

Disclosure Report Cover

Amendment
 Yes No

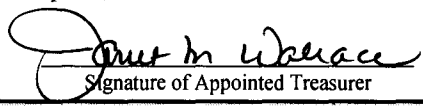
Use this form for general report and committee information, must be signed and submitted along with other detailed forms
 Do not use this form to update information

1. Committee Information	
a. Full Name COMMITTEE TO ELECT JANET M. WALLACE TO CITY COUNCIL	c. ID Number 72YBV6
b. Mailing Address (include City, State and Zip Code) 4501 FOXCROFT ROAD, GREENSBORO, NC 27410	d. Date Filed 09/04/2007
	e. Phone Number 336-854-0432

2. Report Year 2007	3. Period Start Date (mm/dd/yy) 07/01/2007	4. Period End Date (mm/dd/yy) 08/28/2007	5. Treasurer Full Name Janet M. Wallace
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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
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum		<input checked="" type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third Plus
<input type="checkbox"/> NC Political Party Financing Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year
<input type="checkbox"/> Other:		<input type="checkbox"/> Final	<input type="checkbox"/> Year End
8. Number of Fundraisers this Report		<input type="checkbox"/> Special	<input type="checkbox"/> Special
			10. Special Report Name

11. Account Information		11. Account Information	
a. Financial Institution Full Name FIRST HORIZON		a. Financial Institution Full Name FIRST CITIZENS BANK	
b. Purpose CAMPAIGN CHECKING ACCOUNT	c. Account Code 1	b. Purpose CAMPAIGN CHECKING ACCOUNT	c. Account Code 2
	d. Period Begin Balance \$ 11.84		d. Period Begin Balance \$ 0.00

CERTIFICATION
 I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct and that I have been trained by the NC State Board of Elections according to Article 163.278.9(k).
 Janet M. Wallace
 Printed Name of Signer  Signature of Appointed Treasurer 09/04/2007 Date

FOR OFFICE USE ONLY

Date Received:	RECEIVED	Employee:	_____	Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training
Date Postmarked:	SEP 04 2007	Employee:	_____	
Date Scanned:	GUILFORD COUNTY BOARD OF ELECTIONS	Employee:	_____	
Date Data Entered:	_____	Employee:	_____	

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		2. ID Number	
COMMITTEE TO ELECT JANET M. WALLACE TO CITY COUNCIL		35 DAY		72YBV6	
Start of Election Cycle: January 1, 2007		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 11.84		\$ 11.84	
RECEIPTS					
5) Aggregated Contributions from Individuals		<i>(CRO-1205)</i>		\$	
6) Contributions from Individuals		<i>(CRO-1210)</i>		\$ 100.00	
7) Contributions from Political Party Committees		<i>(CRO-1220)</i>		\$	
8) Contributions from Other Political Committees		<i>(CRO-1230)</i>		\$	
9) Loan Proceeds		<i>(CRO-1410)</i>		\$ 100.00	
10) Refunds/Reimbursements To the Committee		<i>(CRO-1240)</i>		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts		<i>(CRO-1250)</i>		\$	
11b) Contributions from Not-for-Profit Organizations		<i>(CRO-1250)</i>		\$	
11c) Outside Sources of Income		<i>(CRO-1250)</i>		\$	
12) TOTAL RECEIPTS <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, and 11c)</i>		\$ 200.00		\$ 200.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures		<i>(CRO-1310)</i>		\$ 53.00	
13b) Contributions to Candidates/Political Committees		<i>(CRO-1310)</i>		\$	
13c) Coordinated Party Expenditures		<i>(CRO-1310)</i>		\$	
14) Loan Repayments		<i>(CRO-1420)</i>		\$	
15) Refunds/Reimbursements From the Committee		<i>(CRO-1320)</i>		\$	
16) In-Kind Contributions		<i>(CRO-1510)</i>		\$	
17) TOTAL EXPENDITURES <i>(Add lines 13a, 13b, 13c, 14, 15, and 16)</i>		\$		\$	
18) Cash on Hand at End <i>(Add lines 4 and 12 together, then subtract line 17)</i>		\$ 158.84		\$ 158.84	
ADDITIONAL INFORMATION					
19) Non-Monetary Gifts Given to Other Committees		<i>(CRO-1330)</i>		\$	
20) Outstanding Loans (incl. ones from other campaigns)		<i>(CRO-1430)</i>		\$ 1820.00	
21) Debts and Obligations owed By the Committee		<i>(CRO-1610)</i>		\$	
22) Debts and Obligations owed To the Committee		<i>(CRO-1620)</i>		\$	
23) Account Transfers Within the Committee		<i>(CRO-1720)</i>		\$	
24) Administrative Support		<i>(CRO-1710)</i>		\$	
25) Forgiven Loans		<i>(CRO-1440)</i>		\$	
26) 48-Hour Notice Reports Sum		\$		\$	

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	
COMMITTEE TO ELECT JANET M. WALLACE TO CITY COUNCIL					72YBV6	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Susan H. O'Hale 2402 Goldfield Court Greensboro, NC 27455			b. Job Title/Profession Mom/Attorney		d. Comments	
			c. Employer's Name/Specific Field None			
					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"/>	2	Check		08/24/2007	\$ 100.00	
<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	
			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"/>					\$	
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	
			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					\$ 100.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 100.00	

Loan Proceeds

Pg 1 of 1

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	
COMMITTEE TO ELECT JANET M. WALLACE TO CITY COUNCI		72YBV6	
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
Janet M. Wallace 4501 Foxcroft Road Greensboro, NC 27410		Paralegal	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		John W. Kirkman, Jr.	07/05/2007
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment
0 %	None	1	Check
			k. Amount
			\$ 100.00
l. Full Name of Lending Institution		m. Loan Number	
4. Endorsers/Makers <i>(The people who guarantee the loan.)</i>			
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			\$ 100.00
<i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i>			

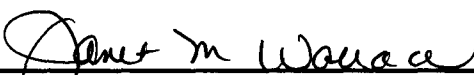
Loan Proceeds Statement

The individual making a loan to the committee must provide the following information. Failure to provide all of the information requested could be a violation of campaign reporting disclosure laws.

