

IN-PERSON




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.

DURHAM BOE																																							
1. Committee Information																																							
a. Full Name		c. ID Number																																					
ELECT DON MOFFITT																																							
b. Mailing Address (include City, State and Zip Code)		d. Date Filed																																					
2110 ENGLEWOOD AVE DURHAM, NC 27705		11/16/2013																																					
		e. Phone Number																																					
		(919) 286-3584																																					
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name																																				
2013	09/25/2013	10/21/2013	MARILYN BUTLER																																				
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)																																					
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; font-weight: bold;">Municipal</td> <td style="width:33%; font-weight: bold;">State/County</td> <td style="width:33%; font-weight: bold;">Referendum</td> </tr> <tr> <td><input type="checkbox"/> Organizational</td> <td><input type="checkbox"/> Organizational</td> <td><input type="checkbox"/> Organizational</td> </tr> <tr> <td><input type="checkbox"/> Thirty-five day</td> <td><input type="checkbox"/> Quarterly</td> <td><input type="checkbox"/> Pre-referendum</td> </tr> <tr> <td><input type="checkbox"/> Pre-primary</td> <td><input type="checkbox"/> First</td> <td><input type="checkbox"/> Final</td> </tr> <tr> <td><input checked="" type="checkbox"/> Pre-election</td> <td><input type="checkbox"/> Second</td> <td><input type="checkbox"/> Supplemental Final</td> </tr> <tr> <td><input type="checkbox"/> Pre-runoff</td> <td><input type="checkbox"/> Third</td> <td><input type="checkbox"/> Annual</td> </tr> <tr> <td><input type="checkbox"/> Semi-annual</td> <td><input type="checkbox"/> Fourth</td> <td><input type="checkbox"/> Special</td> </tr> <tr> <td><input type="checkbox"/> Mid Year</td> <td><input type="checkbox"/> Semi-annual</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Year End</td> <td><input type="checkbox"/> Mid Year</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Final</td> <td><input type="checkbox"/> Year End</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Special</td> <td><input type="checkbox"/> Final</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>		Municipal	State/County	Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum	<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final	<input checked="" type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final	<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual	<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special	<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year		<input type="checkbox"/> Final	<input type="checkbox"/> Year End		<input type="checkbox"/> Special	<input type="checkbox"/> Final			<input type="checkbox"/> Special	
Municipal	State/County	Referendum																																					
<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational																																					
<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum																																					
<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final																																					
<input checked="" type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final																																					
<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual																																					
<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special																																					
<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual																																						
<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year																																						
<input type="checkbox"/> Final	<input type="checkbox"/> Year End																																						
<input type="checkbox"/> Special	<input type="checkbox"/> Final																																						
	<input type="checkbox"/> Special																																						
7. Type of Fund (if applicable, check one)		10. Special Report Name																																					
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:																																							
8. Number of Fundraisers this Report																																							
1																																							
3. Account Information		3. Account Information																																					
a. Financial Institution Full Name		a. Financial Institution Full Name																																					
MECHANICS & FARMERS																																							
b. Purpose	c. Account Code	b. Purpose	c. Account Code																																				
CHECKING ACCOUNT	201																																						
	d. Period Begin Balance		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																																							
 Printed Name of Signer		 Signature of Appointed Treasurer																																					
		11/16/2013 Date																																					
FOR OFFICE USE ONLY																																							
Date Received:	11-18-13	Employee:																																					
Date Postmarked:		Employee:																																					
Date Scanned:		Employee:																																					
Date Data Entered:		Employee:																																					
		Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> 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.																																							

