Disclosure Ro					Yes No	
	eneral report and committee in to update information	information, must b	e signed and sul	bmitted along with	other detailed forms.	
1. Committee Info			· · · · · · · · · · · · · · · · · · ·			
a. Full Name	c. ID Number					
McBroom for City	Council					
b. Mailing Address (inc	clude City, State and Zip Code)	<u> </u>			d. Date Filed	
3551 Forestdale Dr		,				
Apt. ML		10-29-	-15 10:10	2(VI)	10/27/2015	
Burlington, NC 272	215				e. Phone Number	
					336-512-2322	
2. Report Year	3. Period Start Date (mm/	dd/yy) 4. Period (mm/dd/yy	l End Date	5. Treasurer F	·	
2015	09/22/2015	10.	/19/2015	Kendal LeRod	McBroom	
6. Type of Commit	tee (Check One)	9. Type of Repor	rt (check or	nly one type of rep	oort from one category)	
Candidate Camp	paign Party	Municipal	State/	County	Referendum	
PAC	Referendum	Organization	nal	Organizational	Organizational	
Independent Expenditure	Joint Fundraiser	Thirty-five d	lay	Quarterly	Pre-referendum	
Legal Expense I	^F und					
7. Type of Fund	(if applicable, check one)	Pre-primary		First	Final	
"Booster Fund"		Pre-election		Second	Supplemental Final	
Building Fund		Pre-runoff		Third	Annual	
		Semi-annual		Fourth	Special	
r		Mid Ye	ear	Semi-annual		
Other:		Year E	nd L	Mid Year	10. Special Report Name	
	- to the state of	Final		Year End		
8. Number of Fund	Iraisers this Report	Special Special		Final		
				Special		
11. Account Informa. Financial Institution			11. Account	Information stitution Full Name		
BANK OF AMER			a. Financiai ins	stitution run Name		
b. Purpose	c. Account Code	 	b. Purpose		c. Account Code	
FOR CAMPAIGN						
PURCHASES			_			
	d. Period Begin Balanc	e	_		d. Period Begin Balance	
	\$ 344.65				\$	
CERTIFICATION I certify that the Co		iance with all applic	cable provisions	of Article 22A, 2	2B, & 22D-22M of Chapter 163 of	
the NC General Star		ommingled with pro	ohibited or other	non-disclosed fur	nds. I further certify that this report	
Kendal Le	Rod McBroom		elds, WEB		10-27-2015	
FOR OFFICE USE	Printed Name of Signer		Signature of Appoin	nted Treasurer	Date	
Date Received:	1010-11-	Employee	:	<u>)</u> G	Delivery Method Normal Mail	
Date Postmarke	ostmarked: Employee				Registered Mail Hand Delivered	
Date Scanned:	10/29/15	Employee	: <u> </u>	16	Electronically Filed Signer has not received	
	red:	Employee			mandatory training	

custodian of books information, or account information.

Amendment

Detailed Summary

Use this form to summarize all disclosure reporting forms and to total monetary information. 1. Committee Full Name (and Fund if applicable) 3. ID Number 2. Type of Report McBroom For City Council Pre-Election Report Total this Total this **Start of Election Cycle:** January 1, 2012 Reporting Period **Election Cycle** Cash on Hand at Start \$ 1,566.39 400.71 IRRORMANS Marie La **Aggregated Contributions from Individuals** 100.00 \$ 100.00 (CRO-1205) \$ 2,235.99 **Contributions from Individuals** (CRO-1210) \$ 2,235.99 **Contributions from Political Party Committees** \$ 0.00 (CRO-1220) **Contributions from Other Political Committees** (CRO-1230) 0.00 \$ 9) Loan Proceeds \$ (CRO-1410) \$ 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) \$ \$ **TOTAL RECEIPTS** (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) 2.335.99 \$ 2,335.99 EXPENDITURIES 13) Disbursements 13a) Operating Expenditures \$ (CRO-1310) 480.40 480.40 \$ 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ 13c) Coordinated Party Expenditures (CRO-1310) \$ 14) Aggregated Non-Media Expenditures (CRO-1315) \$ Loan Repayments (CRO-1420) \$ \$ 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) 1,085.99 1,085.99 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) 1.566.39 1,566.39 ADDITIONALINEORMATION: 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) \$

48-Hour Notice Reports Sum

Contributions to be Refunded

27)

28)

Amendment

Yes

175.00

\$

(CRO-2200)

(CRO-1215)

