# **Statement of Organization - Candidate Committee**

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

Amendment	
☐ Yes	No No

This form must be accompanied by forms CRO-3100 and CR	O- <u>35</u> 00		
a. Full Name	graphic in the second production of the control of the second production of the second productio	c. ID Number	
Nelva R. Albury Re-election C	and Has	404993	
b. Mailing Address (include City, State and Zip Code)	2 34 367 7 7 7	d. Date Organized	
Yo William Ferge			
DO FOX 10-5		7/6/2007	
PO BOX 1672		e. Phone Number	
Sort City, NC 28445		328-0207	
		Carlotte Color Color (Color Color Co	
a. Full Name	c. Candidate ID Numbe		
Nelva R Albury	140Y993	Non partisan	
b. Mailing Address (include City, State, and Zip Code)	e. Office Sought	f. Jurisdiction	
9066 W. 974 Sorf City, NC 28445	Town Cou	ne,   Surf	
~ · · · · · · · · · · · · · · · · · · ·	(If office sought is	nonpartisan, write "Nonpartisan" in [d]	
	<u> </u>	Party Affiliation.)	
And the second s	lare made in the	A. Managalania, and a second and a large	
a. Full Name	a. Full Name		
William C. Feige			
h. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (in	clude City, State, and Zip Code)	
Hampstend, NC 28443			
c. Phone Number d. Email Address	c. Phone Number	d. Email Address	
270-9161 Charter, net			
270-4161 [harter, net	A second		
a. Full Name	a. Financial Institution	man fings of the tipe and the second state and the second	
	Cape Fea	the second of th	
b. Mailing Address (include City, State, and Zip Code)	b. Purpose	7 7441	
	Deposits	à Dis bursence As	
c. Phone Number d. Email Address	c. Account Code	d. Type	
	NA	Checking	
CERTIFICATION		, Jan 19 19 19 19 19 19 19 19 19 19 19 19 19	
I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled			
with funds for a federal or out-of-state PAC. I further say that this report is complete true and correct.			
William C Force William Form 7/12/07			
William C Ferge William Treasure 7/6/07 Printed Name of Signer Signature of Appointed Treasure Date			
CRO-2100A NC State B	oard of Elections	April 2007	



### North Carolina

#### State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director – Campaign Reporting

FILED BY:

Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (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

LITED DI:	1 6 6.1
Candidate Name:	Nelva R Albury
Treasurer Name:	William C Feige
Treasurer Address:	115 Long Lest Dr.
(include city, state, & zip)	Hampstead, NC 28743
Treasurer Phone:	910-270-9161
the duties and responsibilit	rmation is correct, and I, as candidate, appoint said treasurer to personally fulfill ies imposed upon the appointed treasurer and subject to the penalties and II. Regulation of Election Campaigns of Chapter 163 of the North Carolina

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).

7/6/07
Date Signed

Signature of Candidate

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



### North Carolina

#### State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director - Campaign Reporting

FILED BY:

Committee Name:
Treasurer Name:
Treasurer Address:
(include city, state, & zip)

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

# 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

Nelva R. Albury Re-election Committee William C Feige

Treasurer Phone	910-6	70- 91	6 j		<del></del>
the above named Com	mation provided below i imittee. These account r ngs accounts, or any other	numbers include	all bank accounts u	tilized, credit card acc	ounts,
information provided court of competent just to provide account into	ided on this form is cons would only be used for risdiction. It will be nec- formation on required di of the account number is	r the purposes of essary to assign of sclosure reports.	f an audit or inves each account numb If an account num	tigation or as require er a "account code" ir	d by a n order
Type of account	Financial Institution	Address	Charles 14	Account Number	Account Code
Checking	CapeFear Ban	Homps	18443		BNA
By signing this statement, I authorize agents of the State Board of Elections to inspect all accounts provided.  The formula of Date Signed  In lieu of providing account information, I certify that this committee will not raise or spend any money except for the filing fee. (Only candidates may choose this option.)					
Date Signed		_	Signature	e of Candidate or Treasurer	
CRO-3500	Certification	of Financial Acc	count Information	Jun	e 2007



### North Carolina

## State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director – Campaign Reporting

CRO-3600

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

June 2007

# **Certification of Threshold**

This Certification is used by Candidate and Party Committees only, to declare or withdraw the committee's intent to raise or spend under \$3,000 in the current election cycle

FILED BY:	
Committee Name:	Nelva R. Albuny Re-election Comme top
Treasurer Name:	William C Frige
Treasurer Address:	115 Long Leaf Dr.
(include city, state, & zip)	Hampstead, NC 28947
Treasurer Phone:	910-270-9161
election cycle under the pro until the end of the election expenditures during this ele of elections and file require	mittee intends to neither receive nor expend more than \$3,000 during the current occdures set forth in G.S. 163-278.10A. This certification will remain in effect cycle for this committee. If this committee exceeds \$3,000 in contributions or ection cycle, I understand that I must immediately notify the appropriate board d campaign finance reports.  NONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.
file the next scheduled repo	y Certification to remain under the \$3000 threshold. I will now be required to out for all contributions and expenditures that have not been previously reported urrent election cycle. I further agree to file all future reports required.
7/6/01 Date Signed	Melley Constitute Signature
Note: This Certification is	to be filed at the Election Board where the committee's campaign reports are filed.

Certification of Threshold