Disclosure	Report	Cover
------------	--------	-------

Amendme	n t		
☐ Yes	X	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.

Do not use this	form to update	information.									
1. Committee In	formation					die.	124 25	2 14 136			
a. Full Name									c. ID Number		
SHANETTA 4	DURHAM										
b. Mailing Addre	ess (include Cit	y, State and Zip	Code)						d. Date Filed		
P.O. BOX 134									09/14/2023		
DURHAM, NO	27709								e. Phone Number		
									e. Those stampes		
2. Report Year	3. Period Star	t Date (mm/dd/y	y)	4. Period	End Dat	te (n	nm/dd/yy)	5. Treasur	er Full Name		
2023	07	7/01/2023			08/29/2	.023		AMECHI	NWOSU		
6. Type of Com		One)		e of Report				type of rep	ort from one category)		
X Candidate Can	npaign 🔲 Par	ty	Munic	ipal		Sta	te/County		Referendum		
Joint Fundrais	er 🗖 PA	С		Organizatio	nal		Organizatio	nal	Organizational		
Referendum	☐ Lee	gal Expense Fund	X	Thirty-five		_	Quarterly		Pre-referendum		
		le, check one)	_	Pre-primary			First		Final		
7. Type of Fund		ie, check one)				Ц					
Booster Fund				Pre-election	1	Ш	Second		Supplemental Final		
Building Fund				Pre-runoff			Third		Annual		
	lection Year Can			Semi-annua			Fourth		Special Special		
NC Public Car	npaign Financing	g Fund		Mid Ye	ar		Semi-annua	-			
				Year E	nd		Mid Ye	ar	10. Special Report Name		
Other:				Final			Year E	nd			
8. Number of Fr	undraigare this	Report	П	Special		F	Final				
o. Number of P	0	Report		or			Special				
3. Account Info	rmation	THE PERSON	E DAL		3. Acc	OHB	t Informat	ion			
a. Financial Inst		m e						on Full Nan	1e		
FIFTH THIRD						11 010	. Invertue	JA 2 411 1 1111			
b. Purpose		c. Account Cod	le		b. Purp	ose			c. Account Code		
FOR CAMPAI	GN	D.C.	SCD 01		-	2					
RELATED AC			SB01								
		d. Period Begin	Balan	ce					d. Period Begin Balance		
		\$						\$			
CERTIFICATION		*		-							
I certify that t	he Committee	or Fund is in co	mplian	ce with all a	applicat	ole p	provisions	of Article 2	22A, 22B & 22D-22M of		
Chapter 163 c	f the NC Gener	ral Statutes and	that ne	o funds are	commi	ngle	ed with pro	hibited or o	other non-disclosed		
						_	-		ed by the NC State Board		
l lulius. I luliu	1	I	mpiete	, true una e	On COL U	iiiu	linat i nave	OCCII tituini	ed by the free state board		
I Am	ochi 1	11.00510		1	ann n	~ 1	M	1.1971	09/14/2023		
<u> </u>		N CON A	-	-41	VVVV		1 ///	way			
	rinted Name of S	ngiici		algn	ature of	mpp	ointed Trea	ISUI CI	Date		
FOR OFFICE U	SEONLY	01 1				ě	11				
Date Receiv	ed: _	9/14/2	3	Emplo	yee: _	Δ	XX	<u>De</u>	livery Method Normal Mail		
Date Postm	arked:		_IN	PERS	ON.			- 0	Registered Mail Hand Delivered		
Date Scann	ed: _		_ :	SEP I 4 Z	yee: -				Electronically Filed		
Date Data E	entered:			Emplo					Signer has not received mandatory training		
Plagga No.	to. This farms	ennot be used	-	21 11 11 11 11 L	70-	mat	ion auch a	e the com	nittee address, treasurer,		
Ticase 140											
		nt treasurer, cu									
L`	You must amen	d the Statemen	t of Or	ganization	CRO-2	100 <i>i</i>	A-E) to mal	ke committe	ee changes.		

