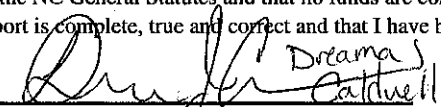
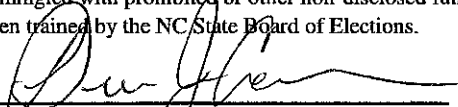


# Disclosure Report Cover

Amendment  
 Yes  No

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.

<b>1. Committee Information</b>				
a. Full Name			c. ID Number	
The Committee to Elect Dreama J Caldwell			84-3788724	
b. Mailing Address (include City, State and Zip Code)			d. Date Filed	
PO Box 2315 Burlington, NC 27216			3/24/2020	
			e. Phone Number	
			336-506-7223	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name	
2020	01-01-20	02-15-20	Dreama J Caldwell	
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
7. Type of Fund (if applicable, check one)		State/County		
<input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		<input type="checkbox"/> Organizational <input checked="" type="checkbox"/> Quarterly <input checked="" type="checkbox"/> First <i>Amendment</i> <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special		
8. Number of Fundraisers this Report		10. Special Report Name		
1				
11. Account Information		11. Account Information		
a. Financial Institution Full Name		a. Financial Institution Full Name		
The Bancorp Bank				
b. Purpose	c. Account Code	b. Purpose	c. Account Code	
Business	083077			
	d. Period Begin Balance		d. Period Begin Balance	
	\$ 29.00		\$	
<b>CERTIFICATION</b>				
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.				
				3-24-20
Printed Name of Signer		Signature of Appointed Treasurer		Date
<b>FOR OFFICE USE ONLY</b>				
Date Received:	6/12/2020	Employee:	JG	
Date Postmarked:		Employee:		
Date Scanned:	6/16/2020	Employee:	JG	
Date Data Entered:		Employee:		
Delivery Method				
<input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training				
<b>Please Note:</b> 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

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
The Committee to Elect Dreama J. Caldwell	1st Str.	84-3788724
Start of Election Cycle: January 1, 2020	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 29.00	\$ 0
<b>RECEIPTS</b>		
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 775	\$ 1,150
6) Contributions from Individuals (CRO-1210)	\$ 1,550	\$ 1,655
7) Contributions from Political Party Committees (CRO-1220)	\$ 0	\$ 0
8) Contributions from Other Political Committees (CRO-1230)	\$ 0	\$ 0
9) Loan Proceeds (CRO-1410)	\$ 0	\$ 0
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$ 0	\$ 0
<b>11) Other Receipt Sources</b>		
11a) Interest on Bank Accounts (CRO-1250)	\$ 0	\$ 0
11b) Contributions from Not-For-Profit Organizations (CRO-1250)	\$ 0	\$ 0
11c) Outside Sources of Income (CRO-1250)	\$ 0	\$ 0
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$ 0	\$ 0
11e) Exempt Purchase Price Sales (CRO-1265)	\$ 0	\$ 0
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 2,325	\$ 2,805
<b>EXPENDITURES</b>		
<b>13) Disbursements</b>		
13a) Operating Expenditures (CRO-1310)	\$ 1,526.56	\$ 1,846.40
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 0	\$ 0
13c) Coordinated Party Expenditures (CRO-1310)	\$ 0	\$ 0
14) Aggregated Non-Media Expenditures (CRO-1315)	\$ 0	\$ 0
15) Loan Repayments (CRO-1420)	\$ 0	\$ 0
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$ 0	\$ 0
17) In-Kind Contributions (CRO-1510)	\$ 10	\$ 115
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 1,536.56	\$ 1,961.43
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 817.44	\$ 843.07
<b>ADDITIONAL INFORMATION</b>		
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$ 0	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ 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	\$ 0
26) Forgiven Loans (CRO-1440)	\$ 0	\$ 0
27) 48-Hour Notice Reports Sum (CRO-2220)	\$ 0	\$ 0
28) Contributions to be Refunded (CRO-1215)	\$ 0	\$ 0

