

Disclosure Report Cover

Amendment

☐ Yes☒ No

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

1. Committee Information	
a. Full Name Durham Prepared Meal Tax Committee	c. ID Number
b. Mailing Address (include City, State and Zip Code) PO Box 13508 Research Triangle Park, NC 27709	d. Date Filed 11/13/2008
	e. Phone Number 919-549-9506

2. Report Year 2008	3. Period Start Date (mm/dd/yy) 10/21/2008	4. Period End Date (mm/dd/yy) 11/13/2008	5. Treasurer Full Name Robert D. Teer, Jr.
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6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	Municipal	State/County	Referendum
<input type="checkbox"/> PAC	<input checked="" type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input checked="" type="checkbox"/> Final
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Other:		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	10. Special Report Name
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	
8. Number of Fundraisers this Report				

11. Account Information		11. Account Information	
a. Financial Institution Full Name Cardinal State Bank		a. Financial Institution Full Name	
b. Purpose	c. Account Code	b. Purpose	c. Account Code
d. Period Begin Balance \$ 615.00		d. Period Begin Balance \$	

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.

Robert D. Teer, Jr.

Printed Name of Signer

Signature of Appointed Treasurer

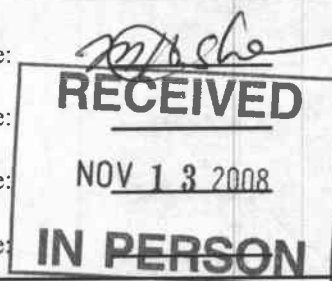
11/13/2008

Date

FOR OFFICE USE ONLY

Date Received: 11/13/08
Date Postmarked: _____
Date Scanned: _____
Date Data Entered: _____

Employee: _____
Employee: _____
Employee: _____
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	
Durham Prepared Meal Tax Committee		Final			
Start of Election Cycle: January 1, 2008		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 615.00		\$ 0	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$ 50.00	
6) Contributions from Individuals (CRO-1210)		\$ 500.00		\$ 2900.00	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$ 5000.00		\$ 5000.00	
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)		\$ 1340.00		\$ 1340.00	
11c) Outside Sources of Income (CRO-1250)		\$ 17875.00		\$ 64765.00	
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, 11d and 11e)		\$ 24715.00		\$ 74055.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 24426.67		\$ 43061.67	
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)		\$ 825.00		\$ 30915.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 25251.67		\$ 73976.67	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 78.33		\$ 78.33	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 5000.00			
22) Debts and Obligations owed By the Committee (CRO-1610)		\$ 4708.00			
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)		\$ 16000.00		\$ 33000.00	
28) Contributions to be Refunded (CRO-1215)		\$		\$	

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Contributions from Individuals

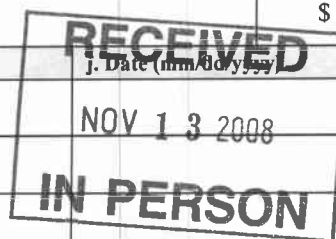
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Amendment

☐ Yes ☒ No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Durham Prepared Meal Tax Committee						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Reyn Bowman 2203 Shoreham Street Durham, NC 27707 919-680-8300			President & CEO			
			c. Employer's Name/Specific Field			
			Durham Convention & Visitors Bureau			
					e. Election Sum to Date	
					\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>		Check		11/07/2008		\$ 500.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 500.00	
5. Total of ALL CRO-1210 Pages					\$ 500.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						



Loan Proceeds

Pg 1 of 1

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report proceeds from a loan and loan endorser's information
A loan proceeds statement must accompany each loan that is from an individual

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Durham Prepared Meal Tax Committee					
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Robert D. Teer, Jr. PO Box 13508 Research Triangle Park, NC 27709 919-549-9506		Developer			
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)	
		Teer Associates		11/05/2008	
				f. End Date (mm/dd/yyyy)	
				On Demand	
g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment	k. Amount	
0 %	None		Check	\$ 5,000.00	
l. Full Name of Lending Institution				m. Loan Number	
4. Endorsers/Makers <i>(The people who guarantee the loan.)</i>					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
				d. Percentage	
				e. Amount	
				% \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
				d. Percentage	
				e. Amount	
				% \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
				d. Percentage	
				e. Amount	
				% \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
				d. Percentage	
				e. Amount	
				% \$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
				d. Percentage	
				e. Amount	
				% \$	
5. Total of ALL CRO-1410 Pages				\$ 5,000.00	
<i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i>					

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Loan Proceeds Statement

The individual making a loan to the committee must provide the following information. Failure to provide all of the information requested could be a violation of campaign reporting disclosure laws.

- **Name of committee to receive loan:**

Durham Prepared Meal Tax Committee

- **Person lending money to committee (Lender):**

Robert D. Teer, Jr.