Amendment ☐ Yes ☑ No

Detailed SummaryUse this form to summarize all disclosure reporting forms and to total monetary information

Use this form to summarize all disclosure reporting form: 1. Committee Full Name (and Fund if applicable)	2. Type of Rep			D Nur	nber
SHANETTA 4 DURHAM	2023 Thirty-	five-day			
Start of Election Cycle: January 1,2023	-):		otal this rting Period	E	Total this ection Cycle
4) Cash on Hand at Start		\$	3,490.34	\$	0.00
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	0.00	\$	0.00
6) Contributions from Individuals	(CRO-1210)	\$	1,195.00	\$	3,416.05
7) Contributions from Political Party Committees	(CRO-1220)	\$	0.00	\$	1,050.00
8) Contributions from Other Political Committees	(CRO-1230)	\$	0.00	\$	0.00
9) Loan Proceeds	(CRO-1410)	\$	0.00	\$	0.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	75.00	\$	75.00
11) Other Receipt Sources		1			
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)	\$	3,050.00	\$	3,500.00
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)	\$	4,320.00	\$	8,041.05
EXPENDITURES					
13) Disbursements				100	and water
13a) Operating Expenditures	(CRO-1310)	\$	2,090.30	\$	2,832.43
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	\$	60.40
15) Loan Repayments	(CRO-1420)	\$	0.00	\$	0.00
6) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	445.00	\$	445.00
7) In-Kind Contributions	(CRO-1510)	\$	0.00	\$	1,196.05
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14	l, 15, 16 and 17)	\$	2,535.30	\$	4,533.88
19) Cash on Hand at End (Add lines 4 and 12 together, then	subtract line 18)	\$	5,275.04	\$	3,507.17
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00		
21) Outstanding Loans (incl. ones from other campaign		\$	0.00		
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$	0.00	dia.	
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$	0.00		Line has
24) Account Transfers Within the Committee PER	SON _(2RO-1720)	\$	0.00	BY4	
25) Administrative Support SEP 1 4	(CRO-1710)	\$	0.00	\$	0.00
26) Forgiven Loans	(CRO-1440)	\$	0.00	\$	0.00
27) 48-Hour Notice Reports Sum DURHAN	BOERO-2220)	\$	0.00	\$	0.00
28) Contributions to be Refunded	(CRO-1215)	\$	0.00	\$	740.92 August 200

		om Individuals			$Pg = \frac{1}{1 \cdot 0.00} of = \frac{5}{10.00}$		Amendme Yes	X No
-				ontributions	under \$50 if form CRO	773		
		(and Fund if applicabl	le)			2.1	D Number	
SHAN.	ETTA 4 DURHA	M						
3. Cont	ributor Informati	on		Add 🔲 F	Remove			
a. Full N	Name, Mailing Add	lress & Phone		b. Job Title/	Profession	d. C	Comments	
(inclu	ide city, state, & z	ip)						
LANIE	ER BLUM					_		
11 UP	CHURCH CIRCL	E		c. Employer	's Name/Specific Field			
DURH	AM, NC 27705					_		
						e. E	lection Su	m to Date
						\$		200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy	}	k. Amoun	t
	BCSB01	Debit Card				,		
	DC3D01				07/07/2023		\$	200.00
							\$	
							\$	
3. Cont	ributor Informati	on		Add 🔲 I	Remove			
a. Full l	Name, Mailing Ado	iress & Phone		b. Job Title/	Profession	d. C	Comments	
(incl	ide city, state, & z	ip)						
NIMA	SHEENA BURNS	S				4		
1727 C	REAT BEND DI	RIVE		c. Employer	's Name/Specific Field	4		
DURH	IAM, NC 27704							
						e. E	lection Su	m to Date
						\$		50.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)	k. Amoun	t
	BCSB01	Credit Card			07/13/2023		\$	50.00
							\$	
							\$	
3 Cont	ributor Informati	on		Add 🔲 1	Remove	20,0		ALI ETETE
	Name, Mailing Add			b. Job Title/		d. C	Comments	
	ude city, state, & z					\top		
JAN C	ROMARTIE							
	ILLARD STREE	T		c. Employer	's Name/Specific Field			
DURH	IAM, NC 27701							
						e. I	Lection Su	m to Date
						\$		20.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	scription	j. Date (mm/dd/yyyy)	k. Amoun	t
	BCSB01	Credit Card	IN PER	RSON	07/12/2023		\$	20.00
			SEP 14	. 202₹			\$	
							\$	
4 Tot	al only this Po	(Te	DURHAN	BOE		\$	1,	270.00
	. Total only this Page . Total of ALL CRO-1210 Pages							1,195.00
(This	(This line must be on line 6 of Detailed Summary Page CRO-1100)							1,175.00

