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: WORTH L. HILL FOR SHERIFF

c. ID Number:

b. Mailing Address (include City, State and Zip Code): 4540 HOLLOMAN Rd. DURHAM N.C. 27703

d. Date Filed:

e. Phone Number:

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2010	01-01-2010	4-17-2010	Donald Wayne Baker

6. Type of Committee (Check One)

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

7. Type of Fund (Check All Applicable)

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

8. Number of Fundraisers this Report

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

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

11. Account Information

a. Financial Institution Full Name: SUNTRUST

b. Purpose: CAMPAIGN ACCOUNT

c. Account Code:

d. Period Begin Balance: $1,610.63

11. Account Information

a. Financial Institution Full Name:

b. Purpose:

c. Account Code:

d. Period Begin Balance:

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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.

Donald Wayne Baker	Donald W. Baker	4-22-2010
Printed Name of Signer	Signature of Appointed Treasurer	Date

FOR OFFICE USE ONLY

Date Received:	4/22/2010	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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
WANTL L. HILL FOR Sheriff	1ST QUARTER	

Start of Election Cycle: January 1, _____		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 1610.13	$ 1510.13
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	$ 3000.00	$ 3000.00
6) Contributions from Individuals	(CRO-1210)	$ 5,324.00	$ 5,724.00
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	(CRO-1250)		
11a) Interest on Bank Accounts	(CRO-1250)	$	$
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	$	$
11c) Outside Sources of Income	(CRO-1250)	$	$
12) "Goods and Services" Contributions	(CRO-1260)	$	$
13) TOTAL RECEIPTS *(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)*		$ 8324.00	$ 8,724.00
EXPENDITURES			
14) Disbursements	(CRO-1310)		
14a) Operating Expenditures	(CRO-1310)	$ 3,771.27	$ 4071.27
14b) Contributions to Candidates/Political Committees	(CRO-1310)	$	$
14c) Coordinated Party Expenditures	(CRO-1310)	$	$
15) Loan Repayments	(CRO-1420)	$	$
16) Refunds/Reimbursements From the Committee	(CRO-1320)	$	$
17) In-Kind Contributions	(CRO-1510)	$	$
18) TOTAL EXPENDITURES *(Add lines 14a, 14b, 14c, 15, 16, and 17)*		$ 3,771.27	$ 4071.27
19) Cash on Hand at End *(Add lines 4 and 13 together, then subtract line 18)*		$ 6,163.36	$ 6,163.36
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1530)	$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	$	
22) Debts and Obligations owed By the Committee	(CRO-1510)	$	
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-1610)	$	$
27) 48-Hour Notice Reports Sum		$	$

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Aggregated Contributions from Individuals

Page 1 of 4

Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
WORTH L. HILL FOR SHERIFF	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove		Check		01-20-10	$ 100.00
☐ Add ☐ Remove		"		01-19-10	$ 100.00
☐ Add ☐ Remove		"		01-20-10	$ 100.00
☐ Add ☐ Remove		"		01-20-10	$ 25.00
☐ Add ☐ Remove		"		01-19-10	$ 50.00
☐ Add ☐ Remove		"		01-20-10	$ 50.00
☐ Add ☐ Remove		"		01-19-10	$ 50.00
☐ Add ☐ Remove		"		01-20-10	$ 50.00
☐ Add ☐ Remove		"		01-19-10	$ 50.00
☐ Add ☐ Remove		"		01-20-10	$ 25.00
☐ Add ☐ Remove		"		01-21-10	$ 50.00
☐ Add ☐ Remove		"		01-20-10	$ 50.00
☐ Add ☐ Remove		"		01-21-10	$ 25.00
☐ Add ☐ Remove		"		01-21-10	$ 40.00
☐ Add ☐ Remove		"		01-24-10	$ 25.00
☐ Add ☐ Remove		"		01-25-10	$ 25.00
☐ Add ☐ Remove		"		01-22-10	$ 25.00
☐ Add ☐ Remove		"		01-20-10	$ 35.00
☐ Add ☐ Remove		"		01-25-10	$ 50.00
☐ Add ☐ Remove		"		01-25-10	$ 50.00
☐ Add ☐ Remove		"		01-24-10	$ 50.00
☐ Add ☐ Remove		"		01-24-10	$ 50.00
☐ Add ☐ Remove		"		01-21-10	$ 50.00

