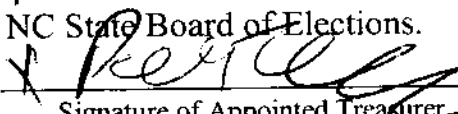


Disclosure Report Cover

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		c. ID Number	
Terrell III for State House		STA-6WF09-C-001	
b. Mailing Address (include City, State and Zip Code)		d. Date Filed	
4549 Tollington Drive Raleigh, NC 27604		12/09/09	
		e. Phone Number	
		919-212-3657	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2008	01-01-08	04-19-08	Paul F. Terrell III
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	<input type="checkbox"/> Municipal	<input type="checkbox"/> State/County
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input checked="" type="checkbox"/> First
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth
<input type="checkbox"/> Other:		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End
		<input type="checkbox"/> Special	<input type="checkbox"/> Final
			<input type="checkbox"/> Special
8. Number of Fundraisers this Report		10. Special Report Name	
11. Account Information		11. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
Bank of America			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
Checking	-22		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 0		\$
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.			
Paul F. Terrell III			
Printed Name of Signer		Signature of Appointed Treasurer	
		12/9/09	
		Date	
FOR OFFICE USE ONLY			
Date Received:	12-9-09	Employee:	LT
Date Postmarked:	N/A	Employee:	LT
Date Scanned:	12-15-09	Employee:	LT
Date Data Entered:		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			
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	
Terrell III for State House		Candidate Finance 1 st quarter		STA-6WFO9-C-001	
Start of Election Cycle: January 1, 2008		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 00.00		\$ 00.00	
5) Aggregated Contributions from Individuals		(CRO-1205) \$ 85.00		\$ 85.00	
6) Contributions from Individuals		(CRO-1210) \$ 200.00		\$ 200.00	
7) Contributions from Political Party Committees		(CRO-1220) \$		\$	
8) Contributions from Other Political Committees		(CRO-1230) \$		\$	
9) Loan Proceeds		(CRO-1410) \$ 500.00		\$ 500.00	
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) \$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c and 11d)		\$ 785.00		\$ 785.00	
13) Disbursements					
13a) Operating Expenditures		(CRO-1310) \$ 455.16		\$ 455.16	
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)		\$ 455.16		\$ 455.16	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 329.84		\$ 329.84	
20) Non-Monetary Gifts Given to Other Committees		(CRO-1330) \$		\$	
21) Outstanding Loans (incl. ones from other campaigns)		(CRO-1430) \$ 500.00		\$	
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-2200) \$		\$	
27) Contributions to be refunded		(CRO-1215) \$		\$	

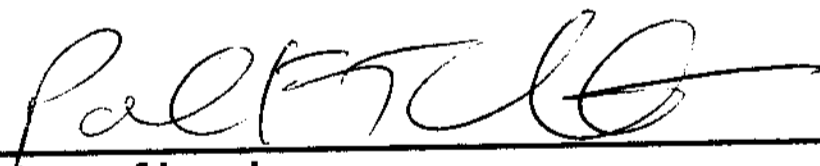
Loan Proceeds Statement

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:	Terrell III for State House
Person lending money to committee (Lender):	Paul F. Terrell III
Date of loan to committee:	02/07/2008
Name of lending institution and account number (source):	Bank of America #9864404974
Amount of loan:	\$500.00
Names of all parties responsible for payment of loan (guarantor):	Paul F. Terrell III
Period of loan:	Indefinite
Rate of interest of loan:	0%
Security pledged for loan:	None

I, Paul F. Terrell III 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.

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) Terrell III for State House			2. ID Number STA-6WF09-C-001	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip) Paul Terrell III 4549 Tollington Drive Raleigh, NC 27604		b. Job Title/Profession Sr. Maint Tech		d. Comments
		c. Employer's Name/Specific Field Cree		e. Start Date (mm/dd/yyyy) 2-7-08
				f. End Date (mm/dd/yyyy) N/A
g. Rate 0 %	h. Security Pledged None	i. Original Loan Amount \$ 500.00	j. Remaining Loan Balance \$ 500.00	
k. Full Name of Lending Institution N/A				l. Loan Number N/A
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
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)
				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
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)
				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			\$ 500.00	
5. Total of ALL CRO-1430 Pages <i>(This line must be on line 21 of Detailed Summary Page CRO-1100)</i>			\$ 500.00	