IN-PERSON

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	
ELECT DON MOFFITT		DURHAM BOE 2013 Pre-Election			
Start of Election Cycle: January 1, 2013			Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start			\$ 10,891.31		\$ 0.00
RECEIPTS					
5) Aggregated Contributions from Individuals		<i>(CRO-1205)</i>	\$ 1,756.85	\$ 5,440.35	
6) Contributions from Individuals		<i>(CRO-1210)</i>	\$ 5,225.65	\$ 17,499.66	
7) Contributions from Political Party Committees		<i>(CRO-1220)</i>	\$ 0.00	\$ 0.00	
8) Contributions from Other Political Committees		<i>(CRO-1230)</i>	\$ 0.00	\$ 1,775.40	
9) Loan Proceeds		<i>(CRO-1410)</i>	\$ 0.00	\$ 0.00	
10) Refunds/Reimbursements to the Committee		<i>(CRO-1240)</i>	\$ 0.00	\$ 0.00	
11) Other Receipt Sources					
11a) Interest on Bank Accounts		<i>(CRO-1250)</i>	\$ 0.00	\$ 0.00	
11b) Contributions from Not-For-Profit Organizations		<i>(CRO-1250)</i>	\$ 0.00	\$ 0.00	
11c) Outside Sources of Income		<i>(CRO-1250)</i>	\$ 0.00	\$ 0.00	
11d) Legal Expense Fund - Other Sources		<i>(CRO-1270)</i>	\$ 0.00	\$ 0.00	
11e) Exempt Purchase Price Sales		<i>(CRO-1265)</i>	\$ 0.00	\$ 0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)			\$ 6,982.50	\$ 24,715.41	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures		<i>(CRO-1310)</i>	\$ 10,280.59	\$ 15,412.86	
13b) Contributions to Candidates/Political Committees		<i>(CRO-1310)</i>	\$ 0.00	\$ 0.00	
13c) Coordinated Party Expenditures		<i>(CRO-1310)</i>	\$ 0.00	\$ 0.00	
14) Aggregated Non-Media Expenditures		<i>(CRO-1315)</i>	\$ 0.00	\$ 46.45	
15) Loan Repayments		<i>(CRO-1420)</i>	\$ 0.00	\$ 0.00	
16) Refunds/Reimbursements from the Committee		<i>(CRO-1320)</i>	\$ 0.00	\$ 831.44	
17) In-Kind Contributions		<i>(CRO-1510)</i>	\$ 270.00	\$ 1,101.44	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)			\$ 10,550.59	\$ 17,392.19	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)			\$ 7,323.22	\$ 7,323.22	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees		<i>(CRO-1330)</i>	\$ 0.00		
21) Outstanding Loans (incl. ones from other campaigns)		<i>(CRO-1430)</i>	\$ 0.00		
22) Debts and Obligations owed by the Committee		<i>(CRO-1610)</i>	\$ 0.00		
23) Debts and Obligations owed to the Committee		<i>(CRO-1620)</i>	\$ 0.00		
24) Account Transfers Within the Committee		<i>(CRO-1720)</i>	\$ 0.00		
25) Administrative Support		<i>(CRO-1710)</i>	\$ 0.00	\$ 0.00	
26) Forgiven Loans		<i>(CRO-1440)</i>	\$ 0.00	\$ 0.00	
27) 48-Hour Notice Reports Sum		<i>(CRO-2220)</i>	\$ 0.00	\$ 0.00	
28) Contributions to be Refunded		<i>(CRO-1215)</i>	\$ 0.00	\$ 0.00	

Aggregated Contributions from Individuals

Page 1 of 2

Amendment

☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
ELECT DON MOFFITT						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/06/2013	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Draft		10/11/2013	\$ 33.68	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Draft		10/13/2013	\$ 48.25	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/15/2013	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		09/30/2013	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Draft		09/27/2013	\$ 19.27	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Draft		09/27/2013	\$ 19.27	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		09/30/2013	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		09/30/2013	\$ 30.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		09/30/2013	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		09/30/2013	\$ 37.50	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		09/30/2013	\$ 37.50	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/03/2013	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/06/2013	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/21/2013	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/21/2013	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/21/2013	\$ 35.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/21/2013	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/21/2013	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/21/2013	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Cash		10/21/2013	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Cash		10/21/2013	\$ 5.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Cash		10/21/2013	\$ 40.00	
4. Total only this Page					\$ 830.47	
5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)					\$ 1,756.65	

