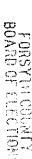
Yes ·

Statement of Organization - Candidate Committee Use this form to create a new or update an existing candidate committee.

This form must b	e accompanied by forms CRO-3100 and (CRO-3500 (when ar	nending, o	nly re-s	ubmit if ap	plicabl	le).
1. Committee Information a. Full Name				9344			
				C.	ID Number		
BRAH	-FORD FOR ALDERN	LAN		İ			
b. Mailing Address (include City, State and Zip Code)			đ.	d. Date Organized		
100 EDEEDALE CT.				•	7-13-2011		
KERNERSYILLE, NC 27284				⊢	e. Phone Number		
·			<u> </u>	336.442.9826			
2. Candidate Info		2				X 6	
a. Full Name	ormation .	a Candidata ID Nov			imary Con		
	A LA DONTE AN IN	e. Candidate ID Number			f. Party Affiliation		
JIMMY DAVID BRAFFORD, JR.		YCQAPQ			REPUBLICAN [Indicate Non-partican if applicable]		
	nclude City, State, and Zip Code)	g. Office Sought					
100 EDGEDA KERNERSUI	LECT. LLE, NC 27284	ALDERMAN					
c . Phone Number	d. Email Address	h. Next Election Year i. Jurisdiction			_		
3364429826 jimmy. brafford@gmail.com 2011		V		110			
LEmail copy of		2011		· · · · · · · · ·	Kernersville		
3, Treasurer Info	rmation	4. Custodian of H	ooks Info	mation	1.00000		
a. Full Name		a. Full Name					
JIMMY DAVID BRAFFORD, JR.				•	3	201	90 -
	clude City, State, and Zip Code)	b. Mailing Address (in	clude City, S	State, and	d Zip Göjde)		17 10
100 EDPER					m	F	O S
KERNERSVIL	1E,NC 27284	ļ ·			m	9	ر پاستان پارتانه ادامان با پارتان درگذش پارتان
Phone Number	d. Email Address	c. Phone Number	d. Email A	ddress	Z	J.,	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
	limmy brotterdegrail. com				CEIVE	ڡ۪	100
Assistant Treasu	**************************************	6. Account Information (incl. CRO-3500) LAdd					
Full Name	Remove	a. Financial Institution		<u> </u>		Remov	te 💮
Mailing Address (inc	hale City State and Et. C. N.	FIRST CITIZENS BANK					
Maning Address (inc	lude City, State, and Zip Code)	b. Purpose	o. Purpose				
		CAMPAIGN FINANCE					
Phone Number	d. Email Address	c. Account Code	d. Type				
☐ Email copy of notices		BFA CHECK		446	NG		
ERTIFICATION			<u> </u>				
I certify that the Co	ommittee or Fund is in compliance with al	l applicable provisi	ons of Artic	cle 22A	. 22B & 21	2D-22N	∕l of
Chapter 163 of the	NC General Statutes and that no funds are	e commingled with	prohibited	or other	r non-discl	osed fu	ınds.
further certify that this report is complete, true and correct.							
JIMMY DAVID BRAFFORD JR 13-2011							
Printed Name of Signer Signature of Appointed Pressiver Date						-	
							ī





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

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

Candidate Name:	JIMMY D. BRAFFORD, JR.		
Treasurer Name:	Jimmy D. BRAFFERD, JR.		<u>~</u>
Treasurer Address:	100 EDGEDALE CT.		<u> </u>
(include city, state, & zip)	KERNERSVILLE, NC	m	<u> </u>
	27284	Ë	9
		\leq	

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.

336.442,9826

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).

7-18-2011 Date Signed

FILED BY:

Treasurer Phone:

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-3600

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

December 2009

Certification of Threshold

This Certification is used to declare or withdraw a committee's intent to raise or spend \$1,000 or less in the current election cycle.

This Certification is only valid for political party committees and candidates for a county office, municipal office, local school board office, soil & water conservation district board of supervisors, or sanitary district board.

Committee Name:	Dr. C. A.	45°.	\equiv
Communee Name:	BRAFFORD FOR ALDERMAN		
Treasurer Name:	Jimmy Dr BRAFFERD, JR.	m	E
Treasurer Address:	100 EDGEDALE CT.	—— ———————————————————————————————————	وَ
(include city, state, & zip)	KERNERSVILLE, NC	<u> </u>	
	27284		ب
			-6
Treasurer Phone:	336.442.9826		
until the end of the election expenditures during this ele of elections and file required	nittee intends to neither receive nor expend more than \$1,00 cedures set forth in G.S. 163-278.10A. This certification very cycle for this committee. If this committee exceeds \$1,000 ction cycle, I understand that I must immediately notify the campaign finance reports. NONLY BE MADE AT THE BEGINNING OF AN ELECTRICATES.	will remain in e) in contribution e appropriate b	effect ns or ooard
o the me next schedilled i	Certification to remain at or under the \$1,000 threshold. I we report for all contributions and expenditures that have not the current election cycle. I further agree to file all future	at has	4
7-18-2011 Date Signed	In the second		******

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

Certification of Threshold