Disclosure Report Cover

Amendment
☐ Yes ☒ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

1. Committee Information

a. Full Name	c. ID Number
MARYANNE GUCCIARDI FOR BOARD OF EDUCATION	
b. Mailing Address (include City, State and Zip Code)	**d. Date Filed**
308 PARKRIDGE AVENUE CHAPEL HILL, NC 27517	10/02/2009
	e. Phone Number

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2009	01/01/2009	09/22/2009	SHELBY POHLMAN

6. Type of Committee (Check One)

- ☒ Candidate Campaign
- ☐ Party
- ☐ PAC
- ☐ Referendum
- ☐ Independent Expenditure
- ☐ Joint Fundraiser
- ☐ Legal Expense Fund

7. Type of Fund *(if applicable, check one)*

- ☐ Booster Fund
- ☐ Building Fund
- ☐ Other:

8. Number of Fundraisers this Report

1

9. Type of Report *(check only one type of report from one category)*

Municipal	State/County	Referendum
☐ Organizational	☐ Organizational	☐ Organizational
☒ Thirty-five day	Quarterly	☐ Pre-referendum
☐ Pre-primary	☐ First	☐ Final
☐ Pre-election	☐ Second	☐ Supplemental Final
☐ Pre-runoff	☐ Third	☐ Annual
Semi-annual	☐ Fourth	☐ Special
☐ Mid Year	Semi-annual	
☐ Year End	☐ Mid Year	**10. Special Report Name**
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

11. Account Information

a. Financial Institution Full Name		b. Purpose	c. Account Code
SUNTRUST		ELECTION OF MARYANNE GUCCIARDI TO BOARD OF EDUCATION	01
			d. Period Begin Balance
			$ 0.00

11. Account Information

a. Financial Institution Full Name		b. Purpose	c. Account Code
			d. Period Begin Balance
			$

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 and that I have been trained by the NC State Board of Elections.

Shelby N. Pohlman		10/02/2009
Printed Name of Signer	Signature of Appointed Treasurer	Date

FOR OFFICE USE ONLY

Date Received:	10/2/09	Employee:	
Date Postmarked:		Employee:	
Date Scanned:		Employee:	
Date Data Entered:		Employee:	

Delivery Method
- ☐ Normal Mail
- ☐ Registered Mail
- ☒ Hand Delivered
- ☐ Electronically Filed
- ☐ Signer has not received mandatory training

Received
OCT 02 2009
Orange Co. Bd. Of Elections

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.
You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment ☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
MARYANNE GUCCIARDI FOR BOARD OF EDUCATION	2009 Thirty-five-day	

Start of Election Cycle: January 1, 2009		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 0.00	$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals	*(CRO-1205)*	$ 665.00	$ 665.00
6) Contributions from Individuals	*(CRO-1210)*	$ 3,015.27	$ 3,015.27
7) Contributions from Political Party Committees	*(CRO-1220)*	$ 0.00	$ 0.00
8) Contributions from Other Political Committees	*(CRO-1230)*	$ 0.00	$ 0.00
9) Loan Proceeds	*(CRO-1410)*	$ 0.00	$ 0.00
10) Refunds/Reimbursements to the Committee	*(CRO-1240)*	$ 0.00	$ 0.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts	*(CRO-1250)*	$ 0.00	$ 0.00
11b) Contributions from Not-For-Profit Organizations	*(CRO-1250)*	$ 0.00	$ 0.00
11c) Outside Sources of Income	*(CRO-1250)*	$ 0.00	$ 0.00
11d) Legal Expense Fund - Other Sources	*(CRO-1270)*	$ 0.00	$ 0.00
11e) Exempt Purchase Price Sales	*(CRO-1265)*	$ 0.00	$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		$ 3,680.27	$ 3,680.27
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	*(CRO-1310)*	$ 0.00	$ 0.00
13b) Contributions to Candidates/Political Committees	*(CRO-1310)*	$ 0.00	$ 0.00
13c) Coordinated Party Expenditures	*(CRO-1310)*	$ 0.00	$ 0.00
14) Aggregated Non-Media Expenditures	*(CRO-1315)*	$ 0.00	$ 0.00
15) Loan Repayments	*(CRO-1420)*	$ 0.00	$ 0.00
16) Refunds/Reimbursements from the Committee	*(CRO-1320)*	$ 0.00	$ 0.00
17) In-Kind Contributions	*(CRO-1510)*	$ 2,165.27	$ 2,165.27
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 2,165.27	$ 2,165.27
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 1,515.00	$ 1,515.00
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	*(CRO-1330)*	$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns)	*(CRO-1430)*	$ 0.00	
22) Debts and Obligations owed by the Committee	*(CRO-1610)*	$ 0.00	
23) Debts and Obligations owed to the Committee	*(CRO-1620)*	$ 0.00	
24) Account Transfers Within the Committee	*(CRO-1720)*	$ 0.00	
25) Administrative Support	*(CRO-1710)*	$ 0.00	$ 0.00
26) Forgiven Loans	*(CRO-1440)*	$ 0.00	$ 0.00
27) 48-Hour Notice Reports Sum	*(CRO-2220)*	$ 0.00	$ 0.00
28) Contributions to be Refunded	*(CRO-1215)*	$ 0.00	$ 0.00