Aggregated Contributions from Individuals

Page 2 of 2

Amendment

☒ Yes ☐ No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number	
ELECT DON MOFFITT						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Draft		10/18/2013	\$ 48.25	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/21/2013	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/21/2013	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/21/2013	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/19/2013	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/19/2013	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/19/2013	\$ 20.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/19/2013	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/19/2013	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/21/2013	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/19/2013	\$ 10.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/21/2013	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/21/2013	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/21/2013	\$ 35.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/21/2013	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Draft		10/15/2013	\$ 23.97	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Check		10/19/2013	\$ 10.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Draft		10/11/2013	\$ 9.41	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Draft		10/03/2013	\$ 48.25	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Draft		10/06/2013	\$ 48.25	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	201	Draft		10/06/2013	\$ 48.25	
4. Total only this Page					\$ 926.38	
5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)					\$ 1,756.85	

CRO-1205

NC State Board of Elections

April 2007

Contributions from Individuals

Pg 1 of 14

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	
ELECT DON MOFFITT						
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	
MICHAEL BACON 912 ROSEHILL AVE DURHAM, NC 27705			SYSTEM ADMINISTRATOR			
			c. Employer's Name/Specific Field			
			UNC-CH			
					e. Election Sum to Date	
					\$ 145.35	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Draft		10/14/2013	\$ 145.35	
<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	
STEVE CAMERON 2308 SPRUNT AVE DURHAM, NC 27705			MANAGER			
			c. Employer's Name/Specific Field			
			WHOLE FOODS BAKEHOUSE			
					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"/>	201	Check		10/12/2013	\$ 250.00	
<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	
SUSAN GIDWITZ 5803 RUSSELL RD DURHAM, NC 27712			RETIRED			
			c. Employer's Name/Specific Field			
			UNC			
					e. Election Sum to Date	
					\$ 96.80	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Draft		10/13/2013	\$ 96.80	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 492.15	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,225.65	

Contributions from Individuals

Pg 2 of 14

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	
ELECT DON MOFFITT						
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
MARY T BOATWRIGHT 2040 ENGLEWOOD AVE DURHAM, NC 27705				PROFESSOR		
				c. Employer's Name/Specific Field DUKE UNIV		
				e. Election Sum to Date		
				\$ 75.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/15/2013	\$ 75.00	
<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
MERRY RABB 2609 SEVIER ST DURHAM, NC 27705				RESEARCH PROGRAMMER/ANALYST		
				c. Employer's Name/Specific Field RTI INTERNATIONAL		
				e. Election Sum to Date		
				\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/15/2013	\$ 100.00	
<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
ELIZABETH WOODMAN 116 W QUEEN ST HILLSBOROUGH, NC 27278				EDITOR		
				c. Employer's Name/Specific Field SELF		
				e. Election Sum to Date		
				\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/15/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 275.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,225.65	

Contributions from Individuals

Pg 3 of 14

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	
ELECT DON MOFFITT						
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	
LEWIS CHEEK 500 OLD BRANDT TRACE GREENSBORO, NC 27455			ATTORNEY			
			c. Employer's Name/Specific Field			
			SELF-EMPLOYED			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/11/2013	\$ 100.00	
<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	
LINDA DANIEL 1101 KNOX ST DURHAM, NC 27701			LIBRARIAN			
			c. Employer's Name/Specific Field			
			DUKE UNIV			
					e. Election Sum to Date	
					\$ 80.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		09/30/2013	\$ 30.00	
<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	
LESLIE MCKINNEY 1403 CAROLINA DURHAM, NC 27705			PHYSICIAN			
			c. Employer's Name/Specific Field			
			ACCENT MEDICAL			
					e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/15/2013	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 330.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,225.65	

