Disclosure Report Cover						Amendment			
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 Infor	mation					The state of the s			
a. Full Name		c. ID Number							
	COMMITTEE TO ELECT DR MONIQUE HOLSEY HYMAN FOR DURHAM								
CITY COUNCIL									
PMB	ude City, State and Zip Code)					d. Date Filed			
4711 HOPE VALL	EY ROAD					01/26/2024			
DURHAM, NC						c. Phone Number			
			7 7 5 7 5						
2. Report Year	3. Period Start Date (mm/s	ld/yy) 4. Per (mm/d	riod End Da  d/yy)	te	5. Treasurer Full	Name			
2023	10/31/2023		12/31/2023		MONIQUE HOLS	SEY HYMAN			
6. Type of Commit		9. Type of Re	eport (c	heck onl	y one type of report	from one category)			
Candidate Camp	- <b>=</b> '	Municipal		State/Co		Referendum			
PAC Independent	Referendum	Organiz	ational		Organizational	Organizational			
. Expenditure	Joint Fundraiser	☐ Thirty-fi	ive day	(	Quarterly	Pre-referendum			
Legal Expense F				_		<u> </u>			
7. Type of Fund	(if applicable, check one)	Pre-prin	- 1		First	Final			
"Booster Fund"  Building Fund		Pre-elec		님	Second	Supplemental Final			
Dunding Fund		Semi-an			Third Fourth	Annual Special			
		i —	d Year	l u	Semi-annual	Special			
Other:			ar End		Mid Year	10. Special Report Name			
		Final			Year End	•			
8. Number of Fund		Special		F	inal				
	0			∐ s	Special				
11. Account Inform					nformation				
a. Financial Institution I TRUIST BANK	full Name		a. Finar	ncial Insti	tution Full Name				
b. Purpose	c. Account Code		b. Purp	iose	IN DERS	ON ccount Code			
COMMITTEE	100				HA ELLIC	) The account Code			
CONTRIBUTION	190	J8 			IAN O. F	2024			
AND	d. Period Begin Balance			JAN 2 5 2024 d. Period Begin Balance					
EXPENDITURES	\$				DURHAM BÔE				
CERTIFICATION					DURDAN	1 402			
I certify that the Con	nmittee or Fund is in compli	ance with all ap	plicable pro	visions o	of Article 22A, 22B,	& 22D-22M of Chapter 163 of			
the NC General State	ites and that no funds are co	mmingled with	prohibited o	r other n	non-disclosed funds.	I further certify that this report			
	correct and that I have been		NG State Bo	ard of E	lections.	1/20/20			
Moned	Printed Name of Signer	<b>N</b>	Signature	f Appaints	ed Treasurer	1/20/24			
FOR OFFICE USE O			Signature 0	л Арроппа	ed Treasurer	Date			
Date Received:	1125/24	Emplo	7700	$\wedge \wedge$	A 1	Delivery Method			
Date Received.	110010	Emplo	yee.			Normal Mail			
Date Postmarke	d:	Emplo	yee:			Registered Mail			
						Hand Delivered Electronically Filed			
Date Scanned:		Emplo	yee:			Signer has not received			
Deta Deta Est	ad.	TEP				mandatory training			
Date Data Enter		Emplo							
Please Note: Thi	s form cannot be used to an	end committee	in formation	such as	the committee addre	ess, treasurer, assistant treasurer,			

