

# North Carolina

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 Treasurer**

FILED BY:	
Candidate Name:	EVELYN A. TERRY
Treasurer Name:	EVELYN A. TERRY Gloria S. Black
Treasurer Address:	1021 Treadway H.
(include city, state, & zip)	WINSTON- SALEM NC 27107
Treasurer Phone:	(336) 788-6481

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.

July 26, 2005

Signature of Candidate

GEVEOR

90:01 WY 91907 SUUT Certification of Treasurer

FORSYTH COUNTY

#### Statement of Organization - Candidate Committee ☐ Yes ☐ No 1. Committee Information Full Name c. ID Number EVELYN A. TERRY SEWard City Council Mailing Address (include City, State and Zip Coole) 1224 Reynolds Forest Dr. Winston-Saleminc 27107 OOYNGF d. Date Organized e. Phone Number 334 788 5008 2. Candidate Information ☐ Candidate's Primary Committee . Full Name c. Candidate ID Number d. Party Affiliation Democrat e. Office Sought f. Jurisdiction 1224 Reynolds Forest Dr Southeast Ward W- 5 Winston-Salem, Ne (If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.) 3. Treasurer Information 4. Custodian of Books Information a. Full Name a. Fuli Name b. Mailing Address (include City, State, and Zip Code) b. Mailing Address (include City, State, and Zip Code) WINSTON-SALEA, NC 1021 TrEadway Phone Number d. Email Address c. Phone Number d. Email Address B36) 188-6481 5. Assistant Treasurer Information ... Add 6. Account Information (incl. CRO-3500) . Full Name Remove a. Financial Institution Full Name Remove Mechanics & Farmers b. Mailing Address (include City, State, and Zip Code) CAMPAIGN FINANCES . 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. Gloria S, Black Printed Name of Signer Signature of Appointed Treasurer

NC State Board of Elections

CRO-2100A

Amendment

May 2003



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:	EYELUN A.	TETTY FOR	SE Ware	d City Cou	WCI
Treasurer Name:	EYELYN A	S. Black	٤		
Treasurer Address:	1021 Tr				
(include city, state, & zip)	WINSTON-	SAlem,	NC 2	7107	
	·.	· · · · · · · · · · · · · · · · · · ·		*	
Treasurer Phone:	(336) 188	-6481			
Check One:  I certify that this commelection cycle under the procuntil the end of the election cexpenditures during this election of elections and file required THIS DECLARATION CAN  I am withdrawing my Calle the next scheduled report from the beginning of the current.	edures set forth in G.S. yele for this committee tion cycle, I understand campaign finance report ONLY BE MADE AT ertification to remain ur for all contributions and	163-278.10A. To a lifthis committed that I must immediate. If the BEGINNII ander the \$3000 that deependitures the	his certification be exceeds \$3,000 bediately notify the NG OF AN ELL reshold. I will at have not beer	will remain in effi 00 in contributions he appropriate boa ECTION CYCLE. now be required to n previously repor	ect s or ard
July 26, 20 Day Signed		Jone	ly Signatu	terry	



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Kimberly Westbrook Deputy Director - Campaign Reporting

FILED BY:

Committee Name:

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

TERRY - SE Ward City Council

# Confidential

### **Certification of Financial Account Information**

Treasurer Name	GORIA	5. BlACK		
Treasurer Addre	ess: <u>[02]</u>	Treadway Co	WIT	1
(include city, state,	& zip) WINSTON	Treadway Co - SAlem,	NC 27107	
Treasurer Phone	_	88-6481		
for the above named accounts, money ma Committee.  The information protein information protein a court of competent	ormation provided below is Committee. These accounts, or wided on this form is consided would only be used jurisdiction. It will be necommation on required disclo	nt numbers include all bor any other financial accordanced confidential and is for the purposes of an accessary to assign each acc	ank accounts utilized, count used for any purp s not subject to public d dit or investigation or a ecount number a "code"	redit card ose by the isclosure. as required by
confidentiality of the	account number is presum	ned to have been waived		ie code,
Type of account	Financial Institution	Address	Account Number	Code
Ch ECKING	Financial Institution  MEF BANK		Account Number	
	Tital	Address MLL Drive W-SAlem, NC	Account Number	Code  MF01
By signing this staten provided.	MiF BANK  ment, I authorize agents of	MLL Drive W-SAlem, NC the State Board of Elect	ions to inspect all acco	MFOI
Checking  By signing this staten	MiF BANK  ment, I authorize agents of	MLL Drive W-SALEM, NC	ions to inspect all acco	MFOI
By signing this staten provided.	MiF BANK  ment, I authorize agents of	the State Board of Elect  We state Board of El	ions to inspect all acco	MF01
By signing this staten provided.	MEF BANK  nent, I authorize agents of  count information, I certif	the State Board of Elect  We state Board of El	ions to inspect all acco	MF01