

Certification to Return to Active Status

This Certification is used by Candidate, Party, PACs and Referendum Committees which have previously filed the Certification of Inactive Status and now wish to return to an active status.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

FILED BY:

Treasurer Phone:

Committee Name:

Treasurer Name:

Lolita Wynn

5850 Fayetteville Road, Suite 206

Durham, NC 27713

919-973-0714

I certify that the above named candidate/political committee, which has been of **inactive status** and exempt from filing disclosure reports, intends to accept contributions and/or make expenditures. This intention of activity alters the status of the above named candidate/political committee to **active status** and requires such committee to begin filing disclosure on the appropriate schedule. All contributions received and/or expenditures made that have not been previously reported will be disclosed on the next scheduled report and all subsequent reports will be filed as scheduled. An amended Statement of Organization (CRO-2100 A-G) must accompany this form.

12/15/2023
Date Signed

Solita WHIPERSON

JAN 2 6 2024

Disclosure Report Cover

Amendme	nt		
X 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		175		Air		V- 1,- T			
a. Fuli Name	10 min						c. ID Number		
LEVON 4 DURHAM		4	Season-Spin angle (1999)	*170090.4	E Official	20000			
b. Mailing Address (include C	ity, State and Zi	p Code)					d. Date Filed		
200 MAHONE STREET APT 20				N. Control of the Con	***************************************	MAN HAVAN CEP 8.7943	01/26/2024		
DURHAM, NC 27713							e. Phone Number		
							e. I none Rumber		
2. Report Year 3. Period Sta	urt Date (mm/dd/	уу)	4. Period	End Da	te (mm/dd/yy)	5. Treasu	rer Full Name		
2020	02/16/2020			06/30/2		LOLITA	and door do deal, and a committee of the		
6. Type of Committee (Check		0 т.							
The state of the s	arty	Munic	e of Repor	t (C	State/County	type of rep	ort from one category)		
	AC		Organizatio	mal	Organizatio	1	Referendum		
	egal Expense Fund	lii	Thirty-five			mai	Organizational		
	ble, check one)	吕	Pre-primar	- 1	Quarterly		Pre-referendum		
Booster Fund"	ore, eneck one)	4=	Pre-electio		First		☐ Final		
☐ Building Fund		ll l		n	Second		Supplemental Final		
Presidential Election Year Ca	ndidates Fund	-	Pre-runoff		Third		Annual		
NC Public Campaign Financin		l_	Semi-annua		Fourth		☐ Special		
The Fuolic Campaign Financin	ig rund	쁘	Mid Ye		Semi-annua	-			
Other:		닏	Year E	nd	☐ Mid Ye		10. Special Report Name		
			Final		Year E	nd			
8. Number of Fundraisers thi	s Report		Special		☐ Final				
0					Special Special				
3. Account Information			Tull a s		ount Informati				
a. Financial Institution Full Na	ame			a. Fina	ncial Institutio	n Full Nam	e		
WELLS FARGO BANK						Mahamanayayaya	770-1		
b. Purpose	c. Account Code	e		b. Purp	oose		c. Account Code		
CHECKING		1		1100					
		1							
	d. Period Begin	Balanc	e				d. Period Begin Balance		
	\$						\$		
CERTIFICATION	<u></u>								
I certify that the Committee	or Fund is in cor	molianc	e with all a	nnlicah	la proviniona	of Amticle Of	14 22D 8 22D 2214 6		
Chapter 163 of the NC Gene	ral Statutes and	that no	funde ara	ppiicau	alad with med	of Afficie Zz	ZA, ZZB & ZZD-ZZM 0f		
funds I further certify that	this report is so	mai no	tunus arc	СОПШІШ	igicu with prof	noned or o	ther non-disclosed		
funds. I further certify that	uns report is cor	npiete,	true and co	orrect a	nd that I have	been traine	d by the NC State Board		
Lolate, What	a n		X	17	1.11		01/07/0004		
Printed Name of	Signer	1=	Sim	ottomo of	Appointed Treas	2	01/26/2024		
FOR OFFICE USE ONLY	Signor .		Sign	ature or .	Appointed 14eas	urer	Date		
	ho/202	Ú			Q-A	Deli	very Method		
Date Received:	126 200	4	Employ	ree: _			Normal Mail		
Data David I I	1 1	" IN	PERSO	NC			Registered Mail		
Date Postmarked:		- '''	Employ	ree:			Hand Delivered		
D . C				0.4					
Date Scanned:		_ J	AN 206 120	∠4 e:			Electronically Filed		
Data Data Entered							Signer has not received		
Date Data Entered:		- DU	RHAWE	OE -			mandatory training		
Please Note: This form of	annot be used to	o amena	d committe	e infor	nation such as				
assista	nt treasurer, cus	todian a	of hooks in	formati	ion or account	informatio	n audiess, heasurer,		
	d the Statement								
100 must affell	a me statement	OT OLES	unzauon ((JKU-211	UVA-E) to make	e committee	cnanges.		