CRO-1000

NC State Board of Elections

custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

August 2008

## **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
COMMITTEE TO ELECT DR MONIQUE HOLSEY FOR DURHAM CITY COUNCIL	END OF YEAR		9
Start of Election Cycle: January 1,		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1688.00	\$
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0	\$
6) Contributions from Individuals	(CRO-1210)	\$ 100.00	\$
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0	-\$
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0	\$
9) Loan Proceeds	(CRO-1410)	\$ 0	\$
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$ 350.00	\$
11) Other Receipt Sources	https://www.mim.go.es	All and the second	
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0	\$
11b) Contributions from Not-for-Profit Organization	tions (CRO-1250)	\$ 0	\$
11c) Outside Sources of Income	(CRO-1250)	\$ 0	\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ 0	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 1	l 1c, 11d and 11e)	\$ 450.00	\$
EXPENDITURES:			
13) Disbursements	and the second second		
13a) Operating Expenditures	(CRO-1310)	\$ 1176.50	\$
13b) Contributions to Candidates/Political Comm	ittees (CRO-1310)	\$ 0	S IN PERSON
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 0	s JAN 2 5 2024
15) Loan Repayments	(CRO-1420)	\$ 0	\$ DURHAM BOE
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$ 0	\$ DURHAM BO
17) In-Kind Contributions	(CRO-1510)	\$ 0	\$
(8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14,	15, 16 and 17)	\$ 1176.50	\$
(9) Cash on Hand at End (Add lines 4 and 12 together, then st	ubtract line 18)	\$ 861.50	\$
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0	
21) Outstanding Loans (incl. ones from other campain	gns) <i>(CRO-1430)</i>	\$ 0	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$ 0	
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$ 0	
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0	
25) Administrative Support	(CRO-1710)	\$ 0	\$
26) Forgiven Loans	(CRO-1440)	\$ 0	\$
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0	\$
28) Contributions to be Refunded	(CRO-1215)	\$ 0	\$

		m Individuals	0.54			Pg	1	of	1	Amendment Yes	No No
_		ividual contributions of		) or contri	bution	s unde	er \$50 if for				
		(and Fund if applica			1170				2. ID Nun	ıber	
COUNC		TO DR MONIQUE	HOLSE	EY HYMA	N FO	R DUI	RHAM CIT	Y			
	buter Infermation	on the contract of the sure of	84	Add		Ren	10ve			- E. M. WILL	10 F
	ne, Mailing Address			b. Job Ti	itle/Prof			T	d. Comment	S	
	city, state, & zip)			EDUC	ATOR						
TAMER	A ZIGLAR										
	TERNUT TRIAL					me/Sp	ecific Field				
GREENS	BORO, NC 2741	0		NC A	T			_			
									e. Election S	um to Date	
		100					-6		\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Descri	ption		j. Date (mm	n/dd/yyyy	у)	k. Amount	
	1908	CREDIT CAR					11	/06/202	23	\$	100.00
										\$	
										\$	
3. Contri	butor Informatio	on		Add		Ren	iove				
	ne, Mailing Address	& Phone		b. Job Title/Profession					d. Comments		
(include	city, state, & zip)								INP	ERSON	
				c. Employer's Name/Specific Field				JAN 2 5 2024			
									c. Election Sum to Date		
									\$DUF	HAM BO	
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Descri	ption		j. Date (mm	n/dd/yyyy	y)	k. Amount	
										\$	
										\$	
										\$	
3. Contri	butor Information	on The Control of the		Add		Ren	nove				
a. Full Name, Mailing Address & Phone			b. Job Title/Profession					d. Comments			
(include	city, state, & zip)			-							
				c. Emplo	yer's Na	me/Sp	ecific Field				
									e. Election S	um to Date	
^							\$				
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Descri	ption		j. Date (mm	n/dd/yyy		k. Amount	
										\$	

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)

\$

\$

100.00

100.00

\$

\$

## Refunds/Reimbursements To the Committee

Pg <u>1</u>

of

1

Amendment

	No

Yes

Use this form to report refunds received by the committee or reimbursements for a previous expenditure.