Contributions from Individuals Pg 2 of

				Amendment					
Pg	2	of	5	☐ Yes	No No				

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

				minounons a	nder \$50 ir ionir ereo i	203	is not used	
	nittee Full Name	2. I	D Number					
SHAN	ETTA 4 DURHA	M						
3. Conti	ibutor Informati	on		Add R	emove			
a. Full N	ame, Mailing Add	lress & Phone		b. Job Title/P	rofession	d. Comments		
(inclu	de city, state, & z	ip)						
	LYN FARRIOR			a Employante	Name/Specific Field	1		
NC				e. Employer s	Name/Specific Fierd	1		
						e. E	lection Sum to Date	
							50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
	BCSB01	Cash			07/13/2023		\$ 50.00	
							\$	
							\$	
	ributor Informati				emove			
	lame, Mailing Ado			b. Job Title/P	rofession	d. C	Comments	
	de city, state, & z	ip)		-				
	'A HENRY NDYTUFF LANI	7		c. Employer's	Name/Specific Field	1		
	AM, NC 27713	3			E			
DOMIAW, NC 27713						e. E	lection Sum to Date	
						\$	50.00	
f. Prior		h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
	BCSB01	Debit Card			07/17/2023		\$ 50.00	
							\$	
							\$	
	ributor Informati				emove			
	lame, Mailing Ad			b. Job Title/Profession			Comments	
	de city, state, & z	1р)		NOT EMPL	OYED			
	LES HUNT RANDALE DRI	VE		c. Employer's	s Name/Specific Field			
	AM, NC 27713							
						e. I	dection Sum to Date	
						\$	200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind De	REPRON N	j. Date (mm/dd/yyyy)		k. Amount	
	BCSB01	Debit Card	055		08/22/2023		\$ 200.00	
			SEP	1 4 2023			\$	
			DURH	AM BOE			\$	
4. Tot	al only this Pa	ge				\$	300.00	
5. Tot	al of ALL CR	O-1210 Pages 6 of Detailed Summary	Page CRO-1100)			\$	1,195.00	
						1		

Cont	ributions fr	om Individuals	,	n-	3 of 5	- 11	mendment Yes	No No
		dividual contributions			v			110
		(and Fund if applicabl		4.1881.13			Number	
	ETTA 4 DURHA							
3. Conti	ributor Informati	on		Add 🔲 Ret	nove	KITI		
	Name, Mailing Add			b. Job Title/Pro	ofession	d. Co	mments	
(inclu	de city, state, & z	ip)						
	JACKSON				V			
	ILL STREET			c. Employer's	Name/Specific Field			
DUKH	AM, NC 27707					e. Ele	ction Sum 1	to Date
						s		50.00
f. Prior	f. Prior g. Account Code h. Form of Payment i. In-Kind De				j. Date (mm/dd/yyyy)		. Amount	20.00
	BCSB01	Debit Card			08/24/2023		\$	50.00
					00/2 1/2025	-	D	30.00
							\$	
							\$	
3. Cont	ributor Informati	on		Add Rei	move	. 2 7	74	e vii i e
	Name, Mailing Add			b. Job Title/Pro	ofession	d. Co	mments	
(inclu	ide city, state, & z	ip)						
	NIO JONES			D 1	AT /CI + (** TO* 1.1	-		
NC				c. Employer's	Name/Specific Field	1		
						e. He	ction Sum	to Date
						\$		100.00
C Della	- 4	E Francis of Dominant	i In Wind Dog	aulutia -	L. Data (m.m./dd//www.		. Amount	100.00
		h. Form of Payment Check	i. In-Kind Des	eripiion	j. Date (mm/dd/yyyy)			
	BCSB01	Check			07/13/2023		\$ 	100.00
							\$	
							\$	
3. Cont	ributor Informati	on		Add Re	move			
	Name, Mailing Add			b. Job Title/Pr		d. Co	mments	
(inclu	ide city, state, & z	ip)		NOT EMPLO	YED			
	NIA LEE				10 h0t T1 11	1		
	ONERIDGE PLA	CE		c. Employer's	Name/Specific Field	1		
DURH	IAM, NC 27705					e. Ele	ection Sum	to Date
						\$		250.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy))	. Amount	
	BCSB01	Debit Card	III III IIII III	ERSON	08/25/2023		\$	250.00
			\$ED	1.4.2002	08/23/2023			250.00
			357	1 4 2023			\$	
			DURF	AM BOE			\$	

