Disclosure Repo					Yes No					
Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information										
1. Committee Information										
a. Full Name	mir 7 %	The second second	S. Brown Street Co.	* . * S	c. ID Number					
COMMITTEE TO ELE	CT DR MONIOUE HO	LSEY HYMAN FO	R DURHAM (CITY	C 10 Fullioer					
COUNCIL										
b. Mailing Address (include	d. Date Filed									
PMB 4711 HOPE VAL	10/02/2023									
DURHAM, NC 27713					e. Phone Number					
					718 414 5987					
2. Report Year 3. 1	Period Start Date (mm/	dd/yy) 4. Period (mm/dd/yy)	End Date	5. Treasurer Full l	Vame.					
2023	08/30/2023		25/2023	DR. MONIQJE HO	DLSEY-HYMAN					
			7713 C.L. 77 C.A. 31							
6. Type of Committee (9. Type of Report		ly one type of report j						
Candidate Campaign	Party	Municipal	State/C		Referendum					
PAC Independent	Referendum	Organizationa		Organizational	Organizational					
Expenditure	Joint Fundraiser	Thirty-five day	y	Quarterly	Pre-referendum					
Legal Expense Fund 7. Type of Fund (#)	applicable, check one)	Pre-primary		First	Final					
"Booster Fund"		Pre-election	١Ħ	Second	Supplemental Final					
Building Fund		Pre-runoff	🗇	Third	Annual					
		Semi-annual		Fourth	Special					
Other:		Mid Year Year End	1 —	Semi-annual Mid Year	10. Special Report Name					
Cinci.		Final	·	Year End	10. Special Report Frame					
8. Number of Fundrais	ers this Report	Special		Final						
1				Special	=					
. 11. Account Informatio	ń .		11. Account	Information						
a. Financial Institution Full	Vame		a. Financial Inst	titution Full Name						
TRUIST BANK	c. Account Code		\ D							
b. Purpose COMMITTEE			b. Purpose	PERSON	c. Account Code					
CONTRIBUTION	19	08								
AND	d. Period Begin Balanc	e		OCT 0 5 2023	d. Period Begin Balance					
EXPENDITURES	\$ 1676.53			OCT 0 9 2023						
\$ 1676.53										
CIEDEFERCATION	1070.00		L B	URHAM BOE	5					
CERTIFICATION Legrify that the Commit		ianga with all anglic								
I certify that the Commi	ttee or Fund is in compl	iance with all applica	able provisions	of Article 22A, 22B,	& 22D-22M of Chapter 163 of					
I certify that the Commi	ttee or Fund is in compl and that no funds are c	ommingled with prob	able provisions	of Article 22A, 22B,						
I certify that the Commit the NC General Statutes is complete, true and con	ttee or Fund is in compl and that no funds are c rect and that I have bee	ommingled with prob n trained by the NC	able provisions hibited or other State Board of I	of Article 22A, 22B, non-disclosed funds. Elections.	& 22D-22M of Chapter 163 of I further certify that this report					
I certify that the Committhe NC General Statutes is complete, true and con	ttee or Fund is in complete and that no funds are correct and that I have been that I have been followed by the control of the correct of the	ommingled with prob n trained by the NC	able provisions	of Article 22A, 22B, non-disclosed funds. Elections.	& 22D-22M of Chapter 163 of					
I certify that the Commit the NC General Statutes is complete, true and con	ttee or Fund is in complete and that no funds are correct and that I have been that I have been followed by the control of the correct of the	ommingled with prob n trained by the NC	able provisions hibited or other State Board of I	of Article 22A, 22B, non-disclosed funds.	& 22D-22M of Chapter 163 of I further certify that this report / 0 / 2 / 23 Date Delivery Method					
I certify that the Committhe NC General Statutes is complete, true and complete of the NC General Statutes is complete.	ttee or Fund is in complete and that no funds are correct and that I have been a single of Signer	ommingled with prob n trained by the NC/	able provisions hibited or other State Board of I	of Article 22A, 22B, non-disclosed funds.	& 22D-22M of Chapter 163 of I further certify that this report / O / 2/23 Date Delivery Method Normal Mail Registered Mail					
I certify that the Commit the NC General Statutes is complete, true and cor Monage FOR OFFICE USE ONL Date Received:	ttee or Fund is in complete and that no funds are correct and that I have been a single of Signer	ommingled with prob n trained by the NC/ 	able provisions hibited or other State Board of I	of Article 22A, 22B, non-disclosed funds.	& 22D-22M of Chapter 163 of I further certify that this report / C / 2/23 Date Delivery Method Normal Mail Registered Mail Hand Delivered Electronically Filed					
I certify that the Committhe NC General Statutes is complete, true and complete, true and complete of the NC General Statutes is complete, true and complete of the NC General Statutes is complete, true and complete of the NC General Statutes is complete. The NC General Statutes is complete of the NC General Statutes in the NC General Statutes is complete. The NC General Statutes is complete, true and complete of the NC General Statutes is complete, true and complete of the NC General Statutes is complete. The NC General Statutes is complete, true and complete of the NC General Statutes is complete, true and complete of the NC General Statutes is complete, true and complete of the NC General Statutes is complete, true and complete of the NC General Statutes is complete, true and complete of the NC General Statutes is complete, true and complete of the NC General Statutes is complete. The NC General Statutes is complete, true and complete of the NC General Statutes is complete of the NC General Statutes in the NC General Statutes is complete of the NC General Statutes in the NC General Statutes is complete of the NC General Statutes in the NC General Statutes is complete of the NC General Statutes in the NC General Sta	ttee or Fund is in complete and that no funds are correct and that I have been a single of Signer	Employee:	able provisions hibited or other State Board of I	of Article 22A, 22B, non-disclosed funds.	& 22D-22M of Chapter 163 of I further certify that this report / 0 / 2 / 23 Date Delivery Method Normal Mail Registered Mail Hand Delivered					
I certify that the Commit the NC General Statutes is complete, true and cor Monte Per Proposition of the Postmarked: Date Postmarked: Date Data Entered:	ttee or Fund is in complete and that no funds are correct and that I have been had Same of Silver 10/5/23	Employee: Employee: Employee:	able provisions hibited or other Stale Board of I	of Article 22A, 22B, non-disclosed funds. Elections.	& 22D-22M of Chapter 163 of I further certify that this report C Z Z Date Delivery Method					
I certify that the Commit the NC General Statutes is complete, true and cor Monte Per Proposition of the Postmarked: Date Postmarked: Date Data Entered:	tee or Fund is in complete and that no funds are correct and that I have been have a funded by the second of Signer and Signe	Employee: Employee: Employee:	able provisions nibited or other Stale Board of I	of Article 22A, 22B, non-disclosed funds. Elections.	& 22D-22M of Chapter 163 of I further certify that this report O 2 23 Date Delivery Method Normal Mail Registered Mail Hand Delivered Electronically Filed Signer has not received					

