

**Disclosure Report Cover**

APR 13 2011

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.

a. Full Name <b>Campaign to Elect Gail M. Strickland</b>		c. ID Number <b>4JG19F</b>
b. Mailing Address (include City, State and Zip Code) <b>165 Bryan Dr Forest City, NC 28043</b>		d. Date Filed <b>1-10-11</b>
		e. Phone Number <b>828-223-2879</b>

2011	1-1-2011	4-6-11	Jane A. McBrauer
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<input type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other: <b>- 0 -</b>		<input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		<b>Municipal</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input 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>State/County</b> <input type="checkbox"/> Organizational 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 checked="" type="checkbox"/> Final <input type="checkbox"/> Special	<b>Referendum</b> <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>Final</b>
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a. Financial Institution Full Name <b>RBC Bank</b>		a. Financial Institution Full Name	
b. Purpose <b>Campaign</b>	c. Account Code <b>1</b>	b. Purpose	c. Account Code
	d. Period Begin Balance <b>\$ 47.21</b>		d. Period Begin Balance <b>\$</b>

**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.

**Jane A. McBrauer** *Jane A. McBrauer* **4-6-11**  
 Printed Name of Signer Signature of Appointed Treasurer Date

**FOR OFFICE USE ONLY**

Date Received: **4-13-11** Employee: *[Signature]*

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

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
Campaign to Elect Gail M. Strickland	Final	4J619F
Start of Election Cycle: January 1, 2011	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start	\$ 47.21	\$ 47.21
<b>RECEIPTS</b>		
5) Aggregated Contributions from Individuals (CRO-1205)	\$ - 0 -	\$ - 0 -
6) Contributions from Individuals (CRO-1210)	\$ - 0 -	\$ - 0 -
7) Contributions from Political Party Committees (CRO-1220)	\$ - 0 -	\$ - 0 -
8) Contributions from Other Political Committees (CRO-1230)	\$ - 0 -	\$ - 0 -
9) Loan Proceeds (CRO-1410)	\$ - 0 -	\$ - 0 -
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$ - 0 -	\$ - 0 -
11) Other Receipt Sources		
11a) Interest on Bank Accounts (CRO-1250)	\$ .01	\$ .01
11b) Contributions from Not-For-Profit Organizations (CRO-1250)	\$ - 0 -	\$ - 0 -
11c) Outside Sources of Income (CRO-1250)	\$ - 0 -	\$ - 0 -
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$ - 0 -	\$ - 0 -
11e) Exempt Purchase Price Sales (CRO-1265)	\$ - 0 -	\$ - 0 -
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 47.22	\$ 47.22
<b>EXPENDITURES</b>		
13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ - 0 -	\$ - 0 -
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ - 0 -	\$ - 0 -
13c) Coordinated Party Expenditures (CRO-1310)	\$ - 0 -	\$ - 0 -
14) Aggregated Non-Media Expenditures (CRO-1315)	\$ - 0 -	\$ - 0 -
15) Loan Repayments (CRO-1420)	\$ 47.22	\$ 47.22
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$ - 0 -	\$ - 0 -
17) In-Kind Contributions (CRO-1510)	\$ - 0 -	\$ - 0 -
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 47.22	\$ 47.22
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ - 0 - ✓	\$ - 0 - ✓
<b>ADDITIONAL INFORMATION</b>		
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$ - 0 -	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ - 0 -	
22) Debts and Obligations owed by the Committee (CRO-1610)	\$ - 0 -	
23) Debts and Obligations owed to the Committee (CRO-1620)	\$ - 0 -	
24) Account Transfers Within the Committee (CRO-1720)	\$ - 0 -	
25) Administrative Support (CRO-1710)	\$ - 0 -	\$ - 0 -
26) Forgiven Loans (CRO-1440)	\$ 602.78	\$ 602.78
27) 48-Hour Notice Reports Sum (CRO-2220)	\$ - 0 -	\$ - 0 -
28) Contributions to be Refunded (CRO-1215)	\$ - 0 -	\$ - 0 -

89.00  
 14,086.63  
 1500.00  
 2104.02  
 14  
 17869.79  
 4431.25  
 1397.22  
 4970.60  
 7070.72  
 17869.79

