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.

	to upuate information.				
1. Committee Informa	ation				and the second second second
a. Full Name	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	**********************	c. ID Number
STEVEUNRUHE4DUI	RHAMSCHOOLS	Westerman			
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BOX 71482					07/11/2016
DURHAM, NC 27722	Ł.				
					e. Phone Number
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***************************************	eriod Start Date (mm/dd/	(vy) 4. Perio	*****************************	***********************	easurer Full Name LLE CLARK
2016	03/01/2016		06/30/2016		
6. Type of Committee Candidate Campaign		9. Type of Repo		nly one type of	f report from one category)
	Party	Municipal	**********************	County	Referendum
☐ Joint Fundraiser ☐ Referendum	☐ PAC☐ Legal Expense Fund	Organizat d		rganizational warterly	Organizational Pre-referendum
—	Legal Expense rund	D Pre-prima	-	uarterly First	☐ Pre-referendum ☐ Final
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☐ Building Fund		☐ Pre-runof		Third	Annual
☐ Presidential Election	n Year Candidates Fund	Semi-ann	11821	Fourth	Special
☐ NC Public Campaign	Financing Fund	☐ Mid 3		emi-annual	
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CERTIFICATION					
I certify that the Con	mmittee or Fund is in co	ompliance with all	Lapplica De pro-	visions of Artic	cle 22A, 22B & 22D-22M of
Chapter 163 of the N	NC General Statutes and	d that no funds ar	re commingled w	with prohibited	l or other non-disclosed
funds. I further cert	afy that this report is co	omplete, true and	confect and that	t I have been tr	rained by the NC State Board
Ectalla	Clark	(1	Ulkkej	May	
C DIEILE Printed!	Name of Signer				07/11/2016
FOR OFFICE USE ON		W.C.	gnature of Appoint	ted Treasurer	Date
	15 10		4	11	Delivery Method
Date Received:	7-12-96		loyee <u></u>	6	☐ Normal Mail
Date Postmarked:		Empl	loyee		Registered Mail Hand Delivered
Date Scanned:	- 12 m	Empl	loyee		☐ Electronically Filed
Date Data Entered:		Emplo	oyee		☐ Signer has not received mandatory training
	assistant treasurer, cus	istodian of books	information, or	account inform	ommittee address, treasurer, nation.
V ATT MATE	ust amend the Statement	t of Organization	(CRO-2100A-E)	to make comm	nittee changes

Detailed Summary

Amendment

Ves 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 STEVEUNRUHE4DURHAMSCHOOLS 2016 Second Quarter Total this Total this 2015 Start of Election Cycle: January 1, Reporting Period **Election Cycle** 4) Cash on Hand at Start 10,025.64 0.00 RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) 617.94 5.207.35 6) Contributions from Individuals (CRO-1210) 5 S 1,696.23 14,529.47 7) Contributions from Political Party Committees (CRO-1220) S 0.00 0.00 (CRO-1230) 8) Contributions from Other Political Committees 0.00 S 600.00 9) Loan Proceeds (CRO-1410) 0.00 S 0.00 10) Refunds/Reimbursements to the Committee (CRO-1240) S 0.00 0.00 11) Other Receipt Sources 11a) Interest on Bank Accounts (CRO-1250) 0.00 0.00 11b) Contributions from Not-For-Profit Organizations (CRO-1250) S 0.00 0.00 11c) Outside Sources of Income (CRO-1250) 5 0.00 0.00 11d) Legal Expense Fund - Other Sources (CRO-1270) \$ 0.00 0.00 11e) Exempt Purchase Price Sales (CRO-1265) S 0.00 S 0.00 2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e) 2,314.17 20,336.82 EXPENDITURES 3) Disbursements 13a) Operating Expenditures (CRO-1310) 4,599.85 10,327.58 13b) Contributions to Candidates/Political Committees (CRO-1310) S 200.00 200.00 13c) Coordinated Party Expenditures (CRO-1310) S S 0.00 0.00 14) Aggregated Non-Media Expenditures (CRO-1315) 68.09 S 145.76 15) Loan Repayments (CRO-1420) S 0.00 0.00 16) Refunds/Reimbursements from the Committee (CRO-1320) S 574.07 1,444.21 17) In-Kind Contributions (CRO-1510) S 865.27 2,186.74 8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) 6,307.28 14,304.29 9) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) 5 6,032.53 6.032.53 ADDITIONAL INFORMATION 20) Non-Monetary Gifts Given to Other Committees (CRO-1330) 0.00 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) 0.00 22) Debts and Obligations owed by the Committee 0.00 (CRO-1610) 23) Debts and Obligations owed to the Committee (CRO-1620) 0.00 24) Account Transfers Within the Committee (CRO-1720) 0.00 25) Administrative Support (CRO-1710) 0.00 \$ 0.00 26) Forgiven Loans (CRO-1440) 0.00 S 0.00 27) 48-Hour Notice Reports Sum (CRO-2220) 5 0.00 0.00 28) Contributions to be Refunded (CRO-1215) 0.00 0.00

