

# Disclosure Report Cover

Amendment

☐ Yes☒ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.

Do not use this form to update information

## 1. Committee Information

<b>a. Full Name</b> Bowser Campaign Committee	<b>c. ID Number</b>
<b>b. Mailing Address (include City, State and Zip Code)</b> PO Box 51874 Durham, NC 27717	<b>d. Date Filed</b> 10/30/11
	<b>e. Phone Number</b> 919.491.1229

<b>2. Report Year</b> 2011	<b>3. Period Start Date (mm/dd/yy)</b> 08/12/11	<b>4. Period End Date (mm/dd/yy)</b> 10/31/11	<b>5. Treasurer Full Name</b> Lois Murphy
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<b>6. Type of Committee (Check One)</b> <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent <input type="checkbox"/> Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser	<b>9. Type of Report (check only one type of report from one category)</b> <b>Municipal</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input checked="" type="checkbox"/> Final <input checked="" type="checkbox"/> Special <b>State/County</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special <b>Referendum</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special	<b>7. Type of Fund (if applicable, check one)</b> <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:	<b>10. Special Report Name</b>
<b>8. Number of Fundraisers this Report</b> None			

<b>11. Account Information</b> <b>a. Financial Institution Full Name</b> Mechanics & Farmers Bank <b>b. Purpose</b> Campaign acct. fore receipts and expenditures <b>c. Account Code</b> <b>d. Period Begin Balance</b> \$ 315.85	<b>11. Account Information</b> <b>a. Financial Institution Full Name</b> IN-PERSON <b>b. Purpose</b> OCT 31 2011 DURHAM BOE <b>c. Account Code</b> <b>d. Period Begin Balance</b> \$
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## CERTIFICATION

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

Lois Murphy  
Printed Name of Signer

Lois Murphy  
Signature of Appointed Treasurer

10/31/11  
Date

## FOR OFFICE USE ONLY

Date Received: 10/31/2011

Employee: mRy

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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. Type of Report</b>	<b>3. ID Number</b>
Bowser Campaign		Pre-Election	
<b>Start of Election Cycle:</b> January 1, 2011		<b>Total this Reporting Period</b>	<b>Total this Election Cycle</b>
4) Cash on Hand at Start		\$ 315.85	\$
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 0.00	\$	
6) Contributions from Individuals (CRO-1210)	\$ 8,300.00	\$	
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)	\$	\$	
<b>11) Other Receipt Sources</b>			
11a) Interest on Bank Accounts (CRO-1250)	\$	\$	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)	\$	\$	
11c) Outside Sources of Income (CRO-1250)	\$	\$	
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$	\$	
11e) Exempt Purchase Price Sales (CRO-1265)	\$	\$	
<b>12) TOTAL RECEIPTS</b> (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 8,300.00	\$
<b>EXPENDITURES</b>			
<b>13) Disbursements</b>			
13a) Operating Expenditures (CRO-1310)	\$ 3,739.82	\$	
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)	\$ 455.59	\$	
17) In-Kind Contributions (CRO-1510)	\$	\$	
<b>18) TOTAL EXPENDITURES</b> (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 4,195.41	\$
<b>19) Cash on Hand at End</b> (Add lines 4 and 12 together, then subtract line 18)		\$ 4,420.44	\$
<b>ADDITIONAL INFORMATION</b>			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$	IN-PERSON	
22) Debts and Obligations owed by the Committee (CRO-1610)	\$	OCT 31 2011	
23) Debts and Obligations owed to the Committee (CRO-1620)	\$		
24) Account Transfers Within the Committee (CRO-1720)	\$	DURHAM B	
25) Administrative Support (CRO-1710)	\$	\$	
26) Forgiven Loans (CRO-1440)	\$	\$	
27) 48-Hour Notice Reports Sum (CRO-2220)	\$	\$	
28) Contributions to be Refunded (CRO-1215)	\$	\$	

