Statement of Organization - Candidate Confect OPY

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Committee Information				
1. Committee Information a. Full Name		c. ID Number		
Committee To Elect Holbrook				
b. Mailing Address (include City, State and Zip Code)	d. Date Organized			
3640 Foxglove Orive		2000		
		e. Phone Number		
Winston-Salen, NC 27	336-922-7615			
2. Candidate Information	Primary Candidate Committe	e		
		b. Candidate ID Number		
Terry L. Holbrook		3828420		
c. Office Sought	d. District/County/Municipality	e. Party Affiliation		
Clerk of Superior Court	Forsyth	RepublicAD		
(If office sought is nonpartisan, write "Nonpartisan" in [e	Party Affiliation.)	dian .		
3. Treasurer Information	4. Custodian of Books Informa	цод		
a. Full Name	a. Full Name			
KAREN JOHNSON GORDON	KAREN JOHNSON GORDON			
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City, State, and Zip Code)			
3640 Foxglove Orive	3640 Foxglove Drive			
Winston - Salem, NC 27106	c. Phone Number d. Email Addr			
c. Phone Number d. Email Address	c. Phone Number d. Email Addr (336)			
922-7615	922-7615			
5. Assistant Treasurer Information		CRO-3500)		
a. Full Name	a. Financial Institution Full Name	Remove		
MARLENE BUCHANAN JOHNSON	First Citizen's BANK			
b. Mailing Address (include City, State, and Zip Code)	b. Purpose	1-1-1-		
301 BRAXTON Ridge Court	CAMPAIGN CONT	TIDUTIONS		
Winston-Salen, NC 27104.	AND Expend	itures		
c. Phone Number d. Email Address	c. Code d. Type			
336-765-5762	FC21 Che	ocking		
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.				
KAREN JOHNSON GORDON Kanes Johnson Do-don 8-8-05 Printed Name of Signer Signature & Appointed Treasurer Date				
CRO-2100A NC State Boa	rd of Elections	March 2003		
CIVED REVER				
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North Carolina State Board of Elections 506 N Harrington Street Raleigh, NČ 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:	TERRY L. HolbRook
Treasurer Name:	KATEN JOHNSON GORDON
Treasurer Address:	3640 Foxglove Drive
(include city, state, & zip)	Winston-SAlem, NC 27106
	021-922-01-15
Treasurer Phone:	336-122-1013

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.

8 - 8 - 85 Date Signed

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Certification of Treasurer



North Carolina State Board of Elections 506 N Harrington Street Rakigh, 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:

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Committee Name:	Committee To Elect Holbrook Clerk
Treasurer Name:	KAREN JOHNSON GOLDON
Treasurer Address:	364D Foxglove Drive
(include city, state, & zip)	Winston-Salem NC 27106
Treasurer Phone:	336-922-7615

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	First Citizens	5 PO Box 5537		FC21
σ	BANK	WINSTON-SALA		

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

nature of Candidate or Treasurer

In lieu of providing account information, I certify that this committee will not raise or spend any money except for the filing fee. (Only candidates may choose this option.)

 Date Signed
 Signature of Candidate or Treasurer

 CRO-3500
 Certification of Financial Account Information