1. Committee Full Name (and Fund if applicable)						2. ID Number				
			HOLSEY HYMA	N FOF	3					
DURHAM CITY										
3. Contributor In				Add	- tomat	Remove		F 88		
a. Full Name, Mailin	_	& Phone			pe of Co			g. C	Comments	
(include city, state,			`		Candio	date	PAC			
COURTLAND B		ſΥ			Refere		Party			
600 WILLARD S	STREET			e. Lev		tered (Specify)		h. (	Original Expenditure Date	
DURHAM, NC				Federal County:  State Municipality:			County: Municipality:	08/28/2023		
					Butte		Wanterparity	i. O	riginal Expenditure Amt	
							\$	350.00		
b. Job Title/Profession c. Employer's Name/Specific Field			f. Pur	rpose			j. E	lection Sum to Date		
								\$	350.00	
k. Account Code	l. Form	of Payment	m. In-Kind Descri	ption		n. Date (mm/d	ld/yyyy)		o. Amount	
1908	DRAF	T .				12	2/20/2023		\$ 350.00	
3. Contributor In	E-G-Schille College College			Add		Remove				
a. Full Name, Mailing		& Phone		d. Ty	pe of Cor	mmittee		g. (	Comments	
(include city, state,	& zip)				Candio	iate	PAC			
					Refere		Party			
				e. Lev		tered (Specify)		h. (	Original Expenditure Date	
					Federa	ıl 📙	County:			
				State Municipality:				-	HASE	
							IN	PI	Real Propenditure Amt	
								\$ 4N 9	5 7024	
b. Job Title/Professio	n	c. Employer's Nam	ie/Specific Field	f. Purpose J. Election Sum to Date					lection Sum to Date	
							שמ	JRH	AM BOE	
k. Account Code	l. Form o	of Payment	m. In-Kind Descri	ption		n. Date (mm/d	ld/yyyy)	Ÿ	o. Amount	
!									\$.:.	
3. Contributor In				Add		Remove				
a. Full Name, Mailing	-	& Phone		d. Type of Committee				g. C	Comments	
(include city, state,	& zip)				Candio	late	PAC			
					Refere		Party			
				e. Lev		tered (Specify)		h. C	Original Expenditure Date	
					Federa	ıl 📙	County:			
				$\perp$	State		Municipality:	ļ.,		
								i. O	riginal Expenditure Amt	
								\$		
b. Job Title/Profession c. Employer's Name/Specific Field			f. Pur	rpose			j. E	lection Sum to Date		
2:								\$		
k. Account Code	l. Form o	of Payment	m. In-Kind Descri	ption		n. Date (mm/d	ld/yyyy)		e. Amount	
									\$	
4. Total only this	Page			V. T	Venilla	XINE U WA		\$	350.00	
5. Total of ALL (		0 Pages			TOOL .		TE MITES II			
		Detailed Summary P	age CRO-1100)					\$	350.00	

committees and	report expenditures coordinated party ex	penditures.	Pg ee for; operating expenses,	<u>1</u> of <u>2</u> contributions to ca	andidate/political
	ull Name (and Fun				2. ID Number
			HYMAN FOR DUR	2001	
3. Type of Disb			RO-1310 forms for each t		
Operating E		Contributions to Car	ndidates/Political Committees		rdinated Party Expenditures
4. Payee Inform	2222 1 4021 2021 1021		Add b. Coordinated Committee N	Remove	A Comment
	ing Address & Phone		b. Coordinated Committee N	ame	d. Comments
(include city, state, JACKIE WAGS					
DURHAM, NC			c. Level Registered (Specify)		
DOMINI, NO			Federal Federal	County:	
			State	Municipality:	e. Election Sum to Date
				wamorpanty.	
					\$ 125.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1908	CHECK	Е	11/10/2023	\$125.00	
				\$	
4. Payee Inform	ation		Add 🗍	Remove	
	ng Address & Phone		b. Coordinated Committee N	23 23 41 0 40 12	d. Comments
(include city, state,					
JERMAINE WALLACE ROXBORO, NC			c. Level Registered (Specify)  Federal	County:	
			State 🖂	Municipality:	e. Election Sum to Date
					\$ 125.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1908	CHECK	Е	11/10/2023	\$125.00	
				\$	IN PERSON
4. Payee Inform	ation		Add	Remove	
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee N	ame	d. Comments 2 5.2024
(include city, state,					JAN 2 0
VEGA SWEPS					DURHAM BOE
DURHAM, NC			c. Level Registered (Specify)		DUHHAM
			Federal	County:	
			State 🛛	Municipality:	e. Election Sum to Date
					\$ 125.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1908	CHECK	Е	11/10/2023	\$125.00	
				\$	
5. Total only th		· ·			\$ 375.00
	CRO-1310 Pages				
	line 13a of Detailed Sun line 13b of Detailed Sun		0 if Operating Expenses) 0 if Contrib to Candidates/Politic	cal Comm)	\$ 1176.50
(This line goes in	line 13c of Detailed Sum	ires)			