Contributions from Individuals

Pg 4 of 14

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	
ELECT DON MOFFITT						
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	
BARKER FRENCH 1005 MONMOUTH AVE DURHAM, NC 27701			RETIRED			
			c. Employer's Name/Specific Field			
			BRINKER CAPITAL			
					e. Election Sum to Date	
					\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		09/30/2013	\$ 100.00	
<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	
LIZ MCGUFFEY 904 VICKERS AVE DURHAM, NC 27701			RETIRED			
			c. Employer's Name/Specific Field			
			SELF EMPLOYED WRITER			
					e. Election Sum to Date	
					\$ 60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		09/30/2013	\$ 60.00	
<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	
SANDRA OGBURN 1320 CARROLL ST DURHAM, NC 27707			RETIRED			
			c. Employer's Name/Specific Field			
			ACHIEVEMENT ACADEMY OF DURHAM			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		09/30/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 260.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,225.65	

Contributions from Individuals

Pg 5 of 14

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	
ELECT DON MOFFITT						
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	
MICHAEL HILL 3931 NORTHAMPTON RD DURHAM, NC 27707			PRESIDENT			
			c. Employer's Name/Specific Field			
			D3 DEVELOPMENT			
					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"/>	201	Check		09/30/2013	\$ 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	
LEAH JOSEPHSON 208 BARCLAY RD CHAPEL HILL, NC 27516			GRAPHIC DESIGNER			
			c. Employer's Name/Specific Field			
			SELF			
					e. Election Sum to Date	
					\$ 270.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	In Kind	GRAPHIC DESIGN FOR LITERATURE PIECE	10/15/2013	\$ 180.00	
<input type="checkbox"/>	201	In Kind	GRAPHIC DESIGN FOR LITERATURE PIECE	10/03/2013	\$ 90.00	
<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	
MARY MOUNTCASTLE 4106 KILDRUMMY CT DURHAM, NC 27705			FORMER SENIOR FELLOW			
			c. Employer's Name/Specific Field			
			SELF-HELP SERVICES CORP			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/06/2013	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 870.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,225.65	

Contributions from Individuals

Pg 6 of 14

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	
ELECT DON MOFFITT						
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	
ANNA COSTELLO 920 OAKLAND AVE DURHAM, NC 27705			BROKER IN CHARGE			
			c. Employer's Name/Specific Field			
			CHAMPION REALTY OF DURHAM			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/04/2013	\$ 100.00	
<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	
PETER RAABE 2402 W. CLUB BLVD DURHAM, NC 27705			DIRECTOR			
			c. Employer's Name/Specific Field			
			AMERICAN RIVERS INC			
					e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/06/2013	\$ 150.00	
<input checked="" type="checkbox"/>	201	Check		07/29/2013	\$ 50.00	
<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	
DAVID ROGERS 1020 OAKLAND AVE DURHAM, NC 27705			FIELD DIRECTOR			
			c. Employer's Name/Specific Field			
			ENVIRONMENT NC			
					e. Election Sum to Date	
					\$ 60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/06/2013	\$ 60.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 310.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,225.65	

Contributions from Individuals

Pg 7 of 14

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	
ELECT DON MOFFITT						
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	
PAT BOCKKINO 7340 ABRON ST DURHAM, NC 27713			RETIRED			
			c. Employer's Name/Specific Field			
			PISCATAWAY TOWNSHIP BOARD OF EDUCATION			
					e. Election Sum to Date	
					\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/21/2013	\$ 25.00	
<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	
BOB HEALY 839 SEDGEFIELD ST DURHAM, NC 27705			RETIRED			
			c. Employer's Name/Specific Field			
			DUKE UNIVERSITY			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/21/2013	\$ 100.00	
<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	
JOHN SCHELP 1022 ROSEHILL DURHAM, NC 27705			POLICY ANALYST			
			c. Employer's Name/Specific Field			
			NIEHS			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		09/30/2013	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 175.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,225.65	