4. Total only this Page	$ 1,125.00
5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)	$ 5,324.00

Aggregated Contributions from Individuals

Page 2 of 4

Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
WORTH L. HILL FOR SHERIFF	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove		CHECK		01-22-10	$ 50.00
☐ Add ☐ Remove		"		01-25-10	$ 100.00
☐ Add ☐ Remove		"		01-22-10	$ 100.00
☐ Add ☐ Remove		"		01-21-10	$ 100.00
☐ Add ☐ Remove		"		01-22-10	$ 100.00
☐ Add ☐ Remove		"		01-21-10	$ 100.00
☐ Add ☐ Remove		"		01-22-10	$ 100.00
☐ Add ☐ Remove		"		01-22-10	$ 100.00
☐ Add ☐ Remove		"		01-26-10	$ 100.00
☐ Add ☐ Remove		"		01-26-10	$ 100.00
☐ Add ☐ Remove		"		01-26-10	$ 100.00
☐ Add ☐ Remove		"		01-27-10	$ 100.00
☐ Add ☐ Remove		"		01-27-10	$ 100.00
☐ Add ☐ Remove		"		01-22-10	$ 100.00
☐ Add ☐ Remove		"		01-01-10	$ 100.00
☐ Add ☐ Remove		"		01-28-10	$ 50.00
☐ Add ☐ Remove		"		01-28-10	$ 50.00
☐ Add ☐ Remove		"		01-21-10	$ 50.00
☐ Add ☐ Remove		"		02-02-10	$ 50.00
☐ Add ☐ Remove		"		02-02-10	$ 25.00
☐ Add ☐ Remove		"		01-30-10	$ 25.00
☐ Add ☐ Remove		"		01-20-10	$ 25.00
☐ Add ☐ Remove		"		01-23-10	$ 25.00
4. Total only this Page					$ 1,750.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*					$ 5,324.00

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Aggregated Contributions from Individuals

Page 3 of 4

Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
WORTH L. HILL FOR SHERIFF	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove		Check		01-30-10	$ 25.00
☐ Add ☐ Remove		"		02-01-10	$ 25.00
☐ Add ☐ Remove		"		01-27-10	$ 25.00
☐ Add ☐ Remove		"		01-28-10	$ 25.00
☐ Add ☐ Remove		"		01-26-10	$ 25.00
☐ Add ☐ Remove		"		01-26-10	$ 100.00
☐ Add ☐ Remove		"		02-04-10	$ 25.00
☐ Add ☐ Remove		"		02-03-10	$ 50.00
☐ Add ☐ Remove		"		02-01-10	$ 100.00
☐ Add ☐ Remove		"		02-01-10	$ 100.00
☐ Add ☐ Remove		"		02-08-10	$ 25.00
☐ Add ☐ Remove		"		02-05-10	$ 25.00
☐ Add ☐ Remove		"		02-06-10	$ 25.00
☐ Add ☐ Remove		"		02-08-10	$ 50.00
☐ Add ☐ Remove		"		01-28-10	$ 100.00
☐ Add ☐ Remove		"		02-08-10	$ 100.00
☐ Add ☐ Remove		"		02-08-10	$ 100.00
☐ Add ☐ Remove		"		02-11-10	$ 100.00
☐ Add ☐ Remove		"		02-15-10	$ 50.00
☐ Add ☐ Remove		"		02-12-10	$ 50.00
☐ Add ☐ Remove		"		02-12-10	$ 100.00
☐ Add ☐ Remove		"		02-26-10	$ 100.00
☐ Add ☐ Remove		"		02-26-10	$ 50.00
4. Total only this Page					$ 1,375.00
5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)					$ 5,324.00

