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

Amendment	
☐ Yes	☐ No

This form must be a	accompanied by forms CRO-3100	and CRO-3500 (when ar	mending, <u>only</u>	re-submit if ap	oplicable).	
1. Committee Infor		187.10.31.751.771.772.772.772.7737.7737.773	hofof a dist			
a. Full Name				e. ID Number		
P. UARE	V. Lucille				-	
h Mailing Address (inc	clude City, State and Zlp Code)			d. Date Organ	ized	_
Di Bruning transfers (****	function, since and expression,	<u> </u>	<u>. </u>	-	- 	_
6321 VAN	INE RE			e. Phone Num	her	
				336		_
KEENER	SUILLE, N.L. 2	7284		595 a	(a) 1)	
2. Candidate Infor			Candidate	's Primary Co		ding.
a. Full Name	1114 Pinnisi Hilling Philippe Street Control 1978	e, Candidate ID Nu	287	f. Party Affilla		* *****
8, FUII Mante						-
				PARTIE	3/1/14/	1
P HAEL	> VILINUILLE	=		(Indicate Non-partisan if applicable		
	clude City, State, and Zip Code)	g. Office Sought			•	
6321VAL	INE IER					
					*	
KEENE	d Email Address	>>54 COUNT	-x CO17	1841551C	NED	
C I I HOHE THE HEAD	d. Email Address	h. Next Election Ye	ar l. J	Jurisdiction		
336						
595-2970						
Email copy of n	otices					
3, Treasurer Infor	mation	4. Custodian of	Books Inforn	nation	The second secon	1177
a, Full Name		a. Full Name			·	1.
					(;) (~)	
MILHARD	V. LINVILVE	·	_		71 57	:
	clude City, State, and Zip Code)	b. Mailing Address	(include City, St	ate, and Zip Cod	(a) [E]	<u> </u>
6221 VA.	NOE RE.				()	
	,,,			1		
大性でんりだり	25VILLE, 26.27	>254				្ន
c, Phone Number	d. Email Address	c. Phone Number	d, Emall Ad	dress		ξ'n
736				i	<u> </u>	بوت. ن
				فر	,) မှ ယ	- 5
#95~ 2971) I prefer to receive	e notices by email Yes	□ No □ Email copy	of notices			73
5. Assistant Treasu	prer Information Add	and the second season and a second second second		el CRO-3500)	Add	-200
a. Full Name	Rem	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			Remove	
a. Luit iaine		a, I mantia, institu	tion Tun maine			
. M. III	Ind. Cles State and Time Code)	h Purnose	: -		 	_
b. Mailing Address (inc	clude City, State, and Zip Code)	b. Purpose				_
				<u> </u>		
c. Phone Number	d, Email Address	c. Account Code	d. Type	<u> </u>	<u> </u>	<u> </u>
	<u></u>					
Email copy o						
CERTIFICATION					 1 156. 	٠.
I certify that the C	Committee or Fund is in compliance	ce with all applicable pro-	visions of Arti	cle 22A, 22B	& 22D-22M	ρf
Chapter 163 of the	e NC General Statutes and that no	funds are commingled v	vith prohibited	or other non-o	disclosed fund	ls.
	at this report is complete, true and		11			
	• •	1 1. De	///			
BULLAND 11	LUNIUME PLA	il all true	nelle	12-10	1-15	
Printe	ed Name of Signer	Signature of Appointed 7	Гтеаѕигег		Date	
	· ·					



State Board of Elections

441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

Certification of Treasurer

This Certification is used by Candidate Committees to appoint a treasurer for the committee. This form is required and must accompany the Candidate's Statement of Organization.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

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).

12-10-15 Date Signed Richard Line of Candidato



State Board of Elections

441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

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.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

FILED BY: BICHARD V. LINUILLE Committee Name: RICHARD V. LINUILLE Treasurer Name: 6321 UANUE 1217. Treasurer Address: KETONETOUILLE, N.C. 20280 (include city, state, & zip) Treasurer Phone: Check One: 1 certify that this committee intends to neither receive nor expend more than \$1,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$1,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports. THIS DECLARATION CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE. I am withdrawing my Certification to remain at or under the \$1,000 threshold. I will now be required to file the next scheduled report for all contributions and expenditures that have not been previously reported from the beginning of the current election cycle. I further agree to file all future reports required? Richard V. Lincello



State Board of Elections 441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach **Executive Director**

Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

Candi	date Designation of Committee Fun	ıds
	committees only and allows the candidate to designate in the to be disbursed using the eight allowable methods outlined i	
This Designation is filed at the	Board of Elections office where the committee's campa	ign reports are filed.
Candidate Name: Z	HAER U. LINVILLE	
Committee Name: Z	CHARD V. LINVILLE	<u> </u>
	CHARD V. LINVILLE	
If Candidate is own treasur	rer, designate an agent to carry out designations:_	
Committee ID #:		
Level Registered: [State	te] [County] If county, specify:	
funds remaining in my Car debts or reasonable expen		ermitted outstanding ffice) be paid in the
1. FSTATE		
2	·	
3		
By signing this form, I cert	ify that the foregoing entities are eligible benefician). A copy of this form should be maintained with Parkers V. Luciallo	
Date:	12-10:15	
CRO-3900	Candidate Designation of Committee Funds	July 2014



State Board of Elections

441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director

CRO-3500

Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

July 2014

Confidential

Certification of Financial Account Information

	l	Cerun	ication o	T P IIIAIICIAI	Account min		
						n for all financial according for all financial according for all form,	
	FILED BY:						
	Committee Na	me:	BraH	ARD V	· binill	LOE	
	Treasurer Nam	ne:	RIGH	ARD V	LUNUI	LLE	
	Treasurer Add			IANCE	_		
	(include city, state	e, & zip)	MEEL	DERSO	or UE, K	U.C. 2>>5	=4
	Treasurer Phor				,	 ,	
nam	ed Committee. Th	hese accoun	t numbers i	nclude all bank		g all account informa credit card accounts, ittee.	
prov <u>Eacl</u> muni	ided is only used a treasurer (or ca	for the purp andidate) n by which to	oses of an a nust designate refer to the	audit or investig ate below an a account numbe	ation or as require ecount code (any er on reports. If an	t to public disclosure. I by a court of comp number or letter of account number is use	etent jurisdiction. combination of
					ee in a bank accour h any other moneys	nt or bank accounts us	ed exclusively by
Ту <u>г</u>	ne of account	Financial I	ustitution	Address		Account Number	Account Code
	By signing this sta	itement, I au	thorize agen	ts of the State B	pard of Elections to	inspect all accounts p	rostojet.
	For Candidate Co	ommittees (<u>Onty</u>				
	except that which	is the cand	idate's perso	onal funds. I fur	committee will not i thermore understan g used for campaigi	raise any money nor s d that an audit or inv n expenditures,	pend any money estigation could
	By signing this sta	tement, I au	thorize agen	ts of the State Bo	pard of Elections to	inspect applicable acc	ount.
_	12~10~15— Date Signed	<u> </u>		/-	Technol V Signatur	e of Candidate or Treasurer	<u>llb</u>

Certification of Financial Account Information