Do not use this form to	o update information	information, must be	signed and sub	omitted along with of	her detailed forms.
1. Committee Inform					
a. Full Name	ACIVII				c. ID Number
Brenda Howerton Cou	anty Commissioner				C. 1D Number
b. Mailing Address (includ	e 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/	4. Period	End Date	5. Treasurer Full	Name
1	(mm)	(mm/dd/yy)			TWILL
2020	04/01/2020	06/	30/2020	Monica Biggs	
6. Type of Committee	Extension 1	9. Type of Repor		aly one type of report	from one category)
Candidate Campaig		Municipal	State/C		Referendum
PAC	Referendum	Organizationa	1	Organizational	Organizational
Independent Expenditure	Joint Fundraiser	Thirty-five da	y	Quarterly	Pre-referendum
Legal Expense Fund	1				
	(if applicable, check one)	Pre-primary		First	Final
"Booster Fund"		Pre-election		Second	Supplemental Final
Building Fund		Pre-runoff		Third	Annual
		Semi-annual		Fourth	Special
		Mid Yes	ır	Semi-annual	
Other:		Year En	d 🔲	Mid Year	10. Special Report Planes
		Final		Year End	
8. Number of Fundra	isers this Report	Special		Final	050
				Special	SEP 0 4 2020
11. Account Informat	ion		11. Account	Information	
a. Financial Institution Ful	l Name		a. Financial Ins	titution Full Name	DURHAM BO
Wells Fargo					20111711120
b. Purpose	c. Account Code		b. Purpose		c. Account Code
b. Purpose Campaign	c. Account Code		b. Purpose		c. Account Code
			b. Purpose		c. Account Code d. Period Begin Balance
	d. Period Begin Balanc		b. Purpose		d. Period Begin Balance
Campaign]		b. Purpose		
Campaign CERTIFICATION	d. Period Begin Balanc	e			d. Period Begin Balance
Campaign CERTIFICATION I certify that the Comm	d. Period Begin Balance \$ 667.95	iance with all applic	able provisions	of Article 22A, 22B.	d. Period Begin Balance \$, & 22D-22M of Chapter 163 of
Campaign CERTIFICATION I certify that the Community the NC General Statute	d. Period Begin Balance \$ 667.95 nittee or Fund is in comples and that no funds are completed.	iance with all applic	able provisions	non-disclosed funds	d. Period Begin Balance
CERTIFICATION I certify that the Commenthe NC General Statute is complete, true and certifications.	d. Period Begin Balance \$ 667.95 nittee or Fund is in complete and that no funds are correct and that I have bee	iance with all applic	able provisions	non-disclosed funds	d. Period Begin Balance \$ 3. & 22D-22M of Chapter 163 of I further certify that this report
Campaign CERTIFICATION I certify that the Community the NC General Statute	d. Period Begin Balance \$ 667.95 nittee or Fund is in completes and that no funds are correct and that I have been	iance with all applic ommingled with pro n trained by the NC	able provisions hibited or other State Board of	non-disclosed funds Elections.	d. Period Begin Balance \$ & 22D-22M of Chapter 163 of I further certify that this report 9/2/2020
CERTIFICATION I certify that the Comm the NC General Statute is complete, true and c Monica Biggs	d. Period Begin Balance \$ 667.95 nittee or Fund is in complete and that no funds are contract and that I have been serviced. Printed Name of Signer	iance with all applic ommingled with pro n trained by the NC	able provisions	non-disclosed funds Elections.	d. Period Begin Balance \$ 3. & 22D-22M of Chapter 163 of I further certify that this report
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CERTIFICATION I certify that the Comm the NC General Statute is complete, true and c Monica Biggs	d. Period Begin Balance \$ 667.95 nittee or Fund is in complete and that no funds are contract and that I have been serviced. Printed Name of Signer	iance with all applic ommingled with pro n trained by the NC	able provisions hibited or other State Board of I	non-disclosed funds Elections.	d. Period Begin Balance \$. & 22D-22M of Chapter 163 of . I further certify that this report 9/2/2020 Date Delivery Method
CERTIFICATION I certify that the Comm the NC General Statute is complete, true and c Monica Biggs FOR OFFICE USE ON Date Received:	d. Period Begin Balance \$ 667.95 nittee or Fund is in complete and that no funds are contract and that I have been serviced. Printed Name of Signer	iance with all applic ommingled with pro n trained by the NC	able provisions hibited or other State Board of Signature of Appoir	non-disclosed funds Elections.	d. Period Begin Balance \$ & 22D-22M of Chapter 163 of I further certify that this report 9/2/2020 Date Delivery Method Normal Mail
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Amendment

