## **Statement of Organization - Candidate Committee**

Is this	statemen	ıt:
New	A	mended

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by form CRO-3500. An amended form is required for each new election year.

	mation							
a. Name of Committee		- '%is	d.	. ID Number				
TERRY FOR SOUTH WEST WARD						1		
b. Mailing Address (include City, State and Zip Code)					e.	Date Organized	11-11	
2254 WESTFIELD AVE. WINSTON SALEM			, NC 27	103		11/27/23	1	
c. Committee Website (	Optional)				f.	Phone Number		
						336-416-6	624	
2. Candidate Inform	mation					HILSPINSI 1		
a. Full Name			e. Party Affiliation					
TERRY RANDALL ARTHUR GALLAGHER			DEMOCRAT					
b. Mailing Address (include City, State, and Zip Code)			f. Office Sought					
	FIELD AVE	- WINSTON SALEM NORTH CAROLINA	CITY COUNCIL					
c . Phone Number	d. Email Address		g. Next Election Yea	xt Election Year h. Jurisdiction		sdiction		
336-416-6624		gmail.com	2024 SOUTH WEST WARD			RD		
Email copy of re			704		500			
3. Treasurer Inform	nation		4. Assistant Treasurer Information					
a. Full Name			a. Full Name					
TERRY RANG	DALL ARTHUR	- GALLAGHER						
b. Mailing Address (incl	ude City, State, and Zi	p Code)	b. Mailing Address (	include City,	State a	nd Zip Code)		
2254 WEST	TFIELD AVE	- GALLAGHER p Code) W-S Ne 27103						
	d. Email Address		c. Phone Number	d. Email A	Address			
336-416-6624	troubly her	egunail.com				r-3		
Send report no	tices by email	Yes No	☐ Email copy of	report noti	ices			
5. Custodian of Boo	ks Information (K		6. Account Information (incl. CRO-3500)					
. Full Name			a. Financial Instituti	on Full Name		(C)	100	
. Mailing Address (incl	ude City, State, and Zi	o Code)					-	
,	***					1		
		1				ည္က ယ္က		
. Phone Number	d. Email Address					N		
. r none Number	d. Email Address		b. Account Code	c. Type		00	CO .	
T F1							- 1	
Email copy of re	port notices							
I certify that the Committee is in compliance with all applicable provisions of Article 22A 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.								
and report is complete, true and correct.								
TERRY GALLAHER / MED 12/7/23					3			
Printed Name of Treasurer Signature of Appointed Treasurer Date								
Coartify that the information above is something I I and I are the state of the sta								
I certify that the information above is correct, and I, as the candidate, appoint said treasurer to personally fulfill the								
luties and responsibilities imposed upon the appointed treasurer and subject to the penalties in Article 22A of Chapter 63 of the NC General Statutes.								
TERRY GALLAGHER TO SAME								
Printed N	Signature of Candidat	te		Date				



## **Candidate Designation of Committee Funds**

This form is used by candidate committees only and allows the candidate to designate in the event of their death, how the committee's funds are to be disbursed using the eight allowable methods outlined in 163-278.16B(a).

This Designation is filed at the Board of Elections office where the committee's campaign reports are filed. Candidate Name: TERRY FOR SOUTH WEST WARD Committee Name: ERRY GALLAGHER Treasurer Name: If Candidate is own treasurer, designate an agent to carry out designations: DUANE GALLAGHER Committee ID #: Level Registered: I, TERRY GALLAGHER, hereby direct that in the event of my death or incapacity all (Name of Candidate) funds remaining in my Campaign Committee account(s) (after payment of permitted outstanding debts or reasonable expenses for winding up the Committee or closing office) be paid in the following manner as permitted by N.C. Gen. Stat. 163-278.16B(a). Name of Entity Plan for Disbursement (eg. Amount of %) (Select from §163-278.16B(a)) 1. DSA OF GWS 100% By signing this form, I certify that the foregoing entities are eligible beneficiaries under N.C. Gen. Statute 163-278.16B(a). A copy of this form should be maintained with the Committee records. Signature of Candidate: Date:

Candidate Designation of Committee Funds

CRO-3900



## **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:		
Committee Name:	TELLY FOR SOUTH WEST WARD	
Treasurer Name:	TERRY GALAGHER	
Treasurer Address:	2254 WESTFIELD AVE.	
(include city, state, & zip)	WINSTON-SALEM, NC	
	27/03	
_		-
Treasurer Phone:	336-416-6624	1 = 1

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 reported from the beginning of the current election cycle. I further agree to file all future reports required.

11/27/23 Date Signed

Signatu