

# 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>a. Full Name</b> Committee to Elect Jillian Johnson		<b>c. ID Number</b>
<b>b. Mailing Address (include City, State and Zip Code)</b> 902 Arnette Ave Durham, NC 27701		<b>d. Date Filed</b> 08/27/2015
		<b>e. Phone Number</b> 919.485.9329

2015	07/01/2015	08/25/2015	Melissa Norton
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<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	<b>Municipal</b> <input type="checkbox"/> Organizational <input checked="" 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	<b>State/County</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly  <input type="checkbox"/> First <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	<b>Referendum</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum  <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund  <input type="checkbox"/> Other:				

<b>a. Financial Institution Full Name</b> BB&T		<b>a. Financial Institution Full Name</b>	
<b>b. Purpose</b>	<b>c. Account Code</b> 1	<b>b. Purpose</b> IN PERSON AUG 27 2015 DURHAM BOE	<b>c. Account Code</b>
	<b>d. Period Begin Balance</b> \$ 100		<b>d. Period Begin Balance</b> \$

## 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.

Melissa Norton  
Printed Name of Signer

[Signature]  
Signature of Appointed Treasurer

8/27/2015  
Date

## FOR OFFICE USE ONLY

Date Received: 8/27/15

Employee: Melissa Norton

Date Postmarked: \_\_\_\_\_

Employee: \_\_\_\_\_

Date Scanned: \_\_\_\_\_

Employee: \_\_\_\_\_

Date Data Entered: \_\_\_\_\_

Employee: \_\_\_\_\_

## Delivery Method

- ☐ Normal Mail  
☐ Registered Mail  
☒ Hand Delivered  
☐ Electronically Filed  
☐ Signer has not received 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

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	
Committee to Elect Jillian Johnson					
<b>Start of Election Cycle:</b> January 1, 2015		<b>Total this Reporting Period</b>		<b>Total this Election Cycle</b>	
4) Cash on Hand at Start		\$ 100.00		\$ 100.00	
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 1,626.00		\$ 1,626.00	
6) Contributions from Individuals (CRO-1210)		\$ 23,126.00		\$ 23,256.93	
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)		\$		\$	
11 e) Exempt Purchase Price Sales (CRO-1265)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 24,752.00		\$ 24,782.93	
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 7,692.77		\$ 7,692.77	
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)		\$ 790.00		\$ 820.93	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 8,482.77		\$ 8,513.70	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 16,369.23		\$ 16,369.23	
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)		\$ IN PERSON			
24) Account Transfers Within the Committee (CRO-1720)		\$ AUG 2 7 2015			
25) Administrative Support (CRO-1710)		\$		\$	
26) Forgiven Loans (CRO-1440)		\$ DURHAM BOE		\$	
27) 48-Hour Notice Reports Sum (CRO-2200)		\$		\$	
28) Contributions to be Refunded (CRO-1215)		\$		\$	

# Aggregated Contributions from Individuals

Page

1 of 3

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
Committee to Elect Jillian Johnson	

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		check		7/17/2015	\$ 40
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		check		7/17/2015	\$ 50
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		check		7/17/2015	\$ 25
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		check		7/17/2015	\$ 30
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		check		7/17/2015	\$ 50
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		cash		7/17/2015	\$ 10
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		cash		7/17/2015	\$ 20
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		7/2/2015	\$ 50
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		7/2/2015	\$ 25
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		7/2/2015	\$ 20
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		7/8/2015	\$ 25
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		7/8/2015	\$ 40
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		7/8/2015	\$ 25
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		7/8/2015	\$ 25
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		7/8/2015	\$ 20
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		7/8/2015	\$ 25
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		7/8/2015	\$ 25
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		7/9/2015	\$ 25
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		7/9/2015	\$ 50
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		7/9/2015	\$ 10
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		7/9/2015	\$ 25
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		7/10/2015	\$ 25
<input type="checkbox"/> Remove					

IN PERSON  
AUG 27 2015  
DURHAM BOE

4. Total only this Page	\$ 640.00
5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)	\$ \$1,626.00

# Aggregated Contributions from Individuals

Page

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Amendment

☐

Yes

☒

No

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

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>		
Committee to Elect Jillian Johnson						
<b>3. Contributor Information</b>						
<b>a. Amend</b>		<b>b. Account Code</b>	<b>c. Form of Payment</b>	<b>d. In-Kind Description</b>	<b>e. Date (mm/dd/yyyy)</b>	<b>f. Amount</b>
<input type="checkbox"/>	Add		credit card		07/10/2015	\$ 25
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		credit card		07/13/2015	\$ 25
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		credit card		07/15/2015	\$ 25
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		credit card		07/16/2015	\$ 20
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		credit card		07/16/2015	\$ 25
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		credit card		07/17/2015	\$ 20
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		credit card		07/17/2015	\$ 25
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		credit card		07/17/2015	\$ 30
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		credit card		07/17/2015	\$ 20
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		credit card		07/17/2015	\$ 30
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		credit card		07/17/2015	\$ 25
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		credit card		07/29/2015	\$ 5
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		credit card		07/31/2015	\$ 25
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		credit card		07/31/2015	\$ 25
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		credit card		07/31/2015	\$ 25
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		credit card		07/31/2015	\$ 25
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		credit card		08/04/2015	\$ 25
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		credit card		07/01/2015	\$ 25
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		credit card		08/05/2015	\$ 10
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add		credit card		08/05/2015	\$ 25
<input type="checkbox"/>	Remove					
<b>4. Total only this Page</b>					\$ 510.00	
<b>5. Total of ALL CRO-1205 Pages</b>					\$ \$1,626.00	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

# Aggregated Contributions from Individuals

Page

3

of

3

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			
Committee to Elect Jillian Johnson					
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		credit card		08/05/2015	\$ 10
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		08/06/2015	\$ 10
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		08/07/2015	\$ 25
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		08/07/2015	\$ 25
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		08/08/2015	\$ 25
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		cash		08/08/2015	\$ 20
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		08/11/2015	\$ 25
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		08/13/2015	\$ 20
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		08/14/2015	\$ 25
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		cash		08/15/2015	\$ 20
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		08/21/2015	\$ 25
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		credit card		08/18/2015	\$ 25
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		Check		08/18/2015	\$ 50
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		Cash	IN PERSON	08/22/2015	\$ 20
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		cash	AUG 27 2015	08/22/2015	\$ 5
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		check	DURHAM BOE	08/06/2015	\$ 50
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		check		08/07/2015	\$ 36
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		cash		08/15/2015	\$ 20
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add		cash		08/15/2015	\$ 40
<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					
4. Total only this Page					\$ 476.00
5. Total of ALL CRO-1205 Pages					\$ \$1,626.00
(This line must be on line 5 of Detailed Summary Page CRO-1100)					