1,872.56  
 1,987.56  
 817.44

# Aggregated Contributions from Individuals

Amendment  
 Yes  No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number
The Committee to Elect Dreama J Caldwell					
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove		Donation	10.00	01/09/2020	\$ 10
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		01/09/2020	\$ 10
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		01/09/2020	\$ 25
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		01/09/2020	\$ 25
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		01/13/2020	\$ 25
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Check		01/14/2020	\$ 50
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		01/14/2020	\$ 50
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		01/16/2020	\$ 50
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		01/17/2020	\$ 50
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		01/18/2020	\$ 25
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		01/26/2020	\$ 5
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		01/26/2020	\$ 25
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		01/27/2020	\$ 25
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		01/27/2020	\$ 50
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		01/27/2020	\$ 25
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		01/28/2020	\$ 25
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		02/05/2020	\$ 25
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		02/07/2020	\$ 25
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	check		02/07/2020	\$ 25
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		02/07/2020	\$ 25
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		02/07/2020	\$ 50
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		02/08/2020	\$ 25
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		02/12/2020	\$ 25
<b>4. Total only this Page</b>					\$ 675
<b>5. Total of ALL CRO-1205 Pages</b> <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 775

# Aggregated Contributions from Individuals

Amendment  Yes  No

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

1. Committee Full Name (and Fund if applicable)					2. ID Number
The Committee to Elect Dreama J Caldwell					
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		02/09/2020	\$ 50
<input type="checkbox"/> Add <input type="checkbox"/> Remove	083077	Online		02/09/2020	\$ 50
<input type="checkbox"/> Add <input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add <input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add <input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add <input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add <input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add <input type="checkbox"/> Remove					\$
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<input type="checkbox"/> Add <input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add <input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add <input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add <input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add <input type="checkbox"/> Remove					\$
<b>4. Total only this Page</b>					\$ 100
<b>5. Total of ALL CRO-1205 Pages</b> <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 775

# Contributions from Individuals

Pg - 1 of 4

Amendment  
 Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
The Committee to Elect Dreama J Caldwell						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Clarissa Paul 114 Shaw Street Burlington, NC 27215			Book keeper			
			<b>c. Employer's Name/Specific Field</b>			
			Self Employed		<b>e. Election Sum to Date</b>	
					\$ 100	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	083077	Online		1-04-2020	\$ 100	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Latoya Murphy 10 Oakville Court McClensville, NC 27301			Director			
			<b>c. Employer's Name/Specific Field</b>			
			New Beginnings Family Care Home		<b>e. Election Sum to Date</b>	
					\$ 150	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	083077	online		01-05-2020	\$ 150	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Anna Grant 807 W Markham Ave Apt B Durham, NC 27701			community school coordinator			
			<b>c. Employer's Name/Specific Field</b>			
			Durham Public School		<b>e. Election Sum to Date</b>	
					\$ 500	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>					\$ 500	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 750	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 1550	

# Contributions from Individuals

Amendment  
 Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
The Committee to Elect Dreama J Caldwell							
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Carvia Artis 451 McPherson Rd Mebane, NC 27302				Realter			
				<b>c. Employer's Name/Specific Field</b>			
				KW Realty & Real Estate		<b>e. Election Sum to Date</b>	
						\$ 75	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	083077	Online		1-12-2020	\$ 50		
<input type="checkbox"/>	083077	Online		1-12-20	\$ 25		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Theodore Luebke 1401 Virginia Ave Durham, NC 27705				Organizer			
				<b>c. Employer's Name/Specific Field</b>			
				Carolina Federation		<b>e. Election Sum to Date</b>	
						\$ 75	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	083077	online		01-13-2020	\$ 75		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Alethia Yaye 212 Randall St Greensboro, NC 27401				business owner			
				<b>c. Employer's Name/Specific Field</b>			
				A+ Brokerage LLC		<b>e. Election Sum to Date</b>	
						\$ 200	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	083077	Online		02/07/2020	\$ 200		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 350	
<b>5. Total of ALL CRO-1210 Pages</b>						\$ 1550	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>							

