

Statement of Organization - Candidate Committee

COPY

Amendment

☐ Yes

☒ No

1. Committee Information

a. Full Name

 Re-elect Dawn Morgan, ~~the~~ Alderman

c. ID Number

b. Mailing Address (include City, State and Zip Code)

 112 Rockford Ct
Kernersville, NC 27284

d. Date Organized

7-7-03

e. Phone Number

993-9147

2. Candidate Information

☐ Primary Candidate Committee

a. Full Name

DAWN MORGAN

b. Candidate ID Number

c. Office Sought

Alderman

d. District/County/Municipality

Kernersville

e. Party Affiliation

Nonpartisan

(If office sought is nonpartisan, write "Nonpartisan" in [e] Party Affiliation.)

3. Treasurer Information

a. Full Name

Dawn H. Morgan

b. Mailing Address (include City, State, and Zip Code)

 112 Rockford Ct
Kernersville, NC 27284

c. Phone Number

993-9147

d. Email Address

dmorgan2@triad.rr.com

4. Custodian of Books Information

a. Full Name

Dawn H. Morgan

b. Mailing Address (include City, State, and Zip Code)

 112 Rockford Ct
Kernersville, NC 27284

c. Phone Number

993-9147

d. Email Address

dmorgan2@triad.rr.com

5. Assistant Treasurer Information

☐ Add

☐ Remove

a. Full Name

NONE

b. Mailing Address (include City, State, and Zip Code)

N/A

c. Phone Number

N/A

d. Email Address

N/A

6. Account Information (incl. CRO-3500)

☒ Add

☐ Remove

a. Financial Institution Full Name

Allegacy Federal Credit Union

b. Purpose

Campaign expense + contributions

c. Code

01

d. Type

Checking

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.

DAWN H. MORGAN

Printed Name of Signer

Dawn H Morgan

Signature of Appointed Treasurer

7-7-03

Date

CRO-2100A

NC State Board of Elections

March 2003

RECEIVED

2003 JUL -8 PM 1:21

 FORSYTH COUNTY
CANDIDATE



COPY

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

Confidential

Certification of Financial Account Information

FILED BY:

Committee Name:

Re-elect Dawn Morgan, Alderman

Treasurer Name:

DAWN H. MORGAN

Treasurer Address:

112 Rockford Ct

(include city, state, & zip)

Kernersville, NC 27284

Treasurer Phone:

993-9147

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.

Type of account	Financial Institution	Address	Account Number	Code
Checking	Allegheny FCU	PO Box 1456 Winston-Salem, NC 27102	XXXXXXXXXX	XXXX

By signing this statement, I authorize agents of the State Board of Elections to inspect all accounts provided.

7-7-03

Date Signed

Dawn H Morgan
Signature of Treasurer



COPY

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:

DAWN MORGAN

Treasurer Name:

DAWN H. MORGAN

Treasurer Address:

112 Rockford Ct

(include city, state, & zip)

Kernersville, NC 27284

Treasurer Phone:

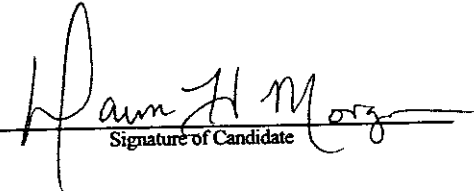
993-9147

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.

7-7-03

Date Signed


Signature of Candidate



North Carolina
State Board of Elections

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Raleigh, NC 27603

Kimberly Westbrook
Deputy Director - Campaign Reporting

Mailing Address
PO Box 27255
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(919) 733-7173
Fax: (919) 715-8047

Certification of Threshold

FILED BY:

Committee Name: RE-ELECT DAWN MORGAN, ~~REP~~ ALDERMAN

Treasurer Name: DAWN H. MORGAN

Treasurer Address: 112 Rockford Ct
(include city, state, & zip) Kernersville, NC 27284

Treasurer Phone: 993-9147

Check One:

☒ I certify that this committee intends to neither receive nor expend more than \$3,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$3,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports.

☐ I am withdrawing my Certification to remain under the \$3000 threshold. I will now be required to file the next scheduled report for all contributions and expenditures that have not been previously reported from the beginning of the current election cycle. I further agree to file all future reports required.

July 7, 2003
Date Signed

Dawn H Morgan
Signature



North Carolina
State Board of Elections

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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:

Treasurer Name:

Treasurer Address:

(include city, state, & zip)

Treasurer Phone:

Reelect Dawn Morgan, Alderman
Dawn H Morgan
112 Rochford Ct
Kernersville, NC 27284
993-9147

Check One:

☐ I certify that this committee intends to neither receive nor expend more than \$3,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$3,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports.

☒ I am withdrawing my Certification to remain under the \$3000 threshold. I will now be required to file the next scheduled report for all contributions and expenditures that have not been previously reported from the beginning of the current election cycle. I further agree to file all future reports required.

11-6-03
Date Signed

Dawn H Morgan
Signature

Candidate Id # 994TOC