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 c. ID Number a. Full Name b. Mailing Address (include City, State and Zip Code) d. Date Filed 3325 Tarleton West Durham, NC 27713 e. Phone Number 2. Report Year 3. Period Start Date (mm/dd/yy) | 4. Period End Date (mm/dd/yy) | 5. Treasurer Full Name Monim William 9. Type of Report (check only one type of report from one categor 6. Type of Committee (Check One) State/County Referendum Municipal Candidate Campaign Party Organizational Organizational Organizational PAC Referendum Thirty-five day Quarterly Pre-referendum Independent Expenditure Joint Fundraiser Final Pre-primary First Legal Expense Fund Supplemental Final Pre-election Second (if applicable, check one) Annual Pre-runoff Third 7. Type of Fund Fourth Special Semi-annual Booster Fund Mid Year Semi-annual Building Fund Year End Mid Year 10. Special Report Name Final Year End Other: 8. Number of Fundraisers this Report Final Special Special 11. Account Information 11. Account Information a. Financial Institution Full Name a. Financial Institution Full Name Account Code b. Purpose b. Purpose c. Account Code DURHAM BOE d. Period Begin Balance d. Period Begin Balance \$10783.38 CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections. nica Willia w Printed Name of Signer Signature of Appointed Treasurer FOR OFFICE USE ONLY Delivery Method Employee: Date Received: ☐ Normal Mail Registered Mail Date Postmarked: Employee: Hand Delivered ☐ Electronically Filed Date Scanned: Employee: ☐ Signer has not received Date Data Entered: Employee: mandatory training Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary	to total more	information	Amendment Yes No
Use this form to summarize all disclosure reporting forms and 1. Committee Full Name (and Fund if applicable)	2. Type of		3. ID Number
Brenda Howerton Ex Caules Com	MZTIW E	√	
Start of Election Cycle: January 1, 2016		Total this Reporting Period	Total this l Election Cycle
4) Cash on Hand at Start		\$6783, 38	
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 400	\$
6) Contributions from Individuals	(CRO-1210)	\$ 12,100	\$
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			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	11d and 11e)	\$13,500	\$
<u>EXPENDITURES</u>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 11802.40	\$
13b) Contributions to Candidates/Political Committees	(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, 1	5, 16 and 17)	\$1802.40	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then sul	otract line 18)	\$ 7480.9	8 \$
ADDITIONAL INFORMATION	11		
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$	
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)	\$	\$

			Amendmer	ıt
Aggregated Contributions from Individuals	Page	of		☐ No
Optional form used to report NC Contributions From Individual	ials of \$50	or less		

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Contributions from Individuals

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O* - Other * Codes require	e detailed explanati	on in required ro	marks field (b)		

Disbursen	nents				Pg of	Amendment Yes No
Use this form t	o report expenditures	from the commi	ttee for	operating ex		tions to candidate/political
committees and	d coordinated party ex	xpenditures	Name of the Control o			
15 Communee	Full Name (and Fun	d if applicable)				2. ID Number
Brenc	la Huvent	kn fir	$()_{i,r}$	on he	MMSCIU	.
3. Type of Dis	bursement (<u>Pleas</u>	e use separate C	RO-131	0 forms for	each type of Dis	pursement.)
Operating Ex	penses	ntributions to Candid			The second secon	ordinated Party Expenditures
4. Payee Infor				Add 🔲	Remove	
	Mailing Address & Ph	one	b. Coordina	ted Committee Nam	e d. Comments	
(include city, state				-		
M, X, C	$\circ m$		c. Level Reg	c. Level Registered (Specify)		
				Federal	County:	 -1
				☐ State	Municipa	ality: e. Election Sum to Date
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i Data	(mm/dd/yyyy)	li Amount	k. Required Remarks
1	debit	Δ	21	2/11/2	\$ 19,80	
	LACION		1010	<u> </u>		monthly weighosting fee.
			***********		\$	
4. Payee Inform	nation ling Address & Phone		Ļ	Add 🔲	Remove	
(include city, sta				b. Coordinat	ed Committee Name	d. Comments
MAION	cluerus inc,			c. Level Regi	stered (Specify)	
VAN Advertising, 3290 Van Drive. Burlington, uc 27215 336-326-7400				Federal	County:	
Burlington in 2775				State	Municipa	lity: e. Election Sum to Date
336-2	26-7400	4) J				\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Oheck	A	1			advertising
	- Exit Oic		1/5	110	6	University 3
					Φ	
a. Full Name, Mailing Address & Phone				Maria Carlos Carlos Company Carlos	Remove ed Committee Name	
(include city, state, & zip)				D. Coordinate	ed Committee Name	d. Comments
				c. Level Regis	stered (Specify)	
				Federal	County:	
				State	Municipa Municipa	lity: e. Election Sum to Date
						\$
. Account Code	g. Form of Payment	h. Purpose Code	i. Date (1	mm/dd/yyyy)	j. Amount	k. Required Remarks
					\$	
					\$	
. Total only th	is Page					\$ 1001.80
	The State of the Control of the State of the					3 10.11.80
5. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)						
(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)						
. Purpose Co	des (List detailed)		in (h.)	above)		
* - Media B* - Printing C* - Fu				ındraising		Another Candidate
E - Salaries	G 101		itical Party		lding Public Office Expenses	
- Postage O* Other	J - Penaltie	S	K* - O	ffice Expens	ses Q* - Do	nation to Legal Expense Fund
	e detailed explanatio	n in required r	emarke	field (k)		
			A STATE OF THE PARTY OF THE PAR	The second second	many a transfer to the last of the first of the second	and the control of th