# 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: Committee to Elect Jeff Marks

c. ID Number:

b. Mailing Address (include City, State and Zip Code): P.O. Box 405, Fayetteville NC 28302

d. Date Filed: 7/30/2009

e. Phone Number: 910-494-1295

| 2. Report Year | 3. Period Start Date (mm/dd/yy) | 4. Period End Date (mm/dd/yy) | 5. Treasurer Full Name |
|---|---|---|---|
| 2009 | 05/11/09 | 06/30/09 | Brenda Chester |

**6. Type of Committee (Check One)**

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

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

- ☐ "Booster Fund"
- ☐ Building Fund
- ☐ NC Political Party Financing Fund
- ☐ Presidential Election Year Candidates Fund
- ☐ NC Public Campaign Financing Fund
- ☐ Other:

**8. Number of Fundraisers this Report**

**9. Type of Report** *(check only one type of report from one category)*

| Municipal | State/County | Referendum |
|---|---|---|
| ☐ Organizational | ☐ Organizational | ☐ Organizational |
| ☐ Thirty-five day | Quarterly | ☐ Pre-referendum |
| ☐ Pre-primary | ☐ First | ☐ Final |
| ☐ Pre-election | ☐ Second | ☐ Supplemental Final |
| ☐ Pre-runoff | ☐ Third | ☐ Annual |
| Semi-annual | ☐ Fourth | ☐ Special |
| ☐ Mid Year | Semi-annual | |
| ☐ Year End | ☒ Mid Year | **10. Special Report Name** |
| ☐ Final | ☐ Year End | |
| ☐ Special | ☐ Final | |
| | ☐ Special | |

**11. Account Information**

a. Financial Institution Full Name: BB+T

b. Purpose: Campaigning

c. Account Code: 01

d. Period Begin Balance: $ 2000.00

**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.

| Brenda Chester | Brenda Chester | 7/30/09 |
|---|---|---|
| Printed Name of Signer | Signature of Appointed Treasurer | Date |

**FOR OFFICE USE ONLY**

Date Received: 7/30/09 Employee: Angie

Date Postmarked: Employee:

Date Scanned: Employee:

Date Data Entered: Employee:

RECEIVED JUL 30 2009

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 (CRC-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 |
|---|---|---|
| Committee to Elect Jeff Marks | Semi-Annual | |

| Start of Election Cycle: January 1, 2009 | | Total this Reporting Period | Total this Election Cycle |
|---|---|---|---|
| 4) Cash on Hand at Start | | $ 2000.- | $ Ø |
| **RECEIPTS** | | | |
| 5) Aggregated Contributions from Individuals | (CRO-1205) | $ | $ |
| 6) Contributions from Individuals | (CRO-1210) | $ 750.- | $ 750.- |
| 7) Contributions from Political Party Committees | (CRO-1220) | $ | $ |
| 8) Contributions from Other Political Committees | (CRO-1230) | $ | $ |
| 9) Loan Proceeds | (CRO-1410) | $ | $ 2,056.- |
| 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) | $ | $ |
| 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c and 11d) | | $ 750.- | $ 2,806.- |
| **EXPENDITURES** | | | |
| 13) Disbursements | | Total this | Total this |
| 13a) Operating Expenditures | (CRO-1310) | $ 1,166.70 | $ 1,222.70 |
| 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) | | $ 1,166.70 | $ 1,222.70 |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) | | $ 1,583.30 | $ 1,583.30 |
| **ADDITIONAL INFORMATION** | | | |
| 20) Non-Monetary Gifts Given to Other Committees | (CRO-1330) | $ | |
| 21) Outstanding Loans (incl. ones from other campaigns) | (CRO-1430) | $ 2,056.- | |
| 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-1220) | $ | $ |
| 28) Contributions to be Refunded | (CRO-1215) | $ | $ |

# 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 Elect Jeff Marks | |

**3. Contributor Information** ☐ Add ☐ Remove

| a. Full Name, Mailing Address & Phone (include city, state, & zip) | b. Job Title/Profession | c. Employer's Name/Specific Field | d. Comments | e. Election Sum to Date |
|---|---|---|---|---|
| James H. Dougherty<br>3813 Clearwater Drive<br>Fayetteville NC 28311-0331<br>910 488 7705 | Exec. Director. | Regional Land Use Advisory Commission | | $ 100.00 |

| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount |
|---|---|---|---|---|---|
| ☐ | 01 | CK | | 6-16-2009 | $ 100.00 |
| ☐ | | | | | $ |
| ☐ | | | | | $ |

**3. Contributor Information** ☐ Add ☐ Remove

| a. Full Name, Mailing Address & Phone (include city, state, & zip) | b. Job Title/Profession | c. Employer's Name/Specific Field | d. Comments | e. Election Sum to Date |
|---|---|---|---|---|
| Dineen Y. Morton<br>5835 Pettigrew Drive<br>Fayetteville, NC 28314<br>910 494 5761 | Owner | Seed2Lily | | $ 100.00 |

| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount |
|---|---|---|---|---|---|
| ☐ | 01 | CK | | 6-13-09 | $ 100.00 |
| ☐ | | | | | $ |
| ☐ | | | | | $ |

