

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 (when amending, only re-submit if applicable).

1. Committee Information					
a. Full Name			c. ID Number		
Thomas Edward Briley, Jr.			RDR 500		
b. Mailing Address (include City, State and Zip Code)			d. Date Organized		
P. O. Box 3218, Atlantic Beach, NC 28512			7/7/2011		
			e. Phone Number		
			252-727-0540		
2. Candidate Information <input type="checkbox"/> Candidate's Primary Committee					
a. Full Name		e. Candidate ID Number		f. Party Affiliation	
Thomas E. Briley, Jr.				NP <small>(Indicate Non-partisan if applicable)</small>	
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought			
P. O. Box 3218, Atlantic Beach, NC 28512		Councilman			
c. Phone Number	d. Email Address	h. Next Election Year		i. Jurisdiction	
252-727-0540	tbriley@ec.rr.com			ABCH	
<input type="checkbox"/> Email copy of notices					
3. Treasurer Information			4. Custodian of Books Information		
a. Full Name			a. Full Name		
Thomas Edward Briley, Jr.			Thomas Edward Briley, Jr.		
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
P. O. Box 3218, Atlantic Beach, NC 28512			P. O. Box 3218, Atlantic Beach, NC 28512		
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address		
252-727-0540	tbriley@ec.rr.com	252-727-0540	tbiley@ec.rr.com		
I prefer to receive notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Email copy of notices		
5. Assistant Treasurer Information		6. Account Information <small>(incl. CRO-3500)</small>		<input type="checkbox"/> Add	
a. Full Name		a. Financial Institution Full Name		<input type="checkbox"/> Remove	
		Wachovia/Wells Fargo			
b. Mailing Address (include City, State, and Zip Code)		b. Purpose			
		Campaign			
c. Phone Number	d. Email Address	c. Account Code	d. Type		
		A	Checking		
<input type="checkbox"/> Email copy of notices					
CERTIFICATION					
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 EDWARD BRILEY, JR.		Signature of Appointed Treasurer		7-18-11	
Printed Name of Signer		Signature of Appointed Treasurer		Date	