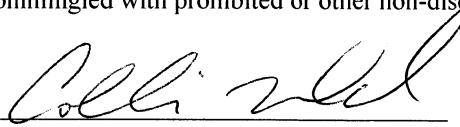


# Statement of Organization - Candidate Committee

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.

| 1. Committee Information  |   |  |   |
|---|---|--|---|
| a. Full Name  |   | c. ID Number   |   |
| Tinga for Raleigh City Council  |   |  |   |
| b. Mailing Address (include City, State and Zip Code)   |   | d. Date Organized  |   |
| PO Box 98990<br>Raleigh, NC 27624   |   | 4/27/2011  |   |
|   |   | e. Phone Number  |   |
|   |   | 919-341-5983   |   |
| <div style="border: 2px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> <p style="margin: 0; font-size: 1.2em; font-weight: bold;">RECEIVED</p> <p style="margin: 0; font-size: 1.2em; font-weight: bold;">MAY 6 2011</p> <p style="margin: 0; font-size: 0.8em;">WAKE CO. BOARD OF ELECTIONS</p> </div> |   |  |   |
| 2. Candidate Information  |   | <input type="checkbox"/> Candidate's Primary Committee                               |   |
| a. Full Name  | c. Candidate ID Number  | d. Party Affiliation   |   |
| Brian Tinga   |   | NON  |   |
| b. Mailing Address (include City, State, and Zip Code)  | e. Office Sought  | f. Jurisdiction  |   |
| PO Box 98990<br>Raleigh, NC 27624   | Raleigh City Council  | A  |   |
| <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  |  |   |
| Collin McMichael  | Collin McMichael  |  |   |
| b. Mailing Address (include City, State, and Zip Code)  | b. Mailing Address (include City, State, and Zip Code)          |  |   |
| PO Box 97275<br>Raleigh, NC 27624   | PO Box 97275<br>Raleigh, NC 27624                               |  |   |
| c. Phone Number   | d. Email Address  | c. Phone Number  | d. Email Address  |
| 919-324-6606  | collin@cmandco.com  | 919-324-6606   | collin@cmandco.com  |
| 5. Assistant Treasurer Information  |   | 6. Account Information <small>(incl. CRO-3500)</small>                               |   |
| a. Full Name  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove | a. Financial Institution Full Name   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|   |   | BB&T   |   |
| b. Mailing Address (include City, State, and Zip Code)  |   | b. Purpose   |   |
|   |   | Checking Account   |   |
| c. Phone Number   | d. Email Address  | c. Account Code  | d. Type   |
|   |   | 1  | Checking  |
| <b>CERTIFICATION</b>  |   |  |   |
| 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.            |   |  |   |
| Collin McMichael  |   |  |   |
| Printed Name of Signer  |   | Signature of Appointed Treasurer   |   |
|   |   | 5/6/2011   |   |
|   |   | Date   |   |



North Carolina  
State Board of Elections

506 N Harrington Street  
Raleigh, NC 27603

RECEIVED

MAY 6 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: Brian Tinga

Treasurer Name: Collin McMichael

Treasurer Address: PO Box 97275

(include city, state, & zip) Raleigh, NC 27624

Treasurer Phone: (919) 324-6606

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).

5-6-2011  
Date Signed

[Signature]  
Signature of Candidate

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