



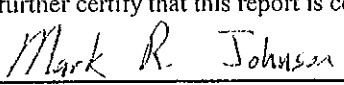
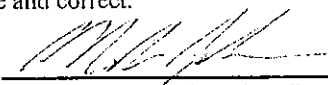
Statement of Organization - Candidate Committee

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	
Mark Johnson for School Board				FOR-8T34TQ-C-001	
b. Mailing Address (include City, State and Zip Code)				d. Date Organized	
2680 Arbor Place Court, Winston Salem, NC 27104				4/9/2013	
				e. Phone Number	
				336-721-3724	
2. Candidate Information <input checked="" type="checkbox"/> Candidate's Primary Committee					
a. Full Name			e. Candidate ID Number		f. Party Affiliation
Mark Randall Johnson, Jr.					Republican
					(Indicate Non-partisan if applicable)
b. Mailing Address (include City, State, and Zip Code)			g. Office Sought		
2680 Arbor Place Court, Winston Salem, NC 27104			Board of Education - At-Large		
c. Phone Number		d. Email Address	h. Next Election Year		i. Jurisdiction
336-721-3724		markrjohnson2@gmail.com			Forsyth County
<input checked="" type="checkbox"/> Email copy of notices			2014		
3. Treasurer Information			4. Custodian of Books Information		
a. Full Name			a. Full Name		
Mark Randall Johnson, Jr.					
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
2680 Arbor Place Court, Winston Salem, NC 27104					
c. Phone Number		d. Email Address	c. Phone Number		d. Email Address
336-721-3724		markrjohnson2@gmail.com			
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 (incl. CRO-3500)		
a. Full Name			a. Financial Institution Full Name		
			BB&T		
b. Mailing Address (include City, State, and Zip Code)			b. Purpose		
			Campaign Purposes		
c. Phone Number		d. Email Address	c. Account Code		d. Type
					Community Checking
<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.					
 Printed Name of Signer			 Signature of Appointed Treasurer		4/30/13 Date

COPY



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

2013 APR 30 PM 3:02
RECEIVED

Kimberly Westbrook-Strach
Deputy Director – Campaign Reporting

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

Confidential

Certification of Financial Account Information

This Certification is used to report confidential bank account information for all financial accounts established by the committee and must accompany the Statement of Organization Form

FILED BY:

Committee Name:

Mark Johnson for School Board

Treasurer Name:

Mark R. Johnson

Treasurer Address:

2680 Arbor Place Court

(include city, state, & zip)

Winston-Salem NC 27104

Treasurer Phone:

336-721-3724

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 is only used for the purposes of an audit or investigation or as required by a court of competent jurisdiction. **Each treasurer (or candidate) must designate below an account code (any number or letter or combination of numbers and letters) by which to refer to the account number on reports.** If an account number is used as the "account code," confidentiality of the account number is presumed to have been waived.

The treasurer shall maintain all moneys of the political committee in a bank account or bank accounts used exclusively by the political committee and shall not commingle those funds with any other moneys.

Type of account	Financial Institution	Address	Account Number	Account Code
Community Checking	BB and T	200 West 2 nd St, Winston Salem NC 27101	[REDACTED]	

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

4/30/13

Date Signed

[Signature]

Signature of Candidate or Treasurer

For Candidate Committees Only

☐ In lieu of providing account information, I certify that this committee will not raise any money nor spend any money except that which is the candidate's personal funds. I furthermore understand that an audit or investigation could warrant the probe of any personal bank account that is being used for campaign expenditures.

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

Date Signed

Signature of Candidate or Treasurer

CRO-3500

Certification of Financial Account Information

August 2012