Amendment X Yes □ No

Detailed Summary
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 Re	A	[3.]	ID Nun	aber
LEVON 4 DURHAM	2020 Second	l Quarter			
Start of Election Cycle: January 1, 2017	_	Total thi Reporting P			Total this ection Cycle
4) Cash on Hand at Start		\$ 7	78.71	\$	0.00
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 1	08.00	\$	1,251.40
6) Contributions from Individuals	(CRO-1210)	\$ 2,1	99.25	\$	5,664.79
7) Contributions from Political Party Committees	(CRO-1220)	\$	0.00	\$	0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$	0.00	\$	338.16
9) Loan Proceeds	(CRO-1410)	\$	0.00	\$	0.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	0.00	\$	0.00
11) Other Receipt Sources				11/2	
11a) Interest on Bank Accounts	(CRO-1250)	\$	0.00	\$	0.00
11b) Contributions from Not-For-Profit Organizatio	ns (CRO-1250)	\$	0.00	\$	0.00
11c) Outside Sources of Income	(CRO-1250)	\$	0.00	\$	0.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	0.00	\$	0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	0.00	\$	0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,	11c,11d and 11e)	\$ 2,3	00.05	\$	7,254.35
EXPENDITURES					
13) Disbursements					2-21-22
13a) Operating Expenditures	(CRO-1310)	\$ 1,5	32.85	\$	5,282.68
13b) Contributions to Candidates/Political Committee	ees (CRO-1310)	\$	0.00	\$	0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$	0.00	\$	0.00
4) Aggregated Non-Media Expenditures	(CRO-1315)	\$	0.00	\$	210.78
15) Loan Repayments	(CRO-1420)	\$	0.00	\$	0.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	20.20	\$	20.20
17) In-Kind Contributions	(CRO-1510)	\$	0.00	\$	214.98
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14	, 15, 16 and 17)	\$ 1,5	53.05	\$	5,728.64
19) Cash on Hand at End (Add lines 4 and 12 together, then	subtract line 18)	\$ 1,5	25.71	\$	1,525.71
ADDITIONAL INFORMATION					W. Sarahana and
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00		
21) Outstanding Loans (incl. ones from other campaign		\$	0.00	- 3	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$	0.00		Miletina
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$	0.00		- N. S. S.
24) Account Transfers Within the Committee	(CRO-1720)	\$	0.00		
25) Administrative Support	(CRO-1710)	S IN DEDO	0.00	\$	0.00
26) Forgiven Loans	(CRO-1440)	BALLUSC	0.00	\$	0.00
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ JAN 2 6 20	20.00	\$	0.00
28) Contributions to be Refunded	(CRO-1215)	\$	0.00	\$	0.00

Aggrega	ated Contrib	outions from I	ndividuals Page	1 of	1	Amendmen Yes	nt No
			From Individuals of \$				_
1. Committe	e Full Name (and	Fund if applicable)			2. ID I	Number	
LEVON 4 I	URHAM					- LUS LU	POSP-Son Special Principles and Special Specia
3. Contribut	or Information				a in	Aleginia	
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd	l/yyyy)	f. Amount	
☐ Add ☐ Remove	1	Debit Card		02/17/202	20	\$	20.20
☐ Add ☐ Remove	1	Debit Card		02/25/202	20	\$	20.20
☐ Add ☐ Remove	1	Debit Card		03/25/202	20	\$	20.20
☐ Add ☐ Remove	1	Debit Card		02/17/202	20	\$	20.00
☐ Add ☐ Remove	1	Debit Card	AL 10 (A) 1 (A) 2	02/22/202	20	\$	20.20
4. Total or	lly this Page				\$		\$100.80
	ALL CRO-12 ust be on line 5 of D	05 Pages etailed Summary Page	CRO-1100)		\$		\$100.80

