

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

1. Committee Information			
a. Full Name <i>Committee to Re-Elect Cora Cole-McFadden</i>		c. ID Number <i>306537</i>	
b. Mailing Address (include City, State and Zip Code) <i>P.O. Box 71067 Durham, NC 27712</i>		d. Date Filed <i>10-5-17</i>	
		e. Phone Number <i>(919) 614-4756</i>	
2. Report Year <i>2017</i>	3. Period Start Date (mm/dd/yy) <i>8-30-2017</i>	4. Period End Date (mm/dd/yy) <i>9-25-2017</i>	5. Treasurer Full Name <i>Jessica Linton</i>
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
☒ Candidate Campaign ☐ PAC ☐ Independent Expenditure ☐ Legal Expense Fund ☐ Party ☐ Referendum ☐ Joint Fundraiser		Municipal ☐ Organizational ☐ Thirty-five day ☒ Pre-primary ☐ Pre-election ☐ Pre-runoff ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special	
7. Type of Fund (if applicable, check one)		State/County ☐ Organizational ☐ Quarterly ☐ First ☐ Second ☐ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special	
☐ "Booster Fund" ☐ Building Fund ☐ Other:		☐ Organizational ☐ Pre-referendum ☐ Final ☐ Supplemental Final ☐ Annual ☐ Special	
8. Number of Fundraisers this Report		10. Special Report Name	
11. Account Information		11. Account Information	
a. Financial Institution Full Name <i>M&F Bank</i>		a. Financial Institution Full Name	
b. Purpose <i>Checking Campaign Acct.</i>	c. Account Code	b. Purpose	c. Account Code
	d. Period Begin Balance <i>\$ 5429.67</i>		d. Period Begin Balance <i>\$</i>
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.			
<i>Cora Cole-McFadden</i> Printed Name of Signer		<i>Cora Cole-McFadden</i> Signature of Appointed Treasurer	
		<i>10-5-17</i> Date	
FOR OFFICE USE ONLY			
Date Received: <i>10/05/17</i>	Employee: <i>JMS</i>	Delivery Method ☐ Normal Mail ☐ Registered Mail ☐ Hand Delivered ☐ Electronically Filed ☐ Signer has not received mandatory training	
Date Postmarked:	Employee:		
Date Scanned:	Employee:		
Date Data Entered:	Employee:		
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.			

Amendment

☐ Yes☒ No**Detailed Summary**

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 Re-Elect Craig McElroy		Pre-Primary	3CLJ3T
Start of Election Cycle: January 1, 2011	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 5429.61	\$	
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 50.00	\$	
6) Contributions from Individuals (CRO-1210)	\$ 950.00	\$	
7) Contributions from Political Party Committees (CRO-1220)	\$	\$	
8) Contributions from Other Political Committees (CRO-1230)	\$ 750.00	\$	
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)	\$	\$	
11e) Exempt Purchase Price Sales (CRO-1265)	\$	\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 1750.00	\$	
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 2,090.06	\$	
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 1,000.00	\$	
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$	
14) Aggregated Non-Media Expenditures (CRO-1315)	\$	\$	
15) Loan Repayments (CRO-1420)	\$	\$	
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$	\$	
17) In-Kind Contributions (CRO-1510)	\$	\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 3,090.06	\$	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 4,089.61	\$	
ADDITIONAL INFORMATION			
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)	\$		
24) Account Transfers Within the Committee (CRO-1720)	\$		
25) Administrative Support (CRO-1710)	\$	\$	
26) Forgiven Loans (CRO-1440)	\$	\$	
27) 48-Hour Notice Reports Sum (CRO-2220)	\$	\$	
28) Contributions to be Refunded (CRO-1215)	\$	\$	

CRO-1100

NC State Board of Elections

August 2008

Contributions from Individuals

Pg 1 of 3

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 Re-Elect Cora Cole-McFadden					3CLT3T	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
I. Jarvis Martin 3608 Mossdale Ave. Durham, NC 27707			Realtor			
			c. Employer's Name/Specific Field			
			Stewart, Martin and McCoy		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	
☐		Check		9-14-17	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
William T. Fletcher 412 Seven Oaks Rd. Durham, NC 27704			Retired Professor			
			c. Employer's Name/Specific Field			
			North Carolina Central University		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	
☐		Check		8-31-17	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Gerald Spence 3 Cilantro Ct. Durham, NC 27703			Real Estate Investor			
			c. Employer's Name/Specific Field			
			Capital Diamond Group		e. Election Sum to Date	
					\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐		Check		9-15-17	\$ 150.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 350.00	
5. Total of ALL CRO-1210 Pages					\$	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

