

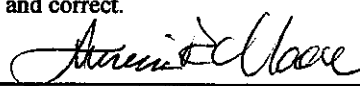
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Statement of Organization - Candidate Committee

Amendment
 Yes 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 The Committee to Elect Brenda B. Diggs		c. ID Number 2013 JUN 10 AM 8:42	
b. Mailing Address (include City, State and Zip Code) 3609 Andrea Lane Winston-Salem, NC 27105		d. Date Organized 6/1/2013	
		e. Phone Number 336-724-6827	
2. Candidate Information <input type="checkbox"/> Candidate's Primary Committee			
a. Full Name Brenda B. Diggs		e. Candidate ID Number	f. Party Affiliation Democratic <small>(Indicate Non-partisan if applicable)</small>
b. Mailing Address (include City, State, and Zip Code) 3609 Andrea Lane Winston-Salem, NC 27105		g. Office Sought City Council	
c. Phone Number 336-724-6827	d. Email Address bidiggs@aol.com	h. Next Election Year 2013	i. Jurisdiction Northeast Ward
<input checked="" type="checkbox"/> Email copy of notices			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name Lucrecia R. Moore		a. Full Name	
b. Mailing Address (include City, State, and Zip Code) 1104 West 4th Street Winston-Salem, NC 27101		b. Mailing Address (include City, State, and Zip Code)	
c. Phone Number 336-414-8714	d. Email Address Lucrecia_Moore@bellsouth.net	c. Phone Number	d. Email Address
I prefer to receive notices by email <input checked="" 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>	
a. Full Name		a. Financial Institution Full Name BB+T Bank - Pending	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
c. Phone Number	d. Email Address	c. Account Code	d. Type
<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.			
Lucrecia R. Moore Printed Name of Signer		 Signature of Appointed Treasurer	6/10/2013 Date

WYOMING COUNTY
BOARD OF ELECTIONS



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2013 JUN 10 AM 8:42

RECEIVED

Kim Westbrook Strach
Executive Director

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

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

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: Brenda B. Diggs
Treasurer Name: Lucrecia R. Moore
Treasurer Address: 1104 West 4th Street
(include city, state, & zip) Winston-Salem, NC 27101

Treasurer Phone: 336-414-8714

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).

June 10, 2013
Date Signed

Brenda B. Diggs
Signature of Candidate

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



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Candidate Designation of Committee Funds

This form is used by candidate committees only and allows the candidate to designate in the event of their death, how the committee's funds are to be disbursed using the eight allowable methods outlined in 163-278.16B(a).

Candidate Name: Brenda B. Diggs

Committee Name: The Committee to Elect Brenda B. Diggs

Treasurer Name: Lucrecia R. Moore

If Candidate is own treasurer, designate an agent to carry out designations: _____

Committee ID #: _____

Level Registered: [State] [County] If county, specify: County

I, Brenda B. Diggs, hereby direct that in the event of my death or incapacity all funds remaining in my Campaign Committee account(s) (after payment of permitted outstanding debts or reasonable expenses for winding up the Committee or closing office) be paid in the following manner as permitted by N.C. Gen. Stat. 163-278.16B(a).

Name of Entity <small>(Select from §163-278.16B(a))</small>	Plan for Disbursement (eg. Amount or %)
1. <u>United Way of Forsyth County</u>	<u>100%</u>
2. _____	_____
3. _____	_____

By signing this form, I certify that the foregoing entities are eligible beneficiaries under N.C. Gen. Statute 163-278.16B(a). A copy of this form should be maintained with the Committee records.

Signature of Candidate: Brenda B. Diggs

Date: June 10, 2013

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