

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.

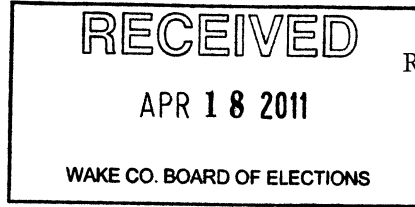
1. Committee Information				
a. Full Name		c. ID Number		
Hill for BOE Committee		<div style="border: 2px solid black; padding: 10px; width: fit-content; margin: auto;"> <p style="font-size: 24px; margin: 0;">RECEIVED</p> <p style="font-size: 18px; margin: 5px 0;">APR 18 2011</p> <p style="font-size: 12px; margin: 0;">WAKE CO. BOARD OF ELECTIONS</p> </div>		
b. Mailing Address (include City, State and Zip Code)				d. Date Organized
300 Paprika Court Raleigh, North Carolina 27614				April 11, 2011
		e. Phone Number		
		919-848-3362		
2. Candidate Information		<input type="checkbox"/> Candidate's Primary Committee		
a. Full Name		c. Candidate ID Number	d. Party Affiliation	
Kevin L. Hill			Nonpartisan	
b. Mailing Address (include City, State, and Zip Code)		e. Office Sought	f. Jurisdiction	
300 Paprika Court Raleigh, NC 27614		Board of Education	Wake	
<i>(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)</i>				
3. Treasurer Information		4. Custodian of Books Information		
a. Full Name		a. Full Name		
Mary Ellen Taft				
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)		
6704 Virgil Drive Raleigh, NC 27614				
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address	
848-1028	mtaft51@gmail.com			
5. Assistant Treasurer Information		6. Account Information <small>(incl. CRO-3500)</small>		
a. Full Name		a. Financial Institution Full Name	b. Purpose	
		Wachovia Bank & Trust	Hill for BOE Committee	
b. Mailing Address (include City, State, and Zip Code)		c. Account Code	d. Type	
		001	Checking	
c. Phone Number		d. Email Address		
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.				
<u>Mary Ellen Taft</u> Printed Name of Signer		<u>Mary Ellen Taft</u> Signature of Appointed Treasurer	<u>4-16-11</u> 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 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: Kevin L. Hill
 Treasurer Name: Mary Ellen Taft
 Treasurer Address: 6704 Virgil Drive

 (include city, state, & zip) Raleigh

NC

27614

 Treasurer Phone: (919) 848-1028

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).

April 18, 2011
 Date Signed

Kevin L. Hill
 Signature of Candidate



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

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APR 18 2011

WAKE CO. BOARD OF ELECTIONS

Kimberly Westbrook-Strach
Deputy Director – Campaign Reporting

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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 nine allowable methods outlined in 163-278.16B(a).

Candidate Name: Kevin L. Hill

Committee Name: Hill for BOE Committee

Treasurer Name: Mary Ellen Taft

If Candidate is own treasurer, designate an agent to carry out designations: _____

Committee ID #: _____

Level Registered: [State] [County] If county, specify: Wake

I, Kevin L. Hill, 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 (Select from §163-278.16B(a))	Plan for Disbursement (eg. Amount or %)
1. <u>Democratic candidate for BOE</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: Kevin L. Hill

Date: April 18, 2011

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