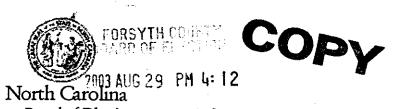
## Statement of Organization - Candidate Committee

C C C D D

1. Committee Inf	ormation	1	NK2 X EH COURT S	-		
a. Fuli Name			RD OF		c. ID Number	
		2003	III 20 DV (			
h Mailing Address (i	nclude City, State and Zip (		JUL 28 PM 4: (	18		
or training reductes (	nerade City, State and Zip (				d. Date Organized	
		# 3				
] .					e. Phone Number	
2. Candidate Info	rmation					
	is Allen Gri	116	Primary Can	lidate Commi		
0	12 HHEN GE	2565			b. Candidate ID Number	
	<u> </u>				U84725	
c. Office Sought $Rv$	THE HALL TOWN	CounciL	d. District/County/Municipality		e. Party Affiliation	
			Carriet 1	· ^	0 0 11.	
(If office sough	it is nonpartisan, write	"Nonnartican" in	Forsyth C	.01	Republican	
3. Treasurer Info	mation	Tronpurisur m			nation	
a. Full Name		·	4. Custodian of Books Information			
OIALIE	Ling Tresclude City, State, and Zip C			· · · · · · · · · · · · · · · · · · ·		
Larry (	teling bes	surer				
O. Mailing Address (in	clude City, State, and Zip C	Code)	b. Mailing Address (include City, State, and Zip Code)			
RUMAL H	BII n.C. 27	95				
c. Phone Number	d. Email Address		c. Phone Number	d. Email Ade	Address	
Cell 336 603 1288						
5. Assistant Treasurer Information Add			6. Account Information (incl. CRO-3500) Add			
a. Full Name		Remove	a. Financial Institution Full Name Remove			
b. Mailing Address (inc	clude City, State, and Zip C	orde)	h Du-			
9-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	Oly, olate, and Zip C	<u> </u>	b. Purpose			
. Phone Number	d. Email Address	·	c. Code	d. Type		
		· · · · · · · · · · · · · · · · · · ·				
CERTIFICATION	<u>!</u>			<u> </u>	<del></del>	
Legify that the C	ommittee is in complice	soo with all massis	ione of Amillo 22 A	:1 3! at		
with funds for a fe	deral or out-of-state PA	C. I further say t	hat this report is con	niciuding (na Inlete true 20	at no funds are commingled	
	P. 0.0			η η η	d correct.	
U COO W	d Name of Size	_ <u>-0-01</u>	lon Aru	lele	1-17-03	
rine	u ivame of Signer	Sig	gnature of Appointed Tre	asurer	Date	



State Board of Elections 506 N Harrington Street Rakeigh, 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	: O.Alle	in Gruk	ohs	
Treasurer Name:	O. Allen	Gru	ble	
Treasurer Address	• • • • • • • • • • • • • • • • • • • •		ron Lane	_
(include city, state, &		MANI N		<u> </u>
				<del></del>
•			-	
Treasurer Phone:	336 4	103 128	38	
accounts, money mark Committee.  The information provi The information provi a court of competent ju provide account information	ded on this form is consided ded would only be used for urisdiction. It will be necessation on required disclosure occount number is presume	red confidential a r the purposes of ssary to assign eaure reports. If an a d to have been wa	all bank accounts utilized, on a count used for any purple and is not subject to public dan audit or investigation or chaccount number a "code account number is used as the tived.	lisclosure.
	Financial Institution	Address	Account Number	Code
PersnoL	RBCCENTURA	WIRSTON	SAlen	12
	<del></del> .	country 4	UbRO	
By signing this statemer provided.	ent, I authorize agents of th	e State Board of	Elections to inspect all acco	unts
8-28-03 Date Signed	<del></del>	0 (	allen Luly Signatur of Tressurer	la .



# COPY

## North Carolina State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook Deputy Director - Campaign Reporting

FILED BY:

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

## **Certification of Treasurer**

Treasurer Address:	ROTA	IHALL	n.c. 2	1045	
(include city, state, & zip)	509	Heath	erton	LANE	
			——————————————————————————————————————		
Treasurer Phone:	336	403	1288	(Ce11)	
I certify that the above inforthe duties and responsibilities sanctions in Subchapter VIII General Statutes.  I understand that if the above the existing Statement of Or	es imposed up I. Regulation of the Treasurer ch	on the appoint of Election Contact anges, it will	nted treasurer a lampaigns of C	and subject to the penal hapter 163 of the North to certify a new treasur	ties and Carolina
7 · 28 - 03  Date Signed			<u>od</u> 0	Allen Julie Signature of Candidate	<u>k</u>



COPY

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:	cham acting treasurer O: Allen Grobb
Treasurer Address:	RUMAL HALL N.C. 27045
(include city, state, & zip)	SO9 HEATHERTON LANE
Treasurer Phone:	336 463 1288 (Cell)
election cycle under the pro until the end of the election expenditures during this ele of elections and file require  I am withdrawing my file the next scheduled repo	mittee 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 ection cycle, I understand that I must immediately notify the appropriate board d campaign finance reports.  Certification to remain under the \$3000 threshold. I will now be required to ref for all contributions and expenditures that have not been previously reported current election cycle. I further agree to file all future reports required.
<b>1</b>	o allen Shull



### 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 to Close Committee**

FILED BY:	
Committee Name:	O. Allen Grubbs
Treasurer Name:	O. Allen Grubbs
Treasurer Address:	509 Heatherton Lane
(include city, state, & zip)	RUTAL HALL N.C. 27045
Treasurer Phone	336 402 1288 (Cell)

I certify that the above mentioned Committee intends to close and cease existence. Upon signing this certification, I declare that all funds have been distributed and reported (if required). In addition, no contributions will be accepted or disbursements made after the "Final Report" is filed or this form is signed. If the Committee at any future time intends to accept or spend funds in support or opposition of any candidate or ballot issue, a new political committee must be formed and registered with the Board of Elections before such activities may commence.

Committees that have filed under the \$3,000 threshold will only be required to sign this Certification. No "Final Report" will be required for committees meeting this criterion. Any Committee that did not file under the \$3,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

11-13-03

Date Signed

Signature

ა: 54