# Contributions from Individuals

Pg 2 of 2

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>	
Bowser Campaign Committee						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Neal Hunter 1691 Colvard Farms Rd. Durham, NC 27713			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
			Entrepreneur			
			<b>c. Employer's Name/Specific Field</b>			
			Self-Employed		<b>e. Election Sum to Date</b>	
				\$ 4,000.00		
<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"/>	1	Check		10/11/11		\$ 4,000.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
			<b>c. Employer's Name/Specific Field</b>			
			Self-Employed		<b>e. Election Sum to Date</b>	
				\$		
<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"/>						\$
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  <div style="text-align: center;">           OCT 3 1 2011            DURHAM BO.         </div>			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
				\$		
<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"/>	1	Check				\$ 4,000.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>4. Total only this Page</b>					\$ 4,000.00	
<b>5. Total of ALL CRO-1210 Pages</b>					\$ 8,300.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

# Contributions from Individuals

Pg 1 of 2

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>	
Bowser Campaign Committee						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Debbie Reyonlds 5500 Old Brandt Tr. Greensboro, NC 27455				<b>b. Job Title/Profession</b>		<b>d. Comments</b>
				Accountant		
				<b>c. Employer's Name/Specific Field</b>		
				Self-Employed		<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"/>	1	Check		10/11/11		\$ 250.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Ellis L. Selph, Jr. 2502 Winton Rd. Durham, NC 27707				<b>b. Job Title/Profession</b>		<b>d. Comments</b>
				Business Owner		
				<b>c. Employer's Name/Specific Field</b>		
				Self-Employed		<b>e. Election Sum to Date</b>
				\$ 50.00		
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>
<input type="checkbox"/>	1	Check		10/11/11		\$ 50.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Janet Hunter 1691 Colvard Farms Rd. Durham, NC 27713				<b>b. Job Title/Profession</b>		<b>d. Comments</b>
				Homemaker		
				<b>c. Employer's Name/Specific Field</b>		
				N/		<b>e. Election Sum to Date</b>
				\$ 4,000.00		
<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"/>	1	Check		10/11/11		\$ 4,000.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>4. Total only this Page</b>					\$ 4,300.00	
<b>5. Total of ALL CRO-1210 Pages</b>					\$ 8,300.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

# Disbursements

Amendment  
Pg 1 of 3 ☐ 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> Bowser Campaign Committee					<b>2. ID Number</b>
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Joe Bowser 9 Druid Pl Durham, NC 27707		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
		<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b> \$ 679.32	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" 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>
	Check	O	10/30/11	\$679.32	Reimbursement for mileage
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Melinda Bowser 9 Druid Pl. Durham, NC 27707		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
		<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b> \$ 350.00	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" 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>
	Check	B	10/30/11	\$200.00	Flyers
	Check	E	10/30/11	\$150.00	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Quincy Tanner 15 Winchester Ct. Durham, NC 27707		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
<div style="position: relative; height: 100px;"> <div style="position: absolute; top: 0; right: 0; font-size: 2em; opacity: 0.5;">IN-PERSON</div> <div style="position: absolute; bottom: 0; right: 0; font-size: 1.5em; opacity: 0.5;">OCT 3 1 2011</div> <div style="position: absolute; bottom: 0; left: 0; font-size: 1.5em; opacity: 0.5;">DURHAM BO</div> </div>		<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b> \$ 250.00	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" 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>
	Check	B	10/30/11	\$200.00	Flyers
	Check	E	10/30/11	\$50.00	
<b>5. Total only this Page</b>					\$ 1,297.32
<b>6. Total of ALL CRO-1310 Pages</b> <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 3,739.82
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)					
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;">A* - Media</div> <div style="width: 33%;">B* - Printing</div> <div style="width: 33%;">C* - Fundraising</div> <div style="width: 33%;">D - To Another Candidate</div> <div style="width: 33%;">E - Salaries</div> <div style="width: 33%;">F* - Equipment</div> <div style="width: 33%;">G - Political Party</div> <div style="width: 33%;">H* - Holding Public Office Expenses</div> <div style="width: 33%;">I - Postage</div> <div style="width: 33%;">J - Penalties</div> <div style="width: 33%;">K* - Office Expenses</div> <div style="width: 33%;">Q* - Donation to Legal Expense Fund</div> <div style="width: 33%;">O* - Other</div> </div>					
* Codes require detailed explanation in required remarks field (k)					