Pg 2 of 3

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) <i>Committee to Re-Elect Cora Cole-McFadden</i>					2. ID Number <i>3CL53T</i>	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Omega C. Parker 111 Oakmont Ave. Durham, N.C. 27713</i>				b. Job Title/Profession <i>Retired Teacher</i>		d. Comments
				c. Employer's Name/Specific Field <i>Durham Public Schools</i>		e. Election Sum to Date \$ <i>100.00</i>
f. Prior ☐	g. Account Code	h. Form of Payment <i>Check</i>	i. In-Kind Description	j. Date (mm/dd/yyyy) <i>9-24-17</i>	k. Amount \$ <i>100.00</i>	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Levell Exum PO Box 3578 Durham, NC 27702</i>				b. Job Title/Profession <i>Realtor</i>		d. Comments
				c. Employer's Name/Specific Field <i>LeStapp, Inc</i>		e. Election Sum to Date \$ <i>100.00</i>
f. Prior ☐	g. Account Code	h. Form of Payment <i>Check</i>	i. In-Kind Description	j. Date (mm/dd/yyyy) <i>9-20-17</i>	k. Amount \$ <i>100.00</i>	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Joseph Harvard III 124 Monticello Ave. Durham, NC 27707</i>				b. Job Title/Profession <i>Retired Pastor</i>		d. Comments
				c. Employer's Name/Specific Field <i>First Presbyterian</i>		e. Election Sum to Date \$ <i>150.00</i>
f. Prior ☐	g. Account Code	h. Form of Payment <i>Check</i>	i. In-Kind Description	j. Date (mm/dd/yyyy) <i>9-25-17</i>	k. Amount \$ <i>150.00</i>	
☐					\$	
☐					\$	
4. Total only this Page					\$ <i>350.00</i>	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$	

Contributions from Individuals

Pg 3 of 3

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 Re-Elect Cora Cole McFadden				3 CLJ3T	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Kenneth Spaulding 7913 Leonardo Dr. Durham, NC 27713		Lawyer			
		c. Employer's Name/Specific Field			
		Kenneth Spaulding Atty at Law		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
☐		check		9-21-17	\$ 250.00
☐					\$
☐					\$
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
		c. Employer's Name/Specific Field			
				e. Election Sum to Date	
				\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐					\$
☐					\$
☐					\$
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
		c. Employer's Name/Specific Field			
				e. Election Sum to Date	
				\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐					\$
☐					\$
☐					\$
4. Total only this Page					\$ 250.00
5. Total of ALL CRO-1210 Pages (This line must fit on line of Detailed Summary Page CRO-1210)					\$

Contributions from Other Political Committees

Pg 1 of 1

Amendment

☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee to Re-Elect Cora Cole-McKadden				3CLJ3T	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee ☐ Candidate ☐ PAC ☐ Referendum		d. Comments	
NC Realtors PAC 4511 Weybridge Lane Greensboro, NC 27407		c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Cycle Sum to Date \$ 150.00	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
	check		9-1-17	\$ 750.00	
				\$	
				\$	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee ☐ Candidate ☐ PAC ☐ Referendum		d. Comments	
		c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Cycle Sum to Date \$	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
				\$	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Committee ☐ Candidate ☐ PAC ☐ Referendum		d. Comments	
		c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Cycle Sum to Date \$	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
				\$	
4. Total only this Page				\$ 750.00	
5. Total of ALL CRO-1230 Pages				\$ 750.00	
(This line must be on line 3 of Detailed Summary Page CRO-1100)					

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 Re-Elect Cora Cole-McFadden						3CLJ3T	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
☐ Operating Expenses		☐ Contributions to Candidates/Political Committees		☐ Coordinated Party Expenditures			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Orlando's 2824 N. Roxboro Rd. Durham, NC 27704							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	Check		8-31-17	\$582.15	Signs/Standards		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
West End Wine Bar 601 W. Main St. Durham, NC 27701							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☒ Municipality:		\$200.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	Check		9-15-17	\$200.00	Campaign Mtg.		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Fed Ex Office 610 9th Street Durham, NC 27705							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$593.31	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	Check		9-21-17	\$379.20	Printing		
				\$			
5. Total only this Page						\$1375.52	
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)							
(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 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 Re-Elect Cora Cole-McFadden						3CLJ3T	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)							
☐ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Fed EX Office 610 9th St. Durham, NC 27705						593.37	
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$ 214.17	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	Check		9-21-17	\$ 214.17	Printing		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Art Sign Company 209 S. Galey St. Durham, NC 27703							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$ 500.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	Check		9-19-17	\$ 250.00	Signs		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Durham Committee on the Affairs of Black People, Inc							
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$ 6000.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	Check		9-18-17	\$ 1,000.00			
				\$			
5. Total only this Page						\$ 714.54	
6. Total of ALL CRO-1310 Pages						\$ 2090.06	
(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		O* - Other	
* Codes require detailed explanation in required remarks field (k.)							