**Other Receipt Sources**

Amendment  
 Yes  No

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

Campaign to Elect Gail M Strickland						45619F	
<input checked="" type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input type="checkbox"/> Outside Sources of Income							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #		d. Comments		
RBC Bank 275 N. main St Rutherfordton, NC 28139			828-287-6440				
			c. Outside Source Explanation		e. Election Sum to Date		
			interest earned		\$ .01		
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yyyy)	j. Amount		
1	Credit			1-14-11	\$ .01		
					\$		
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #		d. Comments		
			c. Outside Source Explanation		e. Election Sum to Date		
					\$		
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yyyy)	j. Amount		
					\$		
					\$		
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #		d. Comments		
			c. Outside Source Explanation		e. Election Sum to Date		
					\$		
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yyyy)	j. Amount		
					\$		
					\$		
Total (only this row)					\$ .01		
Total (all rows)					\$ .01		

# Loan Repayments

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Use this form to report payments on an existing loan.

Campaign to Elect Gail M. Strickland				4JG19F
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) Douglas Strickland 1373 Old US 74 Hwy Ellenboro, NC 28048 828-245-2156				<b>b. Comments</b>  
				<b>c. Original Loan Date</b> 10-15-2010
				<b>d. Original Loan Amount</b> \$ 2,000.00
<b>e. Remaining Loan Balance</b>	<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Date (mm/dd/yyyy)</b>	<b>i. Repayment Amount</b>
\$ 650.00		CHECK	4-6-11	\$ 47.22
\$				\$
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Comments</b>
				<b>c. Original Loan Date</b>
				<b>d. Original Loan Amount</b> \$
<b>e. Remaining Loan Balance</b>	<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Date (mm/dd/yyyy)</b>	<b>i. Repayment Amount</b>
\$				\$
\$				\$
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Comments</b>
				<b>c. Original Loan Date</b>
				<b>d. Original Loan Amount</b> \$
<b>e. Remaining Loan Balance</b>	<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Date (mm/dd/yyyy)</b>	<b>i. Repayment Amount</b>
\$				\$
\$				\$
				\$ 47.22
				\$ 47.22

# Forgiven Loans

Amendment  
 Yes  No

Use this form to report any loan which has been forgiven by the lender.  
 A Forgiven loan statement (CRO-6200) must accompany each forgiven loan.

Campaign to Elect Gail M. Strickland		4JG19F
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Comments	
Douglas Strickland 1373 Old US 74 Hwy Ellenboro, NC 28040  828-245-2156	c. Original Loan Date (mm/dd/yyyy) 10-15-10	
	f. Election Sum to Date \$ 2,000.00	
	d. Original Loan Amount \$ 2,000.00	g. Date (mm/dd/yyyy) 4-6-11
	e. Remaining Loan Balance \$ - 0 -	h. Forgiven Amount \$ 602.78
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Comments	
	c. Original Loan Date (mm/dd/yyyy)	
	f. Election Sum to Date \$	
	d. Original Loan Amount \$	g. Date (mm/dd/yyyy)
	e. Remaining Loan Balance \$	h. Forgiven Amount \$
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Comments	
	c. Original Loan Date (mm/dd/yyyy)	
	f. Election Sum to Date \$	
	d. Original Loan Amount \$	g. Date (mm/dd/yyyy)
	e. Remaining Loan Balance \$	h. Forgiven Amount \$
	\$ 602.78	
	\$ 602.78	
The lender information should contain the same information as supplied on the original loan proceed statement.		



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

APR 13 2011

Kimberly Westbrook-Strach  
 Deputy Director – Campaign Reporting

Mailing Address  
 PO Box 27255  
 Raleigh, NC 27611-7255  
 (919) 733-7173  
 Fax: (919) 715-8047

**Certification to Close Committee**

This Certification is used to express the intent to close the committee after all funds have been properly disbursed.

**FILED BY:**

Committee Name: Campaign to Elect Gail McBrayer Strickland

Treasurer Name: Jane A. McBrayer

Treasurer Address: 165 Bryan Dr

(include city, state, & zip) Forest City, NC 28043

Treasurer Phone: 828-223-2879

I certify that the above mentioned Committee intends to close and cease existence. Upon signing this certification, I declare that all funds have been distributed and reported (if required). In addition, no contributions will be accepted or disbursements made after the "Final Report" is filed or this form is signed. If the Committee at any future time intends to accept or spend funds in support or opposition of any candidate or ballot issue, a new political committee must be formed and registered with the Board of Elections before such activities may commence.

Committees that have filed under the \$1,000 threshold will only be required to sign this Certification. No "Final Report" will be required for committees meeting this criterion. Any Committee that did not file under the \$1,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

4-6-11  
 Date Signed

Jane A. McBrayer  
 Signature

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