IN PERSON

Disclosure Report Cover

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		DURHAM BOE	
a. Full Name			c. ID Number
Callaway for City C	ouncil		XCL 687
b. Mailing Address (include City, State and Zip (Code)		d. Date Filed
307 Gresham AVE			
Durnam NC 27704	ł		e. Phone Number
	•	1	919-695-3232
2. Report Year 3. Period Start Date (mr	n/dd/yy) 4. Period End	Date (mm/dd/yy) 5. Treas	urer Full Name
2017 01/2017			en Maxey
6. Type of Committee (Check One)		t (check only one type of re	eport from one category)
Candidate Campaign Party	Municipal Occapizational	State/County Organizational	Referendum Organizational
PAC Referendum	Organizational Thirty-five day	Quarterly	Pre-referendum
☐ Independent Expenditure ☐ Joint Fundraise ☐ Legal Expense Fund	Pre-primary	First	Final
Legal Expense Pund	Pre-election	Second	Supplemental Final
7. Type of Fund (if applicable, check one)	Pre-runoff	Third	☐ Annual
☐ Booster Fund	Semi-annual	Fourth	☐ Special
☐ Building Fund	Mid Year	Semi-annual	10. Special Report Name
	Year End	Mid Year Year End	10. Special Report Pallie
Other: 8. Number of Fundraisers this Report	Final Special	Final	
8. Number of Fundraisers this Report	Special	Special	
11. Account Information		1. Account Information	
a. Financial Institution Full Name		Financial Institution Full Name	
Latino Credit Union	\cap		
b. Purpose c. Accou		Purpose	c. Account Code
Campaign Expenses Ux	1 7		
d Period	Begin Balance		d. Period Begin Balance
\$ 1	7		\$
CERTIFICATION	<u>U</u>	LE CONTROL DE SA	
I certify that the Committee or Fund is in co	ds are commingled with p	rohibited or other non-disclose	ed funds. I further certify that this
report is complete, true and correct and that	t I have been trained by th	ne NC State Board of Election	s 1 _ 1
Lauren Maxey	_ Cerre	n My	8217 Date
Printed Name of Signer	Signa	ture of Appointed Treasurer	Date
FOR OFFICE USE ONLY	17	164	Delivery Method
Date Received:	Employe	e: KWW WS101	☐ Normal Mail
Date Postmarked:	Employe	e:	Registered Mail Hand Delivered
Date Scanned:	Employe	ee:	☐ Electronically Filed
Date Data Entered:	Employe	e:	Signer has not received mandatory training
Please Note: This form cannot be	used to amend commit	ttee information such as the	committee address, treasurer,
assistant treasur	er, custodian of books	information, or account info	ormation.
You must amend the Stat	ement of Organization	(CRO-2100A-E) to make c	ommittee changes.

Detailed Summary

Use this form to summarize all disclosure reporting forms and to total monetary information.

Ame	ndment	
K	Yes	No

1. Committee Full Name (and Fund if applicable)	2. Type of Report		3. ID Number
Brian C. Callaway	Mid-Yea	Y	XCL687
Start of Election Cycle: January 1,	2017	Total this	Total this
4) Cash on Hand at Start		Reporting Period	S Ø
RECEIPTS	The state of the s		
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 346.52	\$ 346.52
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources		THE RELEASE	
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Organization	ns (CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c,	. 11d and 11e)	\$ 346.52	\$ 346.52.
EXPENDITURES			
13) Disbursements			THE RESIDENCE OF THE PARTY OF T
13a) Operating Expenditures	(CRO-1310)	\$ 246.52	\$ 246.52
13b) Contributions to Candidates/Political Committee	ees (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,	16 and 17)	\$ 246.52	\$ 246.52
19) Cash on Hand at End (Add lines 4 and 12 together, then subtr	act line 18)	\$ 100.00	\$ 100.00
ADDITIONAL INFORMATION		See Section 1	
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns	s) (CRO-1430)	\$	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$	Real Colors
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$	
24) Account Transfers Within the Committee	(CRO-1720)	\$	
25) Administrative Support	(CRO-1710)	\$	\$
26) Forgiven Loans	(CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$
CRO-1100 NC State Board of Elect	ione		August 2008

Cont	ributions fr	om Individua	le	D	g of		Amendment Yes No
		ndividual contributio				_	
		e (and Fund if appl					D Number
		for City				X	CL 687
	ributor Informa			Add Re	emove		The Royal Park
	ame, Mailing Addre			b. Job Title/Prof	ession	-	omments
(includ	e city, state, & zip)			Tinamara	h lan a c. e.c	Pai	id out of pocket
Brio	in C. Cal	laway		Freigy	Manager ame/Specific Field		campaign
3.7	Gresna	m AVP.				ex	penses
30	- Charla			Durnam	PODITC	e. El	ection Sum to Date
Durk	nam NC	27704		school:	5	\$	346.52
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy	_	k. Amount
	LAT	cneck			7/21/17		\$ 221.00
	LAT	CASN			7 24 17		\$ 100.00
	LAT	on-line			7/20/17	•	\$ 25.52
3. Cont	ributor Informa	ation		Add R	emove		
	ame, Mailing Addr	ess & Phone		b. Job Title/Pro	fession	d. Co	omments
(includ	le city, state, & zip)			-			
				c. Employer's N	ame/Specific Field	1	
						L	
						e. El	lection Sum to Date
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	ption	j. Date (mm/dd/yy	yy)	k. Amount
							\$
							\$
							\$
3. Con	tributor Inform	ation		Add R	emove		
	ame, Mailing Addr			b. Job Title/Pro	fession	d. C	Comments
(includ	de city, state, & zip)			-			
				c. Employer's N	ame/Specific Field		
						e. E	lection Sum to Date
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descri	ption	j. Date (mm/dd/yy	yy)	k. Amount
	Λ						\$
							\$
							\$
4. To	tal only this I	Page				\$	346.52
5. To	tal of ALL C	RO-1210 Pages 6 of Detailed Summary	Page CRO-1100)			\$	346.52 346.52
(THIS)	and must be on time	o of Dennieu Dummury	8. 2.10 11001	-			