Contributions to Registered Entities Report Cover

This form should be accompanied by forms CRO-2215B and CRO-2215C. For statutory guidance, please refer to N.C.G.S. § 163-278.12 & 163-278.6(9a).

Amendment
☐ Yes ☐ No

1. Reporting Entity Information

a. Full Name of Entity Making Disbursement <i>Durham Committee on the Affairs of Bl. Kent</i>		d. Entity Type (Check One) ☐ Individual ☐ Other Organization ☐ Nonprofit Organization		e. Federal ID Number (if applicable)	
b. Mailing Address (include City, State and Zip Code) and Phone Number <i>600 Fayetteville St. Suite 200 Durham, NC 27701</i>		f. Date Filed		g. Employer's Name or Principal Place of Business <i>PKC</i>	
h. Occupation					

c. Detailed Description of Entity

Political Action Committee

2. Report Year <i>2017</i>	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)
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5. Custodian of Books

a. Full Name of Entity's Custodian of Books and Accounts
Keith Bishop

b. Mailing Address (include City, State and Zip Code) and Phone Number
*600 Fayetteville St. Suite 200
Durham, NC 27701*

c. Employer's Name or Principal Place of Business

d. Occupation

6. Total Donations ALL Pages

\$

7. Total Contributions ALL Pages

\$

CERTIFICATION

I certify that this statement is complete, true and correct to the best of my knowledge. I further understand that this certification shall be treated as under oath, and any person making this certification knowing the information to be untrue is guilty of a Class I felony.

Carla Cole-McEldale Printed Name of Signer *Carla Cole-McEldale* Signature *10-5-17* Date

Contributions Made to Registered Committees

Use this form to report Contributions within 30 days after they exceed \$100 or 10 days before an election they affect. The term Contribution includes anything of value given to a registered committee including monetary and in kind coordinated expenditures.

1. Committee Receiving Contribution

a. Full Name, Mailing Address (include city, state, and zip) & Phone Number				b. Level Registered	
Durham Committee on the Affairs of Black People (PAC) 600 Fayetteville St. Suite 200 Durham, NC 27701				☐ Federal ☐ County ☐ State ☒ Muni	
c. Item Number	d. Form of Payment	e. Description	f. Date (mm/dd/yyyy)	g. Amount	h. Election Sum to Date
	CHECK	GO TV	9-18-17	\$ 1,000.00	\$ 1,000.00
If Form of Payment above is In Kind provide information on Vendor Paid below.					
i. Full Name, Mailing Address (include city, state, and zip) & Phone Number				j. Date Vendor Paid	
				k. Amount	
				\$	

2. Committee Receiving Contribution

a. Full Name, Mailing Address (include city, state, and zip) & Phone Number				b. Level Registered	
				☐ Federal ☐ County ☐ State ☐ Muni	
c. Item Number	d. Form of Payment	e. Description	f. Date (mm/dd/yyyy)	g. Amount	h. Election Sum to Date
				\$	\$
If Form of Payment above is In Kind provide information on Vendor Paid below.					
i. Full Name, Mailing Address (include city, state, and zip) & Phone Number				j. Date Vendor Paid	
				k. Amount	
				\$	

3. Total Disbursements THIS Page

(sum all the 'If' entries on this page)

3. Total Disbursements ALL Pages (sum all the 'If' entries on all disbursement pages)

CRO-2215C

NC State Board of Elections

February 2012

Donations to further Contributions reported at 2215C

Use this form to identify each person or entity making a donation of more than \$100, to further the contribution(s) reported on 2215C.

1. Donation Information

a. Item Num	b. Full Name, Mailing Address & Phone Number (include city, state, and zip)	c. Principal Occupation of Donor	d. Date (mm/dd/yyyy)	e. Amount
	Committee to Re-Elect Cora Cole-McGadden	Candidate	9-18-17	\$1,000.00
				\$
				\$
				\$
				\$
				\$
				\$
				\$

2. Total Donations THIS Page (sum all the '1e' entries on this page)

3. Total Donations ALL Pages (sum all the '1e' entries on all receipt pages)

CRO-2215B

NC State Board of Elections

February 2012