

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 McBroom for City Council	c. ID Number
b. Mailing Address (include City, State and Zip Code) 3551 Forestdale Drive Apt. ML Burlington, NC 27215	d. Date Filed 01/29/2016
	e. Phone Number 336-512-2322

2. Report Year 2015	3. Period Start Date (mm/dd/yy) 10/19/2015	4. Period End Date (mm/dd/yy) 12/31/2015	5. Treasurer Full Name Kendal LeRod McBroom
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6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	Municipal	State/County	Referendum
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Other:		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
		<input checked="" type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	10. Special Report Name
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
8. Number of Fundraisers this Report		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

11. Account Information		11. Account Information	
a. Financial Institution Full Name BANK OF AMERICA		a. Financial Institution Full Name	
b. Purpose FOR CAMPAIGN PURCHASES	c. Account Code 1	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 367.60		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.

Kendal LeRod McBroom
 Printed Name of Signer

Kendal L. McBroom
 Signature of Appointed Treasurer

01-29-2016
 Date

FOR OFFICE USE ONLY

Date Received: 2/1/16 Employee: SH

Date Postmarked: _____ Employee: _____

Date Scanned: 2/8/16 Employee: JG

Date Data Entered: _____ Employee: _____

Delivery Method
 Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed
 Signer has not received mandatory training

02-01-16 P01:08 RCVD

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	
McBroom For City Council		2015 Year End Semi Annual			
Start of Election Cycle: January 1, <u>2012</u>		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 1,370.31		\$ 1,370.71	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 570.00		\$ 570.00	
6) Contributions from Individuals (CRO-1210)		\$ 3,085.99		\$ 3,085.99	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00		\$	
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)		\$		\$	
11 e) Exempt Purchase Price Sales (CRO-1265)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 3,655.99		\$ 3,655.99	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 1,452.30		\$ 1,452.30	
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)		\$ 1,636.99		\$ 1,636.99	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 3,089.29		\$ 3,089.29	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 576.70		\$ 576.70	
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)		\$		\$ 175.00	

Contributions from Individuals

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	
McBroom For City Council						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Hazel Carter 2506 William Allen Road Burlington, NC 27217			Retired			
			c. Employer's Name/Specific Field			
			Retirement		e. Election Sum to Date	
					\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		10/24/2015	\$ 25.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
John Brown 4667 Dickey Mill Road Burlington, NC 27215			Security Officer			
			c. Employer's Name/Specific Field			
			Elon 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	
<input checked="" type="checkbox"/>	1	Check		10/26/2015	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Dana Courtney 2521 Rogers Road Graham, NC 27253			Retired			
			c. Employer's Name/Specific Field			
			Educator		e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	Check		10/20/2015	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 175.00	
5. Total of ALL CRO-1210 Pages					\$ 850.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

Contributions from Individuals

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	
McBroom For City Council							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Mary Bozeman 823 Lakeside Avenue Burlington, NC 27217				Retired			
				c. Employer's Name/Specific Field			
				Retirement			
						e. Election Sum to Date	
						\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	1	Check		10/20/2015		\$ 25.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Kendal McBroom 3551 Forestdale Drive Burlington, NC 27215				Student			
				c. Employer's Name/Specific Field			
				Duke University			
						e. Election Sum to Date	
						\$ 650.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>			Printing	10/20/2015		\$ 650.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> 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	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
4. Total only this Page						\$ 675.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 850.00	



North Carolina
 State Board of Elections
 441 N Harrington Street
 Raleigh, NC 27603

Kim Westbrook Strach
 Executive Director

Mailing Address
 PO Box 27255
 Raleigh, NC 27611-7255
 (919) 733-7173

Certification of Inactive Status

This certification is used by Candidate, Party, PACs and Referendum Committees to declare their intent to be inactive, which is not raising or spending any money on behalf of the campaign

FILED BY:

Committee Name: McBroom for City Council
 Treasurer Name: Kendal L. McBroom
 Treasurer Address: 3551 Forestdale Drive
 (include city, state, & zip) Apt. ML
Burlington, NC 27215
 Treasurer Phone: 336-572-2322

I certify that the above named candidate/political committee intends to receive no contributions, nor make any expenditures, until the committee resumes activity.

I understand that if the above circumstances change, it will be necessary for the person responsible for filing financial disclosure reports to file an amended Statement of Organization and the Certification to Return to Active Status form (CRO-3300) within ten days.

02-1-16
 Date Signed

Kendal L. McBroom
 Signature

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.