

Statement of Organization Political Action Committee

Amendment Yes No

Use this form to create a new or update an existing political action committee (PAC).

This form must be accompanied by form CRO-3500.

1. Committee Information			
a. Full Name Wake Citizens for Good Government		c. ID Number	
b. Mailing Address (include City, State and Zip Code) P. O. Box 25526 Raleigh, North Carolina 27611		d. Date Organized 09/28/2009	
		e. Phone Number 919-656-0660 → X Required	
2. Political Action Committee Information		3. Connected Organization or Affiliated Committee	
a. Category (Check only one)		a. Full Name	
<input type="checkbox"/> Banking/Finance <input type="checkbox"/> Legal <input type="checkbox"/> Building/Real Estate <input type="checkbox"/> Manufacturing <input type="checkbox"/> Conservative/Liberal <input type="checkbox"/> Minority <input type="checkbox"/> Environment <input type="checkbox"/> Political Party not part of Party Plan of Org. <input checked="" type="checkbox"/> Get Out the Vote <input type="checkbox"/> Religious <input type="checkbox"/> Health <input type="checkbox"/> Trade <input type="checkbox"/> Information Technology / Telecommunications <input type="checkbox"/> Utilities <input type="checkbox"/> Insurance <input type="checkbox"/> Other / Not listed		b. Mailing Address (include City, State, and Zip Code)	
b. Type (Check only one)		c. Phone Number	
<input type="checkbox"/> Parent Entity <input type="checkbox"/> Economic Interest <input checked="" type="checkbox"/> Political Purpose		d. Relationship	
c. Definition of Type Concerned citizens of Wake County		d. Member Definition	
4. Treasurer Information		5. Custodian of Books Information	
a. Full Name Michael J. Schierbeek		a. Full Name Michael J. Schierbeek	
b. Mailing Address (include City, State, and Zip Code) P. O. Box 25526 Raleigh, North Carolina 27611 919-656-0660		b. Mailing Address (include City, State, and Zip Code) P. O. Box 25526 Raleigh, North Carolina 27611 919-656-0660	
c. Phone Number X Required		c. Phone Number X Required	
d. Email Address mjschierbeek@gmail.com		d. Email Address mjschierbeek@gmail.com	
6. Assistant Treasurer Information		7. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
		PNC	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose Receipt of Funds and Disbursements	
c. Phone Number		c. Account Code 2	
d. Email Address		d. Type Checking	
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.			
Michael J. Schierbeek Printed Name of Signer		 Signature of Appointed Treasurer	
		09/13/2013 Date	