

COPY

Statement of Organization - Candidate Committee

Amendment
 Yes No

1. Committee Information			
a. Full Name		c. ID Number	
Mabe For Council		6YKT44	
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
P.O. Box 394 Walker town NC 27051		8-05-05	
		e. Phone Number	
2. Candidate Information <input type="checkbox"/> Candidate's Primary Committee			
a. Full Name		c. Candidate ID Number	d. Party Affiliation
Brenda C. Mabe		6YKT44	Nonpartisan
b. Mailing Address (include City, State, and Zip Code)		e. Office Sought	f. Jurisdiction
P.O. Box 394 Walker town NC 27051		Walker town Councilman	
(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name		a. Full Name	
Brenda C. Mabe		G. Wayne Mabe Sr	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
P.O. Box 394 Walker town NC 27051		P.O. Box 394 Walker town NC 27051	
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
595-8642		595-8642	
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name		<input type="checkbox"/> Add	<input checked="" type="checkbox"/> Add
G. Wayne Mabe Sr		<input type="checkbox"/> Remove	<input type="checkbox"/> Remove
b. Mailing Address (include City, State, and Zip Code)		a. Financial Institution Full Name	
P.O. Box 394 Walker town NC 27051		SunTrust	
		b. Purpose	
		election	
c. Phone Number	d. Email Address	c. Code	d. Type
595-8642		AB-35	checking
CERTIFICATION			
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.			
Brenda C. Mabe		Brenda C. Mabe	10-14-05
Printed Name of Signer		Signature of Appointed Treasurer	Date

CRO-2100A

NC State Board of Elections

May 2003

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OCT 14 PM 4:00 2005

STATE BOARD OF ELECTIONS



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North Carolina
State Board of Elections
506 N Harrington Street
Raleigh, NC 27603

Kimberly Westbrook
Deputy Director - Campaign Reporting

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

Confidential

Certification of Financial Account Information

FILED BY:

Committee Name: Mabe For Council
Treasurer Name: Brenda C. Mabe
Treasurer Address: P.O. Box 394
(include city, state, & zip) Walkertown NC 27051
Treasurer Phone: (336) 595-8642

I certify that the information provided below is true and accurate. I am providing all account information for the above named Committee. These account numbers include all bank accounts utilized, credit card accounts, money market or savings accounts, or any other financial account used for any purpose by the Committee.

The information provided on this form is considered confidential and is not subject to public disclosure. The information provided would only be used for the purposes of an audit or investigation or as required by a court of competent jurisdiction. It will be necessary to assign each account number a "code" in order to provide account information on required disclosure reports. If an account number is used as the "code", confidentiality of the account number is presumed to have been waived.

Type of account	Financial Institution	Address	Account Number	Code
checking	SunTrust	Old Hollow Rd Walkertown 27051	[REDACTED]	AB-55

By signing this statement, I authorize agents of the State Board of Elections to inspect all accounts provided.

10-14-05
Date Signed

Brenda C. Mabe
Signature of Candidate or Treasurer

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

RECEIVED

Signature of Candidate or Treasurer

FORSTHORN
AND
ASSOCIATES