

# 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.

Amendment

☐ Yes ☐ No

<b>1. Committee Information</b>			
a. Full Name <b>Brenda Mc Nair</b>		c. ID Number	
b. Mailing Address (include City, State and Zip Code) <b>6575 Barley Hill Ct. Fayetteville, NC 28314</b>		d. Date Filed <b>7/21/22</b>	
		e. Phone Number <b>910.286.7887</b>	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>	
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input checked="" type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
<b>7. Type of Fund (if applicable, check one)</b>		State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
<input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		<input type="checkbox"/> Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special	
<b>8. Number of Fundraisers this Report</b>		<b>10. Special Report Name</b>	
<b>11. Account Information</b>		<b>11. Account Information</b>	
a. Financial Institution Full Name		a. Financial Institution Full Name	
b. Purpose	c. Account Code	b. Purpose	c. Account Code
	d. Period Begin Balance		d. Period Begin Balance
	\$		\$
<b>CERTIFICATION</b> 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.			
<b>Brenda Mc Nair</b> Printed Name of Signer		<b>Brenda Mc Nair</b> Signature of Appointed Treasurer	
		<b>7-21-22</b> Date	
<b>FOR OFFICE USE ONLY</b>			
Date Received:	<b>7/21/22</b>	Employee:	<b>MM</b>
Date Postmarked:		Employee:	
Date Scanned:		Employee:	
Date Data Entered:		Employee:	
<b>Delivery Method</b> <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training			
<b>Please Note:</b> 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-B) 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	
Cmtte to Elect Brenda McNeir					
Start of Election Cycle: January 1, _____		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$		\$	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$	
6) Contributions from Individuals (CRO-1210)		\$		\$ 1,540 <sup>00</sup>	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$		\$ 1,500 <sup>00</sup>	
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)		\$		\$	
<b>EXPENDITURES</b>					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$		\$	
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)		\$		\$	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$		\$	
<b>ADDITIONAL INFORMATION</b>					
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)		\$		\$	

# Contributions from Individuals

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

Pg \_\_\_\_ of \_\_\_\_ Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
Deborah Dantzler							
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	
Deborah Dantzler 421 Old Farm Road Fayetteville, NC 28314							
				c. Employer's Name/Specific Field		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 type="checkbox"/>		Check		5/8/22	\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
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	
Shannon R. Beapna 2512 Cumberland Rd. Fayetteville N.C. 28306							
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>		Check		5/19/22	\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
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	
Janice M. Worthy 6320 Lynette Cir Fayetteville N.C. 28314							
				c. Employer's Name/Specific Field		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 type="checkbox"/>				5:20, 2022	\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 700.00	
5. Total of ALL CRO-1210 Pages						\$	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						\$	

CRO-1210

NC State Board of Elections

April 2007

# Contributions from Individuals

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

Page \_\_\_\_ of \_\_\_\_ Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable) <b>Committee to Elect Brenda McNair</b>						2. ID Number	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>Yong Yu P.O. Box 35475 Fayetteville, NC 28303</b>				b. Job Title/Profession		d. Comments	
				c. Employer's Name/Specific Field			
				e. Election Sum to Date		\$ <b>200.00</b>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>				<b>5/21/22</b>	\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$ <b>200.00</b>		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>Dorothy McNair 911 Hope Mills Rd Fayetteville, NC 28304</b>				b. Job Title/Profession		d. Comments	
				c. Employer's Name/Specific Field			
				e. Election Sum to Date		\$ <b>120.00</b>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>				<b>06/11/22</b>	\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$ <b>120.00</b>		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <b>Shamale McNair 6574 Barley Hill Ct. Fayetteville NC 28314</b>				b. Job Title/Profession		d. Comments	
				c. Employer's Name/Specific Field			
				e. Election Sum to Date		\$ <b>200.00</b>	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>				<b>06/13</b>	\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$ <b>200</b>		
4. Total only this Page						\$ <b>840.00</b>	
5. Total of ALL CRO-1210 Pages						\$	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						\$	

# Loan Proceeds

Pg \_\_\_\_ of \_\_\_\_ Amendment ☐ Yes ☐ No

Use this form to report proceeds from a loan and loan endorser's information  
A loan proceeds statement must accompany each loan that is from an individual

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Cmta to Elect Brenda McNair					
3. Lender 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	
Brenda McNair 6575 Barker Hill Ct. Fayetteville 28314					
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)	
				5-10-22	
				f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment	k. Amount	
%			Cash	\$ 500.00	
l. Full Name of Lending Institution				m. Loan Number	
4. Endorsers/Makers (The people who guarantee the loan.)					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
		%		\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
		%		\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
		%		\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
		%		\$	
5. Total of ALL CRO-1410 Pages				\$	
(This line must be on line 9 of Detailed Summary Page CRO-1100)					