Disclosure Report Cover

CRO-1000 NC State Board of Elections 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	t 3. ID Number		
Brenda Howerton for County Commissioner	2 nd Quarter			
		Total this	Total this	
Start of Election Cycle: January 1,	2020	Reporting Period	Election Cycle	
4) Cash on Hand at Start		\$ \$667.95	\$	
RECEIPTS				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$	
6) Contributions from Individuals	(CRO-1210)	\$	\$	
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 Organizat	ions <i>(CRO-1250)</i>	\$	\$	
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, 1	Ic, IId and IIe)	\$	\$	
EXPENDITURES				
13) Disbursements				
13a) Operating Expenditures	(CRO-1310)	\$ 1853.14	\$	
13b) Contributions to Candidates/Political Comm	ittees (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)	\$ 1853.14	\$	
19) Cash on Hand at End (Add lines 4 and 12 together, then st	ıbtract line 18)	\$ -1185.19	\$	
ADDITIONAL INFORMATION			IN PERSON	
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	IIVI Elisee	
21) Outstanding Loans (incl. ones from other campaig	gns) (CRO-1430)	\$	SEP 0 4 2020	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$		
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$	DURHAM BOE	
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)	\$	\$	

Amendment **Disbursements** 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 Brenda Howerton for County Commissioner 3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) Contributions to Candidates/Political Committees Coordinated Party Expenditures Operating Expenses 4. Payee Information Add Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) Wix.com c. Level Registered (Specify) Federal County: State Municipality: e. Election Sum to Date h. Purpose Code k. Required Remarks f. Account Code g. Form of Payment i. Date (mm/dd/yyyy) j. Amount WEBSITE \$36 0 6/29/20 1 card \$ Add Remove 4. Payee Information a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) Crawley Creative Agency c. Level Registered (Specify)

Circuistoro, ive	,	1	Federal Federal	County:	-
			State	Municipality:	e. Election Sum to Date
					\$
. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	electronic	Е	4/6/20	\$250.00	
				\$	IN PERSON
. Payee Inform	ation		Add	Remove	
. Full Name, Maili	ng Address & Phone		b. Coordinated Committee N	lame	d. Comments SEP 0 4 2020
include city, state,	& zip)				
Lifeloc					
			c. Level Registered (Specify)		DURHAM BOE
			Federal	County:	
			State	Municipality:	e. Election Sum to Date
					\$
. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	card	О	6/5/20	\$104.97	
				\$	
5. Total only th	is Page				\$ 390.97
6. Total of ALL	CRO-1310 Pages				
,	line 13a of Detailed Sun line 13b of Detailed Sun) if Operating Expenses)) if Contrib to Candidates/Politi	ical Comm)	\$ 1853.14
(This line goes in	line 13c of Detailed Sun	mary Page CRO-1100	if Coordinated Party Expendit	tures)	
7. Purpose Cod	es (List detailed ex	penditure code in (h.) above)		
A* - Media	B* - Printing	C* - Fund	2	D - To Anoth	
E - Salaries	F* - Equipment				g Public Office Expenses
I - Postage O* - Other	J - Penalties	K* - Offic	ee Expenses	Q* - Donatio	on to Legal Expense Fund
	e detailed explanat	ion in required re	marks field (k)		
CRO-1310	c detailed explanat		State Board of Elections		December 2009
CAO-131V		140 0	2 Jan C. Dieber		2333,000, 2007