# Contributions from Individuals

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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 (and Fund if applicable)					2. ID Number	
Committee to Elect Jillian Johnson						
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	
Anthony Maglione 904 Dacian Ave Durham, NC 27701			social worker			
			c. Employer's Name/Specific Field			
			Piedmont Health Services			
			e. Election Sum to Date			
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		7/12/2015	\$ 100.00	
<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	
Theodore Luebke 221 Knox St Durham, NC 27705			organizing director			
			c. Employer's Name/Specific Field			
			America Votes			
			e. Election Sum to Date			
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		7/12/2015	\$ 100.00	
<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	
David Crawford 2847 S Main St, Mt. Airy, NC 27030 Mt. Airy, NC 27030			retired			
			c. Employer's Name/Specific Field			
			retired from Stokes Co. Public Schools			
			e. Election Sum to Date			
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		7/17/2015	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 450.00	
5. Total of ALL CRO-1210 Pages					\$ 23,126.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

# Contributions from Individuals

Pg 2 of 33

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 (and Fund if applicable)				2. ID Number	
Committee to Elect Jillian Johnson					
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	
Jenny Edmonds 417 Carolina Circle Durham, NC 27707		scientist			
		c. Employer's Name/Specific Field			
		US EPA		e. Election Sum to Date	
				\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		check		7/17/2015	\$ 100.00
<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	
Ann Rebeck 2701 Old Sugar Rd Durham, NC 27707		teacher			
		c. Employer's Name/Specific Field			
		Bethel Preschool		e. Election Sum to Date	
				\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		check		7/17/2015	\$ 100.00
<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	
Lorisa Seibel 2410 Par Place Durham, NC 27705		program director			
		c. Employer's Name/Specific Field			
		Reinvestment Partners		e. Election Sum to Date	
				\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		check		7/17/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page				\$ 300.00	
5. Total of ALL CRO 1210 Pages				\$ 23,126.00	

# Contributions from Individuals

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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 (and Fund if applicable)				2. ID Number	
Committee to Elect Jillian Johnson					
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	
Alexis Clark 802 C Arnette Ave Durham, NC 27701		visiting lecturer			
		c. Employer's Name/Specific Field			
		University Southern California			
		e. Election Sum to Date			
		\$ 100.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		check		7/17/2015	\$ 100.00
<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	
Sejal Zota 704 E Forest Hills Blvd Durham, NC 27707		legal director			
		c. Employer's Name/Specific Field			
		National Immigration Project			
		e. Election Sum to Date			
		\$ 100.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		check		7/17/2015	\$ 100.00
<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	
Elizabeth Mason-Deese 124 Fidelity St, Apt 27 Carrboro, NC		graduate student			
		c. Employer's Name/Specific Field			
		UNC-Chapel Hill			
		e. Election Sum to Date			
		\$ 60.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		check		7/17/2015	\$ 60.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page				\$ 260.00	
5. Total of ALL CRO 1210 Pages				\$ 23,126.00	



# Contributions from Individuals

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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 (and Fund if applicable)					2. ID Number	
Committee to Elect Jillian Johnson						
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	
Raymond Eurghart 703 C South S Durham, NC 27707			retired			
			c. Employer's Name/Specific Field			
			retired from City of Durham		e. Election Sum to Date	
					\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		7/17/2015	\$ 55.00	
<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	
Zeola Lancaster 111 Middlebury Ct Durham, NC 27713  <b>IN PERSON</b> <b>AUG 27 2015</b> <b>DURHAM BOE</b>			retired insurance agent			
			c. Employer's Name/Specific Field			
			retired (from self-employed)		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		7/17/2015	\$ 100.00	
<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	
Jonathan Mattingly 500 N Duke St, Spt 56-303 Durham, NC 27701			professor			
			c. Employer's Name/Specific Field			
			Duke		e. Election Sum to Date	
					\$ 750.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		7/20/2015	\$ 750.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 905.00	
5. Total of ALL CRO 1210 Pages					\$ 23,126.00	

# Contributions from Individuals

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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 (and Fund if applicable)					2. ID Number	
Committee to Elect Jillian Johnson						
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	
Lanier Blum 11 Upchurch Circle Durham, NC 27705			Residential Development and Lending			
			c. Employer's Name/Specific Field			
			Self-Help			
			e. Election Sum to Date			
			\$ 200.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		7/24/2015	\$ 200.00	
<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	
Michelle Garst 106 W Woodridge Dr Durham, NC 27707			program manager			
			c. Employer's Name/Specific Field			
			UNC-Chapel Hill			
			e. Election Sum to Date			
			\$ 5,000.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		7/26/2015	\$ 5,000.00	
<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	
Viola Glenn 106 W Woodridge Dr Durham, NC 27707			graduate student			
			c. Employer's Name/Specific Field			
			NC State			
			e. Election Sum to Date			
			\$ 5,000.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		7/26/2015	\$ 5,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 10,200.00	
5. Total of All CRO 1210 Pages					\$ 23,126.00	

# Contributions from Individuals

Pg 6 of 33

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 (and Fund if applicable)				2. ID Number	
Committee to Elect Jillian Johnson					
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	
Ellen Bush 2014 Bivins St Durham, NC 27707		publishing			
		c. Employer's Name/Specific Field			
		UNC Press		e. Election Sum to Date	
				\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/1/2015	\$ 100.00
<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	
Liz Munch 122 Cliff St Canajoharie, NY 13317		Assistant Professor			
		c. Employer's Name/Specific Field			
		University at Albany - SUNY		e. Election Sum to Date	
				\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/2/2015	\$ 100.00
<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	
Nicholas Graber-Grace 1809 Glendale Ave Durham, NC 27701		teacher			
		c. Employer's Name/Specific Field			
		DPS		e. Election Sum to Date	
				\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/2/2015	\$ 55.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only, Add Page				\$ 255.00	
5. Total STATE CRO 1200 Pages				\$ 23,126.00	

# Contributions from Individuals

Pg 7 of 33

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>	
Committee to Elect Jillian Johnson						
<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>	
Stephen Bendich 42 Grove St NY, NY 10014			psychologist			
			<b>c. Employer's Name/Specific Field</b>			
			self		<b>e. Election Sum to Date</b>	
					\$ 100.00	
<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"/>		creditcard		7/2/2015	\$ 100.00	
<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>	
Benjamin Crawford 802 Arnette Ave Durham, NC 27701			software developer			
			<b>c. Employer's Name/Specific Field</b>			
			GWG		<b>e. Election Sum to Date</b>	
					\$ 700.00	
<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"/>		creditcard		7/2/2015	\$ 200.00	
<input type="checkbox"/>		check		8/19/2015	\$ 500.00	
<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>	
Elizabeth Simpson 1809 Glendale Ave Durham, NC 27701			lawyer			
			<b>c. Employer's Name/Specific Field</b>			
			Prisoner Legal Services		<b>e. Election Sum to Date</b>	
					\$ 50.00	
<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"/>		creditcard		7/2/2015	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total on this Page</b>					\$ 850.00	
<b>5. Total of ALL CRO 1210 Pages</b>					\$ 23,126.00	

