Amendment Statement of Organization - Candidate Committee 1. Committee Information c. ID Number Full Name BEENE d. Date Organized b. Mailing Address (include City, State and Zip Code) RIDGE GATE CT. IS UILLE, N.C. 27023 e. Phone Number Primary Candidate Committee 2. Candidate Information b. Candidate ID Number a, Full Name d. District/County/Municipality . Office Sought LENSSUIDLE. (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 b. Mailing Address (include City, State, and Zip Code) b. Mailing Address (include City, State, and Zip Code) Ñ d. Email Address c. Phone Number d. Email Address c. Phone Number-(incl. CRO-3500) Add 6. Account Information 5. Assistant Treasurer Information Add Remove a. Financial Institution Full Name Remove a. Full Name 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.

ROBERT PERRY GREENE

Signature of Appointed Treaspect

March 2003

CRO-2100A

NC State Board of Elections



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:	ROBERT PERRY GREENE
Treasurer Name:	
Treasurer Address:	UN RIDGE GATE CT
(include city, state, & zip)	KENISUSHNE, N.L. 27073
	7 .
Treasurer Phone:	336-945-3621

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.

7-10-03 Date Signed Signature of Candidate





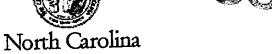
Kimberly Westbrook Deputy Director - Campaign Reporting Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

Confidential

Certification of Financial Account Information

FILED BY:	25000	T DADA	ON LBE	FAF		
Committee Name:	KURSON	/	1 01101			
Treasurer Name:				<u></u>		
Treasurer Address:			1051 1	<u></u>		
(include city, state, & zip	NEWISL	IDGE G	HE ()	123		
Treasurer Phone:	336-94	5-3621				
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		
CHE/KING	WALHOUIA					
By signing this statement, I authorize agents of the State Board of Elections to inspect all accounts provided.						
7-10-03 Date Signed		Bount	Signature of Measurer	Juni		
	-					





State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook Deputy Director – Campaign Reporting COPY

Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

Certification of Threshold

	•
FILED BY:	O DEPON BERUK
Committee Name:	KOBERT PERKY GREENE
Treasurer Name:	
Treasurer Address:	701-11
(include city, state, & zip)	140 RIVER GATE
	KENISUTHE, N.C. 77073
Treasurer Phone:	336-945-3621
election cycle under the pro- until the end of the election expenditures during this el- of elections and file require	mittee intends to neither receive nor expend more than \$3,000 during the current occdures set forth in G.S. 163-278.10A. This certification will remain in effect a cycle for this committee. If this committee exceeds \$3,000 in contributions or ection cycle, I understand that I must immediately notify the appropriate boarded campaign finance reports.
	Certification to remain under the \$3000 threshold. I will now be required to ort for all contributions and expenditures that have not been previously reported current election cycle. I further agree to file all future reports required.
7-10-03 Date Signed	Sold Plant Signature



Kimberly Westbrook Deputy Director - Campaign Reporting

FILED BY:

Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

Certification to Close Committee

Committee Name:	ROBBRT GREENE
Treasurer Name:	ROBBRT GREENE
Treasurer Address:	140 RIDGE CATE CT
(include city, state, & zip)	han Is with B , N.L. 27023
Treasurer Phone:	336 945.3621
certification, I declare that a contributions will be accept signed. If the Committee at any candidate or ballot issu Elections before such activity Committees that have filed "Final Report" will be required under the \$3,000 threshold zero balance with no outsta	under the \$3,000 threshold will only be required to sign this Certification. No ired for committees meeting this criterion. Any Committee that did not file must submit a "Final Report" with this Certification. This report must have a
2003 NO.	711 D 1