Aggregated Contributions from Individuals Page _____ of _____

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I	Yes		X	No

Optional form used to report NC Contributions From Individuals of \$50 or less

1.	Committe	e Full Name (and	Fund if applicable)		2. ID	Number
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	Add Remove	123456	Check		03/13/2016	\$ 35.00
	Add Remove	123456	Check		03/07/2016	\$ 50.00
	Add Remove	123456	Cash		03/07/2016	\$ 20.00
	Add Remove	123456	Cash		03/15/2016	\$ 40.00
	Add Remove	123456	Cash		03/15/2016	\$ 20.00
	Add Remove	123456	Check		03/07/2016	\$ 50.00
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	Add Remove	123456	In-Kind	PURCHASE OF FACEBOOK ADS FOR	03/02/2016	\$ 25.14
	Add Remove	123456	Check	PACEBOOK ADS FOR	04/12/2016	\$ 43.90
		123456	In-Kind	FOOD FOR MEETING WITH EC PARENTS	03/20/2016	\$ 43.90
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NC State Board of Elections

April 2007

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Disbursen	ents				Pe	1 of	,	Amend 1 Ye		V.
Use this form to	report expenditures coordinated party e	from the committ	ee for a	perating expen	nses,	contribut	ons to	candidate	political	
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NC State Board of Elections

December 2009

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

CRO-1310

Disbursements	Do	1 .	n.f	6
	re	1 4	0.7	O

□ Yes 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) STEVEUNRUHE4DURHAMSCHOOLS (Please use separate CRO-1310 forms for each type of Disbursement.) 3. Type of Disbursement X Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures 4. Payee Information □ Add □ Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) BRUEGGER'S BAGELS c. Level Registered (Specify) 626 NINTH STREET ☐ Federal DURHAM, NC 27705 ☐ County: ☐ State ☐ Municipality: e. Election Sum to Date 113.91 f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks 123456 Debit Card 0 03/05/2016 113.91 REFRESHMENTS FOR MEETING WITH LATINO 4. Payee Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) CAMPAIGN TO RE-ELECT ELLEN RECKHOW c. Level Registered (Specify) 11 PINE TOP PLACE ☐ Federal County: DURHAM, NC 27705 ☐ State Municipality: e. Election Sum to Date Durham 200.00 f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks 123456 Check D 03/10/2016 200.00 4. Payee Information 🗆 Add 🗆 Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) ESTELLE CLARK PO BOX 71074 c. Level Registered (Specify) DURHAM, NC 27722 ☐ Federal County: ☐ State ■ Municipality: e. Election Sum to Date 0.00 f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) k. Required Remarks i. Amount 123456 Check 0 03/16/2016 S 136.43 REIMBURSEMENT FOR IN-KIND CONTRIBUTION 5. Total only this Page S 450.34 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) 4,599.85 (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

