

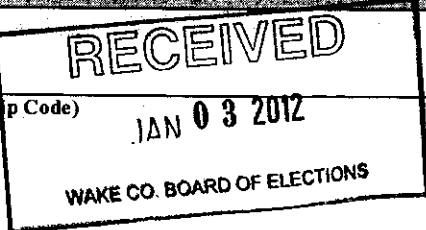
Disclosure Report Cover

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 FRIENDS OF RACQUEL WILLIAMS		c. ID Number	
b. Mailing Address (include City, State and Zip Code) PO BOX 25713 RALEIGH, NC 27611-5713		d. Date Filed 09/29/2011	
		e. Phone Number (919) 227-9690	
2. Report Year 2011	3. Period Start Date (mm/dd/yy) 08/31/2011	4. Period End Date (mm/dd/yy) 09/26/2011	5. Treasurer Full Name ABC MANAGEMENT INC
6. Type of Committee (Check One): <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		7. Type of Report (check only one type of report from one category) 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	
7. Type of Fund (if applicable, check one): <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:		8. Type of Report (check only one type of report from one category) 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	
8. Number of Fundraisers this Report 0		9. Special Report Name	
10. Account Information		11. Account Information	
a. Financial Institution Full Name MECHANICS AND FARMERS BANK		a. Financial Institution Full Name PAYPAL INC	
b. Purpose ACCOUNT FOR CAMPAIGN RECEIPTS & EXPENDITURES	c. Account Code 949	b. Purpose ELECTRONIC CONTRIBUTIONS	c. Account Code 999
	d. Period Begin Balance \$		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			
_____ Printed Name of Signer		_____ Signature of Appointed Treasurer	01/03/2012 Date
FOR OFFICE USE ONLY			
Date Received:	1-3-12	Employee:	JUM
Date Postmarked:	_____	Employee:	_____
Date Scanned:	_____	Employee:	_____
Date Data Entered:	_____	Employee:	_____
			Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input checked="" type="checkbox"/> Electronically Filed
			<input type="checkbox"/> 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) FRIENDS OF RACQUEL WILLIAMS		2. Type of Report 2011 Pre-Election		3. ID Number	
Start of Election Cycle: January 1, 2011			Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start			\$ 19.77		\$ 0.00
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 174.00		\$ 789.00	
6) Contributions from Individuals (CRO-1210)		\$ 709.00		\$ 5,462.36	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00		\$ 0.00	
9) Loan Proceeds (CRO-1410)		\$ 0.00		\$ 0.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 1.95		\$ 3.90	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00		\$ 0.00	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00		\$ 0.00	
11c) Outside Sources of Income (CRO-1250)		\$ 0.00		\$ 0.00	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00		\$ 0.00	
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00		\$ 0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)			\$ 884.95		\$ 6,255.26
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 1,147.02		\$ 5,890.60	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00		\$ 0.00	
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00		\$ 0.00	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 166.36		\$ 683.96	
15) Loan Repayments (CRO-1420)		\$ 0.00		\$ 0.00	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00		\$ 0.00	
17) In-Kind Contributions (CRO-1510)		\$ 0.00		\$ 89.36	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)			\$ 1,313.38		\$ 6,663.92
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)			\$ (408.66)		\$ (408.66)
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0.00			
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 0.00			
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0.00			
24) Account Transfers Within the Committee (CRO-1720)		\$ 620.00			
25) Administrative Support (CRO-1710)		\$ 0.00		\$ 0.00	
26) Forgiven Loans (CRO-1440)		\$ 0.00		\$ 0.00	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0.00		\$ 0.00	
28) Contributions to be Refunded (CRO-1215)		\$ 0.00		\$ 0.00	

Aggregated Contributions from Individuals Page 1 of 1

Amendment
 Yes No

Optional form used to report NC Contributions From Individuals of \$50 or less

Committee/Candidate Name (Addition or Deletion)		Committee/Candidate Number
FRIENDS OF RACQUEL WILLIAMS		

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove	999	Credit Card		09/08/2011	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Cash		09/20/2011	\$ 25.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Cash		08/31/2011	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Cash		08/31/2011	\$ 5.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Cash		08/31/2011	\$ 17.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Cash		08/31/2011	\$ 3.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Cash		08/31/2011	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Cash		08/31/2011	\$ 4.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Cash		09/19/2011	\$ 5.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Cash		08/31/2011	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Cash		09/20/2011	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Cash		09/20/2011	\$ 10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Cash		08/31/2011	\$ 5.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Cash		08/31/2011	\$ 20.00

