



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

RECEIVED

AUG 22 2011

WAKE CO. BOARD OF ELECTIONS

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: Don Hyatt

Treasurer Name: David G, Forvendel

Treasurer Address: 109 Canyon Run

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

Treasurer Phone: 919-380-9218

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).

8/17/2011

Date Signed

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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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: Don Hyatt
Committee Name: Committee to Elect Don Hyatt
Treasurer Name: David Forvender

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

Committee ID #: _____

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

I, Don Hyatt, hereby direct that in the event of the death or incapacity of the
(Name of candidate or estate representative)
aforementioned candidate, all funds remaining in the 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>Wake County GOP</u>	<u>50%</u>
2. <u>North Carolina Center for Voter Education</u>	<u>50%</u>
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 or Representative: *Don Hyatt* Date: 8/17/2011

If signed by an estate representative, indicate the date of candidate's death: _____

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