O* Other

Q* - Donation to Legal Expense Fund

Amendment

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Pg	3	of	6		es	X	No

1. Committee Fu STEVEUNRUHE					••••••••••••••••	**********	2. ID Nu	mber
3. Type of Disbur		se use separate CRO			of Disbu	rseme	nt.)	
Operating Expe		entributions to Candidat	es/Political Committe	2 3	□ C₀	ordinal	ed Party E	xpenditures
4. Payee Informa			☐ Add ☐	Rem				
a. Full Name, Mai		Phone	b. Coording	ted Coz	amittee N	ame	d. Comm	ents
(include city, state	****************************		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
HARRIS TEETER 1501 HORTON RO					/C 10 \			
DURHAM, NC 27			c. Level Rep	ustered	County	 **********************************		
Boldini, NC 27	703		State	Ì	☐ County ☐ Municip		e. Flectio	n Sum to Date
			, , , , , , , , , , , , , , , , , , ,	*******	***************************************		I	*****************
							S	140.7
	. Form of Payme	at h. Purpose Code	i. Date (mm/dd/yyy	y) j. An	ount	k. Re	quired Re	marks
123456	Debit Card	0	03/15/2016	S	140.77	ELEC	CTION RE	SULTS
				s		WAT	CH PART	Υ
4. Payee Informat			□ Add □					
a. Full Name, Mail		hone	b. Coordina	Remo			1.0	
(include city, state		1IUIIE	o. Coordina	ted Con	imittee N	ime 	d. Comm	ents
HIGH POINT NEV	****************************	CE (DI IDUAM	C*************************************					
HERALD SUN)	VOLTH ER BERVI	CL (DUMIAN	c. Level Reg	istered	(Specify)	317		
1530 NORTH GRE	GSON STREET		☐ Federal	E	County:	************		
DURHAM, NC 27	701		☐ State		_		e. Electio	n Sum to Date
			, , , , , , , , , , , , , , , , , , ,	**************	»•••••••••••••	**********	<u> </u>	******************************
							-	375.00
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123456	Debit Card	A	03/07/2016	S	375.00		DIDATE	
				S		ADV	ERTISEM	ENTS IN
4. Payee Informat	ion		□ Add □	Remo				
1. Full Name, Mail		hone	b. Coordinate		_		d. Comm	
include city, state			*************************		***************	e	u. Commi	2111. 0*********************************
MARYJULIA HINS	************************	*************************	######################################					
1433 COLE MILL I			c. Level Reg	stered (Specify)			
DURHAM, NC 277	705		☐ Federal	T.	County:	***************************************		
			☐ State] Municip	ality:	e. Election	Sum to Date
							S	0.00
Account Code g.		. h. n						
123456	************************************	***************************************	***************************************) j. Am	ount	k. Req	uired Rei	narks
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				S		DONA	ATION OF	FOOD FOR
. Total only this I	age	C. 1983					S	601.50
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		Summary Page CRO-1	100 × 0					
(This line goes in li	ine 13b of Detailed	Summary Page CRO-1	100 y Operating Exp	enses) Jidotoo A)-E10-		S	4,599.85
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		d expenditure code ir				****	10.00	
* - Media	B* - Printi		C* - Fundraising		D To	ancét-	or Can Ed	
- Salaries	F* - Equips		G - Political Party				er Candid	
- Postage	J - Penalti		* - Office Expense	e.				fice Expenses
* Other		10.00			A - D0	uaUUI	to regal	Expense Fund
Codes require de	etailed explanati	on in required rema	rks field (k)					

Di	char	342	~***	ents
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				Amendm	ent	
Pg	4	of	6	☐ Yes	X No	