Amendment

CRO-1000 NC State Board of Elections August 2008

Amendment

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

I. Committee Full Name (and Fund if applica COMMITTEE TO ELECT DR MONIQUE HO		Type of Report RE PRIMARY	. 7.4	HELLEY WILL	3. ID No	mber
FOR DURHAM CITY COUNCIL						
Start of Election Cycle: January	ection Cycle: January 1, 2023			Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start				1676.53	\$	1957.93
RECEIPTS						
5) Aggregated Contributions from Individual	uals	(CRO-1205)	\$	0.00	\$	619.08
6) Contributions from Individuals	and and a second	(CRO-1210)	\$	1610.00	\$	15642.06
7) Contributions from Political Party Com	m ittees	(CRO-1220)	\$	0.00	\$	0.00
8) Contributions from Other Political Com	ımittees	(CRO-1230)	\$	0.00	\$	0.00
9) Loan Proceeds		(CRO-1410)	\$	0.00	\$	0.00
10) Refunds/Reimbursements To the Comm	rittee	(CRO-1240)	\$	0.00	. \$	0,00
11) Other Receipt Sources	and and control of the control of th	on common absolutes to a decimal to the desirable of the second section of the section of the second section of the section of t				
11a) Interest on Bank Accounts		(CRO-1250)	\$	0.00	\$	0.00
11b) Contributions from Not-for-Profit	Organizations	(CRO-1250)	\$	0.00	\$	0.00
11c) Outside Sources of Income		(CRO-1250)	\$	0.00	\$	0.00
11d) Legal Expense Fund - Other Source	ces	(CRO-1270)	\$	0.00	\$	0.00
11 e) Exempt Purchase Price Sales		(CRO-1265)	\$	0.00	\$	0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 16	0, 11a, 11b, 11c, 11	ld and 11e)	\$	1610.00	\$	9261.79
EXPENDITURES					E. Yvina	
13) Disbursements	de or megascorregorizações (moços)					
13a) Operating Expenditures		(CRO-1310)	\$	264.50	\$	5343.91
13b) Contributions to Candidates/Politic	cal Committee	s (CRO-1310)	\$	0	\$	1500.00
13c) Coordinated Party Expenditures	DIRECTOR SAFERIT STATEMENTS IN SERVICE STATE SAFERING SAFERING SAFERING STATEMENT	(CRO-1310)	\$	0	\$	0.00
14) Aggregated Non-Media Expenditures		(CRO-1315)	\$	0.00	\$	105,44
15) Loan Repayments		(CRO-1420)	\$	0.00	\$	0.00
16) Refunds/Reimbursements From the Con	mmittee	(CRO-1320)	\$	50.00	\$	0.00
17) In-Kind Contributions	e. Periodo de la Esta de Maria de La Carta, esta de La Carta d	(CRO-1510)	\$	0.00	\$	3745.00
18) TOTAL EXPENDITURES (Add lines 13a,	13b, 13c, 14, 15, 16	5 and 17)	\$	314.50	\$	6999.35
19) Cash on Hand at End (Add lines 4 and 12 tog	ether, then subtract	t line 18)	\$	2972.03	\$	4220.37
ADDITIONAL INFORMATION						
20) Non-Monetary Gifts Given to Other Co	mmittees	(CRO-1330)	\$	0.00		
21) Outstanding Loans (incl. ones from other	er campaigns)	(CRO-1430)	\$.0,00		
22) Debts and Obligations owed By the Con	nmittee	(CRO-1610)	\$	0.00	ak.	
23) Debts and Obligations owed To the Con	nmittee	(CRO-1620)	\$	0.00		K
