| | | COLEY | | | | | |
|--|--|--|---|---|--|--------------|--|
| Statement of | Organization - | Candidate (| Committee | | Amendn Yes | | |
| 1. Committee Infor | mation | | | | · · · · · · · · · · · · · · · · · · · | | |
| a. Full Name | | | | | c. ID Number | | |
| JOINES FOR MAYOR | | | | | 000-000000-0-000 | | |
| b. Mailing Address (include City, State and Zip Code) | | | · · · · · · · · · · · · · · · · · · · | | d. Date Organized | | |
| PO Box 20397 Winston-Salem, NC 27120 | | | 11/01/2005 | | 5 | | |
| | | | e. P | | e. Phone Nun | Phone Number | |
| | | 1 | | | (336) 732-5389 | | |
| 2. Candidate Infor | mation | ······································ | | rimary Commi | | | |
| a. Full Name | | | c. Candidate ID Nun | c. Candidate ID Number d. Party Affiliation | | | |
| James A. Joines | (Allen) | | JFM Democ | | Democrat | ic | |
| b. Mailing Address (include City, State, and Zip Code) | | | e. Office Sought | e. Office Sought f. Jurisdiction | | | |
| PO Box 20397 Winston-Salem, NC 27120 | | | Mayor | | Forsyth County | | |
| | | | (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 | | | | |
| Dawn S. Alexander | | | Same | | | | |
| b. Mailing Address (include City, State, and Zip Code) | | | b. Mailing Address (include City, State, and Zip Code) | | | | |
| 100 N. Main Street, NC6756 Winston-Salem, Nc 27101 | | | Same | | | | |
| c. Phone Number | d. Email Address | | c. Phone Number | c. Phone Number d. Email Address | | | |
| (336) 732-5389 | dawn.alexander@w | vachovia.com | | Same | | | |
| 5. Assistant Treasu | rer Information | D Add | 6. Account Infor | mation (inc | :l. CRO-3500) | Add | |
| a. Full Name Ren | | | a. Financial Institution Full Name Remove | | | | |
| b. Mailing Address (inc | lude City, State, and Zip C | ode) | b. Purpose | · · · · · · · · · · · · · · · · | | | |
| c. Phone Number | d. Email Address | | c. Code | d. Type | | | |
| with funds for a fe | ommittee is in complia deral or out-of-state P/ | AC. I further say | isions of Article 224 that this report is co Solution tignature of Appointed T | omplete, true a | at no funds a nd correct. 01/26/ | | |
| CRO-2100A | | NC State B | oard of Elections | | | May 2003 | |

.



COPY

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:

Dawn S. Alexander

James A. Joines (Allen)

100 N. Main Street, NC6756

Winston-Salem, NC 27101

Treasurer Name: Treasurer Address:

(include city, state, & zip)

Treasurer Phone:

336-732-5389

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.

| 01/26/2007 | Allen Joines |
|----------------|------------------------|
| Date Signed | Signature of Candidate |
| | |
| ECEIVED | ษ |
| AN 26 PM 1: 16 | C 1002 |
| | March 2003 |