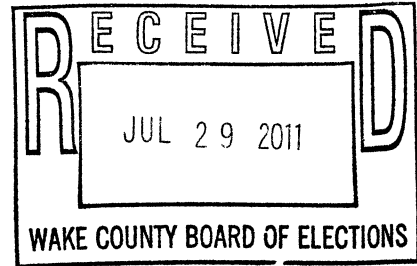




North Carolina
 State Board of Elections
 506 N Harrington Street
 Raleigh, NC 27603



Kimberly Westbrook-Strach
 Deputy Director – Campaign Reporting

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

Certification to Return to Active Status

This Certification is used by Candidate, Party, PACs and Referendum Committees which have previously filed the Certification of Inactive Status and now wish to return to an active status.

FILED BY:

Committee Name: Committee to Elect Lori Bush

Treasurer Name: Laurie T. Miller

Treasurer Address: 305 Rushingwater Dr

(include city, state, & zip) Cary, NC 27513

Treasurer Phone: 919-469-0498

I certify that the above named candidate/political committee, which has been of **inactive status** and exempt from filing disclosure reports, intends to accept contributions and/or make expenditures. This intention of activity alters the status of the above named candidate/political committee to **active status** and requires such committee to begin filing disclosure on the appropriate schedule. All contributions received and/or expenditures made that have not been previously reported will be disclosed on the next scheduled report and all subsequent reports will be filed as scheduled. An amended Statement of Organization (CRO-2100) must accompany this form.

7/29/2011
 Date Signed

Laurie T. Miller
 Signature

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

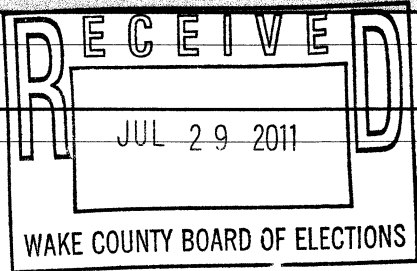
Statement of Organization - Candidate Committee

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 Committee to Elect Lori Bush	c. ID Number
b. Mailing Address (include City, State and Zip Code) 107 Doric Court, Cary, NC 27519	d. Date Organized 7/18/2009
	e. Phone Number 919-319-0530



2. Candidate Information		<input checked="" type="checkbox"/> Candidate's Primary Committee	
a. Full Name Lori Bush	e. Candidate ID Number	f. Party Affiliation nonpartisan <small>(Indicate Non-partisan if applicable)</small>	
b. Mailing Address (include City, State, and Zip Code) same as above	g. Office Sought Cary Town Council At-Large Representative		
c. Phone Number same as above	d. Email Address	h. Next Election Year	i. Jurisdiction Cary
<input type="checkbox"/> Email copy of notices			

3. Treasurer Information		4. Custodian of Books Information	
a. Full Name Laurie T. Miller	a. Full Name Laurie T. Miller		
b. Mailing Address (include City, State, and Zip Code) 305 Rushingwater Dr., Cary, NC 27513	b. Mailing Address (include City, State, and Zip Code) 305 Rushingwater Dr, Cary, NC 27513		
c. Phone Number 919-469-0498	d. Email Address	c. Phone Number 919-469-0498	d. Email Address

I prefer to receive notices by email Yes No Email copy of notices

5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name	<input type="checkbox"/> Add <input type="checkbox"/> Remove	a. Financial Institution Full Name Coastal Federal Credit Union	<input type="checkbox"/> Add <input type="checkbox"/> Remove
b. Mailing Address (include City, State, and Zip Code)	b. Purpose Receiving & disbursing campaign funds		
c. Phone Number	d. Email Address	c. Account Code A, B	d. Type checking/savings
<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.

 Laurie T. Miller
 Printed Name of Signer

 Signature of Appointed Treasurer

 7/29/2011
 Date