CRO-1205 NC State Board of Elections April 2007

IN PERSON

JAN 2 6 2024

		com Individuals dividual contribution			1 of 1	1205	X Yes	☐ No
Marie Control		(and Fund if applicab		onthoutions un	ider \$50 it form CRO	_	ID Numbe	
	N 4 DURHAM	(and rund if appareau	icj	Recognition of the control of the co	The state of the s	2.1	II) Nullibe	<u> </u>
	ributor Informati			Add 🔲 Re	move		- NI lo	
	Name, Mailing Ad			b. Job Title/Pr	ofession	d. 0	Comments	
-	ide city, state, & z	ip)	TOTAL MINING THE PARTY STATE OF					
	N BARNES			- Frank t	WY. 10 10 10 10 17	-		
	BANWORTH CO			c. Employer's	Name/Specific Field	-		
MEBA	NCE, NC 27302					e. I	Dection Su	m to Date
								Formanion
						\$		2,124.25
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy))	k. Amoun	it
	1	Check			03/25/2020		\$	2,124.25
							\$	
							\$	
3. Cont	ributor Informati	on	Na di Sala	Add Re	move			
a. Full N	Name, Mailing Add	dress & Phone		b. Job Title/Pr	ofession	d. 0	Comments	
(inclu	ide city, state, & z	ip)	F770	TEACHER	T. (1997) T. (19		moderatory about	hamma manamaka hamma
JENNI	FER MARSHAL	L						
	HACKER HILL				Name/Specific Field			
WINST	TON-SALEM, N	C 27106		WS/FCS			Dection Su	4. D. 4
						e. r	gection Su	m to Date
						\$		75.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amoun	it
	1	Debit Card			02/23/2020		\$	75.00
							\$	

CRO-1210

4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

NC State Board of Elections

2,199.25 April 2007

2,199.25

IN PERSON

\$

\$

\$

JAN 2 6 2024

Dish	ursements	
LIBU	ui sements	

				Amendm	ent	
Pg	1	of	2	X 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 F	ull Name (and Fund	if applicable)						2. ID Num	ber
LEVON 4 DUI	RHAM								-
3. Type of Disbu	irsement (Please	use separate CR	0-1310	forms for one	h to	ne of Diche	IPSOW.	ent)	
Operating Ex	penses Cont	ributions to Candida						ted Party Exp	enditures
4. Payee Inform				Add 🗆	_	move	Oramai	ou ruity Exp	chartares
	ailing Address & Ph	One	L	b. Coordinate			am o	d. Commer	. 40
(include city, sta		Offic		b. Coordinate	u C	ommittee N	ame	u. Comme	113
GOOGLE	w, w zip/	Harrison Marriago							
	HEATRE PKWY			c. Level Regis	tere	ed (Specify)		-	
MOUNTAIN, O				☐ Federal		County	:		
imoorting, t	511 54015			☐ State				e. Dection	Sum to Date
					A0000000000000000000000000000000000000	9*************************************		MXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	W 980 - 480 - 2 - Walnung - 200000 00 - > 00000 493
								\$	500.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. 4	Amount	k. Re	quired Rem	arks
1	Debit Card	A	0:	3/01/2020	\$	500.00	ADV	VERTISINO	ř
					\vdash				
					\$				
4. Payee Inform		NAME OF BUILDING		Add		move			
	ailing Address & Ph	one		b. Coordinate	d C	ommittee N	ame	d. Commen	its
(include city, sta	te, & zip)		/w w				*****		***************************************
GOOGLE]	
1600 AMPHITI	HEATRE PKWY			c. Level Regis	tere				
MOUNTAIN, O	CA 94043			Federal		☐ County			
				State		☐ Municip	ality:	e. Election	Sum to Date
								\$	245.49
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/vvvv)	i. /	Amount	k. Re	quired Rem	arks
1	Debit Card	A	-	3/31/2020	\$	245.49			
1	Deoit Card	A	0.	5/31/2020	\$	243.49	ADV	/ERTISINO	1
					D.		J		
4. Payee Inform				Add 🔲	Re	move			
a. Full Name, Ma	ailing Address & Ph	one		b. Coordinate	d C	ommittee N	ame	d. Commen	ts
(include city, sta	te, & zip)						7		
L.A. WYNN PA	A								
5850 FAYETTI	EVILLE RD			c. Level Regist	tere				
SUITE 206				Federal		County			
DURHAM, NC	27713			☐ State		☐ Municip	ality:	e. Election	Sum to Date
								\$	2,500.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. <i>A</i>	Amount	k. Re	quired Rem	arks
1	Debit Card	0	0.3	3/01/2020	\$	500.00	CON	IPLIANCE	AND
			-		-			ANCE	
5 Total and 41	n Page			7	\$		percent of the		101510
5. Total only thi								\$	1,245.49
6. Total of ALL	CRO-1310 Pages								
	n line 13a of Detailed S							\$	1,532.85
	n line 13b of Detailed S							*	1,002.00
(This line goes i	n line 13c of Detailed S	Summary Page CRO	-1100 if	Coordinated Par	rty L	Expenditures)			
	odes (List detailed				M				INLIDE
A* - Media	B* - Printin	g	C* - F	undraising		D-To	Anot	her Candida	te IN PE
E - Salaries	F* - Equipm	ent	G-Po	litical Party		H* - H	olding	Public Off	ice Expenses
I - Postage	J - Penaltie	s	K* - C	Office Expenses	S				Expense IMANd2
O* Other						_		_	
* Codes require	e detailed explanatio	n in required ren	narks f	ield (k)		Maria Sini			DURH