4. Total only this Page \$ 174.00

5. Total of ALL CRO-1205 Pages \$ 174.00
(This line must be on line 5 of Detailed Summary Page CRO-1100)

Contributions from Individuals

Amendment
 Yes No

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

Contributor Information						ID Number
FRIENDS OF RACQUEL WILLIAMS						
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) FREDERICK AIKENS 12216 KAYSMOUNT COURT RALEIGH, NC 27614			b. Job Title/Profession RETIRED		d. Comments	
			c. Employer's Name/Specific Field RETIRED		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"/>	999	Credit Card		09/20/2011	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) WENDY GRIFFIN 3529 FUTURA LANE RALEIGH, NC 27610 (919) 449-1365			b. Job Title/Profession COUNSELOR		d. Comments	
			c. Employer's Name/Specific Field HOLLY HILL HOSPITAL LLC		e. Election Sum to Date \$ 125.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input checked="" type="checkbox"/>	949	Cash		08/01/2011	\$ 20.00	
<input checked="" type="checkbox"/>	999	Credit Card		08/27/2011	\$ 5.00	
<input type="checkbox"/>	949	Check		09/18/2011	\$ 100.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) VALERIE JORDAN 600 OLEANDER ROAD RALEIGH, NC 27603			b. Job Title/Profession SALES		d. Comments	
			c. Employer's Name/Specific Field SIEMENS HEALTHCARE		e. Election Sum to Date \$ 215.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	949	Check		09/18/2011	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total on this Page					\$ 300.00	
5. Total of All CRO-1210 Pages					\$ 709.00	
<i>(This line must be the sum of Detailed Summary Page CRO-1205)</i>						

Contributions from Individuals

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

Committee Full Name (and Fund Name, if applicable)						2. ID Number
FRIENDS OF RACQUEL WILLIAMS						
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	
WANDA MCCARGO 3509 CHERRYBARK LANE RALEIGH, NC 27610			CHILD CARE			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			WAND LITTLE HANDS		\$ 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"/>	949	Check		09/18/2011	\$ 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	
RONALD PENNY 2021 FOX DEN CLAYTON, NC 27527-9180			PROFESSOR			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			NORTH CAROLINA CENTRAL UNIVERSITY		\$ 99.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	949	Check		09/23/2011	\$ 99.00	
<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	
WILLIAM E SIMMONS 9612 OAKLEY ROAD ZEBULON, NC 27597			PASTOR			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			TRINITY FAITH TABERNACLE		\$ 60.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	949	Check		09/26/2011	\$ 60.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 259.00	
5. Total of ALL CRO-1210 Pages					\$ 709.00	
<i>(This line must be on the final Detailed Summary Page CRO-1210)</i>						

Contributions from Individuals

Amendment
 Yes No

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

FRIENDS OF RACQUEL WILLIAMS						CD Number
<input type="checkbox"/> Individual <input type="checkbox"/> Retiree						
a. Full Name, Mailing Address & Phone (include city, state, & zip) JACK SMITH PO BOX 491 WENDELL, NC 27591			b. Job Title/Profession RETIRED		d. Comments	
			c. Employer's Name/Specific Field RETIRED			
						e. Election Sum to Date \$ 150.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	949	Check		09/07/2011	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total Contributions						\$ 150.00
5. Total of All CRO 1210s						\$ 709.00

Refunds/Reimbursements To the Committee

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

Use this form to report refunds received by the committee or reimbursements for a previous expenditure.

1. Committee Name (and Fund if applicable)		2. ID Number	
FRIENDS OF RACQUEL WILLIAMS			
3. Committee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		d. Type of Committee	g. Comments
PAYPAL INC 2211 North First Street SAN JOSE, CA 95131 (888) 221-1161		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Party	
		e. Level Registered (Specify)	h. Original Expenditure Date
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:	07/26/2011
			i. Original Expenditure Amt
			\$ 3.20
b. Job Title/Profession	c. Employer's Name/Specific Field	f. Purpose	j. Election Sum to Date
CREDIT CARD MERCHANT SERVICES	PAYPAL INC	CHARGES REFUND FROM PAYPAL FEES CHARGED	\$ 25.49
k. Account Code	l. Form of Payment	m. In-Kind Description	n. Date (mm/dd/yyyy)
999	Electric Funds Tran		09/01/2011
			o. Amount
			\$ 1.95
4. Total Only This Page			\$ 1.95
5. Total of All CRO-1240 Pages <i>(This line must be filed with the original Statement of Expenditures)</i>			\$ 1.95