Received OCT 02 2009 Orange Co. Bd. Of Elections

Aggregated Contributions from Individuals

Page 1 of 1

Amendment ☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of $50 or less

1. Committee Full Name (and Fund if applicable)	2. ID Number
MARYANNE GUCCIARDI FOR BOARD OF EDUCATION	

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	01	Check		09/03/2009	$ 20.00
☐ Add ☐ Remove	01	Check		08/24/2009	$ 50.00
☐ Add ☐ Remove	01	Check		08/09/2009	$ 25.00
☐ Add ☐ Remove	01	Check		07/31/2009	$ 25.00
☐ Add ☐ Remove	01	Check		09/18/2009	$ 25.00
☐ Add ☐ Remove	01	Check		07/31/2009	$ 10.00
☐ Add ☐ Remove	01	Check		09/22/2009	$ 25.00
☐ Add ☐ Remove	01	Check		08/14/2009	$ 50.00
☐ Add ☐ Remove	01	Check		08/14/2009	$ 10.00
☐ Add ☐ Remove	01	Check		08/14/2009	$ 10.00
☐ Add ☐ Remove	01	Check		08/25/2009	$ 50.00
☐ Add ☐ Remove	01	Check		09/20/2009	$ 50.00
☐ Add ☐ Remove	01	Check		08/31/2009	$ 50.00
☐ Add ☐ Remove	01	Check		08/31/2009	$ 50.00
☐ Add ☐ Remove	01	Check		09/04/2009	$ 50.00
☐ Add ☐ Remove	01	Check		09/22/2009	$ 15.00
☐ Add ☐ Remove	01	Check		06/18/2009	$ 5.00
☐ Add ☐ Remove	01	Check		07/31/2009	$ 25.00
☐ Add ☐ Remove	01	Check		08/29/2009	$ 50.00
☐ Add ☐ Remove	01	Check		08/09/2009	$ 25.00
☐ Add ☐ Remove	01	Check		07/03/2009	$ 25.00
☐ Add ☐ Remove	01	Check		08/23/2009	$ 20.00

4. Total only this Page	$ $665.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ $665.00

Received
OCT 02 2009
Orange Co. Bd. Of Elections

Contributions from Individuals

Pg 1 of 4

Amendment ☐ Yes ☒ No

Use this form to report individual contributions over $50 or contributions under $50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)	2. ID Number
MARYANNE GUCCIARDI FOR BOARD OF EDUCATION	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CUTLER ANDREWS 109 HAMPTON COURT CHAPEL HILL, NC 27514	FUNDRAISER	UNC NC CHILDREN'S HOSPITAL		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	01	Check		09/09/2009	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
ROSIE BENZONELLI 837 KENMORE ROAD CHAPEL HILL, NC 27514	OWNER	CHAPEL HILL GARDEN SUITE		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	01	Check		08/28/2009	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
BENJAMIN FELDMAN 304 PARKRIDGE AVENUE CHAPEL HILL, NC 27517	OWNER	SNAPTOTES.COM		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	01	Check		08/31/2009	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 300.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 3,015.27