# Disbursements

Amendment  
Pg 2 of 3 ☐ 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>
Bowser Campaign Committee					
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
Thelma White PO Box 51874 Durham, NC 27717					
		<b>c. Level Registered (Specify)</b>			
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:			
				<b>e. Election Sum to Date</b>	
				\$ 250.00	
<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>
	Check	E	10/30/11	\$250.00	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
Fred White PO Box 51874 Durham, NC 27717				Early Voting/ Primary	
		<b>c. Level Registered (Specify)</b>			
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:			
				<b>e. Election Sum to Date</b>	
				\$ 200.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
	Check	B	10/30/11	\$200.00	Flyers
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
Lois Murphy 825 Colonial Heights Durham, NC 27707				Early Voting/ Primary	
		<b>c. Level Registered (Specify)</b>			
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:			
				<b>e. Election Sum to Date</b>	
				\$ 1,100.00	
<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>
	Check	B	10/30/11	\$700.00	Handouts
	Check	E	10/30/11	\$400.00	
<b>5. Total only this Page</b>					\$ 1,550.00
<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> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 3,739.82
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)					
A* - Media      B* - Printing      C* - Fundraising      D - To Another Candidate E - Salaries      F* - Equipment      G - Political Party      H* - Holding Public Office Expenses I - Postage      J - Penalties      K* - Office Expenses      Q* - Donation to Legal Expense Fund O* - Other					
* Codes require detailed explanation in required remarks field (k)					

# Disbursements

Amendment  
Pg 3 of 3 ☐ 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> Bowser Campaign Committee					<b>2. ID Number</b>
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Lois Murphy 825 Colonial Heights Dr. Durham, NC 27704		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b> Early Voting & Primary	
		<b>c. Level Registered (Specify)</b>			
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b>	
				\$ 150.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
	Check	O	10/30/11	\$150.00	Design of Handouts &
				\$	Web Development Facebook Setup
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Lois Murphy 825 Colonial Heights Durham, NC 27704		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b> Early Voting/ Primary	
		<b>c. Level Registered (Specify)</b>			
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		<b>e. Election Sam to Date</b>	
				\$ 250.00	
<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>
	Check	O	10/30/11	\$250.00	Tri-fold 6 cuts
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Bank of America <div style="text-align: center;">IN-PERSON OCT 31 2011 DURHAM BC</div>		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
		<b>c. Level Registered (Specify)</b>			
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b>	
				\$ 492.50	
<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>
	Check	O	10/30/11	\$492.50	Signage - yards
				\$	
<b>5. Total only this Page</b>					\$ 892.50
<b>6. Total of ALL CRO-1310 Pages</b> (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$ 3,739.82
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)					
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;">A* - Media</div> <div style="width: 33%;">B* - Printing</div> <div style="width: 33%;">C* - Fundraising</div> <div style="width: 33%;">D - To Another Candidate</div> <div style="width: 33%;">E - Salaries</div> <div style="width: 33%;">F* - Equipment</div> <div style="width: 33%;">G - Political Party</div> <div style="width: 33%;">H* - Holding Public Office Expenses</div> <div style="width: 33%;">I - Postage</div> <div style="width: 33%;">J - Penalties</div> <div style="width: 33%;">K* - Office Expenses</div> <div style="width: 33%;">Q* - Donation to Legal Expense Fund</div> <div style="width: 33%;">O* - Other</div> </div>					
* Codes require detailed explanation in required remarks field (k)					

