

COPY

Statement of Organization - Political Action Committee

Amendment
 Yes NoUse this form to create a new or update an existing political action committee (PAC).
This form must be accompanied by form CRO-3500.

1. Committee Information			
a. Full Name		c. ID Number	
WS Black Political Action Committee			
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
PO Box 16486 Winston-Salem, NC 27115-6486		4-17-08	
		e. Phone Number	
		334-345-2628	
2. Political Action Committee Information		3. Connected Organization or Affiliated Committee	
a. Category (Check only one)		a. Full Name	
<input type="checkbox"/> Banking/Finance <input type="checkbox"/> Building/Real Estate <input type="checkbox"/> Conservative/Liberal <input type="checkbox"/> Environment <input type="checkbox"/> Get Out the Vote <input type="checkbox"/> Health <input type="checkbox"/> Information Technology / Telecommunications <input type="checkbox"/> Insurance <input type="checkbox"/> Legal <input type="checkbox"/> Manufacturing <input checked="" type="checkbox"/> Minority <input type="checkbox"/> Political Party not part of Party Plan of Org. <input type="checkbox"/> Religious <input type="checkbox"/> Trade <input type="checkbox"/> Utilities <input type="checkbox"/> Other / Not listed			
b. Type (Check only one)		b. Mailing Address (include City, State, and Zip Code)	
<input type="checkbox"/> Parent Entity <input type="checkbox"/> Economic Interest <input checked="" type="checkbox"/> Political Purpose			
c. Definition of Type		c. Phone Number	
		d. Relationship	
d. Member Definition			
4. Treasurer Information		5. Custodian of Books Information	
a. Full Name		a. Full Name	
Tanya Wiley		Everett Witherspoon	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
PO Box 16496 Winston-Salem, NC 27115-6496		1325 Reynolds Forest Dr. W-Salem, NC 27107	
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
336.794.4058	Marketing@wcpcommunications.com	336.306.4815	levonspoon@hotmail.com
6. Assistant Treasurer Information		7. Account Information (incl CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
		Tri Stone Bank	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
c. Phone Number	d. Email Address	c. Account Code	d. Type
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.			
Tanya Wiley		4-22-08	
Printed Name of Signer		Date	
Signature of Appointed Treasurer			

RECEIVED
2008 APR 22 PM 12:26
ELECTIONS DIVISION



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

2008 APR 22 PM 12:26

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:
~~Treasurer~~ PAC
 Candidate Name:

WS Black Political Action Committee

Treasurer Name:

Tanya Wiley

Treasurer Address:

PO Box 116496

(include city, state, & zip)

Winston-Salem, NC 27115-6496

Treasurer Phone:


336-345-2628

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).

4-22-08

Date Signed


 Signature of Candidate
 Treasurer

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