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)

400.00

1,195.00

\$

\$

Contributions from Individuals Pg 4 of 5 Ves No Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

		aividuai contributions		iitiibutioiis u		15		
1. Comr	nittee Full Name	(and Fund if applicable	e)			2. I	D Number	
SHANE	ETTA 4 DURHA	M						
3. Contr	ibutor Informatio	on		Add R	emove			
4	ame, Mailing Add			b. Job Title/P		d. C	Comments	
	de city, state, & zi							
				ł				
	THY MCKEOWN			c Employer's	Name/Specific Field			
	MOUTH COUR	T		c. Emproyer s	rame/opecine riera			
DURH.	AM, NC 27705					o El	lection Sun	to Data
						C. E	rection 5un	to Date
						\$		50.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
	BCSB01	Debit Card			07/05/2023		d.	50.00
					07/03/2023		\$	30.00
							\$	
							Ψ	
							\$	
3. Cont	ributer Informati	on		Add R	emove			AL BUILD
	lame, Mailing Add			b. Job Title/P	rofession	d. C	Comments	
	de city, state, & z							
_	NA NWOSU			1				
	YELLOW WOO!	DIANE		c. Employer's	Name/Specific Field	1		
APT 20		DLANE			•	1		
	GH, NC 27617					e. E	lection Sun	to Date
KALEI	OII, NC 2/01/							
						\$		246.05
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
	BCSB01	Debit Card			08/09/2023		\$	100.00
					00/07/2020		Ψ	100.00
							\$	
						-		
							\$	
3. Cont.	ributor Informati	on		Add 🔲 R	emove			
a. Full N	Name, Mailing Add	dress & Phone		b. Job Title/I	rofession	d. C	Comments	
(inclu	de city, state, & z	ip)						
EUNIC	E SANDERS							
	EPLETON COUR	РT		c. Employer	Name/Specific Field	1		
	BOROUGH, NC					1		
ITHEE	201100011,110	2,2,0				e. E	lection Sun	to Date
						\$		50.00
f. Prior	g. Account Code	h. Form of Payment	i. Hilliang	eription	j. Date (mm/dd/yyyy)		k. Amount	
	BCSB01	Debit Card		SOM				
	BCSB01	Doon Card	0=-	32.	07/02/2023		\$	50.00
			SEP 14	2023			\$	
<u> </u>			DIDLL				Ψ	
			DURHAM BOE				\$	
4. Tot	al only this Pa	ge				\$		200.00
		O-1210 Pages				\$		1,195.00
(This line must be on line 6 of Detailed Summary Page CRO-1100)						Ĺ		,

Cont	ributions fr	om Individuals	•	P	$e_{\mathbf{g}} = \frac{5}{100} \text{ of } \frac{5}{100}$	_ 🔲 🤈	Yes 💟 No
Use this	form to report in	dividual contributions	s over \$50 or co	ntributions ı	under \$50 if form CRO	1205 is no	t used
1. Com	nittee Full Name	(and Fund if applicabl	e)	13 60		2. ID Nu	mber
SHANI	ETTA 4 DURHA	M					
3. Conti	ibutor Informati	on		Add 🔲 R	temove		
	ame, Mailing Add de city, state, & z			b. Job Title/I	Profession	d. Comm	nents
SUSAN NC	NAH SOUTHE	RN		c. Employer'	s Name/Specific Field		
						e. Electic	on Sum to Date
						\$	25.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy) k. Aı	mount
	BCSB01	Debit Card			07/20/2023	\$	25.00
						\$	
						\$	
4. Tota	al only this Pa	ge			niga i tikuk	\$	25.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$	1,195.00
CRO-12	210		NC State Bo	ard of Election	15		April 2007