- **Date of loan to committee:** 11/05/2008

- **Name of lending institution and account number (source):**

N/A

- **Amount of loan:** \$5,000.00

- **Names of all parties responsible for payment of loan (guarantors):**

N/A

- **Period of loan:** On Demand

- **Rate of interest of loan:** -0-

- **Security pledged for loan:** None

I, Robert D. Teer, Jr., acknowledge that all of the information
(Person lending money to committee)
provided is complete, true, and accurate. I further understand I may not forgive a loan
that has an outstanding balance to any source.

Robert D. Teer, Jr.
Signature of Lender

Robert D. Teer, Jr.
Signature of Treasurer of Committee

This form must be submitted with the disclosure report for which the loan is initially disclosed.

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July 2007

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Other Receipt Sources

Pg

1

of

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Amendment

☐

Yes

☒

No

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Durham Prepared Meal Tax Committee					
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>					
<input type="checkbox"/> Interest		<input checked="" type="checkbox"/> Contributions from Not-for-Profit Organizations		<input type="checkbox"/> Outside Sources of Income	
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
St. Joseph's Historic Foundation 804 Fayetteville Street Durham, NC 27701 919-683-1709					
			c. Outside Source Explanation		
			Foundation	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	
	Check		10/29/2008	\$ 500.00	
				\$	
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
Durham Central Park, Inc. 534 Foster Street Durham, NC 27701 919-794-8194					
			c. Outside Source Explanation		
			Foundation	e. Election Sum to Date \$ 340.00	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
	Check		10/29/2008	\$ 340.00	
				\$	
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
Carolina Theatre of Durham, Inc. DBA Carolina Theatre 309 W. Morgan Street Durham, NC 27701 919-560-3040					
			c. Outside Source Explanation		
			Public Entertainment	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	
	check		11/07/2008	\$ 500.00	
				\$	
5. Total only this Page				\$ 1340.00	
6. Total of ALL CRO-1250 Pages <i>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</i> <i>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</i> <i>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</i>				\$ 1340.00	

Other Receipt Sources

Pg

1

of

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Amendment

☐

Yes

☒

No

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Durham Prepared Meal Tax Committee					
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>					
<input type="checkbox"/> Interest		<input type="checkbox"/> Contributions from Not-for-Profit Organizations		<input checked="" type="checkbox"/> Outside Sources of Income	
4. Contributor Information				<input type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
Scientific Properties, LLC 411 W. Chapel Hill Street, Suite 1006 Durham, NC 27701 919-682-8187					
			c. Outside Source Explanation		
			Developer	e. Election Sum to Date	
				\$ 750.00	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
	Check		10/23/2008	\$ 750.00	
				\$	
4. Contributor Information				<input type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
Chautauqua, Inc. 501 Washington Street, Suite H Durham, NC 27701 919-530-8150					
			c. Outside Source Explanation		
			Publication	e. Election Sum to Date	
				\$ 300.00	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
	Check		10/23/2008	\$ 300.00	
				\$	
4. Contributor Information				<input type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
Duke Corporate Accounts Payable Duke University Box 104131 Durham, NC 27708 919-684-3112					
			c. Outside Source Explanation		
			Educational Institution	e. Election Sum to Date	
				\$ 3000.00	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
	Check		10/23/2008	\$ 3000.00	
				\$	
5. Total only this Page				\$ 4050.00	
6. Total of ALL CRO-1250 Pages <i>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</i> <i>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</i> <i>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</i>				\$ 17050.00	

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Other Receipt Sources

Pg

2

of

3

Amendment

☐ Yes

☒ No

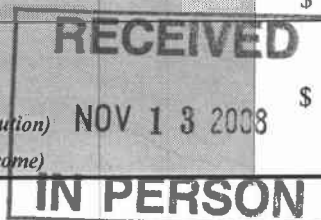
No

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Durham Prepared Meal Tax Committee					
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>					
<input type="checkbox"/> Interest		<input type="checkbox"/> Contributions from Not-for-Profit Organizations		<input checked="" type="checkbox"/> Outside Sources of Income	
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
Quintiles/Innovex PO Box 14325 Research Triangle Park, NC 27709 919-998-2000				e. Election Sum to Date \$ 2500.00	
			c. Outside Source Explanation		
			Clinical Research Organization		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
	Check		10/23/2008	\$ 2500.00	
				\$	
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
Greenfire Real Estate Holdings, LLC PO Box 3658 Durham, NC 27702 919-667-9770				e. Election Sum to Date \$ 1000.00	
			c. Outside Source Explanation		
			Developer		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
	Check		10/29/2008	\$ 1000.00	
				\$	
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
Verizon PO Box 2200 Folsom, CA 95763-2200 916-357-3270				e. Election Sum to Date \$ 2500.00	
			c. Outside Source Explanation		
			Communications Company		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
	Check		10/29/2008	\$ 2500.00	
				\$	
5. Total only this Page				\$ 6000.00	
6. Total of ALL CRO-1250 Pages					
(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)					
(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)					
(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)					