Contributions from Individuals

Pg 8 of 14

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	
ELECT DON MOFFITT					
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	
STEPHEN BOCKKINO 7340 ABRON DR DURHAM, NC 27713		RETIRED			
		c. Employer's Name/Specific Field			
		SYNERICA PHARMACEUTICALS			
				e. Election Sum to Date	
				\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	201	Check		10/21/2013	\$ 25.00
<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	
BARRY RAGIN 2334 DAWN TRAIL DURHAM, NC 27712		PRE-PRESS MANAGER			
		c. Employer's Name/Specific Field			
		PHE, INC			
				e. Election Sum to Date	
				\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	201	Check		10/21/2013	\$ 100.00
<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	
HEATHER SMITH 2112 WILSON ST DURHAM, NC 27705		PRESIDENT			
		c. Employer's Name/Specific Field			
		LINTON AND ASSOC			
				e. Election Sum to Date	
				\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	201	Check		10/21/2013	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page				\$ 175.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)				\$ 5,225.65	

Contributions from Individuals

Pg 9 of 14

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	
ELECT DON MOFFITT						
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	
BRIAN MARRON 4 N> POSTON CT DURHAM, NC 27705			DIRECTOR OF CHEMISTRY			
			c. Employer's Name/Specific Field			
			PFIZER			
					e. Election Sum to Date	
					\$ 125.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/21/2013	\$ 125.00	
<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	
CHARLIE REECE 3604 DARWIN RD DURHAM, NC 27707			ATTOREY			
			c. Employer's Name/Specific Field			
			RHO, INC			
					e. Election Sum to Date	
					\$ 242.45	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Draft		10/15/2013	\$ 242.45	
<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	
STEVE SCHEWEL 2101 W CLUB DURHAM, NC 27705			PROFESSOR			
			c. Employer's Name/Specific Field			
			DUKE UNIVERSITY			
					e. Election Sum to Date	
					\$ 415.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Cash		10/21/2013	\$ 40.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 407.45	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,225.65	

Contributions from Individuals

Pg 10 of 14

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	
ELECT DON MOFFITT						
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	
DABNEY HOPKINS 1700 SPRUNT AVE DURHAM, NC 27705			TEACHER			
			c. Employer's Name/Specific Field			
			DURHAM PUBLIC SCHOOLS			
					e. Election Sum to Date	
					\$ 121.07	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Draft		10/19/2013	\$ 121.07	
<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	
JANET MARRON 4 N. POSTON CT DURHAM, NC 27705			SPEECH THERAPIST			
			c. Employer's Name/Specific Field			
			EMERGE			
					e. Election Sum to Date	
					\$ 125.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/21/2013	\$ 125.00	
<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	
CHARLIE WILSON 123 NOTTINGHAM CHAPEL HILL, NC 27517			VICE PRESIDENT			
			c. Employer's Name/Specific Field			
			CT WILSON CONSTRUCTION CO			
					e. Election Sum to Date	
					\$ 96.80	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Draft		10/18/2013	\$ 96.80	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 342.87	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,225.65	

Contributions from Individuals

Pg 11 of 14

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	
ELECT DON MOFFITT						
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	
MARK TRUSTIN 221 DEER CHASE LANE DURHAM, NC 27705			ATTORNEY			
			c. Employer's Name/Specific Field			
			SELF-EMPLOYED		e. Election Sum to Date	
					\$ 350.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/19/2013	\$ 350.00	
<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	
CHARLES WILSON 25 PENNINGTON PL DURHAM, NC 27707			PRESIDENT			
			c. Employer's Name/Specific Field			
			CT WILSON CONSTRUCTION CO		e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/21/2013	\$ 100.00	
<input checked="" type="checkbox"/>	201	Check		08/12/2013	\$ 100.00	
<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	
LOIS WRIGHT 926 W. MARKHAM DURHAM, NC 27701			INVESTIGATOR			
			c. Employer's Name/Specific Field			
			GSK		e. Election Sum to Date	
					\$ 75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/19/2013	\$ 75.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 525.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,225.65	

