Statement of Organization - Candidate Committee

Ame	endn	nen	t .				
			7000	1	44		
			100	×			
	Yes			\mathbf{r}		NO.	

. Full Name					
CAMPAICAL - CARET LLANDIN IV	CO 111 - CON	c. ID Number			
CAMPAIGN TO ELECT HAROLD LE TO CITY COUNCIL	15 1-1751R52014				
. Mailing Address (include City, State and Zip Code)		d. Date Organized			
3140 SHAFTESBURY LAWE					
	1000	5-10-2005			
WINSTON-SALEM, NC 27105	-6945	e. Phone Number			
마이 그리고 있다. 그는 사람들이 가장하게 되고 그렇게 없는 것이 없었다. 하는 사람들이 보고 있는 것이다. 그는 그렇게 되는 것이 되고 있다면 없었다.		336725-4194			
. Candidate Information	☑ Candidate's Primary Co	y and the second of the second			
Full Name	c. Candidate ID Number	d. Party Affiliation			
HAWLD LEE HAIRSTON		DEMOCRAT			
Mailing Address (include City, State, and Zip Code)	e. Office Sought	f. Jurisdiction			
3140 SHAFTES BURY LANE WINSTON. SALEM, NC 27105-69.	(If office sought is nonpar	tisan, write "Nonpartisan" in [d] Affiliation.)			
Treasurer Information	4. Custodian of Books Inf				
Full Name	a. Full Name				
EMMA INGRAM		CHENITA JOHNSON			
Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)			
2701 WALLING FORD ROAD WINSTON-SALEM, NC 27101-192 Phone Number d. Email Address G000 G171-99 8.688	c. Phone Number d. Emai	Address			
36761-0987 GOODGIRL99 @GBR	336725-6203 HOT	MALL.COM			
Assistant Treasurer Information	6. Account Information				
A3515tant 11casufcr Information La Add	a. Financial Institution Full Nar	ne Remove			
the control of the co					
the control of the co					
Full Name Remove	b. Purpose				
the control of the co	b. Purpose	A B			
Full Name Remove Mailing Address (include City, State, and Zip Code)					
Full Name Remove	b. Purpose c. Code d. Type	A E			

CRO-2100A

NC State Board of Elections

May 2003







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

Kimberly Westbrook Deputy Director - Campaign Reporting

FILED BY:

Committee Name:

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

Confidential

Certification of Financial Account Information

CHMPAIGH TO ELECT HAMOUD LEE HAIRSTON TO CITY COUNCIL

Treasurer Addres	21 /11	COLE INGRUM		<u> </u>
(include city, state, &	ss: <u>270/ W</u> A	HUNGFORD RO	AD	
	& zip) WINSTON-	Sovem, NC 27	101-1959	
Treasurer Phone:		61-0987		
for the above named accounts, money man Committee. The information proves a court of competent provide account information provide account in	Committee. These accounts, rket or savings accounts, rided on this form is consivided would only be used jurisdiction. It will be ne mation on required disclo	is true and accurate. I am put numbers include all band or any other financial account of the purposes of an auditoessary to assign each account of the purposes. If an account med to have been waived.	k accounts utilized, c unt used for any purp ot subject to public d t or investigation or a ount number a "code"	redit card lose by the lisclosure. las required by lin order to
Type of account	Financial Institution	Address	Account Number	Code
community checking	M&F Bank	770 M.LK King	4	N/A
			Britania Selekti	
By signing this statem provided. Date Signed		f the State Board of Election	ns to inspect all according to the state of Treasurer	unts
	count information I carti	أفوق والمتعارف المناف فيأبه وتركاه وتراجي	istoria de la lactica di Lac	
	e. (Only candidates may c	•	not raise or spend an	ly money
In lieu of providing accept for the filing fee		choose this option.)	not raise or spend an	y money

North Carolina State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook Deputy Director – Campaign Reporting Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

Certification of Treasurer

FILED BY:	CHAMPAIGN TO ELECT LA	ranno	D	
Candidate Name:	CAMPAIGN TO ELECT /A LEE HAIRSTON TO CITY	Coun	CIL	
Treasurer Name:	EMMA INGRAM	£.		
Treasurer Address:	2701 WALLINGFORD R	CIAO		
(include city, state, & zip)	WINSTON-SALEM, NC	2710	1-19	59
				4 (S
Freasurer Phone	336 761- MOBT			

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.

5 -/0 - Z005

Date Signed

Signature of Candidate

North Carolina State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook Deputy Director – Campaign Reporting Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

Certification of Threshold

FILED BY:	CIAMIDAIAN TO FIRST / LANDIN
Committee Name:	CAMPAIGN TO ELECT HANDLA LEE HAIRSTON TO CITY COUNCIL
Treasurer Name:	EMMA INGRAM
Treasurer Address:	2701 WALLINGFORD ROAD
(include city, state, & zip)	WINSTON-SALEM, NC 27/01-1959
Treasurer Phone:	336 761-0987
election cycle under the pro- until the end of the election expenditures during this ele- of elections and file required THIS DECLARATION CA I am withdrawing my of file the next scheduled repor-	nittee intends to neither receive nor expend more than \$3,000 during the current reduces set forth in G.S. 163-278.10A. This certification will remain in effect cycle for this committee. If this committee exceeds \$3,000 in contributions or retion cycle, I understand that I must immediately notify the appropriate board a campaign finance reports. N ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE. Certification to remain under the \$3000 threshold. I will now be required to the for all contributions and expenditures that have not been previously reported the remaining the current election cycle. I further agree to file all future reports required.
5-10-2005 Date Signed	Illel La Landa