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APR 28

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	c. ID Number
Marshall Faircloth for County Commissioner	9CE3P2
b. Mailing Address (include City, State and Zip Code)	**d. Date Filed**
P.O. Box 87167 Fayetteville N.C. 28304	4/28/08
	e. Phone Number
	910 323-1040

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2008	3/9/08	4/19/08	A. Johnson Chestnutt

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

0

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	
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

10. Special Report Name

11. Account Information

a. Financial Institution Full Name	
New Century Bank	
b. Purpose	**c. Account Code**
Campaign Account	01
	d. Period Begin Balance
	$ 0

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

A Johnson Chestnutt	[signature]	4/28/08
Printed Name of Signer	Signature of Appointed Treasurer	Date

FOR OFFICE USE ONLY

Date Received:	_____	Employee:	_____
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
Marshall Faircloth for County Commissioner	First Qtr. P/S	9CE3P2

Start of Election Cycle: January 1, 2008	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	$ 0	$ 0
RECEIPTS		
5) Aggregated Contributions from Individuals (CRO-1205)	$ 500.00	$ 500.00
6) Contributions from Individuals (CRO-1210)	$ 1275.00	$ 1275.00
7) Contributions from Political Party Committees (CRO-1220)	$	$
8) Contributions from Other Political Committees (CRO-1230)	$	$
9) Loan Proceeds (CRO-1410)	$	$ 189.00
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)	$ 1775.00	$ 1964.00
EXPENDITURES		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	$	$ 189.00
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)	$ 0	$ 189.00
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	$ 1775.00	$ 1775.00
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)	$	$

Aggregated Contributions from Individuals

Page 2 of 2

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
Marshall Fairchild for County Commission	9CE3P2

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	1	Cash		3/11/08	$ 50.00
☐ Add ☐ Remove	1	Cash		3/11/08	$ 50.00
☐ Add ☐ Remove	1	Cash		3/11/08	$ 50.00
☐ Add ☐ Remove	1	Cash		3/11/08	$ 50.00
☐ Add ☐ Remove	1	Cash		3/11/08	$ 50.00
☐ Add ☐ Remove	1	Cash		3/11/08	$ 50.00
☐ Add ☐ Remove	1	Cash		4/19/08	$ 50.00
☐ Add ☐ Remove	1	Cash		4/19/08	$ 50.00
☐ Add ☐ Remove	1	Check		4/15/08	$ 50.00
☐ Add ☐ Remove	1	Cash		4/19/08	$ 50.00
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
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☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$

4. Total only this Page	$ 500.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 500.00

Contributions from Individuals

Pg 1 of 2 | 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
Marshall Faircloth for County Commissioner	9CE3P2

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
Michael Green 3339 Quarry Drive Fayetteville N.C. 28303	Executive	Cohen + Green Salvage Co. Inc		$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	01	Check		3/12/08	$ 500.00
☐					$
☐					$

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
Carol Traynham Faircloth 2307 Rolling hills Road Fayetteville N.C. 28304	Dental Assistant	U.S. Army		$ 400.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	01	Check		3/24/08	$ 400.00
☐					$
☐					$

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
Fred L. McKinney Clarendon House, Clarendon St. Fayetteville N.C. 28305	Retired	None		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	01	Check		4/2/08	$
☐					$
☐					$

4. Total only this Page	$ 1100.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 1275.00

Contributions from Individuals

Pg 2 of 2 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
Marshall Faircloth for County Commissioner	9CE3P2

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
Wilbur J. Wimmer 2315 Rollinghill Road Fayetteville N.C. 28304	Retired	NONE		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	01	Check		4/4/08	$ 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
Annie R. Pierce 2318 Rolling hill Road Fayetteville N.C. 28304-3741	Retired	NONE		$ 75.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	01	Check		4/21/08	$ 75.00
☐					$
☐					$

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
☐					$
☐					$
☐					$

4. Total only this Page	$ 175.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 1275.00