# Contributions from Individuals

Amendment  
 Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (add/del/rev if applicable)						ID Number
The Committee to Elect Dreama J Caldwell						
2. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
Jenson Roll 414 S Maple St Graham, NC 27253			Construction			
			c. Employer's Name/Specific Field			
			Roll Development	e. Election Sum to Date		
				\$ 125		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	083077	Online		02/13/2020	\$ 125	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
Mtende Roll 414 S Maple Street Graham, NC 27253			Construction			
			c. Employer's Name/Specific Field			
			Roll Development	e. Election Sum to Date		
				\$ 125		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	083077	Online		02/13/2020	\$ 125	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments		
Everett Garner 106 Lamont Rd Greenville, NC 27858			Program Director			
			c. Employer's Name/Specific Field			
			3rd Street Educational center	e. Election Sum to Date		
				\$ 100		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	083077	online		02/14/2020	\$ 100	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 350	
5. Total of ALL CRO 1210 Pages					\$ 1550	
<small>(Total of ALL CRO 1210 Pages, including Summary Page, CRO 1210)</small>						

# Contributions from Individuals

Amendment  
 Yes  No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Contributor Information  Add  Remove  
 a. Full Name, Mailing Address & Phone (include city, state, & zip)  
 The Committee to Elect Dreama J Caldwell

b. Job Title/Profession  
 General Counsel  
 c. Employer's Name/Specific Field  
 NC Supreme Court  
 d. Comments  
 e. Election Sum to Date  
 \$ 100

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	083077	Online		02/14/2020	\$ 100
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

2. Contributor Information  Add  Remove  
 a. Full Name, Mailing Address & Phone (include city, state, & zip)

b. Job Title/Profession  
 c. Employer's Name/Specific Field  
 d. Comments  
 e. Election Sum to Date  
 \$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information  Add  Remove  
 a. Full Name, Mailing Address & Phone (include city, state, & zip)

b. Job Title/Profession  
 c. Employer's Name/Specific Field  
 d. Comments  
 e. Election Sum to Date  
 \$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page \$ 100  
 5. Total of ALL CRO-1210 Pages \$ 1550 PAC



# Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

<b>1. Committee Full Name (and Fund if applicable)</b> The Committee to Elect Dreama Caldwell	<b>2. ID Number</b>
--	---------------------

**3. Type of Disbursement** (Please use separate CRO-1310 forms for each type of Disbursement.)  
 Operating Expenses     Contributions to Candidates/Political Committees     Coordinated Party Expenditures

**4. Payee Information**     Add     Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Amazon marketplace (online)	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$ 73.03

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
083077	credit card	E	01/18/2020	\$59.97	stakes for signs
083077	credit card	E	01/19/2020	\$ 13.00	stakes for signs

**4. Payee Information**     Add     Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) farrak Fancette-Carter 1207 Quaker Creek Rd Mebane, NC 27302	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
083077	check	E	2/21/2020	\$ 200	Fundraiser/Event Coordinator
				\$	

**4. Payee Information**     Add     Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Rion Thompson 611 Atwater St Burlington, NC 27215	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>e. Election Sum to Date</b> \$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
083077	check	E	2/21/2020	\$ 200	Campaign manager
				\$	

**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)  
 (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	Q* - Donation to Legal Expense Fund
O* Other			