# Loan Proceeds

Pg \_\_\_\_ of \_\_\_\_

Amendment

☐ Yes ☐ No

Use this form to report proceeds from a loan and loan endorser's information

A loan proceeds statement must accompany each loan that is from an individual

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Cmte to Elect Brenda McNair			
3. Lender 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
Brenda McNair 6575 Burley Hill Ct Fayetteville NC 28314			
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
			6-9-22
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment
%			
			k. Amount
			\$ 500.00
l. Full Name of Lending Institution			m. Loan Number
4. Endorsers/Makers (The people who guarantee the loan.)			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field
		d. Percentage	e. Amount
		%	\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field
		d. Percentage	e. Amount
		%	\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field
		d. Percentage	e. Amount
		%	\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field
		d. Percentage	e. Amount
		%	\$
5. Total of ALL CRO-1410 Pages			\$
(This line must be on line 9 of Detailed Summary Page CRO-1100)			



# Loan Proceeds

Pg \_\_\_\_ of \_\_\_\_

Amendment

☐ Yes

☐ No

Use this form to report proceeds from a loan and loan endorser's information  
A loan proceeds statement must accompany each loan that is from an individual

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Cmtg to Elst Brenda McNair			
3. Lender 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
Brenda McNair 6574 Barley Hill Ct Fay NC 28314			
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
			6.22.22
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment
%			
			k. Amount
			\$ 500
l. Full Name of Lending Institution			m. Loan Number
4. Endorsers/Makers (The people who guarantee the loan.)			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field
		d. Percentage	e. Amount
		%	\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field
		d. Percentage	e. Amount
		%	\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field
		d. Percentage	e. Amount
		%	\$
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	c. Employer's Name/Specific Field
		d. Percentage	e. Amount
		%	\$
5. Total of ALL CRO-1410 Pages			\$
(This line must be on line 9 of Detailed Summary Page CRO-1100)			



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

## Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

- Name of committee to receive loan: Committee to Elect Brenda McNair
- Person or committee to make loan: Brenda McNair
- Date of loan to committee: June 9, 2022
- Name of lending institution and account number (source):  
N/A
- Amount of loan: \$500.00
- Description (if in-kind loan): \_\_\_\_\_
- Names of all parties responsible for payment of loan (guarantors):  
Committee to Elect Brenda McNair
- Period of loan: \$500.00
- Rate of interest of loan: None
- Security pledged for loan: None

I, Brenda McNair, acknowledge that all of the information  
(Person lending money to committee)  
provided is complete, true, and accurate. I further understand I may not forgive a loan  
that has an outstanding balance to any source.

Brenda McNair  
Signature of Lender

June 9, 2022  
Date Signed

Way A. Williams  
Signature of Treasurer of Committee

6/9/22  
Date Signed





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

## Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

- Name of committee to receive loan: Committee to Elect Brenda McNair
- Person or committee to make loan: Brenda McNair
- Date of loan to committee: May 10, 2022
- Name of lending institution and account number (source):  
N/A
- Amount of loan: \$ 500<sup>00</sup>
- Description (if in-kind loan): \_\_\_\_\_
- Names of all parties responsible for payment of loan (guarantors):  
Committee to Elect Brenda McNair
- Period of loan: Indefinite
- Rate of interest of loan: None
- Security pledged for loan: None

I, Brenda McNair, acknowledge that all of the information  
(Person lending money to committee)  
provided is complete, true, and accurate. I further understand I may not forgive a loan  
that has an outstanding balance to any source.

Brenda McNair  
Signature of Lender

May 10, 2022  
Date Signed

Troy A. Williams  
Signature of Treasurer of Committee

5/10/22  
Date Signed



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

## Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

• Name of committee to receive loan:	<u>Comte to Elect Brenda McNair</u>
• Person or committee to make loan:	<u>Brenda McNair</u>
• Date of loan to committee:	<u>6-22-22</u>
• Name of lending institution and account number (source):	<u>N/A</u>
• Amount of loan:	<u>\$500.00</u>
• Description (if in-kind loan):	
• Names of all parties responsible for payment of loan (guarantors):	
• Period of loan:	<u>Indefinite</u>
• Rate of interest of loan:	<u>NONE</u>
• Security pledged for loan:	

I, Brenda McNair, acknowledge that all of the information  
(Person lending money to committee)  
provided is complete, true, and accurate. I further understand I may not forgive a loan  
that has an outstanding balance to any source.

Brenda McNair  
Signature of Lender

6-22-22  
Date Signed

Tracy A. Wilkins  
Signature of Treasurer of Committee

6-22-22  
Date Signed