# Refunds/Reimbursements From the Committee

Amendment  
Pg 1 of 4 ☐ Yes ☒ No

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

<b>1. Committee Full Name (and Fund if applicable)</b>			<b>2. ID Number</b>	
Bowser Campaign Committee				
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove				
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>d. Type of Committee</b>		<b>h. Original Receipt Date</b>
Melinda Bowser 9 Druid Pl. Durham, NC 27707		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		10/02/11
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 36.00
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>		
O		\$		
<b>b. Job Title/Profession</b>	<b>c. Employer's Name/Specific Field</b>	<b>g. Comments</b>		<b>k. Account Code</b>
Educator	ECHHS			
<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>	
Check	Refreshment - campaign mtg..	10/30/11	\$ 36.00	
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove				
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>d. Type of Committee</b>		<b>h. Original Receipt Date</b>
Melinda Bowser 9 Druid Pl. Durham, NC 27707		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		10/11/11
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 12.79
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>		
O		\$		
<b>b. Job Title/Profession</b>	<b>c. Employer's Name/Specific Field</b>	<b>g. Comments</b>		<b>k. Account Code</b>
Educator	ECHHS			
<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>	
Check	Lunch for poll worker	10/30/11	\$ 12.79	
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove				
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>d. Type of Committee</b>		<b>b. Original Receipt Date</b>
Melinda Bowser 9 Druid Pl. Durham, NC 27707		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		10/9/11
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 14.09
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>		
O		\$		
<b>b. Job Title/Profession</b>	<b>c. Employer's Name/Specific Field</b>	<b>g. Comments</b>		<b>k. Account Code</b>
Educator	ECHHS			
<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>	
Check	Dinner - planning mtg.	10/30/11	\$ 14.09	
<b>4. Total only this Page</b>				\$ 62.88
<b>5. Total of ALL CRO-1320 Pages</b> (This line must be on line 16 of Detailed Summary Page CRO-1100)				\$ 455.59
L - Returned to Contributor      M - Overpayment for Service      N - Exceeded Contribution Limit P* - Reimbursement of In-Kind      O* Other * Codes require detailed explanation in required remarks field (m)				

# Refunds/Reimbursements From the Committee

Pg 2 of 4 Amendment ☐ Yes ☒ No

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

<b>1. Committee Full Name (and Fund if applicable)</b>			<b>2. ID Number</b>	
Bowser Campaign Committee				
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove				
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>d. Type of Committee</b>		<b>h. Original Receipt Date</b>
Melinda Bowser 9 Druid Pl. Durham, NC 27707		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		10/01/11
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 22.57
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>		
O		\$		
<b>b. Job Title/Profession</b>	<b>c. Employer's Name/Specific Field</b>	<b>g. Comments</b>		<b>k. Account Code</b>
Educator	ECHHS			
<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>	
Check	Supplies	10/30/11	\$ 22.57	
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove				
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>d. Type of Committee</b>		<b>h. Original Receipt Date</b>
Melinda Bowser 9 Druid Pl. Durham, NC 27707		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		10/01/11
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 10.60
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>		
O		\$		
<b>b. Job Title/Profession</b>	<b>c. Employer's Name/Specific Field</b>	<b>g. Comments</b>		<b>k. Account Code</b>
Educator	ECHHS			
<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>	
Check	Supplies	10/30/11	\$ 10.60	
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove				
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>d. Type of Committee</b>		<b>h. Original Receipt Date</b>
Melinda Bowser 9 Druid Pl. Durham, NC 27707		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		10/09/11
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 90.96
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>		
O		\$		
<b>b. Job Title/Profession</b>	<b>c. Employer's Name/Specific Field</b>	<b>g. Comments</b>		<b>k. Account Code</b>
Educator	ECHHS			
<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>	
Check	B&W Copies.	10/30/11	\$ 90.96	
<b>4. Total only this Page</b>				\$ 124.13
<b>5. Total of ALL CRO-1320 Pages</b> (This line must be on line 16 of Detailed Summary Page CRO-1100)				\$ 455.59
L - Returned to Contributor      M - Overpayment for Service      N - Exceeded Contribution Limit P* - Reimbursement of In-Kind      O* Other * Codes require detailed explanation in required remarks field (m)				

