

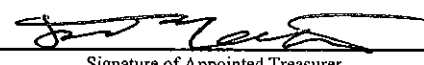
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Statement of Organization - Candidate Committee

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			c. ID Number		
Independent Winston-Salem					
b. Mailing Address (include City, State and Zip Code)			d. Date Organized		
617 Dana Ct. Winston-Salem, NC 27103			08/24/12		
			e. Phone Number		
			(336) 624-5913 (336) 784-3060		
2. Candidate Information					<input type="checkbox"/> Candidate's Primary Committee
a. Full Name		e. Candidate ID Number		f. Party Affiliation	
Travis Ryan Carter				Republican <small>(Indicate Non-partisan if applicable)</small>	
b. Mailing Address (include City, State, and Zip Code)			g. Office Sought		
617 Dana Ct. Winston-Salem, NC 27103			City Councilman, Winston-Salem South Ward		
c. Phone Number	d. Email Address	h. Next Election Year		i. Jurisdiction	
(336) 624-5913 (336) 784-3060	Tcarter624@yahoo.com	2013		South Ward	
<input checked="" type="checkbox"/> Email copy of notices					
3. Treasurer Information			4. Custodian of Books Information		
a. Full Name			a. Full Name		
Travis Ryan Carter					
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
617 Dana Ct. Winston-Salem, NC 27103					
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address		
(336) 624-5913 (336) 784-3060	Tcarter624@yahoo.com				
I prefer to receive notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Email copy of notices		
5. Assistant Treasurer Information		<input type="checkbox"/> Add <input type="checkbox"/> Remove		6. Account Information (incl. CRO-3500) <input type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name		a. Financial Institution Full Name		BBRT	
		b. Purpose		Campaign Finance	
b. Mailing Address (include City, State, and Zip Code)		c. Account Code		d. Type	
		IWS		Community checking	
c. Phone Number		d. Email Address			
<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.					
Travis Ryan Carter				4/17/13	
Printed Name of Signer		Signature of Appointed Treasurer		Date	