

Statement of Organization - Candidate Committee

Amendment

Yes No

	1 Organization - Caldidate			1,000,17,17,000				
	reate a new or update an existing candida e accompanied by forms CRO-3100 and C		ending only:	re-cubmit if	ennlicah	اها		
		CRO-3500 (When and	enumg, omy	ie-suomin n	applicat	no). www.www.		
1. Committee Inf a. Full Name	ormation		24,000	c. ID Numb	er Per			
	tee to Elect Fred Fran	Min		<u></u>	DLC	B		
	nclude City, State and Zip Code)			d. Date Org	anized			
	inral Sawmill Rd			7/2	7			
•	ville, NC 27023					e. Phone Number		
Lewisi	The five afoss			-		4477		
2. Candidate Info	rmation		Candidate	's Primary C	ommitte	e zastanak		
a, Full Name	**************************************	e. Candidate ID Num		f. Party Affi		and a second second second second		
Fred L	vesley Franklin	ECQL	CB	(Indicate Nor		artica, fapplicable)		
	iclude City, State, and Zip Code)	g. Office Sought			·			
· .	rad Saumill Rl 11e, NC 27023	Courc	11 1	7embo	ê/			
c. Phone Number	d. Email Address	h. Next Election Year	i. Jı	risdiction				
336-945-447	A ffrontline trial. 11.60	_1		Lewis	ville	}		
LIEmail copy of	of notices							
3, Treasurer Info	mation	4. Custodian of B	ooks Inform	ation				
a. Full Name		a. Full Name	<u> </u>					
	- Franklin	Fred W. Franklin						
	clude City, State, and Zip Code)	b. Mailing Address (include City, State, and Zip Code)						
	ad Sown. 11 AZ , NC 27033	Levisville, NC >7023						
c. Phone Number	d. Email Address	c. Phone Number	d. Email Addr	ess	·			
	frankline triodirricon	336-945-4477	ffrankl.	-etria	l.or	. com		
I prefer to receive	e notices by email Yes No	Email copy of	f notices					
	irer Information 💮 🔲 Add	6. Account Inform	6: Account Information (incl. CRO-3500); Add					
a. Full Name	☐ Remove	a. Financial Institution	Full Name		Ren	iove		
		Allegacy	Feloral	Crdit	- hr	Sus		
b. Mailing Address (inc	lude City, State, and Zip Code)	b. Purpose	-	<u>-</u>				
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. Phone Number	d. Email Address	c. Account Code	d. T∳pe	1 0				
		3	Cher	100	70	7011		
Email copy o		_	1	<u></u>				
Chapter 163 of the	ommittee or Fund is in compliance with a NC General Statutes and that no funds a at this report is complete, true and correct	re commingled with						
					0	3 [3]		
Printed	1 Name of Signer Sign	nature of Appointed Treas	surer	-	Date C	元 計		





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

Fred W. tranklin		_
Fred W. Franklin		_
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7	720	
336-945-4477	#5 8: 4:5	
		Fred W. Franklin 1420 Conrad Sawmill Rd. = = Lewisville, NC 27023 F. = NO. 27024 F. = NO.

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).

Signature of Candidate

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





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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.

FILED BY:	1	
Committee Name:	Committee to Elect Free W. Franklis	_
Treasurer Name:	Fred W. Franklin m E	_ {
Treasurer Address:	1420 Conrad Sawmill Rd.	۽
(include city, state, & zip)	Lewisville, NC 27023 Z=	_ ;
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		, . L
Treasurer Phone:	336-945-4477	_
election cycle under the pro until the end of the election expenditures during this ele of elections and file required THIS DECLARATION CAL	nittee intends to neither receive nor expend more than \$1,000 during the currencedures set forth in G.S. 163-278.10A. This certification will remain in effective cycle for this committee. If this committee exceeds \$1,000 in contributions of contributions of the current election cycle, I understand that I must immediately notify the appropriate boar I campaign finance reports. N ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE. Certification to remain at or under the \$1,000 threshold. I will now be required report for all contributions and expenditures that have not been previously of the current election cycle. I further agree to file all future reports required.	et or d

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