durham Chamber			1
					` .
Form of Payment m. Required Remarks		n. Date (mm/dd/y		y) o. Amount	
check reimbursement for purchase of address labels		10/19/2011		\$ 102.44	
a. Full Name, Mailing A	ddress & Phone		d. Type of Committee		h. Original Receipt Date
(include city, state, & zip)			Candidate	PAC	10/03/2011
Carver Weaver			Referendum	Party	×
300 W. Morgan St. Ste 1400			c. Level Registered (Specify		L Original Receipt Amount
Durham, NC 27701			Federal 🔀	County:	\$ 868.43
			f. Purpose Code	Municipality:	j. Election Sum to Date
			P	3	\$ 868.43
b. Job Title/Profession		c. Employer's Name/Specific Field	g, Comments		k. Account Code
Marketing		Durham Tech			l
l. Form of Payment	m. Required F	tema itis	- .	n. Date (mm/dd/yy	yy) o. Amount
check	k yard signs		10/10/2011		\$ 868.43
distribution of					
a. Fulf Name, Malling Address & Phone					h. Griginal Receipt Date
		N-PERSON	Referendum	Party	
			e. Level Registered (Specif	Ó	i. Original Receipt Amount
OCT 2 8 2011			Federal	County:	\$
505			f. Purpose Code	Municipality:	j. Election Sum to Date
DURHAM BOE			1. Purpose caue	·/	
					\$
b. Job Title/Profession		c, Employer's Name/Specific Rield	g. Comments		k. Account Code
l. Form of Payment	m. Required I	l Semina		n. Date (mm/dd/y)	(vv) o. Amount
				<u></u>	\$
					\$
					\$
L-Returned to Contrib P* - Reimbursement		A CONTRACT OF THE PROPERTY OF	N = Exception	Contribution Limit	· · · · · · · · · · · · · · · · · · ·

Refunds/Reimbursements From the Committee

Amendment

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