

Statement of Organization - Candidate Committee

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.

Amendment

☐ Yes☒ No

1. Committee Information			
a. Full Name		c. ID Number	
Committee to Elect Joyce for Kids		XXXXXXXXXX	
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
PO Box 12523 Winston-Salem, NC 27117		2-25-10 3-4-10	
		e. Phone Number	
		836-771-1971	
2. Candidate Information			
<input type="checkbox"/> Candidate's Primary Committee			
a. Full Name		c. Candidate ID Number	d. Party Affiliation
Joyce Horton McAdams		ACQAU	NON-Partisan
b. Mailing Address (include City, State, and Zip Code)		e. Office Sought	f. Jurisdiction
2311 Marble St Winston-Salem, NC 27107		School Board	AT LARGE
(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	
Karen Venable		Karen Venable	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
3020 Craven St. Apt 4 Winston-Salem, NC 27127		3020 Craven St. Apt 4 Winston-Salem, NC 27127	
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
336-650-1738		336-650-1738	
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
		SUN TRUST	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
		Campaign Fund	
c. Phone Number	d. Email Address	e. Account Code	d. Type
		STB53	Checking
CERTIFICATION			
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct.			
Joyce H. McAdams		Joyce H. McAdams	
Printed Name of Signer		Signature of Appointed Treasurer	
		3-5-10	
		Date	

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FORSYTH COUNTY

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North Carolina
State Board of Elections
506 N Harrington Street
Raleigh, NC 27603

Kimberly Westbrook-Strach
Deputy Director – Campaign Reporting

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

REC-11
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FORSYTH COUNTY
BOARD OF ELECTIONS

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: Joyce McAdams
Treasurer Name: Karen Venable
Treasurer Address: 3020 Craven St
(include city, state, & zip) Apt 4
Winston-Salem, NC 27127
Treasurer Phone: 336-650-1738 cell 773-440-0907

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).

2-26-2010
Date Signed

Joyce McAdams
Signature of Candidate

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

COPY



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State Board of Elections

506 N Harrington Street
Raleigh, NC 27603

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Deputy Director - Campaign Reporting

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PO Box 27255
Raleigh, NC 27611-7255
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BOARD OF ELECTIONS

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

FILED BY:

Committee Name: Committee to Elect Joyce for Kids
Treasurer Name: Karen Venable
Treasurer Address: 3020 CRAVEN ST. Apt. 4
(include city, state, & zip) WINSTON-SALEM, NC 27137
Treasurer Phone: 336-650-1738 cell 773-440-0907

I certify that the information provided below is true and accurate. I am providing all account information for the above named Committee. These account numbers include all bank accounts utilized, credit card accounts, money market or savings accounts, or any other financial account used for any purpose by the Committee.

The information provided on this form is considered confidential and is not subject to public disclosure. The information provided would only be used for the purposes of an audit or investigation or as required by a court of competent jurisdiction. It will be necessary to assign each account number a "account code" in order to provide account information on required disclosure reports. If an account number is used as the "account code", confidentiality of the account number is presumed to have been waived.

The treasurer shall maintain all moneys of the political committee in a bank account or bank accounts used exclusively by the political committee and shall not commingle those funds with any other moneys.

Type of account	Financial Institution	Address	Account Number	Account Code
Checking	Sun Trust	101 Stratford Rd Ste 60		STB53
		Winston-Salem, NC 27104		

By signing this statement, I authorize agents of the State Board of Elections to inspect all accounts provided.

3-5-10
Date Signed

Joyce H. McAdams
Signature of 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.)

Date Signed

Signature of Candidate or Treasurer



North Carolina
State Board of Elections
506 N Harrington Street
Raleigh, NC 27603

Kimberly Westbrook-Strach
Deputy Director – Campaign Reporting

Mailing Address
PO Box 2723
Raleigh, NC 27611-7233
(919) 733-7171
Fax: (919) 715-8047

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Candidate Designation of Committee Funds

This form is used by candidate committees only and allows the candidate to designate in the event of their death, how the committee's funds are to be disbursed using the eight allowable methods outlined in 163-278.16B(a).

Candidate Name: Joyce McAdams
 Committee Name: Committee to Elect Joyce for Kids
 Treasurer Name: Karen Venable

If Candidate is own treasurer, designate an agent to carry out designations: _____

Committee ID #: _____

Level Registered: [State] [County] If county, specify: Forsyth

I, Joyce McAdams, hereby direct that in the event of my death or incapacity all
(Name of Candidate)
 funds remaining in my Campaign Committee account(s) (after payment of permitted outstanding debts or reasonable expenses for winding up the Committee or closing office) be paid in the following manner as permitted by N.C. Gen. Stat. 163-278.16B(a).

Name of Entity <small>(Select from §163-278.16B(a))</small>	Plan for Disbursement (eg. Amount or %)
1. <u>NC Public Campaign Fund</u>	_____
2. _____	_____
3. _____	_____

By signing this form, I certify that the foregoing entities are eligible beneficiaries under N.C. Gen. Statute 163-278.16B(a). A copy of this form should be maintained with the Committee records.

Signature of Candidate: _____

Date: _____

Joyce McAdams
March 7, 2010

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