24) Account Transfers Within the Committe		(CRO-1720)	\$	0.00		
25) Administrative Support IN F	PERSON	(CRO-1710)	\$	0.00	\$	0.00
26) Forgiven Loans	CT 0°5°2023	(CRO-1440)	\$	0.00	\$	0.00
27) 48-Hour Notice Reports Sum	C1 (1.9) T0T3	(CRO-2220)	\$	0.00	\$	0.00
28) Contributions to be Refunded DUI	RHAM BOE	(CRO-1215)	\$	50.00	\$	50.00

Refunds/Reimburseme		- 6 -	of <u>1</u> _	Yes No	
Use this form to report refunds/rei		ons returned to the contrib	utor.	- Mar Mar Mar	
1. Committee Full Name (and For COMMITTEE TO ELECT DR MONQIE)			way v	2. ID Number	
CITY COUNCIL					
3. Payee Information	□ A	dd 🔲 Remove			
a. Full Name, Mailing Address & Phone		d. Type of Committee		h. Original Receipt Date	
(include city, state, & zip)		Candidate	PAC	09/15/2023	
CONSTANCE SCOTT		Referendum	Party		
909 BRANDON ROAD		e. Level Registered (Specify	7)	i. Original Receipt Amount	
DURHAM, NC		Federal State	County: Municipality:	\$ 50.00	
		f. Purpose Code		j. Election Sum to Date	
		L		\$ 09/23/2023	
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code	
NOT EMPLOYED	NOT EMPLOYED	g. Comments		1908	
THE END DO THE	I NOT DIVIL BOTTLD	}	}	1706	
L Form of Payment m. Required I	Remarks		n. Date (mm/dd/yyy	y) o. Amount	
CREDIT CARD			09/23/2023	\$ 50.00	
# ==			03/23/2023	\$ 50.00	
3. Payee Information		dd E Remove			
a. Full Name, Mailing Address & Phone		d. Type of Committee	P.G	h. Original Receipt Date	
(include city, state, & zip)		Candidate Referendum	PAC		
		e. Level Registered (Specify	Party	i. Original Receipt Amount	
		Federal	County:		
		State	Municipality:	\$	
		f. Purpose Code		j. Election Sum to Date	
				\$	
b. Job Title/Profession	c. Employer's Name/Specific Field	g. Comments		k. Account Code	
I. Form of Payment m. Required I	Remarks	-	n. Date (mm/dd/yyy	y) o. Amount	
				\$	
3. Payee Information		dd Remove			
a. Full Name, Mailing Address & Phone		d. Type of Committee		h. Original Receipt Date	
(include city, state, & zip)		Candidate Referendum	PAC Party		
	IN PERSON	e. Level Registered (Specify		i. Original Receipt Amount	
	INFERSON	Federal	County:		
		State	Municipality:	\$	
	OCT 0'5'2023	f. Purpose Code		j. Election Sum to Date	
				\$	
b. Job Title/Profession	DURHAM BOE	- 0			
D. JOD THEST TOTESSION	c. Employer's Name/Specific Field	g. Comments		k. Account Code	
1. Form of Payment m. Required I	Remarks		n. Date (mm/dd/yyy	y) o. Amount	
				\$	
4. Total only this Page			Salar Salar Salar	\$ 50.00	
5. Total of ALL CRO-1320 Page	S. (This line must be on line 16 of Details	d Summary Page CRO-1100		\$ 50.00	
L - Returned to Contributor	M - Overpayment for Service	1 044 00 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Contribution Limit		
P* - Reimbursement of In-Kind * Codes require detailed explanation in	O* Other				