Amendment

IN PERSON

SEP 1 4 2023

DURHAM BOE

Refunds/Re	imbu	rsements	To the Comn	nittee	Pg _	<u>l</u> of	<u> </u>	Yes No)
Use this form to re	eport ref	funds received	by the committee or	reimbursem	ents for a	previous ex	pendit	ure.	
1. Committee Full	Name	and Fund if ap	plicable)	115 07 35			2. ID	Number	
SHANETTA 4 D	URHAI	M							
3. Contributor Inf	formatic	m		Add	Remov	'e	Julia.	The Part of March	1
a. Full Name, Mail	ing Add	ress & Phone		d. Type of Co	mmittee		g. Co	mments	
(include city, sta	ite, & zi	p)		Candidate		PAC			
SHANETTA 4 D	URHAI	M		Referende	um 🔲	Party			
P.O. BOX 13416					istered (S	Specify)	h. Or	iginal Expenditur	e Date
DURHAM, NC 27709			Federal State		County: Municipality:	07/07/2023			
				Durham		i. Original Expe			Amt
							\$		75.00
b. Job Title/Profess	sion	c. Employer's N	Name/Specific Field	f. Purpose			j. Election Sum to Date		
				REFUND TI FUNDRAIS			\$		(75.00)
k. Account Code	l. Form	of Payment	m. In-Kind Descrip	tion	n.	Date (mm/dd/	уууу)	o. Amount	
BCSB01	Elect	ric Funds Tran				08/28/2023	3	\$	75.00
4. Total only the	his Pag	ge					\$		75.00
5. Total of ALL CRO-1240 Pages (This line must be on line 10 of Detailed Summary Page CRO-11				10)			\$		75.00
CRO-1240			NC State Boa	ard of Election	S			Decer	n ber 2007

Amendment

IN PERSON
SEP 1 4 2023

DURHAM BOE

Other Red	ceipt Sources			Pg	1	of	1	Amen Ye	es X No
	o report income not rep	orted on another f	orm. i.e. inte					it contr	ibutions etc.
1. Committee F	Full Name (and Fund if	applicable)						ID Nun	
SHANETTA 4	DURHAM								
3. Type of Rece	int Course (Please)	ena conquata CRO	1 3 EA COMMO	fan a		-CD a	1	~	
Interest	Contr	use separate CRO-1 ibutions from Not-for-	-Profit Organ	izatio	ach iv	Outside S	Celpt	Source of Inco	a)
4. Contributor					_	Outoide .)Ouroc	8 01 1110.)HIC
a. Full Name, M	lailing Address & Phone		b. Not-for-			ral ID#	d.	Comme	nts
(include city,			-						4.0
REALTORS A	SSOCIATION		<u></u>						
NC			c. Outside	Sour	rce Exp	lanation			
							A]	Mastion	Sum to Date
								Heemon	
						\$		3,000.00	
f. Account Code	, , , , , , , , , , , , , , , , , , , ,	h. In-Kind Descrip	ption	j	i. Date	(m m/dd/y	ууу)	j. Amo	unt
BCSB01	Check				08	/24/2023	3	\$	3,000.00
								\$	
4. Contributor 1				Rem			W.		بعيرواللا
	ailing Address & Phone	2	b. Not-for-Profit Federal ID #				d. (Comme	nts
(include city,			-						
5211 STARDU	-THEIR-SONS ANDE IST DRIVE	RSON	c. Outside	Sour	rce Expl	lanation	+		
DURHAM, NC				00		A H to be to an	+		
							e. I	lection	Sum to Date
							\$		500.00
f. Account Code	g. Form of Payment	h. In-Kind Descrip	ption	í	. Date	(mm/dd/y	vvv)	i Amo	
BCSB01	Debit Card					/05/2023		\$	
				4				3	50.00
								\$	
5. Total only	this Page		1.12				\$		3,050.00
	LL CRO-1250 Pag	ges	STATE OF			N H/ N	1		
(This line goes in	in line 11a of Detailed Sur	mmary Page CRO-110			Contail		\$		3,050.00

(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)

CRO-1250

NC State Board of Elections

December 2007

IN PERSON

SEP 1 4 2023

DURHAM BOE

Disbursen	nents				_	1 -		Āmendi		
	report expenditures	from the committee	aa for o	narating away		1 of			No No	
committees and	coordinated party e	xpenditures	56 101 0	peraumg exper	ises,	contributi	ons to) candidate/[olitical	
1. Committee F	ull Name (and Fund	if applicable)		P YES LE	-01	15-11-0		2. ID Numb	er	
SHANETTA 4	DURHAM									
3. Type of Disbu		use separate CRC	D-1310	forms for each	h type	of Disbu	rseme	ent.)	el signi-l	
Operating Exp	penses 🔲 Cont	ributions to Candidat	es/Polit	ical Committees		☐ Coc	ordinat	ed Party Expe	nditures	
4. Payee Inform					Rem				Edition.	Ī
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Amendment

