

# North Carolina State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director - Campaign Reporting COPY

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

# **Certification of Treasurer**

This Certification is used by Candidate Committees to appoint a treasurer to the committee. This form is required and must accompany the Candidate's Statement of Organization

FILED BY:	1 1			
Candidate Name:	KAndell Mendenhell			
Treasurer Name:	RANdall Mendenhill			
Treasurer Address:	4505 CAMellia lone		2	_ 
(include city, state, & zip)	WALKERTOWN NC. 27051	2	<u> </u>	
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g .		market.	<del>-0</del>	. 1
Treasurer Phone:	336-595-3652	and	2	
			57	. 1 to

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. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

7 - 23 - 07 Date Signed

Signature of Candidate

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.

# ${\bf Statement\ of\ Organization\ \textbf{-}\ Candidate\ Committee}$

Amendment

Yes

Use this form to create a new or update an existing candidate committee

This form must be accompanied by forms CRO-3100 and CRO-3500

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a. Full Name	The state of the s	post o propries	3.			11.	c, ID Numl	ier	
Committe	e TO Elect RANDY 1	Nendenho 11							
	(include City, State and Zip Cod		1 .10 			7. x	d. Date Org	anized	\$5 <sup>1</sup>
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Randall ER	nest Mendenhall		RIY	1F2	2-8	•	Non Par	· · · · · · · · · · · · · · · · · · ·	<del> </del>
b. Mailing Address (i	include City, State, and Zip Code	e)	e. Office Soug	hţ				f. Jurişdî	ction
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	nclude City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)						
4 505 Camella Lane WAlkee foun N.C. 27051			4505 CAMellia Lyne WAlkertam N.C. 27051						
Phone Number	d. Email Address		c. Phone Numb	er	d. Ema	il Áddre	55		
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Full Name		Property of	a. Financial Ins	titution	Full Na	me		Rono	V
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Mailing Address (include City, State, and Zip Code)			b. Purpose		· · · · · ·			3.3	*** ****
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ERTIFICATION	<u> </u>		\$						
	ommittee is in compliance w deral or out-of-state PAC. I							comming	led
RANdall & Mendenhall Kaulall E Mechall 7-23-07 Printed Name of Signer Signature of Appointed Treasurer Date									



# North Carolina

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Kimberly Westbrook-Strach
Deputy Director - Campaign Reporting

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# Certification of Threshold

This Certification is used by Candidate and Party Committees only, to declare or withdraw the committee's intent to raise or spend under \$3,000 in the current election cycle

FILED BY:	
Committee Name:	Committee to Elect Randy Menderhall
Treasurer Name:	Randy Mendenhall
Treasurer Address:	4505 CAMellia lane
(include city, state, & zip)	NA/Kerjann X/C. 27051
Treasurer Phone:	336-595-3652
election cycle under the prountil the end of the election expenditures during this elections and file required THIS DECLARATION CA	mittee intends to neither receive nor expend more than \$3,000 during the current occdures set forth in G.S. 163-278.10A. This certification will remain in effect a cycle for this committee. If this committee exceeds \$3,000 in contributions or extion cycle. I understand that I must immediately notify the appropriate board d campaign finance reports.  N ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.  Certification to remain under the \$3000 threshold. I will now be required to not for all contributions and expenditures that have not been previously reported attent election cycle. I further agree to file all future reports required.
フ - 2 3 - 0 7 Date Signed	RadaME Medaball Signature

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.



# North Carolina

#### State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director - Campaign Reporting

FILED BY:

CRO-3500

Committee Name:

Treasurer Address:

Treasurer Name:

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

June 2007

Confidential

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

This Certification is used to report confidential bank account information for all financial accounts established by the committee and must accompany the Statement of Organization Form

Committee to Fleet Rady Mendenhall
KARdyll Mendenhall
4505 Camellia Lane

(include city, state,	& zip) WALKER	roun N.C.	27051			
Treasurer Phone	e: <u>336-3</u>	95 - 3652				
the above named Con	rmation provided below nmittee. These account ngs accounts, or any oth	numbers include	all bank accounts u	tilized, credit card ac	counts,	
information provided court of competent just to provide account int	ided on this form is con would only be used for risdiction. It will be nec- formation on required do of the account number i	r the purposes of essary to assign disclosure reports.	f an audit or invest each account numbe If an account num	igation or as require er a "account code" i	ed by a n order	
Type of account	Financial Institution	Address		Account Number	Account Code	
Checking	Bank of North Carely	211 Blosd ST K	unersville 27284			
		<u> </u>	·			
By signing this statement, I authorize agents of the State Board of Elections to inspect all accounts provided.						
7-23-07			Radell E.	Michael	, 	
Date Signed			Signature o	f Candidate or 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.)						
•					4	
Date Signed		<del></del>	Signature of	Candidate or Treasurer		

Certification of Financial Account Information