Received

OCT 02 2009

Orange Co. Bd. Of Elections

Contributions from Individuals

Amendment ☐ Yes ☒ No

Use this form to report individual contributions over $50 or contributions under $50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)	2. ID Number
MARYANNE GUCCIARDI FOR BOARD OF EDUCATION	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MARYANNE GUCCIARDI 308 PARKRIDGE AVENUE CHAPEL HILL, NC 27517	ENTREPRENUER	GUCCIARDI CONSULTANTS, LLC		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	01	Check		06/24/2009	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MARYANNE GUCCIARDI 308 PARKRIDGE AVENUE CHAPEL HILL, NC 27517	ENTREPRENUER	GUCCIARDI CONSULTANTS, LLC		$ 2,165.27

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	01	In-Kind	POSTAGE	06/30/2009	$ 68.35
☐	01	In-Kind	PAID FOR FILING FEE	07/09/2009	$ 5.00
☐	01	In-Kind	GRAPHIC DESIGN PAID TO CATHERINE ROGERS	07/21/2009	$ 122.50

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MARYANNE GUCCIARDI 308 PARKRIDGE AVENUE CHAPEL HILL, NC 27517	ENTREPRENUER	GUCCIARDI CONSULTANTS, LLC		$ 2,165.27

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	01	In-Kind	SUPPLIES AND WEB HOSTING	07/27/2009	$ 55.00
☐	01	In-Kind	YARD SIGNS DEPOSIT	08/05/2009	$ 1,260.00
☐	01	In-Kind	COFFEE WITH VOTER	08/07/2009	$ 1.92

4. Total only this Page	$ 1,612.77
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 3,015.27

Received
NC State Board of Elections
OCT 02 2009
Orange Co. Bd. Of Elections

Contributions from Individuals

Amendment ☐ Yes ☒ No

Use this form to report individual contributions over $50 or contributions under $50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)	2. ID Number
MARYANNE GUCCIARDI FOR BOARD OF EDUCATION	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MARYANNE GUCCIARDI 308 PARKRIDGE AVENUE CHAPEL HILL, NC 27517	ENTREPRENUER	GUCCIARDI CONSULTANTS, LLC		$ 2,165.27

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	01	In-Kind	COFFEE WITH VOTER	08/10/2009	$ 1.59
☐	01	In-Kind	PAPER SUPPLIES	08/26/2009	$ 29.87
☐	01	In-Kind	INK FOR PRINTER FOR MAILINGS	09/01/2009	$ 113.11

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
MARYANNE GUCCIARDI 308 PARKRIDGE AVENUE CHAPEL HILL, NC 27517	ENTREPRENUER	GUCCIARDI CONSULTANTS, LLC		$ 2,165.27

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	01	In-Kind	YARD SIGNS FINAL PAYMENT	09/03/2009	$ 500.26
☐	01	In-Kind	COFFEE WITH CONSTITUENT	09/18/2009	$ 2.68
☐	01	In-Kind	WEBSITE HOSTING MONTHLY RENEWAL	09/22/2009	$ 4.99

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
JOAN HUNTLEY PO BOX 190 CHAPEL HILL, NC 27514	RETIRED	RETIRED		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	01	Check		08/13/2009	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 752.50
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 3,015.27