# Contributions from Individuals

Pg 8 of 33

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 (and Fund if applicable)				2. ID Number	
Committee to Elect Jillian Johnson					
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	
Peter Maniloff 704 2nd St Golden, CO 80403		professor			
		c. Employer's Name/Specific Field			
		Colorado School of Mines			
		e. Election Sum to Date			
				\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/2/2015	\$ 100.00
<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	
Gabriel Rosenberg 2510 Alpine Rd Durham, NC 27707		professor			
		c. Employer's Name/Specific Field			
		Duke			
		e. Election Sum to Date			
				\$ 110.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/3/2015	\$ 110.00
<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	
Daisy Goodman 566 Hanover Ct Rd Hanover, NH 37550		nurse-midwife			
		c. Employer's Name/Specific Field			
		Dartmouth Hitchcock Medical Center			
		e. Election Sum to Date			
				\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/2/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total on this Page				\$ 310.00	
5. Total of ALL CRO 1210 Pages				\$ 23,126.00	

# Contributions from Individuals

Pg 9 of 33

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 (and Fund if applicable)				2. ID Number	
Committee to Elect Jillian Johnson					
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	
Rachel Goodman PO Box 1495 Cave Junction, OR 97523		massage therapist			
		c. Employer's Name/Specific Field			
		self		e. Election Sum to Date	
				\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/5/2015	\$ 500.00
<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	
Dr Alice Maniloff 636 Cedar Club Circle Chapel Hill, NC		principal			
		c. Employer's Name/Specific Field			
		DPS		e. Election Sum to Date	
				\$ 110.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/5/2015	\$ 110.00
<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	
Christopher Tralie 17 Balmoray Ct Durham, NC 27707		PHD Student			
		c. Employer's Name/Specific Field			
		Duke		e. Election Sum to Date	
				\$ 110.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/5/2015	\$ 110.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page				\$ 720.00	
5. Total of ALL CRO 1210 Pages				\$ 23,126.00	

# Contributions from Individuals

Pg 10 of 33

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 (and Fund if applicable)					2. ID Number	
Committee to Elect Jillian Johnson						
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	
Alexander Jergensen 301 Gresham Ave Durham, NC 27704			Head of Design			
			c. Employer's Name/Specific Field			
			R65 Labs			
			e. Election Sum to Date			
					\$ 110.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		creditcard		7/6/2015	\$ 110.00	
<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	
Tim Stallman 811-C Arnette Ave Durham, NC 27701			cartographer			
			c. Employer's Name/Specific Field			
			self			
			e. Election Sum to Date			
					\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		creditcard		7/6/2015	\$ 55.00	
<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	
Sendolo Diaminah 512 Dunbar St Durham, NC 27701			Program Coordinator			
			c. Employer's Name/Specific Field			
			BOLD, Praxis Project			
			e. Election Sum to Date			
					\$ 60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		creditcard		7/6/2015	\$ 60.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 225.00	
5. Total of ALL CRO 1210 Pages					\$ 23,126.00	

# Contributions from Individuals

Pg 11 of 33

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 (and Fund if applicable)				2. ID Number	
Committee to Elect Jillian Johnson					
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	
Brian Perlmutter 1000 Duke St Durham, NC 27701		Development Director			
		c. Employer's Name/Specific Field			
		Southern Vision Alliance		e. Election Sum to Date	
				\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/8/2015	\$ 100.00
<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	
Amy Faulring 1122 S 46th St Philadelphia, PA 19143		Vice-president			
		c. Employer's Name/Specific Field			
		The Management Center		e. Election Sum to Date	
				\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/8/2015	\$ 55.00
<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	
Sarah Harlan 1309 Shawnee St Durham, NC 27701		Public Health Manager			
		c. Employer's Name/Specific Field			
		John Hopkins University		e. Election Sum to Date	
				\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/8/2015	\$ 55.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total on this Page				\$ 210.00	
5. Total of ALL CRO-1210 Pages				\$ 23,126.00	



# Contributions from Individuals

Pg 12 of 33

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>	
Committee to Elect Jillian Johnson						
<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>	
Victoria Kaplan 1545 Vanderbilt Pl Glendale, CA 91205			organizer			
			<b>c. Employer's Name/Specific Field</b>			
			Moveon.org			
					<b>e. Election Sum to Date</b>	
					\$ 110.00	
<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"/>		creditcard		7/8/2015	\$ 110.00	
<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>	
Chelsea Earles 1709 Glendale Ave Durham, NC 27701			nanny			
			<b>c. Employer's Name/Specific Field</b>			
			self-employed			
					<b>e. Election Sum to Date</b>	
					\$ 55.00	
<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"/>		creditcard		7/8/2015	\$ 55.00	
<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>	
Page McCullough 110 W Lavender St Durham, NC 27704			retired			
			<b>c. Employer's Name/Specific Field</b>			
			retired from Rural School and Community Trust			
					<b>e. Election Sum to Date</b>	
					\$ 55.00	
<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"/>		creditcard		7/8/2015	\$ 55.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 220.00	
<b>5. Total of ALL CRO 1210 Pages</b>					\$ 23,126.00	

# Contributions from Individuals

Pg 13 of 33

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 (and Fund if applicable)				2. ID Number	
Committee to Elect Jillian Johnson					
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	
Justin McBride 3783 Latrobe St Los Angeles, CA 90031		campaign manager			
		c. Employer's Name/Specific Field			
		AFL-CIO		e. Election Sum to Date	
				\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/8/2015	\$ 250.00
<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	
Mary Grant 344 Whitridge Ave Baltimore, MD 27701		researcher			
		c. Employer's Name/Specific Field			
		Food and Water Watch		e. Election Sum to Date	
				\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/8/2015	\$ 250.00
<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	
Melissa Norton 1102 Wall St Durham, NC 27701		Project Manager			
		c. Employer's Name/Specific Field			
		Durham Living Wage Project		e. Election Sum to Date	
				\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/8/2015	\$ 55.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total on this Page					\$ 555.00
5. Total of ALL CRO 1210 Pages					\$ 23,126.00

# Contributions from Individuals

Pg 14 of 33

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 (and Fund if applicable)				2. ID Number	
Committee to Elect Jillian Johnson					
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	
Bob Wing 114 Briarhaven Dr Durham, NC 27704		consultant			
		c. Employer's Name/Specific Field			
		self-employed		e. Election Sum to Date	
				\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/8/2015	\$ 100.00
<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	
Ross Grady 506 N Mangum St Durham, NC 27701		development manager			
		c. Employer's Name/Specific Field			
		IBM		e. Election Sum to Date	
				\$ 110.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/8/2015	\$ 110.00
<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	
Lauren Spohrer 415 Hugo St Durham, NC 27704		producer			
		c. Employer's Name/Specific Field			
		self-employed		e. Election Sum to Date	
				\$ 165.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/8/2015	\$ 165.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total on this Page				\$ 375.00	
5. Total on this CRO 1205 Page				\$ 23,126.00	