Disbursemer	nts				Pg 3	of	Amenda 5 Yes	
Use this form to rep			e for o	perating expen	ises, contrib	utions 1		
committees and coc							2. ID Numl	har
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Diahuman		Amendment
Disbursements	Pg <u>4</u> of <u>5</u>	□ Ves D
		103

X 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)	de l'ille		100	X = 11.		2. ID Nun	her
SHANETTA 4	DURHAM							21 10 1141	
3. Type of Disb	ursement (Please	use separate CR	0-1310	forms for each	h tvp	e of Disbu	irsem	ent.)	
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- Postage	J - Penalties	SEP 1 4 2023	K* - O	ffice Expenses					Expense Fund
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Disbursem Use this form to	nents report expenditures	from the committee	ee for o	nerating expen	Pg 5 of			
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Amendment Refunds/Reimbursements From the Committee Pg 1 of ☐ Yes X No Use this form to report refunds/reimbursements, including contributions returned to the contributor 1. Committee Full Name (and Fund if applicable) 2. ID Number SHANETTA 4 DURHAM 3. Payee Information Add 🔲 Remove a. Full Name, Mailing Address & Phone d. Type of Committee g. Comments (include city, state, & zip) Candidate ☐ PAC Reimbursement Check#230 Referendum ☐ Party SHANETTA BURRIS e. Level Registered (Specify) h. Original Receipt Date 3701 HIGHGATE DRIVE Federal County: #G 01/26/2023 State Municipality: DURHAM, NC 27713 i. Original Receipt Amount 50.00 b. Job Title/Profession c. Employer's Name/Specific Field f. Purpose Code j. Election Sum to Date (445.00)k. Account Code I. Form of Payment m. Required Remarks n. Date (mm/dd/yyyy) o. Amount Check CAMPAIGN EXPENDITURE BCSB01 08/26/2023 \$ 50.00 3. Payee Information Add 🔲 Remove a. Full Name, Mailing Address & Phone d. Type of Committee g. Comments (include city, state, & zip) Candidate ■ PAC Referendum ☐ Party SHANETTA BURRIS e. Level Registered (Specify) h. Original Receipt Date 3701 HIGHGATE DRIVE ☐ Federal County: #G 02/11/2023 ☐ State Municipality: DURHAM, NC 27713 i. Original Receipt Amount 200.00 b. Job Title/Profession c. Employer's Name/Specific Field f. Purpose Code j. Election Sum to Date (445.00)k. Account Code l. Form of Payment m. Required Remarks n. Date (mm/dd/yyyy) o. Amount Check CAMPAIGN EXPENDITURE BCSB01 08/26/2023 200.00 3. Payee Information Add \square Remove a. Full Name, Mailing Address & Phone d. Type of Committee g. Comments (include city, state, & zip) ☐ PAC Candidate Referendum SHANETTA BURRIS Party 3701 HIGHGATE DRIVE e. Level Registered (Specify) h. Original Receipt Date #GFederal County: 02/17/2023 DURHAM, NC 27713 ☐ State Municipality: i. Original Receipt Amount 30.00 b. Job Title/Profession c. Employer's Name/Specific Field f. Purpose Code j. Election Sum to Date (445.00)k. Account Code l. Form of Payment m. Required Remarks n. Date (mm/dd/yyyy) o. Amount Check CAMPAIGN EXPENDITURE BCSB01 \$ 08/26/2023 30.00 4. Total only this Page \$ 280.00 5. Total of ALL CRO-1320 Pages \$ 445.00 (This line must be on line 15 of Detailed Summary Page CRO-1100) 6. Purpose Codes (List detailed disbursement code in (f) above) L-Returned to Contributor M - Overpayment for Service PERSON N - Exceeded Contibution Limit P* - Reimbursement of In-King O* Other * Codes require detailed explanation in required remarks field (10) 1 4 2022

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DURHAM BOE