**3. Contributor Information** ☐ Add ☐ Remove

| a. Full Name, Mailing Address & Phone (include city, state, & zip) | b. Job Title/Profession | c. Employer's Name/Specific Field | d. Comments | e. Election Sum to Date |
|---|---|---|---|---|
| Dr. Leo Edwards, Jr.<br>1307 Vass Rd.<br>Spring Lake NC 28390<br>910 497 3838 | owner | LEdwards & Associates | | $ 200.00 |

| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount |
|---|---|---|---|---|---|
| ☐ | 01 | CK | | 5/18/2009 | $ 200.00 |
| ☐ | | | | | $ |
| ☐ | | | | | $ |

| | |
|---|---|
| **4. Total only this Page** | $ 400.00 |
| **5. Total of ALL CRO-1210 Pages** *(This line must be on line 6 of Detailed Summary Page CRO-1100)* | $ See pg 3 |

# 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 Elect Jeff Marks | |

**3. Contributor Information** ☐ Add ☐ Remove

| a. Full Name, Mailing Address & Phone (include city, state, & zip) | b. Job Title/Profession | c. Employer's Name/Specific Field | d. Comments | e. Election Sum to Date |
|---|---|---|---|---|
| Brenda R. Chester<br>1235 Oak Knolls Dr<br>Fayetteville NC 28314<br>9107231243 | CPA / Chief Acct | Public Works Commission | | $ 100.00 |

| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount |
|---|---|---|---|---|---|
| ☐ | 01 | CK | | 6/19/2009 | $ 100.00 |
| ☐ | | | | | $ |
| ☐ | | | | | $ |

**3. Contributor Information** ☐ Add ☐ Remove

| a. Full Name, Mailing Address & Phone (include city, state, & zip) | b. Job Title/Profession | c. Employer's Name/Specific Field | d. Comments | e. Election Sum to Date |
|---|---|---|---|---|
| Delvin Mc Allister<br>403 Kettering Rd<br>Stedman, NC 28391<br>9104837312 | Deputy Director | Operation Sickle Cell | | $ 100.00 |

| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount |
|---|---|---|---|---|---|
| ☐ | 01 | CK | | 6/25/2009 | $ 100.00 |
| ☐ | | | | | $ |
| ☐ | | | | | $ |

**3. Contributor Information** ☐ Add ☐ Remove

| a. Full Name, Mailing Address & Phone (include city, state, & zip) | b. Job Title/Profession | c. Employer's Name/Specific Field | d. Comments | e. Election Sum to Date |
|---|---|---|---|---|
| LaTonya Rose<br>109 Breckenridge Dr<br>Raeford NC 28376<br>910 574 8225 | Multiple Media Consultant | White Directory Publishers | | $ 50.00 |

| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount |
|---|---|---|---|---|---|
| ☐ | 01 | CK | | 6/26/2009 | $ 50.00 |
| ☐ | | | | | $ |
| ☐ | | | | | $ |

| | |
|---|---|
| **4. Total only this Page** | $ 250.- |
| **5. Total of ALL CRO-1210 Pages** *(This line must be on line 6 of Detailed Summary Page CRO-1100)* | $ See page 3 |

# Contributions from Individuals



Amendment ☐ Yes ☐ No

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

| 1. Committee Full Name (and Fund if applicable) | 2. ID Number |
|---|---|
| Committee to Elect Jeff Marks | |

**3. Contributor Information** ☐ Add ☐ Remove

| a. Full Name, Mailing Address & Phone (include city, state, & zip) | b. Job Title/Profession | c. Employer's Name/Specific Field | d. Comments | e. Election Sum to Date |
|---|---|---|---|---|
| Mrs. Mary McAllister<br>730 Spyglass Drive<br>Fayetteville NC 28311<br>910 483 7312 | Sickle cell Admin | Operation Sickle Cell | | $ 100.00 |

| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount |
|---|---|---|---|---|---|
| ☐ | 01 | CK | | 06-27-2009 | $ 100.00 |
| ☐ | | | | | $ |
| ☐ | | | | | $ |

**3. Contributor Information** ☐ Add ☐ Remove

| a. Full Name, Mailing Address & Phone (include city, state, & zip) | b. Job Title/Profession | c. Employer's Name/Specific Field | d. Comments | e. Election Sum to Date |
|---|---|---|---|---|
| | | | | $ |

| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount |
|---|---|---|---|---|---|
| ☐ | | | | | $ |
| ☐ | | | | | $ |
| ☐ | | | | | $ |

