

# Statement of Organization - Candidate Committee

Amendment	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
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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 Committee to Elect Don Mial for Wake County School Board	c. ID Number
b. Mailing Address (include City, State and Zip Code)  P.O Box 40404 Raleigh, N.C 27629	d. Date Organized 4/21/2016
	e. Phone Number 919-247-5152

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2. Candidate Information		
a. Full Name Donald Wayne Mial	e. Candidate ID Number	f. Party Affiliation Democrat <small>(Indicate Non-partisan if applicable)</small>
b. Mailing Address (include City, State, and Zip Code) 1021 Penselwood Dr. Raleigh, N.C 27604	g. Office Sought Wake County School Board District-A	
c. Phone Number 919-247-5152	d. Email Address don@donmial.com	h. Next Election Year
<input type="checkbox"/> Email copy of notices		i. Jurisdiction

Wake County Board of Elections Candidate's Primary Committee

3. Treasurer Information		4. Custodian of Books Information	
a. Full Name Willie Sinclair	b. Mailing Address (include City, State, and Zip Code)	a. Full Name Donald Mial	b. Mailing Address (include City, State, and Zip Code) 1021 Penselwood DR, Raleigh, N.C 27604
c. Phone Number	d. Email Address	c. Phone Number 919-247-5152	d. Email Address don@donmial.com

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

5. Assistant Treasurer Information		6. Account Information <small>(incl. CRO-3500)</small>	
a. Full Name Donald Wayne Mial	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	a. Financial Institution Full Name Wells Fargo	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
b. Mailing Address (include City, State, and Zip Code) 1021 Penselwood Dr. Raleigh, N.C 27604		b. Purpose Campaign Account for Receipts and Expenditures	
c. Phone Number 919-247-5152	d. Email Address don@donmial.com	c. Account Code 01	d. Type 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.

\_\_\_\_\_ Willie Sinclair \_\_\_\_\_ 5/9/16 \_\_\_\_\_  
 Printed Name of Signer Signature of Appointed Treasurer Date



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

Kim Westbrook Strach  
 Executive Director

Mailing Address  
 PO Box 27255  
 Raleigh, NC 27611-7255  
 (919) 733-7173

**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: Donald Mial

Treasurer Name: Willie Sinclair

Treasurer Address: 4810 Greenbrier Road

(include city, state, & zip) Raleigh, NC 27603

Treasurer Phone: 919-779-3701 (H) 919-931-2154 (C)

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).

5/9/16  
 Date Signed

Signature of Candidate

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