


Statement of Organization - Candidate Committee

Amendment
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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		<div style="border: 2px solid black; padding: 5px; font-weight: bold; font-size: 1.2em;">RECEIVED</div> <div style="font-weight: bold; font-size: 1.2em;">AUG 29 2011</div> <div style="font-weight: bold; font-size: 0.8em;">WAKE CO. BOARD OF ELECTIONS</div>	c. ID Number	
Committee to Elect Gary Martin				
b. Mailing Address (include City, State and Zip Code)			d. Date Organized	
711 Sutter Gate Lane, Morrisville, NC 27560		7/26/2011		
		e. Phone Number		
		919-434-8358		
2. Candidate Information <input type="checkbox"/> Candidate's Primary Committee				
a. Full Name		e. Candidate ID Number	f. Party Affiliation	
Gary Martin			Non-partisan	
				(Indicate Non-partisan if applicable)
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought		
711 Sutter Gate Lane, Morrisville, NC 27560		Morrisville Town Council		
c. Phone Number	d. Email Address	h. Next Election Year	i. Jurisdiction	
919-434-8358	garymartin55@yahoo.com			
<input checked="" type="checkbox"/> Email copy of notices				
3. Treasurer Information		4. Custodian of Books Information		
a. Full Name		a. Full Name		
Gary Martin				
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)		
711 Sutter Gate Lane, Morrisville, NC 27560				
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address	
919-434-8358	garymartin55@yahoo.com			
I prefer to receive notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of notices		
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)		
a. Full Name		a. Financial Institution Full Name		<input type="checkbox"/> Add <input type="checkbox"/> Remove
		BB&T		
b. Mailing Address (include City, State, and Zip Code)		b. Purpose		
		To hold and manage campaign funds		
c. Phone Number	d. Email Address	c. Account Code	d. Type	
		GM	Checking	
<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.				
Gary Martin				7-26-11
Printed Name of Signer		Signature of Appointed Treasurer		Date