**3. Contributor Information** ☐ Add ☐ Remove

| a. Full Name, Mailing Address & Phone (include city, state, & zip) | b. Job Title/Profession | c. Employer's Name/Specific Field | d. Comments | e. Election Sum to Date |
|---|---|---|---|---|
| | | | | $ |

| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description | j. Date (mm/dd/yyyy) | k. Amount |
|---|---|---|---|---|---|
| ☐ | | | | | $ |
| ☐ | | | | | $ |
| ☐ | | | | | $ |

| | |
|---|---|
| **4. Total only this Page** | $ 100.- |
| **5. Total of ALL CRO-1210 Pages**<br>*(This line must be on line 6 of Detailed Summary Page CRO-1100)* | $ 750.- |

# 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 |
|---|---|
| Committee to Elect Jeff Marks | |

**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 | c. Level Registered (Specify) | d. Comments | e. Election Sum to Date |
|---|---|---|---|---|
| BB&T<br>300 Rowan St<br>Fayetteville, NC 28302<br>(910) 435-3600 | | ☐ Federal ☒ County: ☐ State ☐ Municipality: | | $ 169.40 |

| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
|---|---|---|---|---|---|
| 01 | | O | 05/20/2009 | $ 169.40 | Check/deposits order |
| | | | | $ | |

**4. Payee Information** ☒ Add ☐ Remove

| a. Full Name, Mailing Address & Phone (include city, state, & zip) | b. Coordinated Committee Name | c. Level Registered (Specify) | d. Comments | e. Election Sum to Date |
|---|---|---|---|---|
| The Java Bean<br>450 Hay Street<br>Fayetteville, NC 28301<br>(910) 323-3111 | | ☐ Federal ☒ County: ☐ State ☐ Municipality: | Refreshments for fundraiser | $ 175.36 |

| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
|---|---|---|---|---|---|
| 01 | CK | C | 06/26/2009 | $ 175.36 | |
| | | | | $ | |

**4. Payee Information** ☐ Add ☐ Remove

| a. Full Name, Mailing Address & Phone (include city, state, & zip) | b. Coordinated Committee Name | c. Level Registered (Specify) | d. Comments | e. Election Sum to Date |
|---|---|---|---|---|
| Third Rail Creative Studios<br>108 Hay Street<br>Fayetteville, NC 28301<br>(910) 433-4352 | | ☐ Federal ☒ County: ☐ State ☐ Municipality: | web design and maintenance | $ 821.94 |

| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yyyy) | j. Amount | k. Required Remarks |
|---|---|---|---|---|---|
| 01 | CK | A | 06/26/2009 | $ 821.94 | |
| | | | | $ | |

**5. Total only this Page** $ 1,166.70

**6. Total of ALL CRO-1310 Pages** $ 1,166.70

*(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)

# Outstanding Loans

Pg 1 of 1

Amendment ☐ Yes ☐ No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

| 1. Committee Full Name (and Fund if applicable) | 2. ID Number |
|---|---|
| Committee to Elect Jeff Marks | |

**3. Lender Information** ☐ Add ☐ Remove

| a. Full Name, Mailing Address & Phone (include city, state, & zip) | b. Job Title/Profession | d. Comments |
|---|---|---|
| Jeffrey Adolph Marks<br>P.O. Box 408<br>Fayetteville, NC 28302<br>(910) 494-1295 | Asst. Superintend for Custody Ofs. | |
| | c. Employer's Name/Specific Field | e. Start Date (mm/dd/yyyy) |
| | Sampson Correctional Inst. # 4535 N.C.D.O.C | 05/01/2009 |
| | | f. End Date (mm/dd/yyyy) |

| g. Rate | h. Security Pledged | i. Original Loan Amount | j. Remaining Loan Balance |
|---|---|---|---|
| % | | $ 2,056.- | $ 2,056.- |

| k. Full Name of Lending Institution | l. Loan Number |
|---|---|
| | |

**3. Lender 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. Start Date (mm/dd/yyyy) |
| | | |
| | | f. End Date (mm/dd/yyyy) |

| g. Rate | h. Security Pledged | i. Original Loan Amount | j. Remaining Loan Balance |
|---|---|---|---|
| % | | $ | $ |

| k. Full Name of Lending Institution | l. Loan Number |
|---|---|
| | |

**3. Lender 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. Start Date (mm/dd/yyyy) |
| | | |
| | | f. End Date (mm/dd/yyyy) |

| g. Rate | h. Security Pledged | i. Original Loan Amount | j. Remaining Loan Balance |
|---|---|---|---|
| % | | $ | $ |

| k. Full Name of Lending Institution | l. Loan Number |
|---|---|
| | |

| | |
|---|---|
| 4. Total only this Page | $ 2,056.00 |
| 5. Total of ALL CRO-1430 Pages (This line must be on line 21 of Detailed Summary Page CRO-1100) | $ 2,056.00 |