Aggregated Contributions from Individuals

Page 4 of 4

Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
WORTH L. HILL FOR SHERIFF	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove		Check		02-28-10	$ 25.00
☐ Add ☐ Remove		"		02-24-10	$ 100.00
☐ Add ☐ Remove		"		03-02-10	$ 99.00
☐ Add ☐ Remove		"		03-03-10	$ 100.00
☐ Add ☐ Remove		"		02-28-10	$ 100.00
☐ Add ☐ Remove		"		03-02-10	$ 25.00
☐ Add ☐ Remove		"		03-16-10	$ 100.00
☐ Add ☐ Remove		"		03-16-10	$ 100.00
☐ Add ☐ Remove		"		03-15-10	$ 25.00
☐ Add ☐ Remove		"		04-05-10	$ 100.00
☐ Add ☐ Remove		"		04-10-10	$ 100.00
☐ Add ☐ Remove		"		04-07-10	$ 100.00
☐ Add ☐ Remove		"		03-22-10	$ 50.00
☐ Add ☐ Remove		"		04-07-10	$ 25.00
☐ Add ☐ Remove		"		04-12-10	$ 25.00
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$

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4. Total only this Page	$ 1074.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 5,324.00

Contributions from Individuals

Pg ____ of ____

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
WORTH L. HILL FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JOHN L. ATKINS III PO BOX 12037 RTP 27709 - 919-489-6864	ARCHITECT	OBRIENS-ATKINS		$ 500.00

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

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CHARLES A. SANDERS 3200 RUGBY RD. DURHAM 27707 919-682-5653	VP	CARDINAL STATE BANK		$ 200.00

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

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
DAVID LONG P.O. BOX 450 MURRAYVILLE N.C 27560 919-660-5304	OWNER	LONG REV. CO.		$ 250.00

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

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4. Total only this Page	$ 950.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Itemized Summary Page (CRO-1100))	$ 3000.00

Contributions from Individuals

Pg ____ of ____

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
WORTH L. HILL FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ROBERT DILLARD TYREE JR. P.O. BOX 1305 RTP 27709 919-489-2428	VP	TYREE CONST. CO		$ 250.00

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

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
RODNEY M. LONG 10500 WORLD TRADE BLVD. RALEIGH NC. 27617 919-660-5304	OWNER	LONG BEV. CO.		$ 1000.00

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

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CECIL R. LEE 1200 HORSESHOE RD. DURHAM 27703 919-596-6341	RETIRED			$ 200.00

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

4. Total only this Page	$ 1,450.00
5. Total of ALL CRO-1210 Pages (This box must be an item in Detailed Summary Page CRO-1130)	$ 3,000.00

Contributions from Individuals

Pg ____ of ____ Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
WORTH L. HILL FOR SHERIFF	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Cycle Sum to Date
RICHARD D. BUCHANAN 1821 GLENN SCHOOL Rd. DURHAM 27704				$ 200.00

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

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Cycle Sum to Date
ALVIS A MATTHEWS 4508 ROGERS Rd. DURHAM 27703 919.596-5276	RETIRED			$ 200.00

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

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Cycle Sum to Date
EDWARD J. SHAUGHNESSY 31 SOUTHAMPTON PL. DURHAM 27705 919-660-5304	ENGINEER	DUKE UNIV.		$ 200.00

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

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4. Total only this Page	$ 600.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 3000.00

Disbursements

Pg ____ of ____

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
WORTH L. HILL FOR SHERIFF	

3. Type of Disbursement: *(Please use separate CRO-1310 form for each type of Disbursement)*

☐ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Update

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
NCCU FOUNDATION DURHAM N.C.	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	CONTRIBUTION e. Election Sum to Date $ 75.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				$	
				$	

4. Payee Information ☐ Add ☐ Update

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
PEOPLES ALLIANCE DURHAM N.C.	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	CONTRIBUTION e. Election Sum to Date $ 350.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				$	
				$	