Amendment

Contr	ibutions fro	m Individuals		F	eg <u>1</u>	of		Amendmen Yes	t No
		vidual contributions of		0 or contributions ur	ider \$50 if fo				
1. Comu	nittee Full Name		2. ID Nun	nber	Eta III				
COMMI	TTEE TO ELECT	DR. MONIQUE HO	LSEY	FOR DURHAM CIT	TY COUNCI	L			
3. Contr	ibutor Informatie	n		Add R	emove				
	ne, Mailing Address	& Phone		b. Job Title/Professio			d. Commen	ts	
	A UZZELL			PSYCHOTHERA	APIST				
	NEY COURT			c. Employer's Name/	Specific Field				
DURHA	M, NC			SOLAR COUNS	ELING				
						-		Sum to Date	
							\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (m	m/dd/yyyy)	k. Amount	
	1908	CREDIT CAR			C	08/30/202	.3	\$	250.00
								\$	
								\$	
THE RESERVE OF THE PARTY OF THE	ibutor Informatio			Add 🔲 R	emove		alle tre		
	ne, Mailing Address & city, state, & zip)	& Phone		b. Job Title/Professio			d. Comment	ts	
SHARI C				DIRECTOR CLO	עטע				
51 CLAF	RKSON DRIVE			c. Employer's Name/	Specific Field				
WEST O	RANGE, NJ 0705	2		VERIZON					
						-	e. Election S	Sum to Date	
		·					\$	25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (m	m/dd/yyyy)	k. Amount	
	1908	CREDIT CARD			0	08/30/202	3	\$	25.00
								\$	
								\$	
3. Contri	ibutor Informatio	on		Add 🛛 R	emove		30 100	D. W. Tasi	
	ne, Mailing Address &	k Phone		b. Job Title/Professio	n		d. Comment	ts	
APRIL T	city, state, & zip)	IN PERSO	N	HR					
	BUSH DRIVE	HAT LITES		c. Employer's Name/S	Specific Field				
COLUM	BIA, MD 21044	OCT 0 5 2023		CEIC					
		001 0 0 2020				•	e. Election S	ium to Date	
		DURHAM BO	E				\$	25.00	
f. Prior	g. Account Code	h. Form of Payment		Kind Description	j. Date (m	m/dd/yyyy)	k. Amount	
	1908	CREDIT CARD			0	8/30/202	3	\$	25.00
								\$	
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(This line must be on line 6 of Detailed Summary Page CRO-1100)
CRO-1210