# Contributions from Individuals

Pg 15 of 33

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 (and Fund if applicable)				2. ID Number	
Committee to Elect Jillian Johnson					
3. Contributor Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Michael Hachey 344 Whitridge Ave Baltimore, MD 21218		organizer			
		c. Employer's Name/Specific Field Unite Here			
		e. Election Sum to Date \$ 250.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/8/2015	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Roberta Wood 2569 E 72nd St Chicago, IL 60649		retired			
		c. Employer's Name/Specific Field Metropolitan Water Reclamation District of Greater Chicago (retired)			
		e. Election Sum to Date \$ 110.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard	IN PERSON	7/8/2015	\$ 110.00
<input type="checkbox"/>			AUG 27 2015		\$
<input type="checkbox"/>			DURHAM BOE		\$
3. Contributor Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Tamara Tal 909 Arnette St Durham, NC 27701		scientist			
		c. Employer's Name/Specific Field EPA			
		e. Election Sum to Date \$ 250.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/9/2015	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total Contributions					\$ 610.00
5. Total of All CRO 1210 Pages					\$ 23,126.00

# Contributions from Individuals

Pg 16 of 33

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 (and Fund if applicable)				2. ID Number	
Committee to Elect Jillian Johnson					
3. Contributor Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Hannah Spector 1401 Virginia Ave Durham, NC 27705		researcher			
		c. Employer's Name/Specific Field Planned Parenthood South Atlantic			
		e. Election Sum to Date \$ 55.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/10/2015	\$ 55.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Nabeel Ebeid 24 Sheridan Rd Evanston, IL 60202		Consultant			
		c. Employer's Name/Specific Field Waterstone Management Group			
		e. Election Sum to Date \$ 110.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/14/2015	\$ 110.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments		
Margaret Krome-Lukens 117 Cole St Chapel Hill, NC		assistant manager			
		c. Employer's Name/Specific Field Carrboro Farmers Market			
		e. Election Sum to Date \$ 55.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/14/2015	\$ 55.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total on this Page					\$ 220.00
5. Total of All CRO 1210 Pages (Carry forward from Page 1 and Page 2, if applicable)					\$ 23,126.00

# Contributions from Individuals

Pg 17 of 33

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 (and Fund if applicable)					2. ID Number	
Committee to Elect Jillian Johnson						
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	
Sarah Jennings 3363 Falls Rd Baltimore, MD 21211			Creative Director			
			c. Employer's Name/Specific Field			
			Millenial Media			
			e. Election Sum to Date			
			\$ 55.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		creditcard		7/15/2015	\$ 55.00	
<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	
Cathey Stanley 121 Bonaparte Dr Hillsborough, NC 27278			teacher			
			c. Employer's Name/Specific Field			
			Orange County Schools			
			e. Election Sum to Date			
			\$ 55.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		creditcard		7/15/2015	\$ 55.00	
<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	
Chantelle Fisher-Borne 705 Chalice St Durham, NC 27704			project director			
			c. Employer's Name/Specific Field			
			Funders for LGBTQ Issues			
			e. Election Sum to Date			
			\$ 110.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		creditcard		7/16/2015	\$ 110.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total on this Page					\$ 220.00	
5. Total of All CRO 1205 Pages					\$ 23,126.00	

# Contributions from Individuals

Pg 18 of 33

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 (and Fund if applicable)					2. ID Number	
Committee to Elect Jillian Johnson						
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	
Susan Alton Dailey 1006 Shepherd St Durham, NC 27701			unemployed			
			c. Employer's Name/Specific Field			
			Oregon Health and Science University (previous)		e. Election Sum to Date	
					\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		creditcard		7/16/2015	\$ 55.00	
<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	
Elena Everett 506 Englewood Ave Durham, NC 27701			consultant			
			c. Employer's Name/Specific Field			
			self-employed		e. Election Sum to Date	
					\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		creditcard		7/16/2015	\$ 55.00	
<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	
William Jenniches 912 Shepherd St Durham, NC 27701			computer programmer			
			c. Employer's Name/Specific Field			
			NC State		e. Election Sum to Date	
					\$ 75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		creditcard		7/16/2015	\$ 75.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 185.00	
5. Total all Pages					\$ 23,126.00	

# Contributions from Individuals

Pg 19 of 33

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 (and Fund if applicable)				2. ID Number	
Committee to Elect Jillian Johnson					
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	
Chase Foster 17 Hamlet St Somerville, MA 02143		graduate student			
		c. Employer's Name/Specific Field			
		Harvard University		e. Election Sum to Date	
				\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/17/2015	\$ 55.00
<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	
Chris Toenes 1309 Sedgfield St Durham, NC 27701		counselor			
		c. Employer's Name/Specific Field			
		TROSA		e. Election Sum to Date	
				\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/17/2015	\$ 55.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
5. 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	
JessicaLee White 2909 Fawn Ave Durham, NC 27705		graduate student			
		c. Employer's Name/Specific Field			
		Duke		e. Election Sum to Date	
				\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/17/2015	\$ 55.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
6. Total over \$50					\$ 165.00
7. Total of all CRO 1205 Pages					\$ 23,126.00



# Contributions from Individuals

Pg 20 of 33

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 (and Fund if applicable)				2. ID Number	
Committee to Elect Jillian Johnson					
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	
Laura Wagner 163 St James Dr Piedmont, CA 94611		archivist			
		c. Employer's Name/Specific Field			
		Duke		e. Election Sum to Date	
				\$ 110.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/17/2015	\$ 110.00
<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	
Heidi Wait 1000 N Duke St Durham, NC 27701		nurse			
		c. Employer's Name/Specific Field			
		Duke Hospital		e. Election Sum to Date	
				\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/17/2015	\$ 55.00
<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	
Elizabeth Ault 1013 Dacian Ave Durham, NC 27701		Assistant Editor			
		c. Employer's Name/Specific Field			
		Duke University Press		e. Election Sum to Date	
				\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/17/2015	\$ 55.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total on this Page					\$ 220.00
5. Total on this Form (Page)					\$ 23,126.00

# Contributions from Individuals

Pg 21 of 33

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>	
Committee to Elect Jillian Johnson					
<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>	
Desmera Gatewood 3311 Tarleton East Durham, NC 27713		graduate student			
		<b>c. Employer's Name/Specific Field</b>			
		American University			
				<b>e. Election Sum to Date</b>	
				\$ 55.00	
<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"/>		creditcard		7/17/2015	\$ 55.00
<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>	
Beth Bruch 1010 Iredell St Durham, NC 27705		media coordinator			
		<b>c. Employer's Name/Specific Field</b>			
		Alamance Burlington School System			
				<b>e. Election Sum to Date</b>	
				\$ 55.00	
<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"/>		creditcard		7/17/2015	\$ 55.00
<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>	
Snehal Patel 35 Cub Creek Rd Chapel Hill, NC 27717		physician			
		<b>c. Employer's Name/Specific Field</b>			
		Duke University Medical Center			
				<b>e. Election Sum to Date</b>	
				\$ 501.00	
<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"/>		creditcard		7/17/2015	\$ 501.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total on this Page</b>					\$ 611.00
<b>5. Total on Set of 10 Pages</b>					\$ 23,126.00