Received OCT 02 2009 Orange Co. Bd. Of Elections

Contributions from Individuals

Pg 4 of 4

Amendment ☐ Yes ☒ No

Use this form to report individual contributions over $50 or contributions under $50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)	2. ID Number
MARYANNE GUCCIARDI FOR BOARD OF EDUCATION	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
RUTH MARCHUK 306 PEBBLE SPRINGS ROAD CHAPEL HILL, NC 27514	HOUSEWIFE	HOUSEWIFE		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	01	Check		09/04/2009	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
CAROL MILLAR-LEWIS 208 FAISON RD CHAPEL HILL, NC 27517	HOUSEWIFE	N/A		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	01	Check		09/15/2009	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
FRANK WANG 102 WESTCHESTER PLACE CHAPEL HILL, NC 27514	MANAGER	BIOMEDOMICS, INC		$ 150.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	01	Check		09/22/2009	$ 150.00
☐					$
☐					$

4. Total only this Page	$ 350.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 3,015.27

Received

OCT 02 2009

Orange Co. Bd. Of Elections

In-Kind Contributions

Amendment ☐ Yes ☒ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)	2. ID Number
MARYANNE GUCCIARDI FOR BOARD OF EDUCATION	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
MARYANNE GUCCIARDI 308 PARKRIDGE AVENUE CHAPEL HILL, NC 27517	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date: $ 2,165.27

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
POSTAGE	06/30/2009	$ 68.35
PAID FOR FILING FEE	07/09/2009	$ 5.00
GRAPHIC DESIGN PAID TO CATHERINE ROGERS	07/21/2009	$ 122.50

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
MARYANNE GUCCIARDI 308 PARKRIDGE AVENUE CHAPEL HILL, NC 27517	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date: $ 2,165.27

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
SUPPLIES AND WEB HOSTING	07/27/2009	$ 55.00
YARD SIGNS DEPOSIT	08/05/2009	$ 1,260.00
COFFEE WITH VOTER	08/07/2009	$ 1.92

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
MARYANNE GUCCIARDI 308 PARKRIDGE AVENUE CHAPEL HILL, NC 27517	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date: $ 2,165.27

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
COFFEE WITH VOTER	08/10/2009	$ 1.59
PAPER SUPPLIES	08/26/2009	$ 29.87
INK FOR PRINTER FOR MAILINGS	09/01/2009	$ 113.11

4. Total only this Page	$ 1,657.34
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 2,165.27

Received OCT 02 2009 Orange Co. Bd. Of Elections

In-Kind Contributions

Amendment ☐ Yes ☒ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)	2. ID Number
MARYANNE GUCCIARDI FOR BOARD OF EDUCATION	

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments
MARYANNE GUCCIARDI 308 PARKRIDGE AVENUE CHAPEL HILL, NC 27517	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	d. Election Sum to Date $ 2,165.27

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
YARD SIGNS FINAL PAYMENT	09/03/2009	$ 500.26
COFFEE WITH CONSTITUENT	09/18/2009	$ 2.68
WEBSITE HOSTING MONTHLY RENEWAL	09/22/2009	$ 4.99

4. Total only this Page	$ 507.93
5. Total of ALL CRO-1510 Pages *(This line must be on line 17 of Detailed Summary Page CRO-1100)*	$ 2,165.27

Received
OCT 02 2009
Orange Co. Bd. Of Elections

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

Certification of Threshold

This Certification is used by Candidate and Party Committees only, to declare or withdraw the committee's intent to raise or spend under $3,000 in the current election cycle

FILED BY:

Committee Name: Mary Anne Gucciardi for Board of Education

Treasurer Name: Shelby Poulman

Treasurer Address: 104 Colburn Point

(include city, state, & zip) Chapel Hill, NC 27516

Treasurer Phone: 919-593-6811

Check One:

____ I certify that this committee intends to neither receive nor expend more than $3,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds $3,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports.

THIS DECLARATION CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.

_✓_ I am withdrawing my Certification to remain under the $3000 threshold. I will now be required to file the next scheduled report for all contributions and expenditures that have not been previously reported from the beginning of the current election cycle. I further agree to file all future reports required.

10/2/09
Date Signed

Signature

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

Received
OCT 02 2009
Orange Co. Bd. Of Elections