4. Total only this Page

5. Total of ALL CRO-1210 Pages

300.00

\$

\$

Contributions from Individuals	rg
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Con	tributions fro	m Individuals			Pg	_2	of	7	Amendment	No
Use th	is form to report ind	ividual contributions o	ver \$50	or contributions	under	\$50 if form	n CRO) 1205 is no		
		(and Fund if applica		22 July 1			T, E	2. ID Nun		
		DR. MONIQUE HO	LSEY I	HYMAN FOR D	URHA	M CITY				
COUN					D	SUPPLY OF THE				
	ntributor Information Name, Mailing Address		Ш	Add b. Job Title/Profe	Remo	ove	-	1.0		
	ide city, state, & zip)	OZ I HUBE		BUSINESS A		ISTRATIC	INC	d. Commen	ts	_
	DAY BRROKS			_ BOSHVESS A	DIVILIA	ISTRATIC	714			
	EST 129 TH STREET	c. Employer's Nat	ne/Spec	ific Field						
NEW	YORK, NY 10027			AJAY MANA	GEMI	ENT				
							-	e. Election S	um to Date	
								\$	150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description		j. Date (mm	/dd/yyy	y)	k. Amount	
	1908	CREDIT CARD				08	/30/20	23	\$	100.00
		<u> </u>	1							100.00
									\$	
Ц									\$	
3. Cor	tributor Informatio	on		Add	Remo	ve	1 18			
a. Full ?	Name, Mailing Address	& Phone		b. Job Title/Profe	ssion			d. Comment	ts	
	ide city, state, & zip)			SPORTS						
	BROWN 101 STREET			F. 1 1 ST	10	10° 27° 3.1				
	MOND HILL, NY			c. Employer's Nar	ne/Spec	inc rieia				
	,							e. Election S	um to Date	
								\$	50.00	
f. Prior	g. Account Code	h Form of Dormant	: T Y	Zhad Danadaidh		1 D (/	/33/		r	
1. 1 1101		h. Form of Payment	i, ili-is	Kind Description	-	j. Date (mm			k. Amount	
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a. Full ?	Name, Mailing Address	& Phone		b. Job Title/Profes				d. Comment	s	
	de city, state, & zip)	IN PER	SON	SALES						
	GE ARIANO D DENVILLE ROA									
	TOWN TOWNSHII		2023	c. Employer's Nan NEW RELIC	ne/Spec	ific Field				
DOOL	TOWN TOWNSIE	ULI U	,	NEW RELIC				e. Election S	um to Date	
DURHAM BC			W BO	E				\$	100.00	
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4. To	tal only this Pag	e						\$		250.00
the second to be	tal of ALL CRO							¢		1610.00
(This	line must be on line 6 of	Detailed Summary Page C	RO-1100					\$		1610.00

Contr	ibutions froi	m Individuals		I	Pg	2	of	7_	Amendmen Yes	
		vidual contributions of		or contributions un	nder	\$50 if form	ı CRC) 1205 is no	ot used	
		and Fund if applica		- 123 13 13 17	UE.			2. ID Nun	nber	
COMMI' CITYCO		DR MONIQUE HOL	LSEY F	IYMAN FOR DUR	HAI	M				
3. Contr	ibutor Informatio	on		Add R	temo	ove				
a. Full Nan	ne, Mailing Address &	& Phone		b. Job Title/Profession	on			d. Commen	ts	
	city, state, & zip)			EDUCATOR						
	ROBINSON									
	YDON DIRVE			c. Employer's Name/	/Spec	ific Field				
BARAW	A, NC 27587			NCCO			-	e. Election S	Sum to Data	
								-		
								\$	25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description		j. Date (mm/	/dd/yyy	y)	k. Amount	
	1908	CREDIT CAR				09/	02/20	23	\$	25.00
									\$	
									\$	
3. Contr	ibutor Informatio	on		Add R	temo	ove				
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	city, state, & zip)			NOT EMPLOYE	ED					
	YN ROSS	T- 7- T1 111			/4 ·					
	WELL VALLEY	DRIVE		c. Employer's Name		ific Field				
DALIAM	A, NC 27503			NOT EMPLOYE	SD		-	e. Election S	Sum to Date	
							-	÷ "		
								\$	400.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description		j. Date (mm/	dd/yyy	y)	k. Amount	
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									\$	
3. Contr	ibutor Informatic	on		Add R	temo	ove				85785
	ne, Mailing Address &	& Phone		b. Job Title/Profession	on			d. Commen	ts	
_	city, state, & zip)			EDUCATOR						
	N VALENTINE									
	LDEN CREST DI		c. Employer's Name	/Spec	ific Field					
DURHA	VI, NC			NCCU			-	e. Election S	Sum to Data	
									Sum to Date	
		. =						\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description		j. Date (mm/	/dd/yyy	(y)	k. Amount	
	1908	CREDIT CAR				09/	08/20	23	\$	50.00
									\$	
									\$	