CRO-1250

NC State Board of Elections



December 2007

Other Receipt Sources

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Amendment

☐ Yes ☒ No

No

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Durham Prepared Meal Tax Committee					
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>					
<input type="checkbox"/> Interest		<input type="checkbox"/> Contributions from Not-for-Profit Organizations		<input checked="" type="checkbox"/> Outside Sources of Income	
4. Contributor Information				<input type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
Wachovia Bank, N.A. 302 S. College Street, #4000 One Wachovia Center Charlotte, NC 28288-0013 1-888-216-2308					
			c. Outside Source Explanation		
			Banking Institution		
			e. Election Sum to Date		
			\$ 1000.00		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
	Check		11/07/2008	\$ 1000.00	
				\$	
4. Contributor Information				<input type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
GlaxoSmithKline 200 N. 16 th Street FP-0810 Philadelphia, PA 19102 919-483-2100					
			c. Outside Source Explanation		
			Pharmaceutical Company		
			e. Election Sum to Date		
			\$ 1000.00		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
	Check		11/07/2008	\$ 1000.00	
				\$	
4. Contributor Information				<input type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #	d. Comments	
Duke Power Company PO Box 37929 Charlotte, NC 28237 1-800-777-9898					
			c. Outside Source Explanation		
			Utility Provider		
			e. Election Sum to Date		
			\$ 5000.00		
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
	Check		11/11/2008	\$ 5000.00	
				\$	
5. Total only this Page				\$ 7000.00	
6. Total of ALL CRO-1250 Pages					
<i>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</i>					
<i>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</i>					
<i>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</i>					

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NOV 13 2008

IN PERSON

In-Kind Contributions

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Amendment

☐ Yes ☒ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Durham Prepared Meal Tax Committee			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
WRJD 1410 707 Leon Street Durham, NC 27704 919-220-3226		<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input checked="" type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date	
		\$ 225.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
14 ten-second pre-recorded billboards		10/27/2008	\$ 225.00
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
Melvin Whitley DBA Tell Melvin Consulting 2614 Harvard Avenue Durham, NC 27703 919-957-0443		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date	
		\$ 300.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Administrative services in connection with poll workers.		10/29/2008	\$ 300.00
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
Melvin Whitley DBA Tell Melvin Consulting 2614 Harvard Avenue Durham, NC 27703 919-957-0443		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date	
		\$ 600.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
Administrative services in connection with poll workers.		10/31/2008	\$ 300.00
			\$
			\$
4. Total only this Page		\$ 825.00	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 825.00	

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Disbursements

Pg 1 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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Durham Prepared Meal Tax Committee						
3. Type of Disbursement <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						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Square One Marketing, Inc. 3805-D University Drive Durham, NC 27707 919-490-6991						
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 24850.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	Check	A,B,D	10/23/2008	\$1500.00	Media; printing production cost	
	Check	A	10/23/2008	\$4915.00	Radio spots	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Robert D. Teer, Jr. PO Box 13508 Research Triangle Park, NC 27709 919-549-9506						
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 81.67	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	Check	B	10/23/2008	\$81.67	Printing hand-out	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Melvin Whitley 2614 Harvard Avenue Durham, NC 27703 919-957-0443						
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 3404.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	Check	O	10/29/2008	\$2380.00	Poll worker expenses	
	Check	O	10/31/2008	\$1024.00	Poll worker expenses	
5. Total only this Page					\$ 9900.67	
6. Total of ALL CRO-1310 Pages						
<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>					\$ 24426.67	
7. Purpose Codes (List detailed expenditure code in (h.) above)						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		O* - Other
* Codes require detailed explanation in required remarks field (k)						

