

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 <u>Committee to Re-Elect Cora Cole-McFadden</u>	c. ID Number
b. Mailing Address (include City, State and Zip Code) <u>5613 Old Well P.O. Box Box 72251</u> <u>Durham, NC 27704 Durham, NC 27722</u>	d. Date Filed
	e. Phone Number <u>(919) 477-8995</u>

2. Report Year <u>2009</u>	3. Period Start Date (mm/dd/yy) <u>7-1-09</u>	4. Period End Date (mm/dd/yy) <u>8-25-09</u>	5. Treasurer Full Name <u>Jessica Brown</u>
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6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
☒ Candidate Campaign	☐ Party	☐ Organizational	☐ Organizational
☐ Joint Fundraiser	☐ PAC	☒ Thirty-five day	☐ Pre-referendum
☐ Referendum	☐ Legal Expense Fund	☐ Pre-primary	☐ Final
7. Type of Fund (if applicable, check one)		☐ Pre-election	☐ Supplemental Final
☐ "Booster Fund"		☐ Pre-runoff	☐ Annual
☐ Building Fund		☐ Semi-annual	☐ Special
☐ NC Political Party Financing Fund		☐ Mid Year	
☐ Presidential Election Year Candidates Fund		☐ Year End	
☐ NC Public Campaign Financing Fund		☐ Final	
☐ Other:		☐ Special	
8. Number of Fundraisers this Report <u>1</u>		10. Special Report Name	

11. Account Information	
a. Financial Institution Full Name <u>Mechanics & Farmers Bank</u>	c. Account Code
b. Purpose <u>Checking</u>	d. Period Begin Balance <u>\$ 76.32</u>

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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 undisclosed 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

Cora Cole-McFadden Cora Cole-McFadden 9-1-09
Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY	
Date Received: <u>Sep 1, 09</u>	Employee: <u>MDK</u>
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 Re-Elect Cora Cole-McFall		Municipal/35 day	
Start of Election Cycle: January 1, 2009		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 76.32	\$
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 390.00	\$
6) Contributions from Individuals (CRO-1210)		\$ 2,000.00	\$
7) Contributions from Political Party Committees (CRO-1220)		\$	\$
8) Contributions from Other Political Committees (CRO-1230)		\$	\$
9) Loan Proceeds (CRO-1410)		\$ 188.35	\$
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)		\$ 2,578.35	\$
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 1776.46	\$
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)		\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1776.46	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 801.89	\$
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-1510)		\$	\$
23) Debts and Obligations owed to the Committee (CRO-1520)		\$	\$
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)		\$	\$

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Aggregated Contributions from Individuals

Page

of

Amendment

☐ Yes

☐ No

1. Committee Full Name (and Fund if applicable)	2. ID Number
Committee to Elect Cora Cole-McFadden	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add	1	Check		7-31-2009	\$ 50.00
☐ Remove					
☐ Add	2	Check		8-17-2009	\$ 50.00
☐ Remove					
☐ Add	3	check		8-17-09	\$ 50.00
☐ Remove					
☐ Add	4	check		8-17-09	\$ 50.00
☐ Remove					
☐ Add	5	check		9-1-09	\$ 25.00
☐ Remove					
☐ Add	6	check		8-10-09	\$ 45.00
☐ Remove					
☐ Add	7	check		8-10-09	\$ 50.00
☐ Remove					
☐ Add	8	check		8-8-09	\$ 25.00
☐ Remove					
☐ Add	9	check		8-16-09	\$ 25.00
☐ Remove					
☐ Add	10	check		8-15-09	\$ 20.00
☐ Remove					
☐ Add					\$
☐ Remove					\$
☐ Add					\$
☐ Remove					\$
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4. Total only this Page

\$ 390.00

5. Total of ALL CRO-1205 Pages

\$ 390.00

(This line must be on line 5 of Detailed Summary Page CRO-1100)

