Statement of Organization - Candidate Committee

Amendment

Yes No

	ate a new or update an existing candidate		****			
	eccompanied by forms CRO-3100 and CR	O-3500.	2009.	11 22 8	M 0:30	
	cmation .					
a. Full Name			R	c. ID Number	Fn	
RICKY S	SPENCER PLUNKETT		- ,	FC03	দিট	
INICA TO	SICNCEL TAVALE// Slude City, State and Zip Code)	SPERSON OF THE PROPERTY OF SPERSON	55555555555555555555555555555555555555	d. Date Organ		
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	coulbridge Road		•	07.15.09		
D. 201	HALL, NC 27045			e. Phone Number		
nulose /	" (12) (1 = 32) (3 ·)					
				336 0 6	245470	
2. Candidate Infor	mation	Candidate's Pri	mary Commit	tee		
a. Full Name		c. Candidate ID Numb	er.	d. Party Affili	ation	
D	2	Ton 200		AL. 1. D.		
	ENCER YOUNGETT	rcw 377	a de comunicación de la comunica	140N-14	RTISAN	
21 01 1 1 1 1 2 2 2 2 1 1 3 0 12 3 12 0 12 2 2	lude City; State, and Zip Code)	e. Office Sought			f. Jurisdiction	
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0. 1/	ALL NC 27045	Corner	LMAN		RH	
RUME /T	70C / 1/C 0/075	(If office sought is nonpartisan, write "Nonpartisan" in [d]				
			Party Affil	_		
3. Treasurer Inform	nation	4. Custodian of Bo	oks Informa	ition 🧸 🚉	a make da la	
a. Full Name		a. Full Name				
D	~ (P)	\square) <	ה		
	INCER YAUNKETT	KICKY STENCER YAUNKETT				
	lude City, State, and Zip Code)	b. Mailing Address (include City, State, and Zip Code)				
902 HALLON	IBRIAGE 14040	900 MICONBRIDGE KAD				
RUPH 1	ALL NC 27045	RURAL 14	HL W	2 278	43	
c. Phone Number	d. Email Address	c. Phone Number	d. Email Addr			
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CAR4.5470	KUNYERS @ TRIAD, RR.COM	6245470	YLUNKE	RSC 778	LAD. RREU	
5. Assistant Treasu	rer Information 🔲 🔲 Add	6. Account Inform	ation (incl	CRO-3500)	Add.	
a. Full Name	Remove.	a. Financial Institution	Full Name		Remove	
a Magazine Rus Albra Succione Rel		make mengangan 1951 Jesti				
o. Maning Address (inc	lude City, State, and Zip Code)	b. Purpose			<u> </u>	
c. Phone Number	d. Email Address	c. Account Code	d. Type			
CERTIFICATION						
	ommittee or Fund is in compliance with a					
_	NC General Statutes and that no funds as	re commingied with	promoned or	other non-a	scrosed funds.	
Turther certify that	this report is complete true and sorrect.	· Ma	•			
Kerry 5	YOUKETT SKILL	J/11. Us	•	01.2	10 2019	
	d Name of Signer	nature of Appointed Trea	surer	<u>~/ ~</u>	Date	

CRO-2100A

NC State Board of Elections

December 2007





North Carolina

State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director – Campaign Reporting TOPSYLE SETY ELECTRON OF STREET

2009 JUL 22 AM 9: 30

RECLIVED

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:		
Candidate Name:	RICKY S. PLUNKETT	
Treasurer Name:	RICKY S. PLUNKETT	
Treasurer Address:	900 FALCONBRIAGE ROAD	
(include city, state, & zip)	PURAL HALL NC 27045	
Treasurer Phone:	336 624-5490	

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).

01.20.209 Date Signed

Signature of Candidate

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:

Committee Name: Treasurer Name:

Treasurer Address: (include city, state, & zip)

Treasurer Phone:

FORSY: A THIRTY BOARD CR C COTION:

2009 JUL 22 AM 9: 30

RELLIVED

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

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

I certify that the information provided below is true and accurate. I am providing all account information for

			k accounts utilized, credit card ac d for any purpose by the Committ		
information provide court of competent j to provide account it	d would only be used for urisdiction. It will be nece	the purposes of an au essary to assign each ac sclosure reports. If an	I is not subject to public disclosur adit or investigation or as require ecount number a "account code" in account number is used as the "an maived.	d by a n order	
The treasurer shall rexclusively by the po	maintain all moneys of the olitical committee and shall	e political committee in	n a bank account or bank account funds with any other moneys.	ts used	
Type of account	Financial Institution	Address	Account Number	Account Code	
By signing this staprovided.	tement, I authorize agents	of the State Board of F	Elections to inspect all accounts		
Date Signed			Signature of Candidate or Treasurer		
	g account information, I congress of the second of the sec		ee will not raise or spend any mon	ey	
<u> </u>	9	PK.	Signature of Candidate or Treasurer		
CRO-3500	Certification o	of Financial Account In	formation Augus	t 2008	



North Carolina

State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director – Campaign Reporting FORSY - HYLY HOARD DE L'HOMS

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

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: LICZY S. TZUNKETT
Treasurer Name: ROXY S. PWYKETT
Treasurer Address: 900 FALCOUBRIASE ROAD
(include city, state, & zip) Rural HAU NC 21045
Treasurer Phone: 336 6245410
Check One: I certify that this committee intends to neither receive nor expend more than \$3,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$3,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports. THIS DECLARATION CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE. I am withdrawing my Certification to remain under the \$3000 threshold. I will now be required to file the next scheduled report for all contributions and expenditures that have not been previously reported from the beginning of the current election cycle. I further agree to file all future reports required.
Signature (
Note: This Certification is to be filed at the Fleation Roand whom the committee's committee of the second state of the second

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