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

NC State Board of Elections

NPERSON

April 2007

4. Total only this Page

5. Total of ALL CRO-1210 Pages

\$

\$

275.00

1610.00

Contr	ibutions froi	m Individuals				Pg	_4	_	of	7	Amendme		
		vidual contributions		0 or contrib	butions	under	\$50 i	if form	CRO	1205 is n	ot used		
		and Fund if applica								2. ID Nu	mber		
COMMI		DR MONIQUE HO	LSEY F	TYMAN F	OR DI	JRHAI	M CI	ГҮ					
3. Contri	ibutor Informatic	on and the second		Add		Remo	ove		-02				
	ne, Mailing Address &	& Phone		b. Job Tit	le/Profe	ssion		d. Comments					
	city, state, & zip)			ENTER	TAIN	MENT	,						
	A-WILLIAMS	r TP											
	NTUCKY AVENI GLES, CA	UŁ		c. Employ			ific Fi	eld					
LOS AN	ULES, CA			SELF-E	MPLC	JYED			-	. Disabas	C		
									-	e. Election	Sum to Date		
										\$	50		
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Descrip	tion		j. Dat	e (mm/d	ld/yyy	y)	k. Amount		
	1908	CREDIT CARD						09/1	1/202	23	\$	50.00	
											\$		
											\$		
3. Contri	ibutor Informatio	n		Add		Remo	ove	HI/H		NE TO			
a. Full Nan	ne, Mailing Address &	& Phone		b. Job Titl	le/Profe	ssion				d. Commen	its		
	city, state, & zip)			NOT EN	MPLO	YED							
	NCER SCOTT												
	NDON ROAD M, NC 27713			c. Employer's Name/Specific Field NOT EMPLOED									
DOMIA	VI, INC 27713			NOT EMPLOED					-	e. Election Sum to Date			
									-	e. Election :	oum to Date		
										\$	50.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Descrip	tion		j. Dat	e (mm/d	ld/yyyy	y)	k. Amount		
	1908	CREDIT CAR I)				1		09/1	5/202	23	S	50.00	
											\$		
											\$		
	butor Informatio			Add		Remo	ve	47 11 2					
	ie, Mailing Address &	k Phone		b. Job Titl						d. Commen	ts		
	city, state, & zip)			IT CON	ISULT	ANT							
CARISSA													
DURHAN	DGATE DRIVE			c. Employ				eld					
DUKHAI	DUKE	UNIVI	EKSII	Y			a Flagtion (Sum to Date					
										e. Election a			
6 Th.J		1. P	1	ZI 1 D						\$	100.00		
f. Prior	g. Account Code	h. Form of Payment	1. in-k	Kind Descrip	tion		j. Dat	e (mm/d			k. Amount		
	1908	CREDIT CARD						09/1	5/202	23	\$	100.00	
											\$		

CRO-1210 NC State Board of Elections

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)

\$

\$

200.00

1610.00

April 2007

Contr	ibutions fro	m Individuals		P	g <u>6</u>	of 7	Amendmen	and decidence of the course the course
							Yes	No No
		ividual contributions of		or contributions un	ider \$50 if form (
		(and Fund if applica				2. ID Nu	mber	
COMMI		DR MONIQUE HOI	LSEY F	IYMAN FOR DURI	HAM CITY			
	ibutor Informatie			Add R	emove		F U.S 4	
	me, Mailing Address			b. Job Title/Professio		d. Comme	nte	
	city, state, & zip)	SE I HORE		EDUCATION	, and the second	d. Comme	iits	
	NDERSON							
	ARDUST DRIVE			c. Employer's Name/	Specific Field			
DURHA	M, NC			NCCU				
						e. Election	Sum to Date	
						\$	125.00	
f. Prior	g. Account Code	h. Form of Payment	i In-li	Kind Description	j. Date (mm/dd	l/srereser's	k. Amount	
			I. Ill'I	tina Description				
	1908	CREDIT CARD			09/21	/2023	\$	25.00
							\$	
							\$	
20	Ba . Br e . u	Language Street					3	
	ibutor Information				emove	i Basi Alia		
a. Fun Nai	ne, Mailing Address	& rnone		b. Job Title/Profession DATA ACTION		d. Comme	nts	
(include	city, state, & zip)			COORDINATION				
L'TANY.	A DURANTE							
	ISKONY WAY			c. Employer's Name/	Specific Field			
DURHA	M, NC			DATA WORKS	e. Election Sum to Date			
						\$	20.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/dd	//yyyy)	k. Amount	
	1908	CREDIT CARD			09/22	2/2023	\$	10.00
			-					
							\$	
							\$	
3. Contr	ibutor Informatio	on		Add R	emove		Dia la	
	me, Mailing Address	& Phone		b. Job Title/Professio		d. Comme	nts	
	city, state, & zip)			SR. PROJECT PI	LANNER			
	E COLEMAN AURELRUFFIAN	TWAY		- 15	e			
LAUREI		WAI		c. Employer's Name/		_		
20723	2, 1412			I KEX SOL HOL	113	e. Election	Sum to Date	
				= = = =				
						\$	150.00	
f. Prior	g. Account Code	h. Form of Payment	i, In-F	Kind Description	j. Date (mm/dd	/уууу)	k. Amount	
	1908	CREDIT CARD			09/24	1/2023	\$	50.00

