

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

Amendmen	t
Yes	☐ No

This form must be accompanied by forms CRO-3100 and CF	RO-3500 (when amend	ling, only re-submit if applicable).				
I. Committee Information		en 1920 en de la Manuellan				
The property of the control of the c	· ~~	c. ID Number				
Elect Clifton J. Kilby JR	Shentt					
b. Mailing Address (include City, State and Zip Code)		d. Date Organized				
1280 Old Belt way		6/9/2011				
Rural Hall, NC 27045		e. Phone Number				
,		336-969-1020				
2. Candidate Information		Candidate's Primary Committee				
a. Full Name	e. Candidate ID Number	f, Party Affiliation				
Clifton Julius Kilby Jr		Republican (Indicate Non-partisan if applicabl				
b. Mailing Address (include City, State, and Zip Code)	g. Office Sought	The same of the sa				
3183 Mountain Brook Tr. Winston-Salem, NC 27105	Sheriff					
c. Phone Number: d. Email Address	h. Next Election Year	i. Jurisdiction				
336-661.023 CJKILBYJr@yahoo.com	2014	Forsyth County				
Email copy of notices	•					
3. Treasurer Information a. Full Name	4. Custodian of Book a. Full Name	«Information				
Clare McAndrew Martin	a. Full Name					
		de City, State, and Zip Code)				
b. Mailing Address (include City, State, and Zip Code) 3351 VIUTONA Park In	b. Mailing Address (include					
winston-salem, NC 27103	·	27 P				
c. Phone Number d. Email Address	c. Phone Number d.	Email Address				
536-269-9070 clareboyd 83 @gmail.com		□				
	Email copy of n	ıotices ယ				
S: Assistant Treasurer Information	6. Account Informati a. Financial Institution Fu	ion (incl. CRO-3500) Add				
2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	A CONTRACTOR OF THE SECOND CONTRACTOR OF THE CON	leral Credit Union				
b. Mailing Address (include City, State, and Zip Code)	b. Purpose	STATE OF THE STATE				
	Campaign	A				
	,					
. Phone Number d. Email Address	c. Account Code d.	Туре				
	1	Checking				
☐ Email copy of notices	· ·					
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						
I further ceruity that this report is complete, true and correct						
A		سے سیا				
Clare M. Mastin Printed Name of Signer Sign	nature of Appointed Treasure	1-25-2012				

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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:	Clifton Julius Kilby?	<u> </u>		
Treasurer Name:	Clare Mc Andrew M			
Treasurer Address:	3351 Victoria Park	ln.		28
(include city, state, & zip)	winston-salem, NC	27103	,	ر 2
en e			<u>.</u>	
			i i	لب
Treasurer Phone:	336-269-9070	M of a page	<.	P
			Ü	-:- W
the duties and responsibilitie	nation is correct, and I, as candidate, appoint saids imposed upon the appointed treasurer and subjurged in the control of the	ect to the penal	ties and	y f elf ill
the existing Statement of Org	Treasurer changes, it will be necessary to certify anization within 10 days of the vacancy. I further training by the State Board of Elections within ticle 163.278.9(k).	er understand th	nat the al	

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

Certification of Treasurer

June 2007

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CRO-3100