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) <u>Committee to Re-Elect Cora Cole McFadden</u>					2. ID Number	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Ralph Owens</u> <u>PO Box 51906</u> <u>Durham, NC 27717-1906</u>			b. Job Title/Profession <u>Business man</u>		d. Comments	
			c. Employer's Name/Specific Field <u>Self-Employed</u>		e. Election Sum to Date <u>\$1,000.00</u>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐		<u>Check</u>		<u>7-21-09</u>	<u>\$1,000.00</u>	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>David B. Hundley</u> <u>12643 Garber St.</u> <u>Hansen Hills, Ca 91331</u>			b. Job Title/Profession <u>Accountant</u>		d. Comments	
			c. Employer's Name/Specific Field <u>Self-Employed</u>		e. Election Sum to Date <u>\$200.00</u>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐		<u>Check</u>		<u>7-23-09</u>	<u>\$200.00</u>	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Larry E. McFadden</u> <u>13512 Moorpark St. Apt. 102</u> <u>Sherman Oaks, Ca. 91423-3861</u>			b. Job Title/Profession <u>Accountant</u>		d. Comments <u>SEP 01 2009</u> <u>IN PERSON</u>	
			c. Employer's Name/Specific Field <u>Self-Employed</u>		e. Election Sum to Date <u>\$300.00</u>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐		<u>Check</u>		<u>7-23-09</u>	<u>\$300.00</u>	
☐					\$	
☐					\$	
4. Total only this Page					<u>\$1,500.00</u>	
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)				2. ID Number	
Committee to Re-Elect Cora Cole-McFadden					
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
880-9450 Jon W. Parker 14 Lake Village Dr. Durham, NC 27713		Realtor			
		c. Employer's Name/Specific Field		e. Election Sum to Date	
		Independent		\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		Check		7-25-09	\$ 100.00
☐					\$
☐					\$
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
682-8249 Jesse Jones 608 Cecil St. Durham, NC		Pastor			
		c. Employer's Name/Specific Field		e. Election Sum to Date	
		Self Employed		\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		Check		8-1-09	\$ 100.00
☐					\$
☐					\$
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
682-7801 H. Michael Spears 1212 Red Oak Ave Durham, NC 27707		Contractor			
		c. Employer's Name/Specific Field		e. Election Sum to Date	
		Construction clean-up		\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐		Check		8-17-09	\$ 100.00
☐					\$
☐					\$
4. Total only this Page					\$ 300.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$

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1. Committee Full Name (and Fund if applicable)					3 of 3 2. ID Number	
Committee to Re-Elect Cora Cole-McFadden						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Sharon Elliott-Bynum 105 Chancellors Ridge Dr. Durham, NC 27713			Reg. Nurse			
			c. Employer's Name/Specific Field			
			Care, Inc.		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		8-17-09	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
William M. Forte, Jr. 901 Cava St. Durham, NC 27707			Retired			
			c. Employer's Name/Specific Field			
					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		8-17-09	\$ 100.00	
☐					\$	
☐					\$	
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	
☐					\$	
☐					\$	
☐					\$	
4. Total only this Page					\$ 200.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2,000.00	

CRO-1210

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Disbursements

Page 1 of 1

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					
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
Sign-a-rama Hillsborough Rd. Durham NC 27705					signs, buttons
			c. Level Registered (Specify)		e. Election Sum to Date
			☐ Federal ☐ County: ☐ State ☐ Municipality:		\$ 1588.11
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	Check			\$	
				\$	
4. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
Board of Elections					Filing Fee
			c. Level Registered (Specify)		e. Election Sum to Date
			☐ Federal ☐ County: ☐ State ☐ Municipality:		\$ 188.35
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
4. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		e. Election Sum to Date
			☐ Federal ☐ County: ☐ State ☐ Municipality:		\$ SEP 01 2009
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
5. Total only this Page					\$ 1776.46
6. Total of ALL CRO-1310 Pages					\$ 1776.46
(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	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
				D - To Another Candidate	
				H* - Holding Public Office Expenses	
				O* - Other	
* Codes require detailed explanation in required remarks field (k)					

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Loan Proceeds

Pg 1 of 1

Amendment
☐ Yes ☐ No

Use this form to report proceeds from a loan and loan endorser's information

A loan proceeds statement must accompany each loan that is from an individual

1. Committee Full Name (and Fund if applicable)				2. CRO-1410 Number	
Committee to Re-Elect Cora Cole-McFadden					
3. Lender Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Cora Cole-McFadden 5613 Old Well St. Durham, NC 27704		Elected Official			
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)	
				f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment	k. Amount	
%				\$ 188.35	
l. Full Name of Lending Institution				m. Loan Number	
4. Endorsers/Makers (The people who guarantee the loan)					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
		%		\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
		%		\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
		%		\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
		%		\$	
5. Total of ALL CRO-1410 Pages				s 188.35	
(This line must be on line 9 of Detailed Summary Page CRO-1100)					

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Loan Proceeds Statement

The individual making a loan to the committee must provide the following information. Failure to provide all of the information requested could be a violation of campaign reporting disclosure laws.

- Name of committee to receive loan:
Committee to Re-Elect Cora Cole-McFadden
- Person lending money to committee (Lender):
Cora Cole-McFadden
- Date of loan to committee: 7-9-09
- Name of lending institution and account number (source):
Mechanics & Farmers Bank
- Amount of loan: \$ 188,35
- Names of all parties responsible for payment of loan (guarantors):
Cora Cole-McFadden
- Period of loan: Nov. 10, 2009
- Rate of interest of loan: 0%
- Security pledged for loan: -

I, Cora Cole-McFadden, (Person lending money to committee) acknowledge that all of the information provided is complete, true, and accurate. I further understand I may not forgive a loan that has an outstanding balance to any source.

Cora Cole-McFadden
Signature of Lender

Cora Cole-McFadden
Signature of Treasurer of Committee

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This form must be submitted with the disclosure report for which the loan is initially disclosed.