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

Amendment	
☐ Yes	☐ No
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Thi	is form	must be	e accompanied	by forms	CRO-310	00 and CF	RO-3500	(when	amending.	onl.	v re-sı	ıbmit if a	oplicable)	١.

1. Committee Info	rmation			ny to suomie ir apphoaolej.
a. Full Name			ASSESSMENT AND ASSESSMENT	c. ID Number
Independer	17 Winston - Salem		<u> </u>	
b. Mailing Address (include City, State and Zip Code)				d. Date Organized
617 Dana ct. Winston-Salem, NC 27103			08/24/12	
101 010H- 3KH	em, 10C 21163			e. Phone Number
				326) 624-5913
Zanodziń tropo wy "Wincholowi cogłoś				(336) 784-3060
2. Candidate Info	mation	7		ate's Primary Committee
a. Full Name		e. Candidate ID Num	ber	f. Party Affiliation
Travis Rya	n Carter			Unaffiliated (Indicate Non-partican if applicable)
b. Mailing Address (inc	clude City, State, and Zip Code)	g. Office Sought		
	ct. Winston-Salem, NC 2710	3 Litycoun	cilman	, winston-Salem South ward
c. Phone Number	d. Email Address	h. Next Election Year		i. Jurisdiction
3,000	Tearter624@ yahoo, com	2013		South ward
⊠Email copy or		on the same particular same same same	000-100-1000	
3. Treasurer Infor a. Full Name	mation	4. Custodian of B	ooks Info	rmation
		a. Fuli Name		3 0
Travis Car	· ·			907 907 912 A
	lude City, State, and Zip Code)	b. Mailing Address (in	clude City,	
617 Duna C	h Winston-Salem, NC 27103			CE 27
. Phone Number	d. Email Address	c. Phone Number	d. Email A	Address
336) 624-5913	Taster624 @ yahoo.com			Address P
l prefer to receive	notices by email Yes No	Email copy of	f notices	
. Assistant Treasu		6. Account Inform		(incl. CRO-3500)
. Full Name	☐ Remove	a. Financial Institution	Full Name	Remove
		BBQT		
. Mailing Address (incl	ude City, State, and Zip Code)	b. Purpose		
		Campaign F	inance	
Phone Number	d. Email Address	c. Account Code	d. Type	
		Iws	Commo	onity checking
☐ Email copy of	notices			
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.				
	Name of Signer Sig	nature of Appointed Trea	surer	<u> </u>



North Carolina

State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director – Campaign Reporting Mailing Address
PO Bow 27255
Raleigh, NC 27614-7255
(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:	Travis Ryan Carter
Treasurer Name:	Traus Carter
Treasurer Address:	617 Dana Ct. Winston-Salem, NC 27103
(include city, state, & zip)	· · · · · · · · · · · · · · · · · · ·
Treasurer Phone:	(336) 624-5913 / (336) 784-3060

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).

<u>OS /27/12</u>

Date Signed

Signature of Candidate

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

CRO-3100

Certification of Treasurer

June 2007



North Carolina

State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director – Campaign Reporting

FILED BY:

NECEIVED Address Address Address

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

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:	Independent Winston-Sulem
Treasurer Name:	Travis Carter
Treasurer Address:	617 Dana ct. Winston- Salem, NC 27/03
(include city, state, & zip)	
Check One: I certify that this commelection cycle under the produntil the end of the election expenditures during this elections and file required THIS DECLARATION CA I am withdrawing my to file the next scheduled	mittee intends to neither receive nor expend more than \$1,000 during the current needures set forth in G.S. 163-278.10A. This certification will remain in effect cycle for this committee. If this committee exceeds \$1,000 in contributions or ction cycle, I understand that I must immediately notify the appropriate board 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.

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