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Disbursements

Pg 2 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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Durham Prepared Meal Tax Committee						
3. Type of Disbursement <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		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Square One Marketing, Inc. 3805-D University Drive Durham, NC 27707 919-490-6991					e. Election Sum to Date \$ 37776.00	
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal	<input type="checkbox"/> County:		
			<input type="checkbox"/> State	<input type="checkbox"/> Municipality:		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	Check	A,B,O	11/05/2008	\$6000.00	Ads, printing, poster distrib.	
	Check	A,B,O	11/12/2008	\$6926.00	Ads, signs, tents, spoons	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Square One Marketing, Inc. 3805-D University Drive Durham, NC 27707 919-490-6991					e. Election Sum to Date \$ 39376.00.	
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal	<input type="checkbox"/> County:		
			<input type="checkbox"/> State	<input type="checkbox"/> Municipality:		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	Check	O	11/12/2008	\$1600	PR fees; sign distribution	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
					<div style="border: 2px solid black; padding: 5px; text-align: center;"> RECEIVED NOV 13 2008 IN PERSON </div>	
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal	<input type="checkbox"/> County:		
			<input type="checkbox"/> State	<input type="checkbox"/> Municipality:	e. Election Sum to Date	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
5. Total only this Page					\$ 14526.00	
6. Total of ALL CRO-1310 Pages						
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)						
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)						
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						
7. Purpose Codes (List detailed expenditure code in (h.) above)						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		O* - Other
* Codes require detailed explanation in required remarks field (k)						

Outstanding Loans

Pg 1 of 1 Amendment ☐ Yes ☒ No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)			2. ID Number		
Durham Prepared Meal Tax Committee					
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Robert D. Teer, Jr. PO Box 13508 Research Triangle Park, NC 27709 919-549-9506		Developer			
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)	
		Teer Associates		11/05/2008	
				f. End Date (mm/dd/yyyy)	
				On Demand	
g. Rate		h. Security Pledged		i. Original Loan Amount	
0 %		None		\$ 5000.00	
j. Remaining Loan Balance					
\$ 5000.00					
k. Full Name of Lending Institution				l. Loan Number	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)	
				f. End Date (mm/dd/yyyy)	
g. Rate		h. Security Pledged		i. Original Loan Amount	
%				\$	
j. Remaining Loan Balance					
k. Full Name of Lending Institution				l. Loan Number	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)	
				f. End Date (mm/dd/yyyy)	
g. Rate		h. Security Pledged		i. Original Loan Amount	
%				\$	
j. Remaining Loan Balance					
k. Full Name of Lending Institution				l. Loan Number	
4. Total only this Page				\$ 5000.00	
5. Total of ALL CRO-1430 Pages				\$ 5000.00	
(This line must be on line 21 of Detailed Summary Page CRO-1100)					

Debts and Obligations Owed By the Committee

Pg 1 of 1

Amendment
☐ Yes ☒ No

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card payments.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Durham Prepared Meal Tax Committee			
3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
Square One Marketing, Inc. 3805-D University Drive Durham, NC 27707 919-490-6991			
b. Description of Creditor		Marketing Company	
c. Beginning Balance	d. Total Amount Paid	e. Total Amount Incurred	f. Remaining Balance
\$ 6308.00	\$ 1600.00	\$ 6308.00	\$ 4708.
g. Incurred Debts (what the committee received)			
g1. Date (mm/dd/yyyy)	g2. Amount	g1. Date (mm/dd/yyyy)	g2. Amount
10/31/2008	\$ 6308.00		\$
g3. Item Description		g3. Item Description	
See attached Invoice #8090 marked Exhibit A.			
g4. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g4. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)	
3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
b. Description of Creditor			
c. Beginning Balance	d. Total Amount Paid	e. Total Amount Incurred	f. Remaining Balance
\$	\$	\$	\$
g. Incurred Debts (what the committee received)			
g1. Date (mm/dd/yyyy)	g2. Amount	g1. Date (mm/dd/yyyy)	g2. Amount
	\$		\$
g3. Item Description		g3. Item Description	
g4. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g4. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)	
		<div style="border: 2px solid black; padding: 5px; text-align: center;"> RECEIVED NOV 1 3 2003 IN PERSON </div>	
4. Total only this Page (This should be the sum of all item '3f' from this page)			\$ 4708.00
5. Total of ALL CRO-1610 Pages (This line must be on line 22 of Detailed Summary Page CRO-1100)			\$ 4708.00

SQUARE ONE
MARKETING INC.

EXHIBIT A

October 31, 2008

Mr. Robb Teer
Committee Chair
A Taste FOR Durham's Future
c/o Chamber of Commerce Legacy Foundation
PO Box 3829
Durham, NC 27702

Invoice # 8090

CREDIT

Credit, Yard Signs - 32 Q

\$192.00 CR

ACCOUNT MANAGEMENT

Account Management, Project Fee

\$6,000.00

PR

PR, Get Out to Vote Rally - October 31st

\$300.00

MISCELLANEOUS

Miscellaneous, Yard Sign Distribution - 200 Q

\$200.00

Subtotal

\$6,308.00

TOTAL DUE

\$6,308.00

INVOICE TOTAL

\$6,308.00 ✓

TERMS: NET 30 DAYS. Any invoice past due these terms is subject to interest charges of 1.5% per monthly invoice.

Thank you - we appreciate your business!

Ashley Mitchell

Ashley Mitchell, Senior Account Manager

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