

# 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	
CURTIS P. STRICKLAND, COMMISSIONER		WAKE CO. BOARD OF ELECTIONS	
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
205 EAST SYCAMORE ST. ZEBULON, NC 27597		JUL 07 2011 6/28/11	
		e. Phone Number	
		919-269-6557	
2. Candidate Information			
<input type="checkbox"/> Candidate's Primary Committee			
a. Full Name		c. Candidate ID Number	d. Party Affiliation
CURTIS P. STRICKLAND			NON-PARTISAN DEMOCRAT
b. Mailing Address (include City, State, and Zip Code)		e. Office Sought	f. Jurisdiction
205 EAST SYCAMORE ST. ZEBULON, NC 27597		ZEBULON, NC TOWN COMMISSIONER	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	
CURTIS P. STRICKLAND			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
205 EAST SYCAMORE ST. ZEBULON, NC 27597			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
919-269-6557	CPSTRICK@GMAIL.COM		
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	b. Purpose
		RBC	CAMPAIGN FUNDS
b. Mailing Address (include City, State, and Zip Code)		c. Account Code	d. Type
		47	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.			
CURTIS P. STRICKLAND		Curtis P. Strickland	7/7/11
Printed Name of Signer		Signature of Appointed Treasurer	Date



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

**RECEIVED**  
 JUL 07 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: CURTIS P. STRICKLAND  
 Treasurer Name: CURTIS P. STRICKLAND  
 Treasurer Address: 205. E. SYCAMORE ST.  
 (include city, state, & zip) ZEBULON, NC 27597  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Treasurer Phone: 919-269-6557

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).

7-7-11  
 Date Signed

Curtis P. Strickland  
 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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**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: CURTIS P. STRICKLAND FOR COMMISSIONER  
 Treasurer Name: CURTIS P. STRICKLAND  
 Treasurer Address: 205 EAST SKAMORE ST.  
 (include city, state, & zip) ZEBULON, NC 27597

Treasurer Phone: \_\_\_\_\_

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.

7/7/11  
 Date Signed

Curtis P. Strickland  
 Signature

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