



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 Treasurer

FILED BY:	
Candidate Name:	Tony G. Deans.
Treasurer Name:	Tony G. Deans
Treasurer Address:	4450 Clarksburg Rd
(include city, state, & zip)	Clemmons, NC 27012
Treasurer Phone:	336-978-3310
the duties and responsibilities	nation is correct, and I, as candidate, appoint said treasurer to personally fulfill imposed upon the appointed treasurer and subject to the penalties and Regulation of Election Campaigns of Chapter 163 of the North Carolina
I understand that if the above I the existing Statement of Orga	Freasurer changes, it will be necessary to certify a new treasurer and amend mization within 10 days of the vacancy.
2122/20-	4

CHARACT!

81:01 WY LZ 8719007 Certification of Treasurer

March 2003

Statement of Organization - Candidate Committee					Amend Y	
1. Committee	Information	-	**:-:-			
a. Full Name					c. ID Numb	er
Responsible Schools For Forsyth			rsulla			
	b. Mailing Address (include City, State and Zip Code)			· · · · · · · · · · · · · · · · · · ·	d. Date Organized	
40	So Clocksho	RQ		2127106		101
4450 Clarksburg Rd		10		e. Phone Number		
Clemnons, NC 2701			12		336-978-33/0	
						78-33/0
2. Candidate II a. Full Name	nformation			Primary Commi		<u> </u>
		· · · · · · · · · · · · · · · · · · ·	c. Candidate ID Nu	mber	d. Party Affi	Liation
lone	1 Gilbert D	eans			Repu	blican
b. Mailing Address	(include City, State, and Zip	Code)	e. Office Sought			f. Jurisdiction
4450	O Clarksburg	a Rel	Board	of Educa		A+
		,				LARGE
Clev	umons, NC	24012	(If office sought	is nonpartisan,	write "Non	partisan" in [d]
				Party Affili		
3. Treasurer Info	ormation		4. Custodian of E	looks Informa	tion	
. Full Name	_	· · · · · · · · · · · · · · · · · · ·	a. Full Name			
Tony	Gilbert De	ans	Tony 6	dilbert -	Decins	
. Mailing Address (i	nclude City, State, and Zip C	ode)	b. Mailing Address (i			
4450	CIAR Ks burg	, RQ	4450	Clark	s burg	Rel
Clen	umons, NC	27012	Clen	mans.	, NC à	SIDFL
Phone Number	d. Email Address		c. Phone Number	d. Emzil Addre		
336 178-2211	deans 61 @	'waa-Com	336 978-3310	1	د حملا	.u.o. C con-
	urer Information	I Add	6. Account Inform		CRO-3500)	
Full Name		Remove	a. Financial Institution			Remove
			7200 0			
Jailing Address Go	clude City, State, and Zip Coo		RBC Cen	tura 631	<u>m</u>	
Taming Frank 639 (III)	tride City, State, 220 22p Cot	16)	Election	Camparin	Expan	es
			2100 1100	. 4 6		
- N - 1	T					
ione Number	d. Email Address		c. Code	d. Type		
_		I	TED	Checking		1
RTIFICATION		··				-
ertify that the Co	ommittee is in compliance	with all provision	ns of Article 22A i	ncluding that n	o funds are o	commingled
	leral or out-of-state PAC.					
·		•		•		ľ
Tony G.	Deans -				2/27/	ے د
Tony G. Printed	Name of Signer	Signa	ture of Appointed Treas	nct	2/27/e	te

NC State Board of Elections

CRO-2100A



506 N Hamington Street Rakigh, NC 27603 Westbrook

Kimberly Westbrook Deputy Director - Campaign Reporting

FILED BY:

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Confidential

Certification of Financial Account Information

Committee Nan	ne: Resp	ousible School	s For Forsy	ta
Treasurer Name	Tony	G. Deans		,
Treasurer Addre	ss: 4450	Clarksburg	RO	
(include city, state,		rums, No		
Treasurer Phone:		- 978- 3310		
for the above named accounts, money man Committee. The information provemation provemation provemation provemation provemation provemation provemation provide account information provide account information.	rmation provided below is Committee. These accounts, or ket or savings accounts, or ided on this form is consided would only be used four is disclosured in the committee of the	nt numbers include all bar r any other financial acco lered confidential and is n or the purposes of an audi essary to assign each account	k accounts utilized, count used for any purport of subject to public di it or investigation or a punt number a "code"	redit card ose by the isclosure. Is required by in order to
Type of account	Financial Institution	Address	Account Number	Code
Checking	RBC Centura Bout	31-45 Cla 08		760
		TO ID TRIMINGALS NO		
0		Clemman NC		
By signing this statement provided.	ent, I authorize agents of th	Clemman NC		
provided.		Clemman NC		
By signing this statement provided. 2/27/06 Date Signed		Clemman NC		
Date Signed In lieu of providing acce		clemman NC he State Board of Election that this committee will	as to inspect all accou	ints



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Certification of Threshold

FILED DI:	
Committee Name:	Responsible Schools For Forsyth
Treasurer Name:	Tony G. Prans
Treasurer Address:	4450 Clarks burg Rl
(include city, state, & zip)	Clemmans, NC 27012
Treasurer Phone:	336-978-3310
until the end of the election cyc expenditures during this electio of elections and file required ca THIS DECLARATION CAN O I am withdrawing my Certifile the next scheduled report for	ee intends to neither receive nor expend more than \$3,000 during the current ures set forth in G.S. 163-278.10A. This certification will remain in effect le for this committee. If this committee exceeds \$3,000 in contributions or a cycle, I understand that I must immediately notify the appropriate board impaign finance reports. NLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE. If it is a substantial of the substantial in the
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