4. Payee Information ☐ Add ☐ Update

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
WDNC ATLANTIC CENTRAL DURHAM N.C.	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	CONTRIBUTION e. Election Sum to Date $ 100.00

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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	$ 525.00
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)*	$ 3,771.27

7. Purpose Codes (Use detailed explanation 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.)

Amendment ☐ Yes ☐ No

Disbursements

Pg ____ of ____

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 Email (Optional))	2. ID Number
WORTL L. HILL for Sheriff	

3. Type of Disbursement (Please use separate CRO-1310 for each type of Disbursement)

☐ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Change

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
George White Bar Asson. Durham N.C.	c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:	CONTRIBUTION e. Election Sum to Date $ 50.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				$	
				$	

4. Payee Information ☐ Add ☐ Change

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
PABLO RODRIQUEZ 2713 ROLLING OAK LN RALEIGH N.C. 27606	c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:	Computer Service e. Election Sum to Date $ 128.36

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				$	
				$	

4. Payee Information ☐ Add ☐ Change

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
QUALITY IMPRESSIONS 303 EAST ALTON ST. DURHAM N.C. 27707 919-682-9124	c. Level Registered (Specify): ☐ Federal ☐ County: ☐ State ☐ Municipality:	Advertising e. Election Sum to Date $ 1,637.63

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f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
			APR 22 2010		
			IN PERSON		

5. Total of this Page	$ 1,815.99
6. Total of All CRO-1310 Pages *(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)* *(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)* *(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 3,771.27

7. Purpose Codes (Write in the Expenditure Code Below)

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 (k) field

Disbursements

Pg ____ of ____

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)

WORTH L. HILL FOR SHERIFF

2. ID Number

3. Type of Disbursement (Please use separate CRO-1310 for each type of Disbursement.)

☐ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
POSTMASTER DURHAM N.C.		☐ Federal ☐ County: ☐ State ☐ Municipality:	POSTAGE	$ 198.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	CLECK	POSTAGE	1-13-2010	$ 154.00	
	Check	POSTAGE	3-22-2010	$ 44.00	

4. Payee Information ☐ Add ☐ Edit

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
MLK STEERING COMM. DURHAM N.C.		☐ Federal ☐ County: ☐ State ☐ Municipality:	CONTRIBUTION	$ 100.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				$	
				$	

4. Payee Information ☐ Add ☐ Edit

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Level Registered (Specify)	d. Comments	e. Election Sum to Date
DURHAM COUNTY BOARD OF ELECTIONS		☐ Federal ☐ County: ☐ State ☐ Municipality:	FILING FEE	$ 892.28

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APR 22 2010
IN PERSON

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				$	
				$	

5. Total on this Page $ 1190.28

6. Total of All CRO-1310 Pages $ 3,771.27

(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 (Use appropriate purpose code for each expenditure listed on this CRO-1310.)

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 requiring detailed explanation to required Exempt Activity Report

Disbursements

Pg ____ of ____

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 Mailing Address (if applicable)

WORTH L. HILL FOR SHERIFF

2. ID Number

3. Type of Disbursement (Please see separate CRO-1310 Form for each Type of Disbursement)

☐ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Update

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	c. Comments
TRIANGLE TRIBUNE DURHAM N.C.		ADVERTISING
	c. Level Registered (Specify): ☐ Federal ☐ State ☐ County: ☐ Municipality:	e. Election Sum to Date: $ 240.00

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				$	
				$	

4. Payee Information ☐ Add ☐ Update

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify): ☐ Federal ☐ State ☐ County: ☐ 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
				$	
				$	

4. Payee Information ☐ Add ☐ Update

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

RECEIVED
APR 22 2010
IN PERSON

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				$	
				$	

5. Total From This Page: $ 240.00

6. Total From All CRO-1310 Pages: $ 3,771.27

(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 (for Operating Expenditures only)

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