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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.

Amendment

Yes

No

1. Committee Information

a. Full Name	COMMITTEE TO ELECT	c. ID Number	7JS3B2
b. Mailing Address (include City, State and Zip Code)	316 Third Ave Knightdale NC 27545	d. Date Organized	9-5-11
		e. Phone Number	

2. Candidate Information

Candidate's Primary Committee

a. Full Name	V. Charles Bullock	c. Candidate ID Number	7JS3B2	d. Party Affiliation	NON-PARTISAN
b. Mailing Address (include City, State, and Zip Code)	316 Third Ave Knightdale NC 27545	e. Office Sought	KNIGHTDALE TOWN COUNCIL		
		f. Jurisdiction	AT-LARGE		

(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)

3. Treasurer Information

a. Full Name	Charles Vernon Bullock Jr
b. Mailing Address (include City, State, and Zip Code)	5616 Quail Covey Lane Wendell NC 27591
c. Phone Number	919-271-3364
d. Email Address	TowRifect@aol.com

4. Custodian of Books Information

a. Full Name	
b. Mailing Address (include City, State, and Zip Code)	
c. Phone Number	
d. Email Address	

5. Assistant Treasurer Information

Add
 Remove

a. Full Name	
b. Mailing Address (include City, State, and Zip Code)	
c. Phone Number	
d. Email Address	

6. Account Information (incl. CRO-3500)

Add
 Remove

a. Financial Institution Full Name	CRESCENT BANK		
b. Purpose	CAMPAIGN FUNDS		
c. Account Code	1	d. Type	Checking

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.

CHARLES V. Bullock Jr
Printed Name of Signer


Signature of Appointed Treasurer

9-5-11
Date



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

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WAKE CO. BOARD OF ELECTIONS

Kimberly Westbrook-Strach
Deputy Director – Campaign Reporting

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WAKE CO. BOARD OF ELECTIONS

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: U Charles Bullock
 Treasurer Name: Charles Vernon Bullock Jr
 Treasurer Address: 5616 Deal Cove Lane
 (include city, state, & zip) Wendell NC 27591

 Treasurer Phone: 919- 271-3364

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).

9-5-11
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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Certification of Threshold

This Certification is used to declare or withdraw a committee's intent to raise or spend \$1,000 or less in the current election cycle.

This Certification is only valid for political party committees and candidates for a county office, municipal office, local school board office, soil & water conservation district board of supervisors, or sanitary district board.

FILED BY:

Committee Name: Committee to Elect Charles Bullock
 Treasurer Name: Charles V. Bullock Jr
 Treasurer Address: 5616 Quail Cove Lane
 (include city, state, & zip) Wenocell NC 27591

 Treasurer Phone: 919-271-3364

Check One:

I certify that this committee intends to neither receive nor expend more than \$1,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$1,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports.

THIS DECLARATION CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.

I am withdrawing my Certification to remain at or under the \$1,000 threshold. I will now be required to file the next scheduled report for all contributions and expenditures that have not been previously reported from the beginning of the current election cycle. I further agree to file all future reports required.

9-5-11
 Date Signed

Charles V Bullock Jr
 Signature

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



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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: V. Charles Bullock
Committee Name: Committee to Elect Charles Bullock
Treasurer Name: Charles Vernon Bullock Jr
If Candidate is own treasurer, designate an agent to carry out designations: _____
Committee ID #: _____
Level Registered: [State] [County] If county, specify: _____

I, Charles Bullock, 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>Susan G. Loren (best lover)</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: V. Charles Bullock
Date: 9-5-11

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