# Contributions from Individuals

Pg 22 of 33

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 (and Fund if applicable)				2. ID Number	
Committee to Elect Jillian Johnson					
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	
Gina Difino 518 W SALISBURY St Pittsboro, NC 27000		Program Director			
		c. Employer's Name/Specific Field			
		Duke University		e. Election Sum to Date	
				\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/17/2015	\$ 55.00
<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	
David Haynes 125 Lonnie Gentry Rd Roxboro, NC 27574		organizer			
		c. Employer's Name/Specific Field			
		IBEW		e. Election Sum to Date	
				\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard	AUG 27 2015	7/18/2015	\$ 55.00
<input type="checkbox"/>			DURHAM BOE		\$
<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	
Erin Parish 1506 ENGLEWOOD Ave Durham, NC 277517		instructor			
		c. Employer's Name/Specific Field			
		Duke University		e. Election Sum to Date	
				\$ 165.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/19/2015	\$ 165.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page				\$ 275.00	
5. Total of all CRO-1205 Pages				\$ 23,126.00	

# Contributions from Individuals

Pg 23 of 33

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 (and Fund if applicable)					2. ID Number	
Committee to Elect Jillian Johnson						
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	
Kelly Quirk 152 Parker Ave Maplewood, NJ 07040			LCSW			
			c. Employer's Name/Specific Field			
			BRC			
			e. Election Sum to Date			
			\$		110.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		creditcard		7/20/2015	\$ 110.00	
<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	
Gail Wagner 163 St James Dr Piedmont, CA 94611			physician			
			c. Employer's Name/Specific Field			
			The Permanente Medical Group			
			e. Election Sum to Date			
			\$		250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		creditcard		7/25/2015	\$ 250.00	
<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	
Jenn Frye 216 E Markham Ave Durham, NC 27705			Associate Director			
			c. Employer's Name/Specific Field			
			Democracy NC			
			e. Election Sum to Date			
			\$		55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		creditcard		7/26/2015	\$ 55.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total on this Page					\$ 415.00	
5. Total of All CRO 1205 Pages					\$ 23,126.00	

# Contributions from Individuals

Pg 24 of 33

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 (and Fund if applicable)				2. ID Number	
Committee to Elect Jillian Johnson					
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	
Cy Stober 103 E Ellerbee St Durham, NC 27704		Senior Regional Planner			
		c. Employer's Name/Specific Field			
		Piedmont Triad Regional Counl		e. Election Sum to Date	
				\$ 110.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/26/2015	\$ 110.00
<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	
Jocelyn Olcott 1227 Vickers Ave Durham, NC 27707		professor			
		c. Employer's Name/Specific Field			
		Duke University		e. Election Sum to Date	
				\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/20/2015	\$ 55.00
<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	
Marelda Parish 1560 lawton Ave Macon, GA 31201		Associate Director			
		c. Employer's Name/Specific Field			
		Democracy NC		e. Election Sum to Date	
				\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/20/2015	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
Total Contributions This Page					\$ 665.00
Total Contributions for this Period					\$ 23,126.00

# Contributions from Individuals

Pg 25 of 33

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 (and Fund if applicable)				2. ID Number	
Committee to Elect Jillian Johnson					
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	
Tema Okun 204 Rigsbee Ave Durham, NC 27701		consultant			
		c. Employer's Name/Specific Field			
		self-employed			
		e. Election Sum to Date			
				\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/27/2015	\$ 500.00
<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	
Noah Rubin-Blöse 1212 Prabhupada Dr Hillsborough, NC 2770		chef			
		c. Employer's Name/Specific Field			
		self-employed			
		e. Election Sum to Date			
				\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/27/2015	\$ 55.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
5. 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	
Lanakila McMahan 1801 Clydesdale Pl Washington, DC 20009		manager			
		c. Employer's Name/Specific Field			
		USAID			
		e. Election Sum to Date			
				\$ 75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/20/2015	\$ 75.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
6. Total Contributions				\$ 630.00	
7. Total of CRO 1205-465				\$ 23,126.00	

# Contributions from Individuals

Pg 26 of 33

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 (and Fund if applicable)					2. ID Number	
Committee to Elect Jillian Johnson						
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	
Kevin Prosen 30-59 Steinway St Astoria, NY 11103			teacher			
			c. Employer's Name/Specific Field			
			NYC Dept of Education			
			e. Election Sum to Date			
			\$ 55.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		creditcard		7/16/2015	\$ 55.00	
<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	
Damon Seils 601 Jones Ferry Rd Carrboro, NC 27510			research manager			
			c. Employer's Name/Specific Field			
			Duke			
			e. Election Sum to Date			
			\$ 55.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>				7/16/2015	\$ 55.00	
<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	
Shayan Mukherjee 2120 Englewood Ave Durham, NC 27705			Statistician			
			c. Employer's Name/Specific Field			
			Duke			
			e. Election Sum to Date			
			\$ 55.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		creditcard			\$ 55.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 110.00	
5. Total of All Pages (Add Page)					\$ 23,126.00	

# Contributions from Individuals

Pg 27 of 33

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>	
Committee to Elect Jillian Johnson					
<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>	
Christina Chia 2419 Perkins Rd\ Durham, NC 27704		administrator			
		<b>c. Employer's Name/Specific Field</b>			
		Duke		<b>e. Election Sum to Date</b>	
				\$ 55.00	
<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"/>		creditcard		7/20/2015	\$ 55.00
<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>	
Susan Goodman Bendich 902 Arnette Ave Durham, NC 27701		psychologist			
		<b>c. Employer's Name/Specific Field</b>			
		retired (from self-employed)		<b>e. Election Sum to Date</b>	
				\$ 400.00	
<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"/>		creditcard		07/01/2015	\$ 400.00
<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>	
Paul Bendich 902 Arnette Ave Durham, NC 27701		mathematician			
		<b>c. Employer's Name/Specific Field</b>			
		Duke		<b>e. Election Sum to Date</b>	
				\$ 100.00	
<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"/>		creditcard		07/01/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total for this Page</b>				\$ 555.00	
<b>5. Total for All Pages</b>				\$ 23,126.00	



# Contributions from Individuals

Pg 28 of 33

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 (and Fund if applicable)				2. ID Number	
Committee to Elect Jillian Johnson					
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	
Charles Soeder 103 Hillcrest Ave Carrboro, NC 27510		scientist			
		c. Employer's Name/Specific Field			
		UNC-Chapel Hill		e. Election Sum to Date	
				\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		7/1/2015	\$ 55.00
<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	
Natalia Weedy 807 Parker St Durham, NC 27701		photographer			
		c. Employer's Name/Specific Field			
		self		e. Election Sum to Date	
				\$ 790.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>			photography	07/02/2015	\$ 790.00
<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	
Kevin Morgan 1003 Monmouth Ave Durham, NC 27701		Systems Analyst/Programmer			
		c. Employer's Name/Specific Field			
		UNC		e. Election Sum to Date	
				\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		08/07/2015	\$ 55.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total Contributions				\$ 900.00	
5. Total of SE, CRO, and Pledge				\$ 21,116.00	

