



North Carolina
State Board of Elections

506 N Harrington Street
Raleigh, NC 27603

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 Treasurer

FILED BY:

Candidate Name: KENNETH "Doc" DAVIS
Treasurer Name: FRED MARTIN, JR.
Treasurer Address: P.O. Box 117
(include city, state, & zip) WALKERTOWN, N.C. 27051

Treasurer Phone: 336 595 2631

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.

8-05-05

Date Signed

Kenneth Doc Davis
Signature of Candidate

RECEIVED

2005 AUG 15 PM 3:17

CRO-3100

Certification of Treasurer

March 2003

Statement of Organization - Candidate Committee

Amendment	
☐ Yes	☐ No

1. Committee Information					
a. Full Name				c. ID Number	
Kenneth "Doc" Davis Election Committee					
b. Mailing Address (include City, State and Zip Code)				d. Date Organized	
P.O. Box 117 WALKERTOWN, N.C. 27051				8-05-05	
				e. Phone Number	
				595-2631	
2. Candidate Information			☐ Candidate's Primary Committee		
a. Full Name		c. Candidate ID Number		d. Party Affiliation	
Kenneth (Doc) Davis		R3467D		Nonpartisan	
b. Mailing Address (include City, State, and Zip Code)		e. Office Sought		f. Jurisdiction	
P.O. Box 278 WALKERTOWN, N.C. 27051		mayor - Walkertown		Walkertown	
(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)					
3. Treasurer Information			4. Custodian of Books Information		
a. Full Name			a. Full Name		
FRED MARTIN, JR.					
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
P.O. Box 117 WALKERTOWN, N.C. 27051					
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address		
595-2631					
5. Assistant Treasurer Information		☐ Add ☐ Remove		6. Account Information (incl. CRO-3500) ☐ Add ☐ Remove	
a. Full Name		a. Financial Institution Full Name			
b. Mailing Address (include City, State, and Zip Code)		b. Purpose			
c. Phone Number	d. Email Address	c. Code	d. Type		
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.					
FRED MARTIN, JR.		Fred Martin, Jr.		8-14-05	
Printed Name of Signer		Signature of Appointed Treasurer		Date	

CRO-2100A

NC State Board of Elections

May 2003



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Deputy Director - Campaign Reporting

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Certification of Threshold

FILED BY:

Committee Name: KENNETH "Doe" Davis Election Committee

Treasurer Name: FRED MARTIN, JR.

Treasurer Address: P.O. Box 117

(include city, state, & zip) WALKERTOWN, N.C. 27051

Treasurer Phone: 336 595 2631

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.

THIS DECLARATION CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.

☐ 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.

8-14-05
Date Signed

Fred Martin, Jr.
Signature



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Fax: (919) 715-8047

Confidential

Certification of Financial Account Information

FILED BY:

Committee Name: Kenneth "Doc" Davis Election Committee
Treasurer Name: FRED MARTIN, JR.
Treasurer Address: P.O. Box 117
(include city, state, & zip) WALKERTOWN, N.C. 27051
Treasurer Phone: 336 595 2631

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

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

8-14-05
Date Signed

Fred Martin, Jr.
Signature of 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.)

8-08-05
Date Signed

Kenneth Doc Davis
Signature of Candidate