Disbursen	1ents				D.a.	2 .			endment
	report expenditures	from the committee	aa far	an amatin a com a	Pg				
committees and	coordinated party e	xnenditures	ee ioi (operating exper	1868	, continou	tions t	o candida	ne/ponneai
	ull Name (and Fund							2. ID N	umher
LEVON 4 DUI				Annual Control of Cont		W.W W.			
3. Type of Disbu		use separate CRO							
Operating Exp		ributions to Candida	tes/Polit	tical Committees			oordina	ted Party I	Expenditures
4. Payee Inform				Add 🗖		nove			
	ailing Address & Ph	one		b. Coordinate	d Co	mmittee	Name	d. Comr	nents
(include city, sta	the party of the p		Mar						
	E ASSOCIATES					1.40 1.6		-	
	HARMONY CHUR	.CH RD		c. Level Regis Federal	tere				
ROUGEMONT	, NC 27572			State		Count	-	o Monti	on Sum to Date
				State		IVICITIO	tpanty.	e. Heen	on Sum to Date
								\$	110.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Re	equired R	emarks
1	Debit Card	A	0	3/31/2020	\$	110.00	AD	VERTISI	NG
					\$				
4. Payee Inform	ation			Add \square	Rer	nove			
	ailing Address & Ph	one		b. Coordinate			Name	d. Comn	nents
(include city, sta	•			durementalistics and estimate	ner-energeneere		·*************************************		NAMES INCOME.
STAPLES	energia de como espera de la como espe	2-37**-040*********************************	17000 V7000-1						
3600 NORTH I	DUKE ST			c. Level Regis	tere	d (Specify)		
DURHAM, NO	27704			Federal		Count	•		
				☐ State		Munic	ipality:	e. Electi	on Sum to Date
								\$	177.36
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/vvvv)	i. A	mount	k. Re	quired R	emarks
1	Debit Card	В		2/28/2020	\$	177.36	-	TCARD	turkturu võit ayanganaanaanaan
	2 33.1 3.1.2	_	— ·	2,20,2020		177.50	100		
					\$				
5. Total only thi	s Page							\$	287.36

CRO-1310 NC State Board of Elections December 2009

C* - Fundraising

G - Political Party

K* - Office Expenses

6. Total of ALL CRO-1310 Pages

A* - Media

E - Salaries

I - Postage

O* Other

(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)

7. Purpose Codes (List detailed expenditure code in (h.) above)

* Codes require detailed explanation in required remarks field (k)

B* - Printing

J - Penalties

F* - Equipment

(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)

IN PERSON

1,532.85

\$

D - To Another Candidate

H* - Holding Public Office Expenses

Q* - Donation to Legal Expense Fund

JAN 2 6 2024

					Pg 1 of			□ No
Use this form to 1	report re	efunds/reimbur	sements, including co	ontributions r	eturned to the contril	buto	(
1. Committee Ful	ll Name	(and Fund if a	pplicable)			2.1	D Number	7 M F 201
LEVON 4 DURI	HAM				10-11		37.111111111111111111111111111111111111	The state of the s
3. Payee Informa				Add	Remove	HE		
a. Full Name, Mai	~			d. Type of Co	ommittee	g. C	Comments	
(include city, st	ate, & z	ip)		Candidate		- Individual of	and the state of t	200 14 (MARKET THE STATE OF THE STATE
SARAH MYE				Referend				
827 EMBER DR	IVE			Parameter	istered (Specify)	h. C	Priginal Rece	ipt Date
DURHAM, NC	27703			Federal	County:		03/25/20	020
				☐ State	☐ Municipality:			
						i. O	riginal Recei	pt Amount
						\$		20.20
b. Job Title/Profes	sion	c. Employer's	Name/Specific Field	f. Purpose C	ode	j. E	ection Sum t	o Date
NA		NA		L		\$		0.00
k. Account Code	l. Forn	n of Payment	m. Required Remai	rks	n. Date (mm/dd/y	ууу)	o. Amount	
1	Debit (Card		100000	04/24/2020		\$	20.20
4. Total only this	Page			Wall mi		\$	-	20.20
5. Total of ALL C (This line must be			ımmary Page CRO-110	0)		\$		20.20
6. Purpose Cod	les (List	detailed disbu	rsement code in (f) a	bove)			100000	
L - Returned to	Contrib	outor M -	Overpayment for Se	rvice	N - Exceed	led C	Contibution L	imit
P* - Reimburs	ement o		Other					
* Codes requir	e detail	ed explanation	in required remarks	s field (m)				
CRO-1320			NC State Boa	rd of Elections				July 2007

IN PERSON

Amendment

JAN 2 6 2024