\$

\$

Contributions from Individuals

			Amendment					
Pg	4	of	5_		Yes	\boxtimes	No	

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

1. Comm	ittee Full Name (and Fund if applical	ole)			2. ID Num	ber		
McBroon	n For City Council								
3, Contributor Information				Add 🔲 Rem	Property of the second second				
a. Full Name, Mailing Address & Phone			b. Job Title/Profession		d. Comment	S			
(include city, state, & zip)			Bank Teller						
Mrs. Shir	-								
1534 Rog				c. Employer's Name/Spe					
Graham,	NC 27253			Carter Bank and Tru	ust				
						e. Election S	um to Date		
						\$	50.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy	yy)	k. Amount		
	1	Check			09/30/20)15	\$	50.00	
							\$		
							\$		
3. Contri	butor Informatio	n		Add Rem	nove				
a. Full Nan	ne, Mailing Address &	k Phone		b. Job Title/Profession	ion d. Comme		nts		
(include	city, state, & zip)	·		Student					
Mrs. Pam									
	npton Arbor Circle			c. Employer's Name/Spe	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
Chesterfie	eld, Virginia 2363	2		Duke Divinity Scho	ool				
						e. Election Sum to Date			
		Parameter 1				\$	25.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy	yy)	k. Amount		
	1	Check			10/08/20)15	\$	25.00	
		NATIONAL VIOLENCE CONTRACTOR OF THE PROPERTY O					\$		
							\$		
3. Contri	butor Informatio	n		Add Rem	nove				
41.1918/11	ie, Mailing Address &	& Phone				d. Comment	d. Comments		
	city, state, & zip)			Therapist					
	mie Staton								
209 Wext				c. Employer's Name/Specific Field					
Burningto	n, NC 27215			Self-Employed		o Floation Sum to Date		· · · · · · · · · · · · · · · · · · ·	
					e. Election Sum to Date				
			·			\$	200.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy	уу)	k. Amount		
	1	Check			10/19/20	015	\$	200.00	
							\$		
							\$	·	
4. Total	only this Page	9				\$		275.00	
	of ALL CRO	-1210 Pages Detailed Summary Page C		celli Sancedori		\$		2, 235.99	
12 ms une	maior ue un une o 0] i	ocunca Summary ruge C	ACO+1100,						

		n Individuals		Pg	_5 of	5_	Amendment	No No	
		vidual contributions of and Fund if applica		or contributions und	er \$50 if form CR	O 1205 is no 2. ID Num			
	ncce Fun Name (m For City Counci	1	DIE)			2. ID Nuu	ider		
	ibutor Informatio		\boxtimes	Add 🔲 Ren	nove				
	ne, Mailing Address &			b. Job Title/Profession	HUVC	d. Comment	•		
	city, state, & zip)			Retired		u. comment			
	thy Yarbrough		· · · · · · · · · · · · · · · · · · ·	1					
	dhaven Drive			c. Employer's Name/Sp					
Burlingto	on, NC 27215			N.C. School Syster					
						e. Election Sum to Date			
						\$	100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Date (mm/dd/yy	yy)	k. Amount		
	1	Check			10/15/2	015	\$	100.00	
							\$		
							\$		
3. Contri	ibutor Informatic)n		Add 🔲 Rer	nove				
a. Full Nan	ne, Mailing Address &			b. Job Title/Profession		d. Comment	s	<u> </u>	
	city, state, & zip)			Dentist					
Dr. Rosly	•								
	dowood Drive on, NC 27215			c. Employer's Name/Specific Field Self-Employed					
Burningto	m, 100 27215					e. Election Sum to Date			
						\$	300.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Lind Description	j. Date (mm/dd/yy	уу)	k. Amount		
	1	Check		***************************************	10/18/20	015	\$	300.00	
							\$		
							\$		
3. Contri	ibutor Informatio	n 💮 📆		Add Rer	nove		•		
a. Full Nan	ne, Mailing Address &	& Phone		b. Job Title/Profession	d. Comment	s			
	city, state, & zip)			Student					
Kendal M									
3551 Forestdale Drive				c. Employer's Name/Sp Duke Divinity Scho					
Apt. ML Burlington, NC 27215			Duke Divinity School		e. Election S	um to Data			
Darmigto	m, 140 27213					\$	101.00		
f. Prior g. Account Code h. Form of Payment i. In-		i. In-K	Kind Description j. Date (mm/dd/y						
	1	Check			10/19/20		\$	101.00	
							\$		
							\$		

4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

2,235.99

501.00

\$

\$