	III Name (and Fun E4DURHAMSCHO	******************************		*************		*********	2. ID Nun	aber
3. Type of Disbu			0-1310 forms for ea		**************	()*()*()******************************	*********************	
X Operating Exp		ntributions to Candidat	tes/Political Committee			ordinat	ted Party Ex	penditures
4. Payee Informa			Add -	Remo			T	
	niling Address & P	hone	b. Coordinat	ted Con	ımittee N	ame	d. Comme	uts
(include city, stat INDY WEEK	e, & zip)		***************************************					
PO BOX 1772			c. Level Regi	istered	(Specify)	-91	-	
DURHAM, NC 2°	7702		☐ Federal		County	**************************************	4	
	7702		☐ State				e. Election	Sum to Date
						***************************************	s	646.00
f. Account Code	g. Form of Paymer	at h. Purpose Code	i. Date (mm/dd/yyyy) j. Am	ount	k. Re	quired Rei	narks
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				s		CAN	IDIDATE II	N PAPER
4. Payee Informa	ition		□ Add □	Remo	2174			
•	iling Address & P	hone	b. Coordinat			ame	d. Comme	mts was a second
(include city, stat				************	0000	***************************************		***************************************
	***************************************	URHAM EDITION	rosser consiste					
	OOWELL STREET		c. Level Regi	istered ((Specify)		1	
RALEIGH, NC 27	7601		☐ Federal		County:			
			☐ State	L	J Municip	ality:	e. Election	Sum to Date
							S	359.32
f. Account Code	g. Form of Paymen	it h. Purpose Code	i. Date (mm/dd/yyyy	j. Am	ount	k. Re	quired Ren	narks
123456	Debit Card	A	03/02/2016	\$	*************	**********	N PAPER A	**********************
				s		ONL		
4 Danie Informa								
4. Payee Information Full Name Mai	ition iling Address & P	M	Add -	Remo				
a. run Name, Mai (include city, state		none	b. Coordinate	ed Com	mittee Na	ıme	d. Comme	nts
	AND OBSERVER	***************************************	808-001					
215 SOUTH MCD		1	c. Level Regi	stered (Specify)	Ē.		
RALEIGH, NC 27			☐ Federal		County:	0000000000		
			☐ State				e. Election	Sum to Date
							S	359.28
f Account Code	Form of Payman	h Purnose Code	i. Date (mm/dd/yyyy)) j. Am		I. Ra	quired Ren	
123456	Debit Card	A	***************************************	~ • • • • • • • • • • • • • • • • • • •	*****************	***************		*******************************
123,55	Deon Card	^A	03/08/2016	S	359.28		IPAIGN AD 'SPAPER A	
				S		IND	STATERA	ND
5. Total only this	Page		The state of the s				S	1,364.60
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(This line goes in	line 13a of Detailed	Summary Page CRO-	-1100 if Operating Expe	enses)	A 100 Mg		•	4 500 05
			1100 if Contrib to Can 1100 if Coordinamd Pa			<i>эн</i> ині)	S	4,599.85
		d expenditure code i		Day way	Distinct Co,			
A* - Media	B* - Printi		C* - Fundraising		D - To.	Anoth	ner Candida	ate
E - Salaries	F* - Equipn		G - Political Party					fice Expenses
- Postage	J - Penalti		K* - Office Expense	S				Expense Fund
O* Other				The second second				
* Codes require	detailed explanati	on in required rema	arks field (k)					

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p _p 5				Amendment				
Pg	5	of	6	☐ Yes	X No			

