

COPY

Statement of Organization - Political Action Committee

Amendment
 Yes No

1. Committee Information

a. Full Name EAST WARD POLITICAL ACTION COMMITTEE		c. ID Number
b. Mailing Address (include City, State and Zip Code) ALBERT T. PORTER, JR. 1228 DUBLIN DR. WINSTON SALEM, NC 27101		d. Date Organized 05/81
		e. Phone Number 336-777-0238

MAR 17 2005
N.C. BOARD OF ELECTIONS

2. Political

a. Category (Check only one)

<input type="checkbox"/> Banking/Finance	<input type="checkbox"/> Legal
<input type="checkbox"/> Building/Real Estate	<input type="checkbox"/> Manufacturing
<input type="checkbox"/> Conservative/Liberal	<input type="checkbox"/> Minority
<input type="checkbox"/> Environment	<input type="checkbox"/> Political Party not part of Party Plan of Org.
<input checked="" type="checkbox"/> Get Out the Vote	<input type="checkbox"/> Religious
<input type="checkbox"/> Health	<input type="checkbox"/> Trade
<input type="checkbox"/> Information Technology / Telecommunications	<input type="checkbox"/> Utilities
<input type="checkbox"/> Insurance	<input type="checkbox"/> Other / Not listed

3. Connected Organization or Affiliated Committee

a. Full Name

b. Mailing Address (include City, State, and Zip Code)

c. Phone Number

d. Relationship

b. Type (Check only one)

Parent Entity

Economic Interest

Political Purpose

c. Definition of Type

d. Member Definition

4. Treasurer Information

a. Full Name

b. Mail: **ALBERT T. PORTER, JR.
1228 DUBLIN DR.
WINSTON SALEM, NC 27101**

c. Phone Number: **777-0238**

d. Email Address: **tommy27101@YAHOO.COM**

5. Custodian of Books Information

a. Full Name

b. Mailing: **ALBERT T. PORTER, JR.
1228 DUBLIN DR.
WINSTON SALEM, NC 27101**

c. Phone Number: **777-0238**

d. Email Address: **tommy27101@YAHOO.COM**

6. Assistant Treasurer Information

a. Full Name

b. Mailing Address (include City, State, and Zip Code)

c. Phone Number

d. Email Address

7. Account Information (incl. CRO-3500)

a. Financial Institution Full Name: **MECHANICS & FARMERS BANK**

b. Purpose: **GOTV POLITICAL CONTRIBUTIONS**

c. Code: **[REDACTED]**

d. Type: **checking**

CERTIFICATION

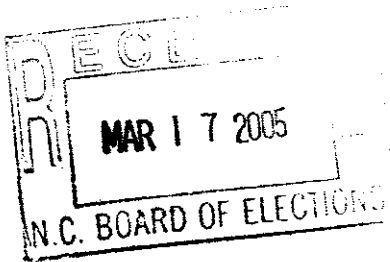
I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct.

Albert T. Porter Jr.
Printed Name of Signer

Albert T. Porter Jr.
Signature of Appointed Treasurer

3/16/05
Date

RECEIVED
2005 MAR 21 AM 9:13
FORSYTH COUNTY
CANDIDATE SERVICES



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

COPY

Confidential

Certification of Financial Account Information

FILED BY:

Committee Name: EAST IVARD POLITICAL ACTION COMMITTEE
Treasurer Name: _____
Treasurer Address: _____
(include city, state, & zip) _____
Treasurer Phone: 336-777-0238

ALBERT T. PORTER, JR.
1228 DUBLIN DR.
WINSTON SALEM, NC 27101

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	MECHANICS & FARMERS BANK	770 MLK BLVD - 27102 IV-S, N.C. P.O. BOX 628	[REDACTED]	

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

3/16/05
Date Signed

Albert T. Porter, Jr.
Signature of 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

Signature of Candidate

2005 MAR 21 AM 9:43

FORSTYTH COUNTY BOARD OF ELECTIONS