

# COPY

## 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 (when amending, only re-submit if applicable).

Amendment

☐ Yes

☐ No

<b>1. Committee Information</b>			
a. Full Name		c. ID Number	
Stockton for Alderman			
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
503 E Bodenhamer St Kernersville NC 27284		7-14-11	
		e. Phone Number	
		993-2464	
<b>2. Candidate Information</b> <input type="checkbox"/> Candidate's Primary Committee			
a. Full Name		e. Candidate ID Number	f. Party Affiliation
Grady Cornelius Stockton		4CQ2HP	Republican
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought	
503 E Bodenhamer St Kernersville NC 27284		Alderman	
c. Phone Number	d. Email Address	h. Next Election Year	i. Jurisdiction
993-2464	NEALstockton@gmail.com	2011	Kernersville
<input type="checkbox"/> Email copy of notices			
<b>3. Treasurer Information</b>		<b>4. Custodian of Books Information</b>	
a. Full Name		a. Full Name	
Courtney Turlington			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
PO Box 708 Kernersville NC 27285			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
993-9955			
I prefer to receive notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of notices	
<b>5. Assistant Treasurer Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		<b>6. Account Information</b> (incl. CRO-3500) <input type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name		a. Financial Institution Full Name	
		Fidelity	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
		Campaign Finance	
c. Phone Number	d. Email Address	c. Account Code	d. Type
		FB	Checking
<input type="checkbox"/> Email copy of notices			
<b>CERTIFICATION</b>			
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.			
NEAL Stockton		Neal Stockton 7-19-11	
Printed Name of Signer		Signature of Appointed Treasurer Date	



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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

**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:

Neal Stockton

Treasurer Name:

Courtney Turlington

Treasurer Address:

P.O. Box 708

(include city, state, & zip)

Kernersville NC 27285

Treasurer Phone:

993-9955

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FORSYTH COUNTY  
BOARD OF ELECTIONS

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).

7/20/2011  
Date Signed

Courtney Turlington  
Signature of Candidate

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