Disburse	ements
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		Ame	endment	t
Da	of	X	Yes	☐ No
Pg		 -		litical.

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

Operating Expenses Contributions to Candidates/Pointcal Committee Payee Information Full Name, Mailing Address & Phone Add Remove b. Coordinated Committee Name County Board & Dections c. Level Registered (Specify) Federal County: State Municipali	d. Comments ty: e. Election Sum to Date \$ 221.00 k. Required Remarks Filing Flee d. Comments
Operating Expenses Contributions to Candidates/Political Committees Coordinated Coordinated Coordinated Committees Coordinated Coor	d. Comments ty: e. Election Sum to Date \$ 221.00 k. Required Remarks Filing FlC
Coording Expenses	d. Comments ty: e. Election Sum to Date \$ 221.00 k. Required Remarks Filing FlC
Operating Expenses	d. Comments ty: e. Election Sum to Date \$ 221.00 k. Required Remarks Filing Flee d. Comments
Payee Information Full Name, Mailing Address & Phone Stude city, state, & zip) CONTY BOAYO & DectionS C. Level Registered (Specify) Federal County: State Municipali Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount ACCOUNT COLUL OTHER OF 221.00 Payee Information Full Name, Mailing Address & Phone Add Remove b. Coordinated Committee Name	ty: e. Election Sum to Date \$ 221.00 k. Required Remarks Filing FlC
Full Name, Mailing Address & Phone County Board & Election S C. Level Registered (Specify)	ty: e. Election Sum to Date \$ 221.00 k. Required Remarks Filing FlC
Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount ACCOUNT COLUL OTHER OT 21 17 \$ 221.00 Payee Information Full Name, Mailing Address & Phone Add Remove	\$ 221.00 k. Required Remarks Filing FlC
Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount Check Other 07 21 17 \$ 221.00 Payee Information Full Name, Mailing Address & Phone County Board of Elections L. Level Registered (Specify) Federal County: Municipalis OT 21 17 \$ 221.00 S Add Remove b. Coordinated Committee Name	\$ 221.00 k. Required Remarks Filing FlC
Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount of the control of	\$ 221.00 k. Required Remarks Filing FlC
Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount of the control of	\$ 221.00 k. Required Remarks Filing FlC
Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) g. Amount AT COLCL OTTER OT 21 17 \$ 221.00 Payee Information Full Name, Mailing Address & Phone b. Coordinated Committee Name	k. Required Remarks Filing Fee d. Comments
Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) g. Amount AT COLCL OTTER OT 21 17 \$ 221.00 Payee Information Full Name, Mailing Address & Phone b. Coordinated Committee Name	Filing Fee
Payee Information Full Name, Mailing Address & Phone Add Remove	d. Comments
Payee Information Full Name, Mailing Address & Phone b. Coordinated Committee Name	d. Comments
Payee Information Full Name, Mailing Address & Phone b. Coordinated Committee Name	
Payee Information Full Name, Mailing Address & Phone b. Coordinated Committee Name	
Full Name, Mailing Address & Phone	
(include city, state, & zip)	Domain ter
	website.
The GO Dady choop 1	
4455 N. Hayden Rd, Solic 200 State Municipa	ality: e. Election Sum to Date
Scotts dale, An 20ng 85200	\$ 25.52
	k. Required Remarks
Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount	website Domain
LAT Online-(redit Cface upences 7/20/17 \$25.52	VOCADONC DON'S
\$	
☐ Add ☐ Remove	ne d. Comments
4. Payee Information a. Full Name, Mailing Address & Phone b. Coordinated Committee Name	ne d. Comments
(include city, state, & zip)	
c. Level Registered (Specify)	
☐ Federal ☐ County	pality: e. Election Sum to Date
State Munici	
	\$
h. Purpose Code i. Date (mm/dd/yyyy) j. Amount	k. Required Remarks
f. Account Code g. Form of Payment h. Purpose Code i. Date (mn/da/yyyy) 5.	
s	
	\$ 246.52
5. Total only this Page	\$ 246.52 * 246.52
6. Total of ALL CRO-1310 Pages	\$ 214, 62
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Co	mm) 1 240.52
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)	
C - des (List detailed expenditure code III (II.) above)	- A - A Condidata
R* - Printing	To Another Candidate - Holding Public Office Expens
The Ferriment	- Holding Fublic Office 227 - Donation to Legal Expense F
T Description I - Office	20
I - Postage J - Penalues	