

Statement of Organization - Candidate Committee

Amendment

☒ Yes ☐ No

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 DAN BESSE COMMITTEE		c. ID Number 9C08C4	
b. Mailing Address (include City, State and Zip Code) PO BOX 15306 WINSTON-SALEM, NC 27113		d. Date Organized 1/18/01	
		e. Phone Number 336-722-1674	
2. Candidate Information <input checked="" type="checkbox"/> Candidate's Primary Committee			
a. Full Name DAN BESSE		e. Candidate ID Number	f. Party Affiliation DEMOCRAT <small>(Indicate Non-partisan if applicable)</small>
b. Mailing Address (include City, State, and Zip Code) PO BOX 15306, WINSTON-SALEM, NC 27113		g. Office Sought CITY COUNCIL	
c. Phone Number	d. Email Address	h. Next Election Year 2013	i. Jurisdiction WINSTON-SALEM
<input type="checkbox"/> Email copy of notices			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name JACK H. CAMPBELL, JR.		a. Full Name JACK H. CAMPBELL, JR.	
b. Mailing Address (include City, State, and Zip Code) 1208 BROOKSTOWN AVE WINSTON-SALEM, NC 27101		b. Mailing Address (include City, State, and Zip Code) 1208 BROOKSTOWN AVE WINSTON-SALEM, NC 27101	
c. Phone Number 336-722-8328	d. Email Address jackcampbell@triad.rr.com	c. Phone Number 336-722-8328	d. Email Address jackcampbell@triad.rr.com
I prefer to receive notices by email <input checked="" 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 JACK H. CAMPBELL, JR.		a. Financial Institution Full Name JACK H. CAMPBELL, JR.	
b. Mailing Address (include City, State, and Zip Code) 1208 BROOKSTOWN AVE WINSTON-SALEM, NC 27101		b. Purpose 1208 BROOKSTOWN AVE WINSTON-SALEM, NC 27101	
c. Phone Number 336-722-8328	d. Email Address jackcampbell@triad.rr.com	c. Account Code	d. Type
<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.			
Jack H. Campbell, Jr. Printed Name of Signer		1/9/13 Date	
		Signature of Appointed Treasurer	



COPY

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

Kimberly Westbrook-Strach
Deputy Director – Campaign Reporting

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: Dan Besse
Treasurer Name: Jack H. Campbell, Jr.
Treasurer Address: 1208 Brookstown Ave
(include city, state, & zip) Winston-Salem, NC 27101
Treasurer Phone: 336-722-8328

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).

1/9/13

Date Signed

Signature of Candidate

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