Disbursements	Pg	2	of	4	Amendment Yes	No
Use this form to report expenditures from the committee for; operating	expenses,	contri	butions to	candidat	e/political	
committees and coordinated party expenditures.						
1. Committee Full Name (and Fund if annlicable)					2. ID Number	

1. Committee F	ull Name (and Fun	d if applicable)			2. ID Number
Brenda Howerto	on for County Comm	nissioner			
3. Type of Disbu	ursement (Plea	se use separate C	RO-1310 forms for each ty	pe of Disbursem	ent.)
Operating E			didates/Political Committees		ordinated Party Expenditures
4. Payee Inform			Add	Remove	V 1
	ng Address & Phone		b. Coordinated Committee Na		d. Comments
(include city, state,	_		b. Cool dillated Committee 14		u. Comments
Actblue					
Acibiue			a Larral Davistawad (Chasifu)		-
			c. Level Registered (Specify)	0	-
			Federal	County:	
			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
1	electronic	O	4/3/20	\$14.25	fee
•				ψ1 1.25	
				\$	
				Ψ	
4. Payee Inform			Add	Remove	
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Na	ame	d. Comments
(include city, state,	& zip)				
Grammarly					
			c. Level Registered (Specify)		
			Federal	County:	7
			State	Municipality:	e. Election Sum to Date
				Transco.punty.	OF ELECTION DAILS TO DAILS
					\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
Wilder Cour	g. I of m of I styllione	•	II Date (IIIII dayyyy)	J. Tamount	software
1	card	0	4/8/20	\$59.95	Soliwaic
1	Card	0	4/0/20	457.75	
1	card	0	4/8/20	\$37.73	
3	card	0	4/8/20	\$	IN PERSON
				\$	IN PERSON
4. Payee Inform	ation		Add	\$ Remove	
4. Payee Inform a. Full Name, Maili	nation ng Address & Phone			\$ Remove	IN PERSON d. Comments SEP 0 4 2020
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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 Brenda Howerton for County Commissioner (Please use separate CRO-1310 forms for each type of Disbursement.) 3. Type of Disbursement Contributions to Candidates/Political Committees Operating Expenses Coordinated Party Expenditures 4. Pavee Information Add Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) Paula Wolfe c. Level Registered (Specify) 616 Weathergreen Drive Raleigh, NC 27615 Federal County: State Municipality: e. Election Sum to Date h. Purpose Code f. Account Code g. Form of Payment i. Date (mm/dd/yyyy) j. Amount k. Required Remarks 1 5/11/20 \$1000 check E 4. Payee Information Add Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) Durham for All 1803 Chapel Hill Rd c. Level Registered (Specify) Durham, NC 27707 Federal County: State Municipality: e. Election Sum to Date \$ h. Purpose Code g. Form of Payment i. Date (mm/dd/yyyy) j. Amount k. Required Remarks f. Account Code membership 1 6/29/20 \$20.00 card 0 \$ IN PERSON 4. Pavee Information Add Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments SEP 0 4 2020 (include city, state, & zip) SK Graphic Design c. Level Registered (Specify) steve@skgraphicdesign.com **DURHAM BOE** Federal County: State Municipality: e. Election Sum to Date h. Purpose Code i. Date (mm/dd/yyyy) k. Required Remarks f. Account Code g. Form of Payment j. Amount 1 E 5/16/2020 \$150 card \$ 1170 5. Total only this Page 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) S 1853.14 (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) D - To Another Candidate A* - Media B* - Printing C* - Fundraising H* - Holding Public Office Expenses E - Salaries F* - Equipment G - Political Party J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund I - Postage

O* - Other

* Codes require detailed explanation in required remarks field (k)

Amendment