#### Amendment Statement of Organization - Candidate Committee Yes Yes ☐ No Use this form to create a new or update an existing candidate committee. This form must be accompanied by forms CRO-3100 and CRO-3500 (when amending, only re-submit if applicable). 1. Committee Information a. Full Name c. ID Number Vote Dwight Torres **PEND5411** b. Mailing Address (include City, State and Zip Code) d. Date Organized 8/16/2011 PO Box 2873, Surf City, NC 28445 e. Phone Number (910)340-7310 2. Candidate Information ☑ Candidate's Primary Committee a. Full Name e. Candidate ID Number f. Party Affiliation (I) Independent **Dwight Torres** (Indicate Non-partican if applicable) b. Mailing Address (include City, State, and Zip Code) g. Office Sought PO Box 2873, Surf City, NC 28445 Mayor c . Phone Number d. Emall Address h. Next Election Year i. Jurisdiction (910)340-7310 dwight.torres1@usmc.mil Surf City, NC ☑ Email copy of notices 3. Treasurer Information 4. Custodian of Books Information. . Full Name a. Full Name **Dwight Torres** b. Mailing Address (include City, State, and Zip Code) b. Mailing Address (include City, State, and Zip Code) PO Box 2873, Surf City, NC 28445 c. Phone Number d. Email Address c. Phone Number d, Email Address (910)340-7310 dwight.torres1@usmc.mil I prefer to receive notices by email ✓ Yes □ No □ Email copy of notices 5. Assistant Treasurer Information Add 6, Account Information (incl. CRO-3500) V Add . Full Name Remove a. Financial Institution Full Name Remove Bank Of America (Surf City, NC)

CERTIFICATION

☐ Email copy of notices

. Phone Number

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M 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.

Dwight Torres

Printed Name of Signer

d. Email Address

b. Mailing Address (include City, State, and Zip Code)

Signature of Appointed Treasurer

b. Purpose

Campaign

c. Account Code

8/16/2011 Date

checking



### North Carolina

### State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director – Campaign Reporting 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

| FILED BY;                    |                     |
|------------------------------|---------------------|
| Candidate Name:              | Dwight Torres       |
| Treasurer Name:              | Dwight Torres       |
| Treasurer Address:           | PO Box 2873         |
| (include city, state, & zip) | Surf City, NC 28445 |
|                              |                     |
|                              |                     |
| Treasurer Phone:             | (910)340-7310       |
|                              |                     |

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).

8/16/2011

Date Signed

Signature of Candidate

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

CRO-3100

Certification of Treasurer

June 2007



### North Carolina

# State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director – Campaign Reporting Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

## **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 \$1,000 in the current election cycle.

| FILED BY:   |   |
|---|---|
| Committee Name:   | Vote Dwight Torres  |
| Treasurer Name:   | Dwight Torres   |
| Treasurer Address:  | PO Box 2873   |
| (include city, state, & zip)  | Surf City, NC 28445   |
|   |   |
| Treasurer Phone:  | (910)340-7310   |
| election cycle under the produntil the end of the election expenditures during this elections and file required | tee intends to neither receive nor expend more than \$1,000 during the current cedures set forth in G.S. 163-278.10A. This certification will remain in effect cycle for this committee. If this committee exceeds \$1,000 in contributions or ction cycle, I understand that I must immediately notify the appropriate board campaign finance reports.  NONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE. |
| the next scheduled report for   | rtification to remain under the \$1,000 threshold. I will now be required to file all contributions and expenditures that have not been previously reported from election cycle. I further agree to file all future reports required.   |
| 8/16/2011<br>Date Signed  | Huight fono.  |
| Note: This Certification is to  | be filed at the Election Board where the committee's compaign reports are filed   |

CRO-3600

Certification of Threshold

December 2009



# North Carolina

### State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director – Campaign Reporting Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

# **Certification to Close Committee**

This Certification is used to express the intent to close the committee after all funds have been properly disbursed.

| FILED BY:                    |                           |  |
|------------------------------|---------------------------|--|
| Committee Name:              | Vote Dwight Torres        |  |
| Treasurer Name:              | Dwight Tornes Po Box 2873 |  |
| Treasurer Address:           | Po Box 2873               |  |
| (include city, state, & zip) | Surf City NC 28445        |  |
|                              |                           |  |
|                              |                           |  |
| Treasurer Phone:             | (910)340-7310             |  |

I certify that the above mentioned Committee intends to close and cease existence. Upon signing this certification, I declare that all funds have been distributed and reported (if required). In addition, no contributions will be accepted or disbursements made after the "Final Report" is filed or this form is signed. If the Committee at any future time intends to accept or spend-funds-in-support-or opposition-of-any candidate or ballot issue, a new political committee must be formed and registered with the Board of Elections before such activities may commence.

Committees that have filed under the \$1,000 threshold will only be required to sign this Certification. No "Final Report" will be required for committees meeting this criterion. Any Committee that did not file under the \$1,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

Feb/10/2010

Date Signed

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