

## North Carolina State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook Deputy Director -- Campaign Reporting COPY

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

#### **Certification of Treasurer**

I ILLE DI.	<i>f</i>
Candidate Name:	WAYNE HESTER
Treasurer Name:	FRED MARTIN, JR.
Treasurer Address:	P.O. BOX 117
(include city, state, & zip)	WALKERTOWN, N.C 27051
Treasurer Phone:	336 595 2631
the duties and responsibilities	mation is correct, and I, as candidate, appoint said treasurer to personally fulfill es imposed upon the appointed treasurer and subject to the penalties and I. Regulation of Election Campaigns of Chapter 163 of the North Carolina
I understand that if the above	e Treasurer changes, it will be necessary to certify a new treasurer and amend

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the existing Statement of Organization within 10 days of the vacancy.

LI: 8 Wd SI SAV SOUZ

Certification of Treasurer

CRO-3100

8-12-05 Date Signed

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March 2003

# Statement of Organization - Candidate Committee Amendment Yes

1. Committee l	Information					
a. Full Name			* 1		c. ID Number	
WAYN	IE HESTER	- ElEction	ou Coum.			
	s (include City, State and Zi				d. Date Organized	
POL	Box 117 certown N			ļ		
1.7.14	toon NO	227051		į,	e. Phone Number	
Wala				ļ		
				<u> </u>		
2. Candidate In	formation	,	Candidate's	Primary Committe	ee	
a. Full Name			c. Candidate ID Nu		l. Party Affiliation	
WAY	WE HEST	ER	LZYPS	4	Non-Partisan	
b. Mailing Address	(include City, State, and Zi	p Code)	e. Office Sought		f. Jurisdiction	
POB	ox 14 vtown NC	C 27051	town Council Walkerton			
Walker 1 30 11 11 1 1			(If office sought is nonpartisan, write "Nonpartisan" in [d]  Party Affiliation.)			
3. Treasurer Inf	armation	•	4 Custodian of	Books Informati	::	
s. Fuli Name	UI IMAUUM	······································	a. Full Name	DOOKS INTO MAIL	ОП	
FARD M	ARTIN JR.					
o. Mailing Address (	include City, State, and Zip	Code)	b. Mailing Address (	include City, State,	and Zip Code)	
P.O. Box I WALKERto	17 NX, N.C. 2	7051				
. Phone Number	d. Émail Address		c. Phone Number	d. Email Address	J	
336-595 26.	3/	-				
	surer Information	☐ Add	6. Account Infor	mation (incl. C	RO-3500)	
. Full Name		☐ Remove	a. Financial Institution	on Fuil Name	Remove	
				•		
. Mailing Address (i	nclude City, State, and Zip	Code)	b. Purpose			
Phone Number	d. Email Address		c. Code	d. Type		
ERTIFICATIO	 N					
I certify that the (					o funds are commingled orrect.	
FRED	MARTIN IR.	_ Fred	Mate of Appointed Tree	ashrer	8-14-05 Date	

CRO-2100A

NC State Board of Elections

May 200.

☐ No



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## **Certification of Threshold**

FILED BY:	
Committee Name:	WAYNE HESTER-ELECTION COMMITTER
Treasurer Name:	FRED MARTIN, JR.
Treasurer Address:	P.O. BOX 117
(include city, state, & zip)	WALKERTOWN, N.C. 2705/
Treasurer Phone:	336 -595 263/
election cycle under the procuntil the end of the election of expenditures during this elections and file required THIS DECLARATION CAN  I am withdrawing my Coffile the next scheduled report	nittee intends to neither receive nor expend more than \$3,000 during the current redures set forth in G.S. 163-278.10A. This certification will remain in effect reycle for this committee. If this committee exceeds \$3,000 in contributions or tion cycle, I understand that I must immediately notify the appropriate board campaign finance reports.  I ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE. retification to remain under the \$3000 threshold. I will now be required to for all contributions and expenditures that have not been previously reported rent election cycle. I further agree to file all future reports required.
8-12-05 Date Signed	Wayne Naster Signature





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Kimberly Westbrook Deputy Director - Campaign Reporting

FILED BY:

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

### Confidential

#### **Certification of Financial Account Information**

FILED DI.	
Committee Nar	me: WAYNE HESTER-ELECTION COMMIT
Treasurer Name	
Treasurer Addr	ess: 8.0. Box 117
(include city, state,	, & zip) WALKERTOWN, N.C. 2705/
Treasurer Phone	
for the above name	formation provided below is true and accurate. I am providing all account information d Committee. These account numbers include all bank accounts utilized, credit card tarket or savings accounts, or any other financial account used for any purpose by the
The information pro a court of competent provide account info	ovided on this form is considered confidential and is not subject to public disclosure.  ovided would only be used for the purposes of an audit or investigation or as required by it jurisdiction. It will be necessary to assign each account number a "code" in order to commation on required disclosure reports. If an account number is used as the "code", e account number is presumed to have been waived.
Type of account	Financial Institution Address Account Number Code
Checking	Financial Institution Address Account Number Code  LEX. STATE BANKWALKERTOWN, W.C. TM
By signing this states provided.	ment, I authorize agents of the State Board of Elections to inspect all accounts
8-/6-05 Date Signed	Tressitute of Treasurer
	ccount information, I certify that this committee will not raise or spend any money ee. (Only candidates may choose this option.)
Date Signed	CIPATION Signature of Candidate
CRO-3500	81:7 Hd 91 9NV 9N7  Certification of Financial Account Information  March 2003
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