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 Infor	The second secon								
a. Full Name	c. ID Number								
Committee to elect	Willicent Rogers								
	lude City, State and Zip Code)				d. Date Filed				
P.O. Box 52543 Durham, N. C. 277	07/13/2022								
	e. Phone Number								
					919-225-1277				
2. Report Year	3. Period Start Date (mm/c	dd/yy) 4. Period (mm/dd/yy)	End Date	5. Treasurer Ful	Full Name				
2022	12/03/2021	07/1	3/2022	Samuel D. Roger	Samuel D. Rogers				
6. Type of Commit	tee (Check One)	9. Type of Report	(check on	lly one type of repor	rt from one category)				
Candidate Camp		Municipal	State/C		Referendum				
PAC	Referendum	Organizationa		Organizational	Organizational				
Independent Expenditure	Joint Fundraiser	Thirty-five day	y	Quarterly	Pre-referendum				
Legal Expense F	und								
7. Type of Fund	(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 Year		Semi-annual	40.0				
Other:		Year End	'	Mid Year Year End	10. Special Report Name				
8. Number of Fund	voicers this Depart	Special Special		Final					
8. Number of Fund	0	Special		Special					
11. Account Information 11. Account Information									
a. Financial Institution Full Name a. Financial Institution Full Name									
Truist Bank									
b. Purpose c. Account Code			b. Purpose		c. Account Code				
Campaign	63	89							
	d. Period Begin Balanc	e			d. Period Begin Balance				
	\$ 452.60				\$				
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. Samuel D. Rogers Printed Name of Signer Signature of Appointed Treasurer Date									
FOR OFFICE USE ONLY									
Date Received:	1/13/22	Employee:	1881		Delivery Method Normal Mail				
Date Postmarke	d:	IN PERSO	N		Registered Mail Hand Delivered				
Flectronically Filed									
Date Scamicu.		Employee:	2		Signer has not received				
Date Data Enter	-	Employee:			mandatory training				
Please Note: Th	is form cannot be used to an custodi	DURHAM B mend committee information of books information	rmation such as tion, or account	the committee add	ress, treasurer, assistant treasurer,				

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Amendment

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. II) Number	
Committee to elect Millicent Rogers				
Start of Election Cycle: January 1,	2022	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 452.60	\$ 452.60		
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	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 Organization	tions (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, 1	'1c, 11d and 11e)	\$	\$	
EXPENDITURES				
13) Disbursements				
13a) Operating Expenditures	(CRO-1310)	\$ 219.86	\$ 219.86	
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)	\$ 2438.82	\$ 2438.82	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14,	15, 16 and 17)	\$ 2658.68	\$ 2658.68	
19) Cash on Hand at End (Add lines 4 and 12 together, then sa	ıbtract line 18)	\$ -2206.08	\$ -2206.08	
ADDITIONAL INFORMATION				
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ -		
21) Outstanding Loans (incl. ones from other campaigness)	gns) (CRO-1430)	\$		
22) Debts and Obligations owed By the Committee	\$			
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$		
24) Account Transfers Within the Committee	4) Account Transfers Within the Committee (CRO-1720)			
25) Administrative Support IN PERSON	(CRO-1710)	\$	\$	
26) Forgiven Loans 1111 1 3 2022	(CRO-1440)	\$	\$	
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$	
28) Contributions to be Refunded DURHAM BOE	(CRO-1215)	\$	\$	

1. Committee 1	coordinated party ex					
	Full Name (and Fun		A 15 min in it.		2. ID Number	
	elect Millicent Roger					
3. Type of Disk			RO-1310 forms for each			
Operating 1		Contributions to Car	Add Committees	Remove	Coordinated Party Expenditures	
4. Payee Information			b. Coordinated Committee	d. Comments		
include city, state	ling Address & Phone		b. Cool dinated Committee	: I Value	donate	
	Elect Millicent				and items	
1 100100 2011110			c. Level Registered (Specif	iy)		
			Federal			
			State X	e. Election Sum to Date		
					\$ 67.38	
. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
K	debit card	K	06/03/2022	\$67.38	expense	
				\$		
4. Payee Inform	nation		Add	Remove		
. Full Name, Mai	ling Address & Phone		b. Coordinated Committee	Name .	d. Comments	
include city, state	, & zip)				recurring	
Zoom payment						
			c. Level Registered (Specif	-		
			Federal _	County:		
			State	Municipality:	e. Election Sum to Date	
					\$ 14.99	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
K debit card		K	06/06/2022	\$14.99	expense	
				\$		
4. Payee Infor	mation		Add	Remove		
. Full Name, Mai	ling Address & Phone		b. Coordinated Committee	Name	d. Comments	
include city, state	, & zip)				fee	
Overdraft fee						
			c. Level Registered (Specif	10		
			Federal _	County:		
			State	Municipality:	e. Election Sum to Date	
					\$ 36.00	
. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
f. Account Code	g. Form of Payment bank draft	h. Purpose Code	i. Date (mm/dd/yyyy) 06/09/2022	j. Amount \$36.00	k. Required Remarks fee	

(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Page Expendings) 7. Purpose Codes (List detailed expenditure code in (h.) above)

A* - Media B* - Printing

C* - Fundraising G - Political Party

D - To Another Candidate

DURHAM BOE H* - Holding Public Office Expenses Q* - Donation to Legal Expense Fund