1. Committee Fu STEVEUNRUHE	ull Name (and Fu E4DURHAMSCHO			>*************************************	oo on oomoom	2.IDN	umber
3. Type of Disbu	rsement (Place	se use separate CR	0.1310 forms for a		-/ 70-1		
Operating Exp	**************	ontributions to Candida			000000000000000000000000000000000000000	rdinated Party l	Francis
4. Payee Informa			□ Add □	Remo		. Onnaceo I arry	- Apenditures
a. Full Name, Ma	iling Address &	Phone	b. Coordina			me d. Com	nents
(include city, sta	*****************		***************************************	********	****************	***************************************	***************************************
		TOGRAPHY CLASS					
3218 ROSE OF SI DURHAM, NC 2			c. Level Rep	istered (Specify) County:	************	
DOMENNI, INC. 2	7712		State	Ē		dity: e. Electi	on Sum to Date
			oamoomoamoom	****************		s	***************************************
f Assaunt Cada	- F	nt h. Purpose Code					700.00
123456	E. rorm of Payme Check			***************************************	****************	k. Required R	***********************************
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				\$		LOGO AND S	TILK SCREEN
4. Payee Informa			☐ Add ☐	Remo	ve		
a. Full Name, Ma		Phone	b. Coordina	ted Com	mittee Na	me d. Comn	aents
include city, stat	***************************************	***************************************	C+C)+10+10+10+10+10+10				
UNITED STATES STATION	POST OFFICE E	NO VALLEY	c. Level Reg		C26.N		
314 MILTON ROA	AD		☐ Federal	isterea (County:	***********	
DURHAM, NC 27			☐ State		_	lity: e. Election	on Sum to Date
			*************		***********************	*****************************	******************************
		11.5 2:				\$	70.00
		at h. Purpose Code	1	**********	******************	c Required R	emarks
123456	Debit Card	I	04/08/2016	S	35.00		
				S			
l. Payee Informa			□ Add □	Remo	ve		
ı. Full Name, Mai		hone	b. Coordina	ed Com	nittee Nan	ae d. Comm	ients
include city, state	**************************	0************************************	00000000000	***************	****************	***************	100+1+00+1+0+1+0+1+1+0+1+0+1+0+1+0+1+0+
STEVEN UNRUH							
1011 MINERVA A DURHAM, NC 27			c. Level Regi		County:	***************************************	
27 John 111, 140 27	701		State			ity e Flectio	n Sum to Date
					***************************************	***************************************	***************************************
						S	427.95
		t h. Purpose Code	i. Date (mm/dd/yyyy) j. Amo	unt k	. Required Re	marks
123456	Check	0	04/12/2016	S		REIMBURSEM	
				S	ľ	TEMS PURCE	IASED AS
. Total only this	Page					S	1,162.95
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		Summary Page CRO-	1100 if Ongrating Eym	аного)			
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Purpose Cod	les (List detaile	d expenditure code i	in (h.) above)				
.* - Media	B* - Print		C* - Fundraising		D - To A	nother Candio	date
- Salaries	F* - Equip	nent	G - Political Party	The same was made			ffice Expenses
- Postage * Other	J - Penalt	es	K* - Office Expense	5			l Expense Fund
WWW	letailed evaluated	on in required rem:	1 6 11 7 1				
DO 1216	e cancea expianati	on in reduired tem:	irks field (k)				

Dis	burs	emen	ts
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	5 (Amendment				
Pg	6_	of	6	☐ Yes	X No			