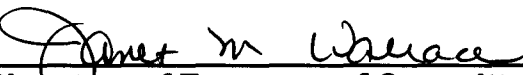
Name of committee to receive loan:	COMMITTEE TO ELECT JANET M. WALLACE TO CITY COUNCI
Person lending money to committee (Lender):	Janet M. Wallace
Date of loan to committee:	07/05/2007
Name of lending institution and account number (source):	STATE EMPLOYEES CREDIT UNION
Amount of loan:	\$100.00
Names of all parties responsible for payment of loan (guarantor):	COMMITTEE TO ELECT JANET M. WALLACE TO CITY COUNCI
Period of loan:	OPEN
Rate of interest of loan:	NONE
Security pledged for loan:	NONE

I, Janet M. Wallace acknowledge that all of the
(Person lending money to committee)

Information provided is complete, true, and accurate. I further understand I may not forgive a loan that has an outstanding balance to any source.



Signature of Lender



Signature of Treasurer of Committee

This form must be submitted with the disclosure report for which the loan is initially disclosed.

Disbursements

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)					2. ID Number
COMMITTEE TO ELECT JANET M. WALLACE TO CITY COUNCI					72YBV6
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments
GUILFORD CO BOARD OF ELECTIONS OLD GUILFORD COUNTY COURTHOUSE MARKET STREET GREENSBORO NC 27401					
			c. Level Registered (Specify)		e. Election Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 53.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	CHECK	H	07/06/2007	\$53.00	FILING FEE VOTER LISTING
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		e. Election Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		e. Election Sum to Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
5. Total only this Page					\$ 53.00
6. Total of ALL CRO-1310 Pages					\$ 53.00
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>					
<i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>					
<i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
				D - To Another Candidate	
				H* - Holding Public Office Expenses	
				O* - Other	
* Codes require detailed explanation in required remarks field (k)					

Outstanding Loans

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full

1. Committee Full Name (and Fund if applicable)			2. ID Number
COMMITTEE TO ELECT JANET M. WALLACE TO CITY COUNCI			72YBV6
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
Janet M. Wallace 4501 Foxcroft Road Greensboro, NC 27410 336-854-0432		PARALEGAL	e. Start Date (mm/dd/yyyy)
		c. Employer's Name/Specific Field	04/20/2005
		John W. Kirkman, Jr.	f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
0 %	None	\$ 2120.00	\$ 1820.00
k. Full Name of Lending Institution			l. Loan Number
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
			e. Start Date (mm/dd/yyyy)
		c. Employer's Name/Specific Field	
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$	\$
k. Full Name of Lending Institution			l. Loan Number
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
			e. Start Date (mm/dd/yyyy)
		c. Employer's Name/Specific Field	
			f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		\$	\$
k. Full Name of Lending Institution			l. Loan Number
4. Total only this Page			\$ 1820.00
5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>			\$ 1820.00

Additional Committee Funds

Amendment
 Yes No

Use this form to notify the Election Board that the Candidate or Party Committee has set up an additional fund

1. Committee Full Name	2. Set-up Date	3. ID Number
COMMITTEE TO ELECT JANET M. WALLACE TO CITY COUNCI	08/24/2007	72YBV6

4. Fund Information			
a. Name of Fund		b. ID Number	
JANET WALLACE FOR CITY COUNCIL		72YBV6	
c. Type		e. Account Information (incl. CRO-3500)	
<input type="checkbox"/> "Booster" or "Support" Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> NC Political Party Financing Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input checked="" type="checkbox"/> Other: CHECKING		<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	
		i. Financial Institution Full Name	
		FIRST CITIZENS BANK	
		ii. Purpose	
		CAMPAIGN CHECKING ACCOUNT	
d. Fund Manager Full Name		iii. Account Code	iv. Type
JANET MARIE WALLACE		2	CHECKING

4. Fund Information			
a. Name of Fund		b. ID Number	
c. Type		e. Account Information (incl. CRO-3500)	
<input type="checkbox"/> "Booster" or "Support" Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> NC Political Party Financing Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> Other:		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
		i. Financial Institution Full Name	
		ii. Purpose	
d. Fund Manager Full Name		iii. Account Code	iv. Type

4. Fund Information			
a. Name of Fund		b. ID Number	
c. Type		e. Account Information (incl. CRO-3500)	
<input type="checkbox"/> "Booster" or "Support" Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> NC Political Party Financing Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> Other:		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
		i. Financial Institution Full Name	
		ii. Purpose	
d. Fund Manager Full Name		iii. Account Code	iv. Type

CERTIFICATION

I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct.

Janet M. Wallace
 Printed Name of Signer


 Signature of Appointed Treasurer

09/04/2007
 Date