

Amendment Ves 🗖 No

Statement of Organization - Referendum Committee Use this form to create a new or update an existing referendum committee.			Amendment Yes No	
This form must be 1. Committee Info a. Full Name	accompanied by form CRO-3500		c. ID Number	
Real Friends of Clemmons				
P.O. Box 744			d. Date Organized	
			10/19/2011	
			e. Phone Number 766 - 990 2	
2. Referendum Information			166-1102	
a. Full Name		b. Date of Referendum	c. Declaration	
Street and Sidewalk Bonds 11/08/2011		Support Oppose		
3, Treasurer Information 4. Custodian of Books Information			mation*	
a. Full Name		a. Full Name	a. Full Name	
Oliver N. Swanson			State, and Zip Code	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, S	b. Mailing Address (include City, State, and Zip Code)	
P.O. Boy 146 Clemmons, NC 27012				
	d. Email Address	c. Phone Number		
766-9902	natswan Daol.co	<u>, and an and an </u>		
5- Assistant Treasu	rer Information	d 6. Account Information	inel: CR0:3500)	
a. Full Name		moye	Remove	
FIDELITY BANK			TY BANK	
b. Mailing Address (include City, State, and Zip Code) b. Purpose				
		Referden	Comm Etres -0	
c. Phone Number	d. Email Address	c. Account Code d. Type		
		I CRC	2 ching	
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. Oliver N. Swanson Output Printed Name of Signer Signature of Appointed Treasurer				
CRO-2100E	NC	State Board of Elections	December 2007	

An environment of the second