	all Name (and Fund E4DURHAMSCHOO		e)	••••••••••••	***************	*********	2. ID Nur	ober
3. Type of Disbu Operating Exc			te CRO-1310 forms for eac		***************************************	*********	***************************************	
		tributions to (Candidates/Political Committee			ordina	ted Party Ex	penditures
4. Payee Inform	ation niling Address & Pl		Add -	Rem				100
(include city, sta		lule	b. Coordinat	ed Cor	nmittee N	ame	d. Comme	nts
VISTAPRINT	ie, & Zip)		*********************					
275 WYMAN ST	RFFT		c. Level Regi	stored	(Snarify)		-	
WALTHAM, MA			☐ Fadeal	1	County	**************************************	•	
,,	02 131		☐ State	i	Municip		e. Election	Sum to Date
			000000000000000000000000000000000000000	()************************************	00000000000000000000000000000000000000		S	116.07
f. Account Code	g. Form of Payment	h. Purpose	Code i. Date (mm/dd/yyyy	li. An	nount	k. Re	quired Ren	
123456	Debit Card	В	03/02/2016	s	116.07	***********	TCANDID	······································
				s	110.07		INESS CAR	
4. Payee Informs	ition		☐ Add ☐	Rem	nva			
a. Full Name, Ma	iling Address & Ph	one	b. Coordinate			ıma	d. Comme	-1-
(include city, stat			William Committee Committe	************		**********	······	
VISTAPRINT	***************************************	***************************************	**************************************					
275 WYMAN STI			c. Level Regis	tered	(Specify)			
WALTHAM, MA	02451		☐ Federal		County:			
			☐ State	L] Municip	ality:	e. Election	Sum to Date
							S	110.12
f. Account Code	g. Form of Payment	h. Purpose	Code i. Date (mm/dd/yyyy)	i. Am	ount	k. Re	quired Ren	iante e
123456	Debit Card	О	04/05/2016	S	************	********	NK YOU G	O+++++++++++++++++++++++++++++++++++++
				 	110.12		CAMPAI	
				S				311 2000
5. Total only this							S	226.19
	RO-1310 Pages							
(This line goes in	line 13a of Detailed S	Summary Page	e CRO-1100 if Operating Expe	nses)			S	4,599,85
(This line goes in	line 13b of Detailed S	Summary Page	e CRO-1100 if Contrib to Cand	idates/	Political Co	mm)	•	4,577.05
7. Purpose Co			code in (h.) above)	rty Exp	enditures)			
A* - Media	B* - Printin		C* - Fundraising		D T-	A **		
- Salaries	F* - Equipm		G - Political Party				er Candida	
- Postage	J - Penaltie		K* - Office Expenses					ice Expenses
O* Other				•	Q -D0	mati0	n to Legal	Expense Fund
* C.d	datailad	. :	d remarks field (k)					

Aggregated	Non-Media	Expenditures
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	Amendment						
Page1_ of1_	☐ Yes ☒ No						

Optional form used to report NC Non-Media Expenditures of \$50 or less.

1. Committe	ee Full Name (an	d Fund if applicable)		2 030 01 1003.	2.1D N	ımber	
STEVEUNR	RUHE4DURHAMS	SCHOOLS			***************************************	*************	MODE CONTROL OF THE C
3. Payee Inf	ormation						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyy	y) f. Amou	nt	g. Required Remarks
☐ Add ☐ Remove	123456	Debit Card	0	03/14/2016	S	19.09	LUNCH WITH STAFF TO PREPARE FOR
☐ Add ☐ Remove	123456	Debit Card	О	04/03/2016	s	33.00	6 MONTH RENTAL OF PO BOX
☐ Add ☐ Remove	123456	Electric Funds Tran	0	06/30/2016	S	14.00	BANK FEE (MONTHLY) WHEN
4. Total o	nly this Page				S		68.09
	f ALL CRO-1 nust be on line 14 o	315 Pages f Detailed Summary Pa	ge CRO-1100)		S	***************************************	68.09
6. Purposi		letailed expenditu					
E 0.1		- Printing	C* - Fundr		- To Anotl	90000000000000000000000000000000000000	
E - Salan		- Equipment	G - Political				ic Office Expenses
I - Posta O* - Otl		Penalties	K* - Office	Expenses Q	* - Donati	ons to	Legal Expense Fund
* Codes	require detai	led explanation i	n required ren	narks field (g)			