# Refunds/Reimbursements From the Committee

Pg 3 of 4 Amendment ☐ Yes ☒ No

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

<b>1. Committee Full Name (and Fund if applicable)</b>			<b>2. ID Number</b>	
Bowser Campaign Committee				
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove				
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Quincy Tanner 15 Winchester Ct. Durham, NC 27707		<b>d. Type of Committee</b>		<b>h. Original Receipt Date</b>
		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		10/04/11
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 64.78
		<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>
		O		\$
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>		<b>k. Account Code</b>
Computer Tech.		Duke		
<b>l. Form of Payment</b>		<b>m. Required Remarks</b>		<b>n. Date (mm/dd/yyyy)</b> <b>o. Amount</b>
Check		supplies		10/30/11 \$ 64.78
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove				
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Quincy Tanner 15 Winchester Durham, NC 27707		<b>d. Type of Committee</b>		<b>h. Original Receipt Date</b>
		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		10/09/11
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 20.27
		<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>
		O		\$
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>		<b>k. Account Code</b>
Computer Tech.		Duck		
<b>l. Form of Payment</b>		<b>m. Required Remarks</b>		<b>n. Date (mm/dd/yyyy)</b> <b>o. Amount</b>
Check		Food for volunteers -		10/30/11 \$ 20.27
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove				
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Quincy Tanner 15 Winchester Durham, NC 27707		<b>d. Type of Committee</b>		<b>h. Original Receipt Date</b>
		<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		10/09/11
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		\$ 5.53
		<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>
		O		\$
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>		<b>k. Account Code</b>
Computer Tech		Duke		
<b>l. Form of Payment</b>		<b>m. Required Remarks</b>		<b>n. Date (mm/dd/yyyy)</b> <b>o. Amount</b>
Check		Food for volunteer		10/30/11 \$ 5.53
<b>4. Total only this Page</b>				\$ 90.58
<b>5. Total of ALL CRO-1320 Pages</b> (This line must be on line 16 of Detailed Summary Page CRO-1100)				\$ 455.59
L - Returned to Contributor      M - Overpayment for Service      N - Exceeded Contribution Limit P* - Reimbursement of In-Kind      O* Other * Codes require detailed explanation in required remarks field (m)				

# Refunds/Reimbursements From the Committee

Pg 4 of 4 Amendment ☐ Yes ☒ No

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

<b>1. Committee Full Name (and Fund if applicable)</b>			<b>2. ID Number</b>			
Bowser Campaign Committee						
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Lois Murphy 825 Colonial Heights Dr. Durham, NC 27704		<b>d. Type of Committee</b> <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party		<b>h. Original Receipt Date</b> 10/09/11		
		<b>e. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		<b>i. Original Receipt Amount</b> \$ 177.18		
		<b>f. Purpose Code</b> O		<b>j. Election Sum to Date</b> \$		
		<b>b. Job Title/Profession</b> Substitute Teacher		<b>c. Employer's Name/Specific Field</b> DPS	<b>g. Comments</b>	<b>k. Account Code</b>
		<b>l. Form of Payment</b> Check		<b>m. Required Remarks</b> supplies		<b>n. Date (mm/dd/yyyy)</b> 10/10/11
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
		<b>d. Type of Committee</b> <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party		<b>h. Original Receipt Date</b>		
		<b>e. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>i. Original Receipt Amount</b> \$		
		<b>f. Purpose Code</b> O		<b>j. Election Sum to Date</b> \$		
		<b>b. Job Title/Profession</b> Computer Tech.		<b>c. Employer's Name/Specific Field</b> Duck	<b>g. Comments</b>	<b>k. Account Code</b>
		<b>l. Form of Payment</b>		<b>m. Required Remarks</b>		<b>n. Date (mm/dd/yyyy)</b>
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  <div style="text-align: center;">             IN-PERSON               OCT 3 1 2011               DURHAM BO.           </div>		<b>d. Type of Committee</b> <input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party		<b>h. Original Receipt Date</b>		
		<b>e. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>i. Original Receipt Amount</b> \$		
		<b>f. Purpose Code</b> O		<b>j. Election Sum to Date</b> \$		
		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	<b>g. Comments</b>	<b>k. Account Code</b>
		<b>l. Form of Payment</b>		<b>m. Required Remarks</b>		<b>n. Date (mm/dd/yyyy)</b>
<b>4. Total only this Page</b>				\$ 178.00		
<b>5. Total of ALL CRO-1320 Pages</b> (This line must be on line 16 of Detailed Summary Page CRO-1100)				\$ 455.59		
L - Returned to Contributor      M - Overpayment for Service      N - Exceeded Contribution Limit P* - Reimbursement of In-Kind      O* Other						
* Codes require detailed explanation in required remarks field (m)						