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Page 1 of 2

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I am amending this Statement of Organization to withdraw my Certification to remain under the \$3000 threshold. I will now			rtification to remain	under th	e \$3000 thre	shold. I will now		
be required to file a report of all contributions and expenditures from the beginning of the election cycle that have not been								
previously reported. This report will be referred to as a "Threshold Report". I further agree to file all future reports								
required.								
CEDTIFICATION	CERTIFICATION							
CERTIFICATION								
I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with								
funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct.								
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2000 1 //st. / tol. 16								
Signature of Appointed Transurer or Candidate  Date								



North Carolina
State Board of Elections
506 N Harrington Street

Raleigh, NC 27603

Kimberly Westbrook Deputy Director - Campaign Reporting Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

## **Certification of Treasurer**

FILED BY: Candidate Name: Treasurer Name:	TALE R. FOLWELL GARY W. GILBERT	
Treasurer Address: (include city, state, & zip)	C/o FOLWELL FOR HOUSE  2995. NESTVIEW DA.  W-SALLA, NL 27104	
Treasurer Phone:	(336) 722-5650	

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.

3/11/02 Date Signed

Signature of Candidate