CRO-1315

NC State Board of Elections

December 2009

Refunds/R	eimbi	ursements	From the Co	mmittee P	g1 of	1 🗆 v.	dment es 🛛 No	
1. Committee Fu STEVEUNRUHE	ll Name	(and Fund if a	rsements, including c	ontnbutions retu	uned to the contri	2. ID Num	ber	
3. Payee Informa				Add □ R	emove			
a. Full Name, Ma				d. Type of Com		g. Comme	ats	
(include city, s	tate, & z	ip)		☐ Candidate	■ PAC	*******************	***************************************	
ESTELLE CLARI				Referendom	☐ Party			
1921 MILTON RO				e. Level Registe	******	h. Origina	l Receipt Date	
DURHAM, NC 2'	7712			☐ Federal ☐ State	County: Municipality:	04/13/2016		
						i. Original	Receipt Amount	
b. Job Title/Profes	sion	c. Employer's	Name/Specific Field	f. Purpose Code		-	375.85 Sum to Date	
RETIRED TEACHER	**************************************	RETIRED TEAC	*****************************	P	001400000400111000040001110001111	S	0.00	
k. Account Code	l. Forn	n of Payment	m. Required Remar	rks	n. Date (mm/dd/)	yyy) o. Amo	umf-	
123456	Check	>CONTROL OF STREET STRE	PAYMENT FOR IN-KINI EXPENDITURE FOR	D	04/26/2016	s	375.85	
3. Payee Informa				Add 🔲 Re	move			
a. Full Name, Mai				d. Type of Com		g. Commen	rts in the second	
(include city, st	***************	ip)	*******************************	Candidate	☐ PAC	*************************	***************************************	
STEVEN UNRUH				☐ Referendum	☐ Party			
1011 MINERVA A DURHAM, NC 27				e. Level Registe Federal State	red (Specify) County: Municipality:	h. Original Receipt Date 04/23/2016		
				*****************************	*************************************	i. Original	Receipt Amount	
						S	198.22	
b. Job Title/Profes	sion	c. Employer's	Name/Specific Field	f. Purpose Code		j. Election S	um to Date	
RETIRED TEACHER		RETIRED TEACH	HER	Р		S	0.00	
k Account Code	l. Form	of Payment	m. Required Remar	k	n. Date (mm/dd/y	ууу) о. Ато	unt	
123456	Check		REIMBURSE FOR IN-KII DINNER FOR VOLUNTE		04/26/2016	s	198.22	
4. Total only this						S	574.07	
	on line 1	15 of Detailed Su	ımmary Page CRO-1100			S	574.07	
6. Purpose Cod	es (List	detailed disbur	rsement code in (f) ab	ove)	11.50			
L - Returned to P* - Reimburse * Codes require	ment of	In-Kin O*	Overpayment for Ser Other in required remarks		N - Exceed	ed Contibut	ion Limit	