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

CRO-1210

NC State Board of Elections

NPERSON

April 2007

4. Total only this Page

5. Total of ALL CRO-1210 Pages

\$

\$

85.00

1610.00

\$

Amendment **Contributions from Individuals** Pg 7 ηf 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 COMMITTEE TO ELECT DR MONIQUE HOLSEY HYMAN FOR DURHAM CITY COUNCIL 3. Contributor Information Remove Add a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) **EDUCATOR** LANA RIGGINS SAMPSON 2020 GOTTWALD COURT e. Employer's Name/Specific Field GARNER, NC 27529 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 1908 **CHECK** 09/17/2023 \$ 100.00 \$ \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) WANDA R. ALLEN 211 RODE0 DRIVE c. Employer's Name/Specific Field DURHAM, NC 27704 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 1908 **CHECK** 08/31/2023 \$ 100.00 \$ \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) CONSULTANT KENYATTA UZZELL 27602 PADDOCK TRAIL PLACE c. Employer's Name/Specific Field CHANTILLY, VIRGINIA **POLHIRE** e. Election Sum to Date \$ 75.00

5. Total of ALL CRO-1210 Pages DURHAM BOE \$ 1610.00 (This line must be on line 6 of Detailed Summary Page CRO-1100) CRO-1210

NC State Board of Elections

IN PERSON

OCT 0 5 2023

j. Date (mm/dd/yyyy)

09/23/2023

k. Amount

75.00

275.00

April 2007

\$

\$

\$

\$

i. In-Kind Description

f. Prior

П

g. Account Code

1908

4. Total only this Page

h. Form of Payment

CREDIT CAR()

Disbursem Use this form to		from the committe	Pg ee for, operating expenses,	_	Amendment 1 Yes No candidate/political
	coordinated party ex				ountiano pontion
1. Committee I	full Name (and Fun	d if applicable)	* * *		2. ID Number
			LSEY HYMAN FOR		
3. Type of Dish	ursement (Plea	ise iise separate C	RO-1310 forms for each t	vpe of Disbursen	neut.)
Operating I	Expenses	Contributions to Car	ndidates/Political Committees	C	oordinated Party Expenditures
4. Payee Inform	nation		Add	Remove	
a. Full Name, Mail	ing Address & Phone		b. Coordinated Committee N	ame	d. Comments
FED EX 4900 NC HIGH DURHAM, NO	IWAY 55		c. Level Registered (Specify) Federal	County:	
			State 🗵	Municipality:	e. Election Sum to Date \$ 251.88
		lin ai			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1908	CASH	k	09/24/2023	\$251.88	COPIES
				\$	
4. Payee Inform	nation		Add 🔲	Remove	
a. Full Name, Mail	ing Address & Phone		b. Coordinated Committee N	ame	d. Comments
ACT BLUE P.O. BOX 4411 SOMERVILLE	146		c. Level Registered (Specify) Federal State	County: Municipality:	e. Election Sum to Date
					\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1908	DRAFT	K	09/26/2023	\$12.92	Processing FEES
				\$	
4. Payee Inform	nation		Add 🔲	Remove	
a. Full Name, Mail (include city, state,	ing Address & Phone & zip)		b. Coordinated Committee No	ame	d. Comments
			c. Level Registered (Specify) Federal State	County: Municipality:	e. Election Sum to Date
		RSON			\$
f. Account Code	g. Form of Payment	h, Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks

\$ DURHAM BOE \$ 5. Total only this Page \$ 264.50 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$ 264.50 (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) 7. Purpose Codes (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) CRO-1310 NC State Board of Elections December 2009