



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:	HAMOLD LEE HAIRSTON COMPAION TO ELECT TO FORSYTH COUNTY COMMISSIONER
Candidate Name:	ELECT TO FORSYTH COUNTY COMMISSIONER
Treasurer Name:	HUMOLD LEE HUMESTON
Treasurer Address:	3140 SHAFTESBURY LAWE
(include city, state, & zip)	3140 SHAFTESBURY LAWE WINSTON-SALEM, NC 27105-6945
Treasurer Phone:	336 725-4194

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.

2 - 22 - 06 Date Signed

Held of

2006 FEB 22 PM 2: 18

Certification of Treasurer EOUS ALA COUNTLY

CRO-3100

March 2003

Statement of Organization - Party Committee

			,
Amendment			
Yes	Ø		
The second section and the second section is a second section of the second section section is a second section sectio	A NUMBER OF STREET	nancho s	2-360000

1. Committee Info	rmation			
• Full Name				Number
Therear of Les	HAINSON # BUSET	MUPALLOW	10	
ELECT T	FORSYTH COUNTY	DMMISSIAN	ER	
b. Mailing Address (inc	clude City, State and Zip Code)		d. Da	te Organized
3140 SHM	ETESBURY LANG		2-	22-06
WINSTON.	SALEM, NC 27105-6	945	e. Ph	one Number
			32	36 25-4194
2. Party Informati	on			
a. Type		b. Party Name		
National National		MONTH CHNOLINA		
State		Demograti	in Dava	r v
Subordinate		Demogun (TITIES	
3. Treasurer Infor	mation	4. Custodian of Books Information		
a. Full Name	-	a. Full Name		
HAMOLD LEE HAIRSTON		HAMOLO LEE HAIRSTON		
	clude City, State, and Zip Code)	b. Mailing Address (inc	lude City, State, and	l Zip Code)
3140 SHA	FTESBURY LANE	3140 SHAFTESBURY LANE		
WINSTON	· SUCEM, INC 27105	WINSTON-SALEM, INC 27105		
a Bhona Number	d Fmail Address	c. Phone Number	d. Email Address	4/16
725,4194	HITAIRSTON / TRIAD. R.L. COM	336 725-4194	HHAIRSTO TMAD.NA	COM
5 Assistant Traces	urer Information	6. Account Inform)-3500)
5. Assistant Treasurer Information		a. Financial Institution		Remove
a. Puli Ivanie		MECHINALICS .	-Farmers	BANK
b. Mailing Address (in	clude City, State, and Zip Code)	h. Purrose		
		POLITICAL	CHMPA	LGN
c. Phone Number	d. Email Address	c. Code	d. Type	
			CHECICIN	·c
CERTIFICATION	7			
Legrify that the C	Committee is in compliance with all provised and or out-of-state PAC. I further say to	sions of Article 22A, hat this report is com	including that no plete, true and co	funds are commingled rrect.
	LEG HAIRSON /Lel	10 8/16	4	2-22-06
I-MANUSLO Print	ed Name of Signer Signer	gnature of Appointed Trea	surer	Date

CRO-2100C

NC State Board of Elections

March 2003



Kimberly Westbrook Deputy Director - Campaign Reporting

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

Confidential

Cei	rtification of Fin	ancial Accor	unt Information	n
FILED BY:	HANDLO LE	e Huirsa	ON COMPANS	N TO
Committee Nam	e: ELECT T	O FORSY TH	1 COUNTY COM	UMISSIONEE
Treasurer Name	Homoro	LEE HA	RSTON	
Treasurer Addre	ss: <u>3140 SH</u>	AFTESBU	MY LANE	
(include city, state,		N-SALE		05-6949
Treasurer Phone:	336 72	:5-4194	•	
for the above named accounts, money material Committee. The information provides the control of	rmation provided below is t Committee. These account rket or savings accounts, or rided on this form is conside	numbers include all any other financial a cred confidential and	bank accounts utilized, caccount used for any purp	redit card ose by the
a court of competent provide account info	rided would only be used fo jurisdiction. It will be nece mation on required disclost account number is presume	r the purposes of an ssary to assign each are reports. If an acc	audit or investigation or a account number a "code" count number is used as the	is required by
Type of account	Financial Institution	Address	Account Number	Code
CHEKING	MEHONICS + FARMY	W-S, NC		
By signing this staten provided.	nent, I authorize agents of th	e State Board of Ele	ections to inspect all accou	unts
7. 22 116			M-011-	1



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:	HAMOUD LEE HMINSTON CHIMPAIGN T
Committee Name:	ELECT TO FORSYTH COUNTY COMMISSIONER
Treasurer Name:	HANDLO LEE HAIRSTON
Treasurer Address:	3140 SHAFTESBURY LANE
(include city, state, & zip)	WINSTON-SALEM, NC 27/05-6945
Treasurer Phone:	336 725-4194
until the end of the election expenditures during this election of 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 I 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 trent election cycle. I further agree to file all future reports required.

Z-ZZ-06 Date Signed