CRO-1320

NC State Board of Elections

July 2007

In-Kind Contributions Use this form to report non-monetary contributions	*				Оγ	ndment 'es K No
Use this form to report non-monetary contributions Use CRO-1215 if In-Kind Contributions were or	will be refunded w	r servi vithin	ices provid 7 da <u>vs.</u>	led to tne	committee	or fund.
1. Committee Full Name (and Fund if applicable	e)		************	2.	D Numbe	r
STEVEUNRUHE4DURHAMSCHOOLS						
3. Contributor Information	☐ Add ☐	Rem	ove			A
a. Full Name, Mailing Address & Phone	b. Type of	Cont		c, (Comments	
(include city, state, & zip)	X Individ		***************************************	***************************************		**************************************
Aggregated Individual Contribution	Candida Party PAC					
	☐ Referen		ot Source	*********	************	ım to Date
					S	25.14
e. Description	metoneseonimoonimonimoonimooni		f. Date (m)	m/dd/yyy	y) g. Fai	r Market Amount
PURCHASE OF FACEBOOK ADS FOR CAMPAIGN			03/02	2/2016	\$	25.14
		1			\$	
					\$	
3. Contributor Information	☐ Add ☐	Rem	ove			2./
a. Full Name, Mailing Address & Phone	b. Type of (Contr		c. C	omments	
(include city, state, & zip)	X Individu			T	***************************************	D*************************************
Aggregated Individual Contribution	☐ Candida ☐ Party ☐ PAC					
	Referen		22	d. E	lection Su	m to Date
	Other R	Leceip	t Source	. 3	•	43.90
e. Description		f	. Date (mr	m/dd/yyy;	r) g. Fair	r Market Amount
FOOD FOR MEETING WITH EC PARENTS AND POSTAGE FOR CAMPAIGN SHIRT TO A DONOR IN ENGLAND	OR MAILING A		03/20	0/2016	S	43.90
					\$	
					s	
3. Contributor Information		Remo				
a. Full Name, Mailing Address & Phone	b. Type of C		ibutor	c C	omments	······································
(include city, state, & zip)						
ESTELLE CLARK 1921 MILTON ROAD	☐ Candidat	te		***************************************		
DURHAM, NC 27712	PAC PAC			***************************************		
DOIGH 1.1.1.1.0 27712	☐ Referend	đum		d. El	ection Su	m to Date
	Other Re	eceipt	Source	S	FC3-82-07 (\$2-6-07) (\$2-6-07)	136.43
e. Description		f.	Date (mn		· · · · · · · · · · · · · · · · · · ·	Market Amount
FOOD PLATTERS FOR ELECTION NIGHT WATCH PARTY	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	******	03/15/	***************************************	·······	***********************************
	***************************************	_	03/13/	/2016	\$	136.43
					S	
					s	

4. Total only this Page

205.47

865.27

5

\$

In Vind Contains					Amendment		
In-Kind Contributions	Pe	2	of	2	☐ Yes	V No	
			W.S.		1 E3	210	

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

<u>Use CRO-1215 if In-Kind Contributions</u> were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable	le)		ided with	II > Gays.	2. D	Number	•
STEVEUNRUHE4DURHAMSCHOOLS						3	(474-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
3. Contributor Information		Ad	d □ Re	move			
a. Full Name, Mailing Address & Phone (include city, state, & zip) ESTELLE CLARK 1921 MILTON ROAD DURHAM, NC 27712	***************************************	b. Type of C X Individua Candidat Party PAC		itributor	e. Con	nments	
Domini, Ne 27/12	1.		Referendon	-	d. Elec	tion Su	m to Date
			Other Rece	ipt Source	S		0.00
e. Description		******		f. Date (mm/d	d'yyyy)	g. Fair	Market Amount
RENTAL AND CONVERSION TO PURCHASE OF CAMPAID FROM RENT-A-CENTER	ON COMPUT	ER		04/13/20	16	s	375.85
						S	
						s	
3. Contributor Information a. Full Name, Mailing Address & Phone				move			
(include city, state, & zip) MARY-JULIA HINSON 1433 COLE MILL ROAD DURHAM, NC 27705			ype of Con Individual Candidate Party PAC Referendum Other Recei	ı	d. Elec	uments	n to Date
e. Description				[. n	\$	1	85.73
PURCHASE FOOD FOR YOUNG ADULT MEETING WITH C	ANDIDATE	*******	***************	f. Date (mm/dd	***********		Market Amount
				03/06/201	16	S	85.73
						5	
3. Contributor Information	П	Add	I ☐ Ren				
s. Full Name, Mailing Address & Phone (include city, state, & zip) STEVEN UNRUHE 1011 MINERVA AVE DURHAM, NC 27701		b. Type of Con Individual Candidate Party PAC Referendom		tributor	c. Com	осонно до съ	ı to Date
	1 -		Other Receip		\$		0.00
e. Description	***************************************			f. Date (mm/dd	(xyyy)	g. Fair !	Market Amount
FOOD FOR THANK YOU DINNER FOR STAFF VOLUNTEERS				04/23/201	6	S	198.22
						s	
						S	
1. Total only this Page					S		659.80
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary P	Page CRO-1	1100	9)		S		865.27