# Contributions from Individuals

Pg 29 of 33

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 (and Fund if applicable)				2. ID Number	
Committee to Elect Jillian Johnson					
<div> <div> Add Remove </div> </div>					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Carl Rist 809 Watts St Durham, NC 27701		scientist			
		c. Employer's Name/Specific Field			
		UNC-Chapel Hill			
		e. Election Sum to Date			
		\$ 55.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		08/9/2015	\$ 55.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<div> <div> Add Remove </div> </div>					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Claudia Horowitz PO BOX 1887 Durham, NC 27702		consultant			
		c. Employer's Name/Specific Field			
		self			
		e. Election Sum to Date			
		\$ 55.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		08/10/2015	\$ 55.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<div> <div> Add Remove </div> </div>					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Peter Gilbert 601 Swan St Durham, NC 27701		attorney			
		c. Employer's Name/Specific Field			
		Legal Aid Society of NC			
		e. Election Sum to Date			
		\$ 110.00			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		08/14/2015	\$ 110.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
Total Contributions					\$ 220.00
Total Cash Contributions					\$ 23,126.00

# Contributions from Individuals

Pg 30 of 33

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 (and Fund if applicable)				2. ID Number	
Committee to Elect Jillian Johnson					
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	
Beth Silberman 809 Carolina Ave Durham, NC 27705		physical therapist			
		c. Employer's Name/Specific Field			
		Duke University Medical Centre			
				e. Election Sum to Date	
				\$ 110.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		08/15/2015	\$ 110.00
<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	
Margaret Krome-Lukens 117 Cole St Chapel Hill, NC 27516		assistant manager			
		c. Employer's Name/Specific Field			
		Carrboro Farmers Market			
				e. Election Sum to Date	
				\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		08/15/2015	\$ 55.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
5. 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	
Tamar Schlekat 1 Beverly Dr Durham, NC 27707		consultant			
		c. Employer's Name/Specific Field			
		Arcadis			
				e. Election Sum to Date	
				\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		check		08/15/2015	\$ 100.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
Total Contributions				\$ 265.00	
Total Available for Campaign				\$ 23,126.00	

IN PERSON  
AUG 27 2015

DURHAM BOE

# Contributions from Individuals

Pg 31 of 33

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 (and Fund if applicable)					2. ID Number	
Committee to Elect Jillian Johnson						
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	
Phil Marsosudiro 2908 Arnold Rd Durham, NC 27707			consultant			
			c. Employer's Name/Specific Field			
			self		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		08/15/2015	\$ 100.00	
<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	
Luciana Fellin 68 Beverly Dr Durham, NC 27707			Professor			
			c. Employer's Name/Specific Field			
			Duke		e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		08/15/2015	\$ 100.00	
<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	
Shirley McConahay 3205 Tipi Ln Durham, NC 27705			consultant			
			c. Employer's Name/Specific Field			
			Arcadis		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		check		08/15/2015	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
Total Name this Page					\$ 250.00	
Total Name this Page					\$ 23,126.00	

# Contributions from Individuals

Pg 32 of 33

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 (and Fund if applicable)				2. ID Number	
Committee to Elect Jillian Johnson					
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	
Anne M. Akwari PO Box 51614 Durham, NC 27717		physician			
		c. Employer's Name/Specific Field			
		self			
				e. Election Sum to Date	
				\$ 110.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		08/16/2015	\$ 110.00
<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	
Jessica Rutter 447 17th St SE Washington DC 20003		attorney			
		c. Employer's Name/Specific Field			
		Nlr			
				e. Election Sum to Date	
				\$ 55.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		08/17/2015	\$ 55.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
5. 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	
Jane Mansbridge 3 Walker St Cambridge, MA 02138		professor			
		c. Employer's Name/Specific Field			
		Harvard			
				e. Election Sum to Date	
				\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		check		08/19/2015	\$ 200.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
6. Total Contributions				\$ 365.00	
7. Total Contributions (CRO 1205 Page)				\$ 23,126.00	

Pg 33 of 33

☐ **Yes** ☒ **No**

Committee Full Name (and Fund if applicable)	ID Number
Committee to Elect Jillian Johnson	

<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>		<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>		
<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>		<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>		
<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>		
	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	
		<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>
		<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>
		<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>
<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>	<div> <div> <input type="checkbox"/> </div> <div> <input type="checkbox"/> </div> </div>		

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		creditcard		08/25/2015	\$ 55.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

Candidate Information		Add	Remove
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Laura Drey 2248 Cranford Durham, NC 27705	<b>b. Job Title/Profession</b> photographer		<b>d. Comments</b>     
	<b>c. Employer's Name/Specific Field</b> self		
		<b>e. Election Sum to Date</b>  \$ 250.00	

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		check		08/25/2015	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

Contributor Information		Add	Remove	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Eddie Davis 405 Stinhurst Dr Durham, NC 27707	<b>b. Job Title/Profession</b> retired teacher			
	<b>c. Employer's Name/Specific Field</b> retired (DPS)			
	<b>e. Election Sum to Date</b>			
	\$ 50.00			

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>		check		08/25/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

<p> <b>1. Total number of pages</b>  <b>2. List of figures</b> </p>	<p> <b>\$ 355.00</b>  <b>\$ 23,126.00</b> </p>
-------------------------------------------------------------------------	----------------------------------------------------