Contributions from Individuals

Pg 12 of 14

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	
ELECT DON MOFFITT						
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
MP DESSAUER 2021 WILDON ST DURHAM, NC 27705				DIRECTOR OF COMMUNICATIONS		
				c. Employer's Name/Specific Field		
				BCBSNC		
				e. Election Sum to Date		
				\$ 56.78		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/21/2013	\$ 56.78	
<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
HENRI GAVIN 1400 VIRGINIA AVE DURHAM, NC 27705				PROF OF CIVIL & ENVIRONMENTAL		
				c. Employer's Name/Specific Field		
				DUKE UNIVERSITY		
				e. Election Sum to Date		
				\$ 75.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/21/2013	\$ 75.00	
<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
ROBIN MAGEE 1400 VIRGINIA AVE DURHAM, NC 27705				CONTRACT EMPLOYEE		
				c. Employer's Name/Specific Field		
				DURHAM PUBLIC SCHOOLS		
				e. Election Sum to Date		
				\$ 75.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/21/2013	\$ 75.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 206.78	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,225.65	

Contributions from Individuals

Pg 13 of 14

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	
ELECT DON MOFFITT						
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
JOHN AYCOTH 2609 N. DUKE ST BLDG 800 DURHAM, NC 27704				PRESIDENT & CEO		
				c. Employer's Name/Specific Field RICE HOUSE HEALTHCARE PROGRAM HOLDINGS		
				e. Election Sum to Date		
				\$ 193.90		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Draft		09/25/2013	\$ 193.90	
<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
DAVID MILLS 1607 DELAWARE AVE DURHAM, NC 27705				FINANCE DIRECTOR		
				c. Employer's Name/Specific Field EL FUTURO, INC		
				e. Election Sum to Date		
				\$ 96.80		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Draft		10/02/2013	\$ 96.80	
<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
NINA SPERBER 1308 VIRGINIA AVE DURHAM, NC 27705				HEALTH RESEARCH SPECIALIST		
				c. Employer's Name/Specific Field VETERANS ADMINISTRATION		
				e. Election Sum to Date		
				\$ 125.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/06/2013	\$ 125.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 415.70	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,225.65	

Contributions from Individuals

Pg 14 of 14

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	
ELECT DON MOFFITT						
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
ELLEN BACON 4201 SWARTHMORE RD DURHAM, NC 27707				PROFESSOR		
				c. Employer's Name/Specific Field SCHOOL OF EDUCATION, NCCU		
				e. Election Sum to Date		
				\$ 193.90		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Draft		10/07/2013	\$ 193.90	
<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
WILLIAM LAMBE 2306 TAMPA AVE DURHAM, NC 27705				DIRECTOR OF ECONOMIC DEVELOPMENT		
				c. Employer's Name/Specific Field UNC		
				e. Election Sum to Date		
				\$ 96.80		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Draft		10/06/2013	\$ 96.80	
<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
JULIE MOONEY 1604 WOODBURN RD DURHAM, NC 27707				CONSULTANT		
				c. Employer's Name/Specific Field NON-PROFITS		
				e. Election Sum to Date		
				\$ 150.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	201	Check		10/06/2013	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 440.70	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 5,225.65	

Disbursements

Pg 1 of 3

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	
ELECT DON MOFFITT						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
<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
CES MAIL COMMUNICATIONS 2319 ATLANTIC AVE RALEIGH, NC 27611						
				c. Level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						\$ 7,381.49
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
201	Check	AI	10/21/2013	\$ 3,826.43	POSTAGE AND MAILING	
201	Check	AI	10/11/2013	\$ 3,555.06	OF CARD POSTAGE AND MAILING OF CARD	

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
GARRETT DIXON 1513 E. FRANKLIN ST NO. 136 CHAPEL HILL, NC 27514						
				c. Level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						\$ 1,600.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
201	Check	E	10/01/2013	\$ 400.00		
201	Check	E	10/15/2013	\$ 400.00		

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
FACEBOOK 1 HACKER WAY MENLO PARK, CA 94025						
				c. Level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						\$ 75.85
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
201	Draft	A	10/12/2013	\$ 50.63	ADS ON FACEBOOK	
201	Draft	A	10/11/2013	\$ 25.22	ADS ON FACEBOOK	

