

RECEIVED

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 (when amending only re-submit if applicable).

Amendment

RECEIVED

1. Committee Information

a. Full Name <i>Committee to Elect Tillie S. Turlington</i>		c. ID Number WAKE CO. BOARD OF ELECTIONS	
b. Mailing Address (include City, State and Zip Code) <i>P.O. Box 134 220 Lake Dr Wendell NC 27591</i>		d. Date Organized <i>7-15-11</i>	
		e. Phone Number <i>919-365-6789</i>	

2. Candidate Information

Candidate's Primary Committee

a. Full Name <i>Tillie S. Turlington</i>		e. Candidate ID Number		f. Party Affiliation <i>non Partisan</i> <small>(Indicate Non-partisan if applicable)</small>	
b. Mailing Address (include City, State, and Zip Code) <i>P.O. Box 134 Wendell NC 27591</i>		g. Office Sought <i>Wendell Town Commissioner</i>			
c. Phone Number		d. Email Address		h. Next Election Year	
				i. Jurisdiction <i>at-large</i>	

Email copy of notices

3. Treasurer Information

4. Custodian of Books Information

a. Full Name <i>Tillie S. Turlington</i>		a. Full Name	
b. Mailing Address (include City, State, and Zip Code) <i>P.O. Box 134 Wendell NC 27591</i>		b. Mailing Address (include City, State, and Zip Code)	
c. Phone Number		c. Phone Number	
d. Email Address		d. Email Address	

I prefer to receive notices by email Yes No Email copy of notices

5. Assistant Treasurer Information

Add Remove

6. Account Information (incl. CRO-3500)

Add Remove

a. Full Name		a. Financial Institution Full Name <i>First Citizens bank</i>	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose <i>Campaign funds</i>	
c. Phone Number		c. Account Code <i>1</i>	
d. Email Address		d. Type <i>Checking</i>	

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.

Tillie S. Turlington *Tillie S. Turlington* *8-3-11*
 Printed Name of Signer Signature of Appointed Treasurer Date