

COPY

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

Statement of Organization - Candidate Committee

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by forms CRO-3100 and CRO-3500 (when amending, only re-submit if applicable).

1. Committee Information			
a. Full Name		c. ID Number	
Harry James Jr		2014 JAN 28 PM 12:57	
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
1500 Reynard Dr. Kernersville, N.C. 27284		1-27-14	
		e. Phone Number	
		336/996-2218	
2. Candidate Information <input type="checkbox"/> Candidate's Primary Committee			
a. Full Name		c. Candidate ID Number	f. Party Affiliation
Walter Marshall			Democrat <small>(Indicate Non-partisan if applicable)</small>
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought	
3246 Kittering Lane Winston-Salem, N.C. 27105		Forsyth County Commissioner, District A	
c. Phone Number	d. Email Address	h. Next Election Year	i. Jurisdiction
336-725-0852		2014	Forsyth County
<input type="checkbox"/> Email copy of notices			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name		a. Full Name	
Harry James Jr		Harry James, Jr	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
1500 Reynard Dr Kernersville, N.C. 27284		1500 Reynard Dr Kernersville, N.C. 27284	
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
336/996-2218		336/996-2218	
I prefer to receive notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Email copy of notices			
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	b. Purpose
Harold James		Mechanics & Farmers Bank	Re-Election Campaign
b. Mailing Address (include City, State, and Zip Code)		c. Account Code	d. Type
1500 Reynard Dr Kernersville, N.C. 27284			Checking
c. Phone Number	d. Email Address		
336/996-2218			
<input type="checkbox"/> Email copy of notices			
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.			
HARRY JAMES, JR.			1-27-14
Printed Name of Signer		Signature of Appointed Treasurer	Date



COPY

2014 JAN 28 PM 12:57
RECEIVED

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
Fax: (919) 715-8047

Certification of Treasurer

This Certification is used by Candidate Committees to appoint a treasurer to the committee. This form is required and must accompany the Candidate's Statement of Organization

FILED BY:

Candidate Name: Walter Marshall

Treasurer Name: Harry James Jr

Treasurer Address: 1500 Reynard Dr

(include city, state, & zip) Kernersville, N.C. 27284

Treasurer Phone: 336/996-2218

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

1-27-14
Date Signed

[Signature]
Signature of Candidate

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



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FORSYTH COUNTY
REGISTRATION DIVISION

2014 JAN 28 PM 12:57

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State Board of Elections
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Raleigh, NC 27603

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Raleigh, NC 27611-7255
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Candidate Designation of Committee Funds

This form is used by candidate committees only and allows the candidate to designate in the event of their death, how the committee's funds are to be disbursed using the eight allowable methods outlined in 163-278.16B(a).

Candidate Name: Walter Marshall

Committee Name: Re-Elect Walter Marshall

Treasurer Name: Harry James Jr.

If Candidate is own treasurer, designate an agent to carry out designations: N/A

Committee ID #: _____

Level Registered: [State] [County] If county, specify: Forsyth

I, Walter Marshall, hereby direct that in the event of my death or incapacity all
(Name of Candidate)
funds remaining in my Campaign Committee account(s) (after payment of permitted outstanding debts or reasonable expenses for winding up the Committee or closing office) be paid in the following manner as permitted by N.C. Gen. Stat. 163-278.16B(a).

Name of Entity <small>(Select from §163-278.16B(a))</small>	Plan for Disbursement (eg. Amount or %)
1. <u>Winston-Salem Forsyth County NAACP</u>	<u>100 %</u>
2. _____	_____
3. _____	_____

By signing this form, I certify that the foregoing entities are eligible beneficiaries under N.C. Gen. Statute 163-278.16B(a). A copy of this form should be maintained with the Committee records.

Signature of Candidate: [Signature]

Date: 1-27-14

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