# In-Kind Contributions

Pg 1 of 1

Amendment

☐ Yes ☒ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.  
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee/Fund Name (and Fund if applicable)		2. ID Number																																																
Committee to Elect Jillian Johnson																																																		
<div> <div>3. Contributor Information</div> <div> <div> <div> <div>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</div> <div> Natalia Weedy 807 Parker St Durham, NC 27701 </div> </div> <div> <div>b. Type of Contributor</div> <div> <input checked="" type="checkbox"/> Individual  <input type="checkbox"/> Candidate  <input type="checkbox"/> Party  <input type="checkbox"/> PAC  <input type="checkbox"/> Referendum  <input type="checkbox"/> Other Receipt Source </div> </div> <div> <div>c. Comments</div> <div> photography </div> <div> <div>d. Election Sum to Date</div> <div>\$ 790.00</div> </div> </div> </div> </div> </div> <tr> <td>e. Description</td> <td>f. Date (mm/dd/yyyy)</td> <td>g. Fair Market Amount</td> </tr> <tr> <td>campaign photography/ head shot</td> <td>07/02/2015</td> <td>\$ 790.00</td> </tr> <tr> <td></td> <td></td> <td>\$</td> </tr> <tr> <td></td> <td></td> <td>\$</td> </tr> <tr> <td colspan="3"> <div> <div>3. Contributor Information</div> <div> <div> <div> <div>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</div> <div> </div> </div> <div> <div>b. Type of Contributor</div> <div> <input type="checkbox"/> Individual  <input type="checkbox"/> Candidate  <input type="checkbox"/> Party  <input type="checkbox"/> PAC  <input type="checkbox"/> Referendum  <input type="checkbox"/> Other Receipt Source </div> </div> <div> <div>c. Comments</div> <div> </div> <div> <div>d. Election Sum to Date</div> <div>\$</div> </div> </div> </div> </div> </div> <tr> <td>e. Description</td> <td>f. Date (mm/dd/yyyy)</td> <td>g. Fair Market Amount</td> </tr> <tr> <td></td> <td></td> <td>\$</td> </tr> <tr> <td>\$</td> <td></td> <td>\$</td> </tr> <tr> <td></td> <td></td> <td>\$</td> </tr> <tr> <td colspan="3"> <div> <div>3. Contributor Information</div> <div> <div> <div> <div>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</div> <div> </div> </div> <div> <div>b. Type of Contributor</div> <div> <input type="checkbox"/> Individual  <input type="checkbox"/> Candidate  <input type="checkbox"/> Party  <input type="checkbox"/> PAC  <input type="checkbox"/> Referendum  <input type="checkbox"/> Other Receipt Source </div> </div> <div> <div>c. Comments</div> <div> </div> <div> <div>d. Election Sum to Date</div> <div>\$</div> </div> </div> </div> </div> </div> <tr> <td>e. Description</td> <td>f. Date (mm/dd/yyyy)</td> <td>g. Fair Market Amount</td> </tr> <tr> <td></td> <td></td> <td>\$</td> </tr> <tr> <td></td> <td></td> <td>\$</td> </tr> <tr> <td></td> <td></td> <td>\$</td> </tr> <tr> <td colspan="2"> <div> <div>4. Total In-Kind Contributions</div> <div> </div> </div> </td> <td>\$ 790.00</td> </tr> <tr> <td colspan="2"> <div> <div>5. Total In-Kind Contributions</div> <div> </div> </div> </td> <td>\$ 790.00</td> </tr> </td></tr></td></tr>			e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount	campaign photography/ head shot	07/02/2015	\$ 790.00			\$			\$	<div> <div>3. Contributor Information</div> <div> <div> <div> <div>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</div> <div> </div> </div> <div> <div>b. Type of Contributor</div> <div> <input type="checkbox"/> Individual  <input type="checkbox"/> Candidate  <input type="checkbox"/> Party  <input type="checkbox"/> PAC  <input type="checkbox"/> Referendum  <input type="checkbox"/> Other Receipt Source </div> </div> <div> <div>c. Comments</div> <div> </div> <div> <div>d. Election Sum to Date</div> <div>\$</div> </div> </div> </div> </div> </div> <tr> <td>e. Description</td> <td>f. Date (mm/dd/yyyy)</td> <td>g. Fair Market Amount</td> </tr> <tr> <td></td> <td></td> <td>\$</td> </tr> <tr> <td>\$</td> <td></td> <td>\$</td> </tr> <tr> <td></td> <td></td> <td>\$</td> </tr> <tr> <td colspan="3"> <div> <div>3. Contributor Information</div> <div> <div> <div> <div>a. 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Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount			\$	\$		\$			\$	<div> <div>3. Contributor Information</div> <div> <div> <div> <div>a. Full Name, Mailing Address &amp; Phone (include city, state, &amp; zip)</div> <div> </div> </div> <div> <div>b. Type of Contributor</div> <div> <input type="checkbox"/> Individual  <input type="checkbox"/> Candidate  <input type="checkbox"/> Party  <input type="checkbox"/> PAC  <input type="checkbox"/> Referendum  <input type="checkbox"/> Other Receipt Source </div> </div> <div> <div>c. Comments</div> <div> </div> <div> <div>d. Election Sum to Date</div> <div>\$</div> </div> </div> </div> </div> </div> <tr> <td>e. Description</td> <td>f. Date (mm/dd/yyyy)</td> <td>g. Fair Market Amount</td> </tr> <tr> <td></td> <td></td> <td>\$</td> </tr> <tr> <td></td> <td></td> <td>\$</td> </tr> <tr> <td></td> <td></td> <td>\$</td> </tr> <tr> <td colspan="2"> <div> <div>4. 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campaign photography/ head shot	07/02/2015	\$ 790.00																																																
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# Disbursements

Pg 1 of 2

Amendment  
☐ Yes ☒ No

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
Committee to Elect Jillian Johnson						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)						
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures		
4. Payee Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Democracy Engine 850 Quincy Street, NW #402 Washington, DC 20011					processing fees	
			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	
					\$ 392.73	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	creditcard	O	07/01/2015	\$22.54		
1	creditcard	O	07/08/2015	\$67.84		
5. Payee Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Democracy Engine 850 Quincy Street, NW #402 Washington, DC 20011					processing fees	
			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	
					\$ 392.73	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	creditcard	O	07/15/2015	\$103.57		
1	creditcard	)	07/22/2015	\$90.89		
6. Payee Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Democracy Engine 850 Quincy Street, NW #402 Washington, DC 20011					processing fees	
			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	
					\$ 392.73	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	creditcard	O	07/29/2015	\$43.94		
1	creditcard	)	8/5/2015	\$31.38		
7. Total for this Page					\$ 360.16	
(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)					\$ 7,692.77	
<b>A* - Media</b> <b>B* - Printing</b> <b>C* - Fundraising</b> <b>D - To Another Candidate</b> <b>E - Salaries</b> <b>F* - Equipment</b> <b>G - Political Party</b> <b>H* - Holding Public Office Expenses</b> <b>I - Postage</b> <b>J - Penalties</b> <b>K* - Office Expenses</b> <b>Q* - Donation to Legal Expense Fund</b> <b>O* - Other</b>						
8. Add required explanation in required remarks field(s)						



# Disbursements

Pg 2 of 9

Amendment  
☐ Yes ☒ No

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	
Committee to Elect Jillian Johnson						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)						
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures		
4. Payee Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments		
NationBuilder 520 South Grand Avenue Los Angeles, CA				web hosting		
		c. Level Registered (Specify)		e. Election Sum to Date		
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				
				\$ 58.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	creditcard	O	07/01/2015	\$29.00		
1	creditcard	O	08/07/2015	\$29.00		
4. Payee Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments		
Durham BOE 201 N. Roxboro St Durham, NC 27701				filing fee		
		c. Level Registered (Specify)		e. Election Sum to Date		
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				
				\$ 205.88		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	creditcard	O	07/15/2015	\$205.88		
				\$		
4. Payee Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments		
Pure Buttons 4930 Chippewea Rd. Unit A. Mendina, OH. 44256						
		c. Level Registered (Specify)		e. Election Sum to Date		
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				
				\$ 214.12		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	creditcard	O	07/29/2015	\$140.31		
1	creditcard	)	7/31/2015	\$73.81		
5. Total only this Page					\$ 478.00	
6. Total of ALL CRO-1310 Pages					\$ 7,692.77	
(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

