

# Statement of Organization - Candidate Committee

Amendment	
✓ Yes	□ No

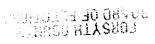
1. Committee Info	rmation					•	
a. Full Name					c. ID Number		
Committee to elect Richard Norman			N/A				
b. Mailing Address (in	clude City, State and Zip Cod	e)			d. Date Organ	d. Date Organized	
2071 Mallard Lakes Drive			07/05/2005				
Winston-Salem,	NC 27100				e. Phone Number		
					(336) 499	-6280	
2. Candidate Infor	mation		Candidate's Pri	mary Commi	ttee		
a. Full Name			c. Candidate ID Numb	D Number d. Party Affiliation		ation	
Richard Norman			6KYAE4	6KYAE4 Libertarian		1	
b. Mailing Address (inc	clude City, State, and Zip Cod	le)	e. Office Sought			f. Jurisdiction	
2071 Mallard Lakes Drive Winston-Salem, NC 27106		W-S City Coucil		NO			
			(If office sought is nonpartisan, write "Nonpartisan" in [d]  Party Affiliation.)			partisan" in [d]	
3. Treasurer Infor	mation		4. Custodian of Bo	oks Informa	ation		
a. Full Name			a. Full Name				
Carl Allen			Carl Allen				
b. Mailing Address (inc	clude City, State, and Zip Cod	le)	b. Mailing Address (include City, State, and Zip Code)				
305 Gloucestershire Road Winston-Salem, NC 27104		305 Gloucestershire Road Winston-Salem, NC 27104					
c. Phone Number	d. Email Address		c. Phone Number	c. Phone Number d. Email Address			
(336) 659-9908	treasurer@votenorma	an.org	(336) 659-9908 treasurer@votenorman.org		an.org		
5. Assistant Treasu	rer Information	Add	6. Account Inform	ation (incl	. CRO-3500)	✓ Add	
a. Full Name		Remove	a. Financial Institution	Full Name		Remove	
			PayPal				
b. Mailing Address (inc	lude City, State, and Zip Cod	c)	b. Purpose				
			Online Donations	•			
c. Phone Number	d. Email Address		c. Code	d. Type			
			2	Checking	,		
with funds for a fe	ommittee is in compliance deral or out-of-state PAC  Out-of-state PAC  Out-of-state PAC  Out-of-state PAC	. I further say		plete, true an	d correct.	e commingled	

CRO-2100A

NC State Board of Election

May 2003

3002 MIE 53 BH M: 25





### 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:	
Committee Name:	Committee to elect Richard Norman
Treasurer Name:	Carl Allen
Treasurer Address:	305 Gloucestershire Road
include city, state, & zip)	Winston-Salem
·	NC
	27104
Treasurer Phone:	(336) 659-9908
entil the end of the election cycle for this continues during this election cycle, I under the elections and file required campaign finated.  I am withdrawing my Certification to file the next scheduled report for all contributions.	in G.S. 163-278.10A. This certification will remain in effect ommittee. If this committee exceeds \$3,000 in contributions or iderstand that I must immediately notify the appropriate board ince reports.  Termain under the \$3000 threshold. I will now be required to utions and expenditures that have not been previously reported ycle. I further agree to file all future reports required.
3-27-05	



Kimberly Westbrook Deputy Director – Campaign Reporting

FILED BY:

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

## Confidential

# **Certification of Financial Account Information**

Committee Name:		Committee to elect Richard Norman					
Treasurer Name:		Carl Allen					
Treasurer Address	<b>:</b>	305 Gloucestershire Road					
(include city, state, &	zip)		Winston-Salem, N	C 27104			
				• "			
Treasurer Phone:			(336)	659-9908			
I certify that the information provided below is true and accurate. I am providing all account information for the above named Committee. These account numbers include all bank accounts utilized, credit card accounts, money market or savings accounts, or any other financial account used for any purpose by the Committee.  The information provided on this form is considered confidential and is not subject to public disclosure. The information provided would only be used for the purposes of an audit or investigation or as required by a court of competent jurisdiction. It will be necessary to assign each account number a "code" in order to provide account information on required disclosure reports. If an account number is used as the "code", confidentiality of the account number is presumed to have been waived.							
Type of account	Financial Institution	Address	Account Number	Code			
Checking	PayPal	- 11	4	2			
Checking	Suntrust	2001 Reynolds Rds W-5 NC 27106		1			
By signing this statement, I authorize agents of the State Board of Elections to inspect all accounts provided.							
8-22-05 Date Signed		<i>Ca</i>	Signature of Treasurer				