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

# Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
Timothy Carter 1207 Quaker Creek Rd Mebane, NC 27302				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b> \$
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
083077	check	E	02/21/2020	200	FH/website Coordinator	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
Van's Advertising 3290 Van Dr Burlington, NC 27215				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b> \$
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
083077	creditcard	O	01/21/2020	\$ 400	t-shirts	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
Salon K 560 Huffman Mill Rd Burlington, NC 27215				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b> \$ 76
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
083077	credit card	O	01/22/2020	\$ 75	Campaign appearance	
083077	creditcard	O	01/10/2020	\$ 1	(forum) booking fee	
<b>5. Total only this Page</b>						\$
<b>6. Total of ALL CRO-1310 Pages</b>						\$
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>						
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>						
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						
<b>7. Purpose Codes</b> <i>(List detailed expenditure code in (h.) above)</i>						
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		Q* - Donation to Legal Expense Fund
O* Other						
* Codes require detailed explanation in required remarks field (k)						

# Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

<b>1. Committee Full Name (and Fund if applicable)</b> <u>The Committee to Elect Debraj Caldwell</u>	<b>2. ID Number</b>
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**3. Type of Disbursement** *(Please use separate CRO-1310 forms for each type of Disbursement.)*

Operating Expenses     Contributions to Candidates/Political Committees     Coordinated Party Expenditures

**4. Payee Information**     Add     Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
	<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	<b>e. Election Sum to Date</b> \$

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	

**4. Payee Information**     Add     Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i> <u>Time News</u>	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
	<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	<b>e. Election Sum to Date</b> \$ <u>1.06</u>

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
<u>0830</u>	<u>credit card</u>	<u>0</u>	<u>01/26/2020</u>	\$ <u>1.06</u>	<u>digital subscription</u>
				\$	

**4. Payee Information**     Add     Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i> <u>Zoom</u>	<b>b. Coordinated Committee Name</b>	<b>d. Comments</b>
	<b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	<b>e. Election Sum to Date</b> \$ <u>7.49</u>

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
<u>083077</u>	<u>credit card</u>	<u>K</u>	<u>1/26/2020</u>	\$ <u>7.49</u>	<u>online meetings</u>
				\$	

**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)*

*(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	Q* - Donation to Legal Expense Fund
O* Other			

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

**Disbursements**

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>
The Committee to Elect Dreama J Caldwell						
<b>3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)</b>						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
Dollar General 600 Rauhut S. Burlington, NC 27215						
			<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
08307	credit card	0	02/01/2020	\$ 12.81	Canvassing Supplies	
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
Bojangles 2403 Maple Ave. Burlington, NC 27215						
			<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
083077	credit card	0	02/02/2020	\$ 20.12	Volunteer lunch after canvass	
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
ActBlue Donate						
			<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
			<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
083017	online deduction	C	02/05/2020	\$ 20.31	fee for collecting donation	
0830	online deduction	C	02/07/2020	\$ 50.00	fee for collecting donation	
<b>5. Total only this Page</b>						\$
<b>6. Total of ALL CRO-1310 Pages</b>						\$
<small>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</small>						
<small>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</small>						
<small>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</small>						
<b>7. Purpose Codes (List detailed expenditure code in (h.) above)</b>						
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		Q* - Donation to Legal Expense Fund
O* Other						
* Codes require detailed explanation in required remarks field (k)						

# 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) <u>The Committee to Elect Dreama Nabell</u>	2. ID Number
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3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)  
 Operating Expenses     Contributions to Candidates/Political Committees     Coordinated Party Expenditures

4. Payee Information     Add     Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Audible</u>	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	e. Election Sum to Date \$

f. Account Code <u>053077</u>	g. Form of Payment <u>Credit card</u>	h. Purpose Code <u>0</u>	i. Date (mm/dd/yyyy) <u>02/15/2008</u>	j. Amount <u>\$15.96</u>	k. Required Remarks <u>online political books</u>
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4. Payee Information     Add     Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> 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
				\$	

4. Payee Information     Add     Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> 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
				\$	

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)  
 (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)

Pgs. 1-3 missing \$1249.78  
\$1,276.78 =  
\$1,526.56

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	Q* - Donation to Legal Expense Fund
O* Other			

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