Pg 3 of 2

Amendment

☐ Yes ☒ No

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
Committee to Elect Jillian Johnson					
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)					
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Facebook, Inc. 1601 Willow Road Menlo Park CA 94025					social media
			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
					\$ 54.98
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	creditcard	A	07/15/20	\$8.48	fee to boost FB post
1	creditcard	A	7/15/2015	\$16.68	fee to boost FB post
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Facebook, Inc 1601 Willow Road Menlo Park CA 94025					social media
			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
					\$ 54.98
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	creditcard	A	07/31/2015	\$29.82	fee to boost FB post
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Fed Ex Store 610 9TH ST DURHAM. Durham, NC 27705					print postcard
			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
					\$ 123.54
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	creditcard	B	7/15/2015	\$123.54	campaign postcards
				\$	
5. Total only this Page					\$ 178.52
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)					\$ 7,692.77
(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	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
O* - Other				D - To Another Candidate	
				H* - Holding Public Office Expenses	
				Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k)					

# Disbursements

Pg 4 of 2

Amendment  
☐ Yes ☒ No

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) Committee to Elect Jillian Johnson					2. ID Number		
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)							
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information							
<input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments		
Costco. 1510 North Pointe Durham, NC 27705			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		food for campaign launch		
					e. Election Sum to Date \$ 167.67		
			f. Account Code			g. Form of Payment	h. Purpose Code
1			creditcard	O	07/15/20	\$167.67	k. Required Remarks
						\$	
4. Payee Information							
<input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments		
Ben & Jerry's 609 Broad St Durham, NC 27705			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		food for campaign launch		
					e. Election Sum to Date \$ 54.81		
			f. Account Code			g. Form of Payment	h. Purpose Code
1			creditcard	O	07/15/2015	\$54.81	k. Required Remarks
						\$	
4. Payee Information							
<input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments		
NC Democratic Party 220 Hillsborough St. Raleigh, NC 27603			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		VoteBuilder		
					e. Election Sum to Date \$ 534.00		
			f. Account Code			g. Form of Payment	h. Purpose Code
1			check	)	7/15/2015	\$534.00	k. Required Remarks
						\$	
5. Total only this Page					\$ 756.48		
6. Total of ALL CRO-1310 Pages					\$ 7,692.77		
(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 (Use detailed expenditure code in (b.) 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

Pg 5 of 9

Amendment  
☐ Yes ☒ No

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	
Committee to Elect Jillian Johnson						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)						
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures		
4. Payee Information						
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Carosel Checks 8906 Harlem Ave Bridgeview, IL 60455					checks	
			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	
					\$ 16.92	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	creditcard	O	07/23/20	\$16.92		
				\$		
4. Payee Information						
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Orlando's Custom Screenprintin 2824 N. Roxoboro St Durham ,NC 27704					shirts	
			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	
					\$ 1,225.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	creditcard	O	07/23/2015	\$774.00		
1	creditcard	O	8/17/2015	\$451.50		
4. Payee Information						
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Office Depot 4001 Chapel Hill Blvd Durham, NC 27707					labels	
			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	
					\$ 33.69	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	creditcard	)	7/23/2015	\$21.40		
			7/27/2015	\$12.29		
5. Total only this Page					\$ 1,276.11	
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)					\$ 7,692.77	
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

Pg 6 of 2

Amendment  
☐ Yes ☒ No

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	
Committee to Elect Jillian Johnson						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)						
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures		
4. Payee Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Beyu Cafe 225 W Main St Durham, NC 27701					food	
			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	
					\$ 22.06	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	creditcard	O	07/24/20	\$22.06		
				\$		
4. Payee Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Adam Pyburn 2020 Wa Wa Ave Durham, NC 27707					design work	
			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	
					\$ 300.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	creditcard	O	07/29/2015	\$300.00		
				\$		
4. Payee Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Capitol Promotions PO Box 231 Glenside, PA 19038					yard signs	
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 2,500	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	creditcard	)	7/23/2015	\$2,500		
				\$		
5. Total only this Page					\$ 2,822.06	
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)					\$ 7,692.77	
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

Pg 2 of 2

Amendment

☐ Yes ☒ No

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>	
Committee to Elect Jillian Johnson						
<b>3. Type of Disbursement</b> (Please use separate CRO-1310 forms for each type of Disbursement.)						
<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>	
PSPrint 2861 Mandela Parkway Oakland, CA 94608					bumper sticker palm cards	
			<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:		\$ 1,363.06				
<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>	
1	creditcard	O	8/2/2015	\$189.35		
1	creditcard	B	7/31/2015	\$120.08	campaign palm cards	
<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>	
PSPrint 2861 Mandela Parkway Oakland, CA 94608					campaign doorhangers	
			<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:		\$ 1,363.06				
<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>	
1	creditcard	B	8/18/2015	\$1053.63	doorhangers	
				\$		
<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>	
DCABP 601 Fayetteville St Durham, NC 27701					print ad & tickets for DCABP banquet	
			<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:		\$ 380.00				
<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>	
1	check	A	8/17/2015	\$250.00	Print ad for DCABP brochure	
1	check	O	8/11/2015	\$130.00		
<b>5. Total only this Page</b>					\$ 1,743.06	
<b>6. Total of ALL CRO-1310 Pages</b>						
(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)					\$ 7,692.77	
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						
<b>7. Purpose Codes</b> (List or 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

Pg 8 of 2

Amendment

☐ Yes ☒ No

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
Committee to Elect Jillian Johnson					
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)					
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Dollar General 800 Broad St Durham, NC 27705				supplies for houseparty	
		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	
				\$ 19.89	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	creditcard	O	8/17/2015	\$19.89	
				\$	
4. Payee Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Party City 5402 New Hope Commons Dr Durham, NC 27707				campaign event supplies	
		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	
				\$ 8.54	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	creditcard	O	8/22/2015	\$8.54	
				\$	
4. Payee Information					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Home Depot 1700 N Pointe Dr Durham, NC 27705				campaign suppli dry erase board	
		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	
				\$ 16.09	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	credit card	O	8/22/2015	\$16.09	
				\$	
5. Total only this Page					\$ 44.52
6. Total of ALL CRO-1310 Pages					\$ 7,692.77
(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 (k) 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

Pg 2 of 2

Amendment  
☐ Yes ☒ No

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	
Committee to Elect Jillian Johnson						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures		
4. Payee Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments		
Democracy Engine 850 Quincy Street, NW #402 Washington, DC 20011				processing fees		
		c. Level Registered (Specify)		e. Election Sum to Date		
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				
				\$ 392.73		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	creditcard	O	8/12/2015	\$11.88		
1	creditcard	O	8/19/2015	\$20.69		
4. Payee Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments		
Google Inc. 1600 Amphitheatre Parkway Mountain View, CA 94043				google aps		
		c. Level Registered (Specify)		e. Election Sum to Date		
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				
				\$ 1.29		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	creditcard	)	08/03/2015	\$1.29		
1				\$		
4. Payee Information						
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments		
IN PERSON AUG 27 2015 DURHAM						
		c. Level Registered (Specify)		e. Election Sum to Date		
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:				
				\$		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1				\$		
1		)		\$		
5. Total only this Page					\$ 333.86	
6. Total of ALL CRO-1310 Pages					\$ 7,692.77	
(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.)						