A\* - Media

E - Salaries

I - Postage

O\* - Other

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

B\* - Printing

J - Penalties

F\* - Equipment

C\* - Fundraising G - Political Party

K\* - Office Expenses

D - To Another Candidate

H\* - Holding Public Office Expenses

Q\* - Donation to Legal Expense Fund

					Ameno	lment	
Disbursements	Pg	<u>2</u>	of	<u>2</u>		Yes	Ņ
Use this form to report expenditures from the committee for operating ex	nenses	contribution	ns to	candid	date/politic	·al	

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						
			Y HYMAN FOR DUR				
3. Type of Disb	ursement (Plea	se use separate C	RO-1310 forms for each t	pe of Disbursen	nent.)		
Operating F			ndidates/Political Committees		oordinated Party Expenditures		
4. Payee Inform	The second secon	Υ, П'	Add	Remove			
	ng Address & Phone		b. Coordinated Committee Na	The same of the sa	d. Comments		
	-		as Continues Committee In		u, comments		
(include city, state,			1				
CRAIG HYMA							
DURHAM, NC			c. Level Registered (Specify)				
			Federal	County:			
			State 🖂	Municipality:	c. Election Sum to Date		
					\$ 1300.00		
					\$ 1300.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1000	CYTECY	-	11/00/0000	<b>#</b> 400 00			
1908	CHECK	E	11/09/2023	\$400.00			
1908	CHECK	E	11/15/2023	\$400.00			
4. Pavee Inform	lation :		Add	Remove			
	20. 1.1		37 37 50 Maryllo 245 1 455 1 4669 5451. 7 Ct 1 1 1 1 1	2 4453747 1137514 3 467	1.0		
	ng Address & Phone		b. Coordinated Committee Na	me	d. Comments		
(include city, state,	& zip)		4				
ACT BLUE							
P.O. BOX 4411	46		c. Level Registered (Specify)		1		
SOMERVILE,	MA 02144		Federal	County:			
			State 🖂	Municipality:	e. Election Sum to Date		
					A 252.52		
					\$ 263.62		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	g. 1 om of 1 a face (minimaly); y		J. LANCOUNT	PROCESSING FEES			
1908	DRAFT	K	12/31/2023	\$1.50	I ROCESSING FEES		
				\$			
4. Payee Inform					IN PERSON		
			Add	*Remove	IN PERIOD.		
	ng Address & Phone		b. Coordinated Committee Na	me	d. Comments		
(include city, state,	& zip)				JAN 2 5 2024		
			c. Level Registered (Specify)		THAM BOE		
			Federal	DURHAM BOE			
			State	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		
AT A A POPULATE OF THE	Po r over or r tolyments		2010 (11110 1110 3333)	p remount	a. required remains		
				\$			
				\$			
		B. 144 EN		]			
5. Total only th		W			\$ 800.00		
	CRO-1310 Pages	15 <sub>0</sub>					
	-		00 if Operating Expenses)		<b>\$</b> 1176.50		
-			00 if Contrib to C <mark>andidates/Politic</mark>	,	Ψ 11/0.50		
			0 if Coordinated Party Expenditu	res)			
7. Purpose Cod	es (List detailed ex	penditure code in	(h.) above)				
A* - Media	B* - Printing	C* - Fun	The state of the s	D - To Anoth	her Candidate		
E - Salaries	F* - Equipment				g Public Office Expenses		
I - Postage	J - Penalties	K* - Offi	ce Expenses		on to Legal Expense Fund		
O* - Other	***		4.00				
* Codes requir	e detailed explanat	on in required r	emarks field (k)				