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 accompanied by forms CRO-3100 and CI	RO-3500 (when amending, on	ly re-submit if applicable).
1. Committee Information		
a. Full Name	<u> </u>	c. ID Number
Brent Rockett for Bethanic	<u> </u>	
b. Mailing Address (include City, State and Zip Code)		d. Date Organized
5208 Bear Creekfol		7-18-17
Winsdon-SaleM, NC 27106	?	e. Phone Number
		336-922-4317
2. Candidate Information	Candida	nté's Primary Committee
a Full Name	e. Candidate ID Number	f. Party Affiliation
Brent Stephen Rockett		Non-partisan (Indicate Non-partisan if applicable)
b. Mailing Address (include City, State, and Zip Code)	g. Office Sought	(nkineate tron-partisali ii applicable)
5208 BearCreek Rd		# · · · · · · · · · · · · · · · · · · ·
winston-Salen, MC 27106	Bethania Com	missioner
c. Phone Number 💎 d. Email Address 🥏 💮 💮	h. Next Election Year	Jurisdiction
336-922-431 Cearthly Kinet		
☐ Email copy of notices		
3: Treasurer Information	4. Custodian of Books Info	mation :
a. Full Name	a. Full Name	
Breat-Stephen Rockett		20 1
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City,	State, and Zip Code) 🚐 😉 🔠
5208 Boercreekfd	'	
winston-Salem, NC 27106		20 程
c. Phone Number d. Email Address	c. Phone Number d. Email A	Address 2 02
rockethmen 54		က ယူ
336922-4317 cearthlink.net		
I prefer to receive notices by email Yes No	. —	
5. Assistant Treasurer Information Add a. Full Name	6. Account Information	- II. 1- 14 10 20 36 v
a, Full Name	a. Financial Institution Full Name	Remove
b. Mailing Address (include City, State, and Zip Code)	b. Purpose	
		_
Takan a kata da a 1866 - Taka a dan asara a 1866 - Maria da da 1866 - Maria da da 1866 - Maria da da 1866 - Maria da 1866 - Mari	ka Tanasana kalendaran kenada dari dari dari	The special control of
c. Phone Number d. Email Address	c. Account Code d. Type	
☐ Email copy of notices		
CERTIFICATION		
I certify that the Committee or Fund is in compliance with	all applicable provisions of Ar	rticle 22A, 22B & 22D-22M of
Chapter 163 of the NC General Statutes and that no funds	are commingled with prohibite	
I further certify that this report is complete, true and correct	et.	.]
Brook & O. Kath D.	ant Shipt	7-20-17
Printed Name of Signer Sig	gnature of Appointed Treasurer	
	·	***



North Carolina

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: Brent Rockett for Bethania Committee Name: Brents, Rocketh Treasurer Name: Treasurer Address: Winston-Salem, NC 27106 (include city, state, & zip) 336 922-4317 Treasurer Phone: Check One: ✓I 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. Breat & Kacket Date Signed



North Carolina

State Board of Elections

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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.

FILED BY:	_	
Candidate Name:	Brent-S. Rockett	
Treasurer Name:	Brents. Rockett	
Treasurer Address:	5208 Bear Creek Rd	_
(include city, state, & zip)	Winsdon-Solem, NC 27106	
Treasurer Phone:	336 922-4317	

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).

7-20-17
Date Signed

Brewl Ko Will
Signature of Candidate



North Carolina

State Board of Elections

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

Confidential

Certification of Financial Account Information

This Certification is used to report confidential bank account information for all financial accounts established by the committee and must accompany the Statement of Organization Form.

	FILED BY:				
	Committee Nam	e: Brest	Rockett for Bethanic	<u> </u>	
	Treasurer Name:	: Brent	-S. Rockett		
	Treasurer Addres	ss: <u>520</u>	8 Bear Creek Rd		
	(include city, state,	& zip)	ston-Solem, NC	27106	<u>-</u>
	Treasurer Phone	: 336	0 922-4317		
nam	ed Committee. The	se account numbers in	s true and accurate. I am providing nelude all bank accounts utilized, a used for any purpose by the Comm	credit card accounts,	
prov Eac l	ided is only used fo	r the purposes of an a	dered confidential and is not subject audit or investigation or as required ate below an account code (any account number on reports. If an	l by a court of compo number or letter or	etent jurisdiction. combination of
			presumed to have been waived.	noodani namboi 15 acc	
			political committee in a bank account those funds with any other moneys		ed exclusively by
_		Financial Institution	Address	Account Number	Account Code
L	By signing this state	ement, I authorize ager	nts of the State Board of Elections to	inspect all accounts p	rovided.
	Date Signed		Signatu	re of Candidate or Treasure	<u> </u>
	For Candidate Con	mmittees Only			
□	except that which i	is the candidate's pers	certify that this committee will not onal funds. I furthermore understar count that is being used for campaig	d that an audit or inv	pend any money restigation could
	By signing this state	ement, I authorize ager	nts of the State Board of Elections to	inspect applicable acc	counts.
	7-20-17 Date Signed	_	Liens	.Ko chou	
	Date Signed		Signatu	re of Candidate or Treasure	r