5. Total only this Page					\$ 8,257.34
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)					\$ 10,280.59

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	Q* - Donation to Legal Expense Fund
O* Other			
* Codes require detailed explanation in required remarks field (k)			

Disbursements

Pg 2 of 3

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	
ELECT DON MOFFITT						
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
B & J CUSTOM PRINTERS 1403 PERSON ST DURHAM, NC 27703				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
						\$ 102.13
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
201	Check	B	10/16/2013	\$ 102.13	BUSINESS CARDS	
				\$		
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
LASTING PRINTING AND GRAPHICS 733 W. JOHNSON ST LOWER LEVEL RALEIGH, NC 27603				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
						\$ 1,441.13
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
201	Check	B	10/17/2013	\$ 1,441.13	6X9 INTRO MAILER	
				\$	CARDS	
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
US BANK 80 S. 8TH ST SUITE 224 MINNEAPOLIS, MN 55402				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
						\$ 3,302.38
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
201	Check	AH	10/17/2013	\$ 299.99	SMALL CARD LAYOUT,	
				\$	TICKETS TO CHAMBER	
5. Total only this Page					\$ 1,843.25	
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)					\$ 10,280.59	
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		Q* - Donation to Legal Expense Fund
O* Other						
* Codes require detailed explanation in required remarks field (k)						

Disbursements

Pg 3 of 3

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	
ELECT DON MOFFITT					
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
LEAH JOSEPHSON 208 BARCLAY RD CHAPEL HILL, NC 27516					
			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
					\$ 180.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
201	Check	A	10/15/2013	\$ 120.00	MAIL PIECE GRAPHIC
201	Check	A	10/03/2013	\$ 60.00	DESIGN DESIGN FOR

LITERATURE PIECE FOR

5. Total only this Page		\$ 180.00
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>		\$ 10,280.59
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>		
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>		
A* - Media	B* - Printing	C* - Fundraising
E - Salaries	F* - Equipment	G - Political Party
I - Postage	J - Penalties	K* - Office Expenses
O* Other		D - To Another Candidate
		H* - Holding Public Office Expenses
		Q* - Donation to Legal Expense Fund
* Codes require detailed explanation in required remarks field (k.)		

CRO-1310

NC State Board of Elections

December 2009

In-Kind Contributions

Pg 1 of 1

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	
ELECT DON MOFFITT			
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	
LEAH JOSEPHSON 208 BARCLAY RD CHAPEL HILL, NC 27516		<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	
		\$ 270.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
GRAPHIC DESIGN FOR LITERATURE PIECE		10/15/2013	\$ 180.00
GRAPHIC DESIGN FOR LITERATURE PIECE		10/03/2013	\$ 90.00
			\$
4. Total only this Page		\$ 270.00	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 270.00	

CRO-1510

NC State Board of Elections

December 2007



North Carolina
State Board of Elections
441 N Harrington Street
Raleigh, NC 27603

Kim Westbrook Strach
Executive Director

IN-PERSON

NOV 18 2013

DURHAM BOE

Mailing Address
PO Box 27255
Raleigh, NC 27611-7255
(919) 733-7173
Fax: (919) 715-8047

Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form

- Name of committee to receive loan: ELECT DON MOFFITT
- Person or committee to make loan: DON MOFFITT
- Date of loan to committee: 10/25/13
- Name of lending institution and account number (source):
WELLS FARGO 9079922642
- Amount of loan: \$2000.00
- Description (if in-kind loan): _____
- Names of all parties responsible for payment of loan (guarantors):
DON MOFFITT
- Period of loan: 6 MONTHS
- Rate of interest of loan: 0%
- Security pledged for loan: NONE

I, DON MOFFITT, 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.

Don Moffitt
Signature of Lender

10/25/13
Date Signed

Marigold Butler
Signature of Treasurer of Committee

Nov 17, 2013
Date Signed

Note: This Statement is to be filed with the Election Board where the committee's reports are filed.