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North Carolina
State Board of Elections
506 N Harrington Street
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Deputy Director – Campaign Reporting

2009 FEB 11 11:32
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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: T. ALLEN JONES

Treasurer Name: Bill Rose

Treasurer Address: PO Box 20397

(include city, state, & zip) Winston-Salem, NC 20397

Treasurer Phone: 336-765-1645

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).

2/20/2009
Date Signed

J. Allen Jones
Signature of Candidate

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