

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.

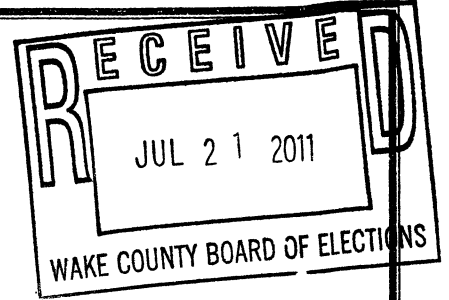
Amendment
 Yes No

RECEIVED

1. Committee Information		JUL 21 2011	
a. Full Name		c. ID Number	
ELECT ZACHARY DONAHUE		WAKE CO. BOARD OF ELECTIONS	
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
504 WHEDDON CROSS WAY WAKE FOREST, NC 27587		7-11-11	
		e. Phone Number	
		919-761-9043	
2. Candidate Information		<input type="checkbox"/> Candidate's Primary Committee	
a. Full Name		c. Candidate ID Number	d. Party Affiliation
ZACHARY THOMAS DONAHUE			NON PARTISAN
b. Mailing Address (include City, State, and Zip Code)		e. Office Sought	f. Jurisdiction
504 WHEDDON CROSS WAY WAKE FOREST, NC 27587		WAKE FOREST BOARD OF COMMISSIONERS	AT LARGE
(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name		a. Full Name	
ZACHARY THOMAS DONAHUE			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
504 WHEDDON CROSS WAY WAKE FOREST, NC 27587			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
		BANK OF AMERICA	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
		CAMPAIGN FUNDS	
c. Phone Number	d. Email Address	c. Account Code	d. Type
		1	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.			
ZACHARY T. DONAHUE			7/20/11
Printed Name of Signer		Signature of Appointed Treasurer	Date



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 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: ELECT ZACHARY DONAHUE
 Treasurer Name: ZACHARY DONAHUE
 Treasurer Address: 504 WHEDDON CROSS WAY
 (include city, state, & zip) WAKE FOREST, NC 27587

 Treasurer Phone: 919 761-9043

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.

7/20/11
 Date Signed

Zachary Donahue
 Signature

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