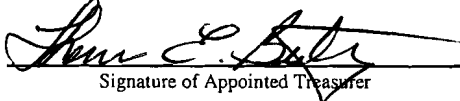


# Statement of Organization - Candidate Committee

Amendment	
<input type="checkbox"/> Yes	<input type="checkbox"/> 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.

<b>1. Committee Information</b>					
a. Full Name				c. ID Number	
THOMAS E. BRILEY				WDRD8E	
b. Mailing Address (include City, State and Zip Code)				d. Date Organized	
P.O. BOX 3218 ATLANTIC BEACH N.C. 28512				6-9-09	
				e. Phone Number	
				252-727-0540	
<b>2. Candidate Information</b> <input type="checkbox"/> Candidate's Primary Committee					
a. Full Name			c. Candidate ID Number	d. Party Affiliation	
THOMAS E. BRILEY					
b. Mailing Address (include City, State, and Zip Code)			e. Office Sought		f. Jurisdiction
P.O. BOX 3218 ATLANTIC BEACH N.C. 28512			Commission		
			(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)		
<b>3. Treasurer Information</b>			<b>4. Custodian of Books Information</b>		
a. Full Name			a. Full Name		
ABOVE			ABOVE		
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
SAME			SAME		
c. Phone Number	d. Email Address		c. Phone Number	d. Email Address	
SAME	E00NEBRILEY@EMBARDIANL.COM		SAME	SAME	
<b>5. Assistant Treasurer Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			<b>6. Account Information</b> (incl. CRO-3500) <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name			a. Financial Institution Full Name		b. Purpose
			WACHOVIA		
b. Mailing Address (include City, State, and Zip Code)			c. Account Code		
			A		
c. Phone Number	d. Email Address		d. Type		
			Checking		
<b>CERTIFICATION</b>					
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.					
THOMAS E. BRILEY				7-9-09	
Printed Name of Signer		Signature of Appointed Treasurer		Date	