## Statement of Organization - Candidate Committee

1. Committee Information

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

NONE

a. Full Name

	Amendment  Ves No
	c. ID Number
	C ED (VEIII)()
8	d. Date Organized
	e. Phone Number
iate Commi	ttee
	b. Candidate ID Number
	KYL700
nicipality	e. Party Affiliation
	Dem.
oks Inforn	nation
'e	
lude City, St	ate, and Zip Code)
ne	

2. Candidate Information		Brimany Can di	1-4- C	<u> </u>		
a. Full Name		Primary Candi	date Committe			
					b. Candidate ID Number	
DONALD W. RIERSON					KYL700	
c. Office Sought	· · · · · · · · · · · · · · · · · · ·		d. District/County/Mu	nicipality	e. Party Affiliation	
MAYOR		_	Tobaccoville		Dem.	
(if office sough	(If office sought is nonpartisan, write "Nonpartisan" in		] Party Affiliation.)			
3. Treasurer Infor	mation		4. Custodian of Books Information			
a. Full Name	1/6 41		a. Full Name		· · · · · · · · · · · · · · · · · · ·	
	NONE		None			
b. Mailing Address (inc	clude City, State, and Zip Code)		b. Mailing Address (in	clude City, State	and Zin Code)	
None			None			
c. Phone Number	d. Email Address		c. Phone Number	d. Email Addre	35	
` .			-			
5. Assistant Treasu	rer Information	dd	6. Account Inform	ation (incl.	CRO-3500)	
a. Full Name Remove		emove	a. Financial Institution Full Name Remove			
None			100.	Ne.	,	
b. Mailing Address (include City, State, and Zip Code)		i i	. Parpose			
Nowe			No	on e.		
c. Phone Number	d. Email Address		. Code	d. Type		
NONE	Nove		none			
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.    Donald Welson   1-21-2003						
rintee	i izeme of pignet.	Signa	ture of Appointed Treas	urer ·	Date	
CRO-2100A	N	C State Board	of Elections		March 2003	



### 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 Threshold**

FILED BY:	
Committee Name:	
Treasurer Name:	_ NONE
Treasurer Address:	
(include city, state, & zip)	
Treasurer Phone:	
I certify that this come election cycle under the prountil the end of the election expenditures during this elections and file required.  I am withdrawing my file the next scheduled report	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 if campaign finance reports.  Certification to remain under the \$3000 threshold. I will now be required to t for all contributions and expenditures that have not been previously reported reent election cycle. I further agree to file all future reports required.
7-2/- 2063 Date Signed	Sand W Rien in

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North Carolina State Board of Elections

506 N Harrington Street

Raleigh, NC 27603

Kimberly Westbrook Deputy Director - Campaign Reporting alling Address
O B 9 27255

PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7179 Fax: (919) 715-8047

## **Certification of Treasurer**

FILED BY:	
Candidate Name:	DONALD W. RIERSON
Treasurer Name:	DONALD W. RIERSON
Treasurer Address:	6125 Tobaccoville RD
(include city, state, & zip)	Tobaccoville, N.C. 27050
Freasurer Phone:	336-924-4972

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.

7-26-2003 Date Signed

Signature of Candidate



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

Kimberly Westbrook Deputy Director - Campaign Reporting

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### Confidential

## **Certification of Financial Account Information**

FILED BY:				
Committee Name	e:			
Treasurer Name:		1/,		N
Treasurer Addres		70		
(include city, state, &		$\mathcal{U}_{i}$		
•		<del>/                                    </del>	·	<u> </u>
		)		
Treasurer Phone:		· .		
ior uie above named	Committee. These account	numbers include ai	ll bank accounts utilized, ci	redit card
Committee. The information pro- The information pro- a court of competent provide account info	vided on this form is consider vided on this form is consider vided would only be used for jurisdiction. It will be necess remation on required disclosures account number is presume	ered confidential and the purposes of an assary to assign each are reports. If an ac	account used for any purport ad is not subject to public di a audit or investigation or a h account number a "code" ccount number is used as th	isclosure. Is required by
Committee. The information pro- The information pro- a court of competent provide account info	rket or savings accounts, or a vided on this form is conside vided would only be used for jurisdiction. It will be necess	ered confidential and the purposes of an assary to assign each are reports. If an ac	account used for any purport ad is not subject to public di a audit or investigation or a h account number a "code" ccount number is used as th	isclosure. Is required by
Committee.  The information provide information provide account information provide account information provide account informaticality of the	rket or savings accounts, or a vided on this form is conside vided would only be used for jurisdiction. It will be necess rmation on required disclosure account number is presume	any other financial ared confidential an r the purposes of a ssary to assign eacl are reports. If an ac d to have been wai	account used for any purposed is not subject to public dinaudit or investigation or a haccount number a "code" count number is used as the ved.	isclosure. Is required by in order to ie "code",



## North Carolina

#### State Board of Elections

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## **Certification to Close Committee**

FILED BY:	
Committee Name:	SONALd WAYNE KIERSON
Treasurer Name:	Donald Wayne RIERSON
Treasurer Address:	6125 Tomoccouille Rd
(include city, state, & zip)	Tobaccacille, Nies 27050
Treasurer Phone:	336-924-4972

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.

100-10 2003 Date Signed Month Magne Sur

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Match 2003.