Disbursements

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

1. Committee Name (Number and Fund, if applicable)						2. ID Number
FRIENDS OF RACQUEL WILLIAMS						
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 (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
BENTON CARD COMPANY 105 SOUTH WALL STREET BENSON, NC 27504-1327 (919) 894-5656						
			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:		\$ 428.07	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
949	Debit Card	B	09/23/2011	\$ 428.07	CAMPAIGN MATERIALS	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
CLUBFLYERS.COM CLUBFLYERS.COM 2300 NW 7TH AVENUE MIAMI, FL 33127 (305) 591-7600						
			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:		\$ 868.11	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
949	Debit Card	B	09/13/2011	\$ 351.79	CAMPAIGN SIGNAGE	
949	Debit Card	B	09/19/2011	\$ 342.08	CAMPAIGN FLYERS & SIGNAGE	
5. Total only this Page						\$ 1,147.02
6. Total of ALL CRO-1310 Pages						\$ 1,147.02
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>						
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>						
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						
7. Purpose Codes <i>(List detailed expenditure code in (k) above)</i>						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund
O* Other						
* Codes require detailed explanation in required remarks field (k)						

Aggregated Non-Media Expenditures

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

Optional form used to report NC Non-Media Expenditures of \$50 or less.

FRIENDS OF RACQUEL WILLIAMS															
* Expenditure Information															
ADD/REMOVE	ACCOUNT NUMBER	TYPE OF PAYMENT	ACCOUNT TYPE	DATE	AMOUNT	REMARKS (g)									
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Debit Card	O	09/24/2011	\$ 30.00	FUEL FOR CAMPAIGN TRAVEL									
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Debit Card	O	09/25/2011	\$ 20.02	FUEL FOR CAMPAIGN TRAVEL									
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Draft	O	08/31/2011	\$ 6.00	BANK CHARGES									
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Debit Card	O	09/12/2011	\$ 10.17	WEBSITE									
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Debit Card	B	09/23/2011	\$ 7.69	CAMPAIGN MATERIALS									
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Check	O	09/07/2011	\$ 26.94	REIMBURSE CAMPAIGN MEETING									
<input type="checkbox"/> Add <input type="checkbox"/> Remove	999	Draft	O	09/08/2011	\$ 0.59	CREDIT CARD CHARGES									
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Debit Card	O	09/06/2011	\$ 30.00	CAMPAIGN MEETING									
<input type="checkbox"/> Add <input type="checkbox"/> Remove	949	Debit Card	O	09/08/2011	\$ 34.95	CAMPAIGN WEBSITE									
Total Only This Page					\$	166.36									
Total (6) ALL PAGES					\$	166.36									
<table border="0"> <tr> <td>E - Salaries</td> <td>B* - Printing</td> <td>D - To Another Candidate</td> </tr> <tr> <td></td> <td>G - Political Party</td> <td></td> </tr> <tr> <td>O* - Other</td> <td>J - Penalties</td> <td>Q* - Donations to Legal Expense Fund</td> </tr> </table>							E - Salaries	B* - Printing	D - To Another Candidate		G - Political Party		O* - Other	J - Penalties	Q* - Donations to Legal Expense Fund
E - Salaries	B* - Printing	D - To Another Candidate													
	G - Political Party														
O* - Other	J - Penalties	Q* - Donations to Legal Expense Fund													
* Codes require detailed explanation in required remarks field (g)															

Account Transfers Within the Committee Page 1 of 1

Amendment
 Yes No

Use this form to transfer money between multiple bank, depository or credit accounts.

FRIENDS OF RACQUEL WILLIAMS				22
Details of Information				
a. Amend	b. Account Code Transferred From	c. Account Code Transferred To	d. Date (mm/dd/yyyy)	e. Amount
<input type="checkbox"/> Add <input type="checkbox"/> Remove	999	949	09/01/2011	\$ 500.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	999	949	09/12/2011	\$ 20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	999	949	09/22/2011	\$ 100.00
4 Total on this Page				\$ 620.00
5 Total of ALL CRO-1720 Pages				\$ 620.00

CRO-1720

NC State Board of Elections

December 2007