E - Salaries F* - Equipment I - Postage J - Penalties

O* - Other

K* - Office Expenses

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

Disbursem	ents			Pg		of		Amendment Yes		No
			tee f	for; operating expense	es, coi	ntributions to	candid	late/political		
	coordinated party ex full Name (and Fun							2. ID Number		
	lect Millicent Rogers							Z. ID Number		
3. Type of Disb			RO	-1310 forms for each	tine	of Dishurse	ment.			
Operating E			_	ates/Political Committees	11100			ed Party Expenditure	S	
4. Payee Inform			A	dd 🔲	R	temove	7			VIII.
	ing Address & Phone		_	. Coordinated Committee			d. Co	omments		
(include city, state,	_						exp	ense		
	elect MIL Custom									
			c.	Level Registered (Specify	y)					
			ΙĒ	Federal County:						
		L	State 🖂	N	funicipality:	e. El	ection Sum to Date			
							\$	100.49		
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j.	Amount		equired Remarks		
K	debit card	K		06/09/2022	\$	100.49	expense			
					\$					
4. Payee Inform	nation		A	dd	R	lemove				
a. Full Name, Mail	ing Address & Phone		b.	. Coordinated Committee	Name		d. C	omments		
(include city, state,							exp	ense		
Corporate debit			_					_		
			c.	c. Level Registered (Specify)						
			11-	Federal		County:	. 171			
			-	State 🔀	ļ īv	funicipality:	e. El	ection Sum to Date		
							\$	1.00		
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j.	Amount	k. Re	equired Remarks		
K	debit card	K		06/22/2022	\$	1.00	exp	ense		
					\$					
4. Payee Inform	nation		Δ	\dd		lemove		2" THE TWITE		
	ing Address & Phone		b. Coordinated Committee Name			d. C	omments			
(include city, state,				DI COOI GIAMETE COMMINICE L'IMME			-			
(Internation City) Comments			1							
			c.	Level Registered (Specify	y)					
				Federal		County:				
				State 🔀	l N	funicipality:	e. El	ection Sum to Date		
							\$			
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j.	Amount	k. R	equired Remarks		
					\$					
					\$					
5. Total only th	is Page						\$	101.49		
	CRO-1310 Pages									
(This line goes in	line 13a of Detailed Sur	nmary Page CRO-110	90 if	Operating Expenses)	NI.		\$			
(This line goes in line 13b of Detailed Summary Page CRO-1100 (This line goes in line 13c of Detailed Summary Page CRO-1100				Coordinated Party Expend	ditures		Ф			
	es (List detailed ex	penditure code in	(h	above) and	1				-12	70
A* - Media	B* - Printing	C* - Fun	dra	ising JUL 1 3 LUL	.fn	D - To Ano	ther Can	didate		
E - Salaries	F* - Equipment	G - Politi	ical l	above) ising JUL 1 3 202 Party Expenses DURHAM B	OF			ic Office Expenses		
I - Postage O* - Other	J - Penalties	K* - Off	ice F	Expenses DURHAM D	,00	Q* - Donat	ion to L	egal Expense Fun	d	
O - Other										

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

In-Kind Contributions		j	Pg of		Amendment Yes No		
Use this form to report non-monetary contributions, donations, go		ervio	ces provided to th	e com	nittee or fund.		
Use CRO-1215 if In-Kind Contributions were or will be refunded	d within	7 day	/S.				
1. Committee Full Name (and Fund if applicable)	2. ID	Number					
Committee to elect Millicent Rogers							
3. Contributor Information Add	Remove			111			
a. Full Name, Mailing Address & Phone	b. Type		Contributor		nments		
(include city, state, & zip)			vidual	Committee to el			
NCAE PACK			Candidate		ct Millicent Rogers		
		Party PAC		Koge	ers		
			rendum	d. Election Sum to Date			
			er Receipt Source	\$ 258.32			
e. Description			f. Date (mm/dd/yy	yy) g. Fair Market Amount			
Flyers / pole standing							
, , ,			05/22/2022		\$ 258.32		
					\$		
					\$		
3. Contributor Information Add	Remove						
a. Full Name, Mailing Address & Phone	b. Type	e of C	ontributor	c. Con	nments		
(include city, state, & zip)		Individual		mailer			
Mailer			didate				
		Part					
			rendum	d. Ele	ction Sum to Date		
			r Receipt Source	\$	\$ 1624.00		
e. Description			f. Date (mm/dd/yy	yy)	g. Fair Market Amount		
mailer			05/26/2022		\$ 1624.00		
					\$		
					\$		
3. Contributor Information Add	Remove						
a. Full Name, Mailing Address & Phone	b. Type	e of C	ontributor	c. Con	nments		
(include city, state, & zip)		Indiv	vidual	Тое	lect		
Canvass			lidate	Milli	icent Roger		
Phones		Party					
Poll standing	PA		rendum	& Florida Com 4 D.A.			
			r Receipt Source	d. Election Sum to Date			
		Out	*	\$	556.50		
e. Description Committee to elect			f. Date (mm/dd/yy)	yy)	g. Fair Market Amount		
Millicent Rogers IN PERSON			06/22/2022	2	\$ 556.50		
Millicent Rogers IN PERSON JUL 1 3 2072					\$		
JUL 1 3 2012					· ·		

CRO-1510 NC State Board of Elections December 2007

DURHAM BOE

4. Total only this Page

5. Total of ALL CRO-1510 Pages

(This tine must be on line 17 of Detailed Summary Page CRO-1100)

\$

\$

\$

2438.82

2438.82