

Disclosure Report Cover

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

COPY

Amendment

☐ Yes☐ No

1. Committee Information

a. Full Name

Brooke Cashion for Alderman Committee

c. ID Number

E1K4519

b. Mailing Address (include City, State and Zip Code)

5953 Kenton Drive
Kernersville, NC 27289

d. Date Filed

1/29/10

e. Phone Number

336-817-3598

2. Report Year

2009

3. Period Start Date (mm/dd/yy)

1/1/2008

4. Period End Date (mm/dd/yy)

1/29/10

5. Treasurer Full Name

Brooke Cashion

6. Type of Committee (Check One)

- ☒ Candidate Campaign
☐ PAC
☐ Independent Expenditure
☐ Legal Expense Fund
☐ Party
☐ Referendum
☐ Joint Fundraiser

7. Type of Fund (if applicable, check one)

- ☐ "Booster Fund"
☐ Building Fund

☐ Other:

9. Type of Report

(check only one type of report from one category)

Municipal

- ☐ Organizational
☐ Thirty-five day

- ☐ Pre-primary
☐ Pre-election
☐ Pre-runoff
☐ Semi-annual
☐ Mid Year
☐ Year End

- ☒ Final
☐ Special

State/County

- ☐ Organizational
☐ Quarterly

- ☐ First
☐ Second
☐ Third
☐ Fourth
☐ Semi-annual
☐ Mid Year
☐ Year End
☐ Final
☐ Special

Referendum

- ☐ Organizational
☐ Pre-referendum

- ☐ Final
☐ Supplemental Final
☐ Annual
☐ Special

10. Special Report Name

11. Account Information

a. Financial Institution Full Name

Fidelity Bank

b. Purpose

all acct income
and expense

c. Account Code

FB01

d. Period Begin Balance

\$461.52

11. Account Information

a. Financial Institution Full Name

b. Purpose

c. Account Code

d. Period Begin Balance

\$

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.

Brooke W. Cashion

Printed Name of Signer

Signature of Appointed Treasurer

1/29/10

Date

FOR OFFICE USE ONLY

Date Received:

2-4-10

Employee:

Judy Spears

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

Use this form to summarize all disclosure reporting forms and to total monetary information.

Amendment
☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
Brooke Cashion for Alderman		Final-Muni		FKYS19	
Start of Election Cycle: January 1, 2007		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$461.52		\$461.52	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$	
6) Contributions from Individuals (CRO-1210)		\$10.00		\$10.00	
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)		\$		\$	
11e) Exempt Purchase Price Sales (CRO-1265)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$10.00		\$10.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$271.52		\$271.52	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$200.00		\$200.00	
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)		\$471.52		\$471.52	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ - 0 -		\$ - 0 -	
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-2200)		\$		\$	
28) Contributions to be Refunded (CRO-1215)		\$		\$	

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

 of

☐ Yes ☐ No

CRO-1205

Disbursements

Pg ____ of ____

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) <i>Brooke Cashion for Alderman Committee</i>					2. ID Number <i>IKY519</i>	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
<input checked="" 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) <i>Fidelity Bank XXXXXX Kernersville, NC 27284</i>				b. Coordinated Committee Name		d. Comments
				c. Level Registered (Specify)		e. Election Sum to Date <i>\$5.00</i>
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		
f. Account Code <i>FB01</i>	g. Form of Payment <i>debit</i>	h. Purpose Code <i>0</i>	i. Date (mm/dd/yyyy) <i>1/2009</i>	j. Amount <i>\$ 5.00</i>	k. Required Remarks <i>bank fee</i>	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Triad Flight of Honor PO Box 4613 Greensboro, NC 27404</i>				b. Coordinated Committee Name		d. Comments
				c. Level Registered (Specify)		e. Election Sum to Date <i>\$ 266.82</i>
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
f. Account Code <i>FB01</i>	g. Form of Payment <i>check</i>	h. Purpose Code <i>C</i>	i. Date (mm/dd/yyyy) <i>7/31/09</i>	j. Amount <i>\$150.00</i>	k. Required Remarks <i>donation for program to fly to Washington DC</i>	
f. Account Code <i>FB01</i>	g. Form of Payment <i>check</i>	h. Purpose Code <i>C</i>	i. Date (mm/dd/yyyy) <i>9/25/09</i>	j. Amount <i>\$116.53</i>	k. Required Remarks <i>"</i>	
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
				c. Level Registered (Specify)		e. Election Sum to Date <i>\$</i>
				<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	
				\$		
				\$		
5. Total only this Page					<i>\$ 271.53</i>	
6. Total of ALL CRO-1310 Pages					<i>\$ 471.53</i>	
(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 ____ of ____

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	
Brooke Cashin for Alderman Committee					104519	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
<input type="checkbox"/> Operating Expenses <input checked="" 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
Virginia Foxx for Congress 2575 Old 6100 N Clemmons, NC 27012						
				c. Level Registered (Specify)		
				<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						e. Election Sum to Date
						\$ 200.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
FB01	check	C	7/29/09	\$ 200.00	donation to campaign committee	
				\$		
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
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						e. Election Sum to Date
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						e. Election Sum to Date
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
5. Total only this Page						\$ 200.00
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)						