Statement of Organization - Candidate Committee Yes Yes ☐ No 1. Committee Information . ID Number a. Fuli Name AlderMAN d. Date Organized b. Mailing Address (include City, State and Zip Code) PO BAX 85 Ker Newville, NC 27285 e. Phone Number 336 996 4099 **Primary Candidate Committee** 2. Candidate Information b. Candidate ID Number a, Full Name MARTHA VANGHON VANCE GROWN d. District/County/Municipality c. Party Affiliation c. Office Sought Kernersville NON PARTISAN (If office sought is nonpartisan, write "Nonpartisan" in [e] Party Affiliation.) 4. Custodian of Books Information 3. Treasurer Information a. Fuli Name a. Full Name Ame b. Mailing Address (include City, State, and Zip Code) b. Mailing Address (include City, State, and Zip Code) d. Email Address c. Phone Number d. Email Address c. Phone Number Add 6. Account Information (incl. CRO-3500) 5. Assistant Treasurer Information Add a. Figurcial Institution Full Name Remove Remove . Fuli Name NONE b. Mailing Address (include City, State, and Zip Code) b. Purpose d. Type c, Code d. Email Address c. Phone Number 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. Signature of Appointed Treasurer Printed Name of Signer NC State Board of Elections CRO-2100A

Amendment



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:	MARTHA VANCE BROWN MARTHA VANCE BROWN
Treasurer Name:	MARTHA VANCE BROWN
Treasurer Address:	DA KAYOC
(include city, state, & zip)	Kernersville, NC 27285
Treasurer Phone:	mation is correct, and I, as candidate, appoint said treasurer to personally fulfill
نهزانطنوه وسميه فرسم سانه فران	es imposed upon the appointed treasurer and subject to the penalties and I. Regulation of Election Campaigns of Chapter 163 of the North Carolina
I understand that if the above the existing Statement of O	re Treasurer changes, it will be necessary to certify a new treasurer and amend rganization within 10 days of the vacancy.



North Carolina

State Board of Elections 506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook Deputy Director - Campaign Reporting

FILED BY:

Raleigh, NC 27611-7255

Confidential

Certification of Financial Account Information

TIDED DI.			\sim 110				
Committee Name:	MARTHA	VANCE BROWN	N Fir Aldern	-PN			
Treasurer Name:	MARTHA	VANCE BROW.	<i>N</i>				
Treasurer Address		1785					
(include city, state, &	zip) <u>Ker</u> Ne	ersville, Ncz	7285				
			<u></u>				
	<u></u>	e te e de la companya		 .			
Treasurer Phone:	(336)	9964099	er aller t				
I certify that the information provided below is true and accurate. I am providing all account information for the above named Committee. These account numbers include all bank accounts utilized, credit card accounts, money market or savings accounts, or any other financial account used for any purpose by the Committee. The information provided on this form is considered confidential and is not subject to public disclosure. The information provided would only be used for the purposes of an audit or investigation or as required by a court of competent jurisdiction. It will be necessary to assign each account number a "code" in order to provide account information on required disclosure reports. If an account number is used as the "code", confidentiality of the account number is presumed to have been waived.							
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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 Threshold

FILED BY:	
Committee Name:	MARTHA VANCE BROWN FOR Alberman
Treasurer Name:	MARTHA VANCE BROWN
Treasurer Address:	PO B0 + 85
include city, state, & zip)	Kernersville, NC 27285
Consequence Discourse	996-4099
Freasurer Phone:	714 .0.7
election cycle under the pro intil the end of the election expenditures during this ele of elections and file require	nittee intends to neither receive nor expend more than \$3,000 during the current cedures set forth in G.S. 163-278.10A. This certification will remain in effect cycle for this committee. If this committee exceeds \$3,000 in contributions or ction cycle, I understand that I must immediately notify the appropriate board a campaign finance reports. Certification to remain under the \$3000 threshold. I will now be required to
file the next scheduled repo	t for all contributions and expenditures that have not been previously reported arrent election cycle. I further agree to file all future reports required.
8/6/03	Martha Vance Grown
D.4. 6'1	Cimphin



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 to Close Committee

FILED BY:		
Committee Name:	MARTHA VANCE BROWN FOR ALDERMAN	Committee
Treasurer Name:	MARTHA VANCE BROWN	
Treasurer Address:	P.O. BOX 85	
(include city, state, & zip)	Kernersville, NC 27285	
	· · · · · · · · · · · · · · · · · · ·	
Treasurer Phone:	(336) 996 4099	
certification, I declare that a contributions will be accept signed. If the Committee at	tioned Committee intends to close and cease existence. Upon signing this all funds have been distributed and reported (if required). In addition, no ed or disbursements made after the "Final Report" is filed or this form is any future time intends to accept or spend funds in support or opposition of e, a new political committee must be formed and registered with the Board of ties may commence.	
"Final Report" will be requi	under the \$3,000 threshold will only be required to sign this Certification. No red for committees meeting this criterion. Any Committee that did not file must submit a "Final Report" with this Certification. This report must have a	
zero balance with no outsta		
11/9/03	Markelance Brown	_
Date Signed	Signature	