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).

<u>This form must be a </u>	accompanied by forms CRO-3100 and Cr	CO-3300 (when amend	ing, only	re-subilite if applicable).	
1. Committee Info	rmation		.' -		
a. Full Name				c. ID Number	
LARRY	WAYNE DIKON				
b. Mailing Address (inc	clude City, State and Zip Code)			d. Date Organized	
2714 R	OSS ROAD			2-1-2012	
				e. Phone Number	
DURHAM	1 NC 27703			919-957-0766	
2. Candidate Infor	matión		Candidate	e's Primary Committee	
a. Full Name		e. Candidate ID Number		f. Party Affiliation	
LARRY W	JAYNE DIXON			DEMOCRAT (Indicate Non-partican if applicable	
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought		(sicilate : 1011 particul: .2 approach	
	PSS ROAD				
DURHA!	7 NC 27703	COUNTY CE			
	d. Email Address	h. Next Election Year	i. J	furisdiction	
957-0766	LD 533248 @ ADL.COM				
Email copy of n	lotices				
3. Treasurer Infor	4. Custodian of Boo	ks Inform	nation of the state of the stat		
a. Full Name		a. Full Name			
LARRY WAYNE DIXON		LARRY WAYNE DIXON			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)			
2714 ROSS ROAD		2714 ROSS ROAD			
DURHAM.	NC 27703	DURHAM	NC	27703	
c. Phone Number	d. Email Address	c. Phone Number d	En ail Add	dress	
957.0766	LD 533248@AOL.COM			248 @ AOL. COM	
I prefer to receive	Email copy of notices				
5. Assistant Treasu	6 Account Information (incl. CRO-3500) Add				
a. Full Name	Remove (1997)	a. Financial Institution F		Remove	
		LOCAL GOVERNME	eut Fel	DERAL CREDIT UNION	
b. Mailing Address (incl	lude City, State, and Zip Code)	b. Purpose	Γp	ECEIVED	
			"	LOLIVE	
			F	EB 2 4 REC'D	
. Phone Number	d. Email Address	c. Account Code d.	~ l		
			וטם	ARD OF ELECTIONS	
]	BO	ARD OF ELECTIONS	
Email copy o					
CERTIFICATION		. 11 11 14	6	ila aa a aan e aan aan ah	
	ommittee or Fund is in compliance with a				
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.					
, , , , , , , , , , , , , , , , , , , ,	\sim		`	_	
LARRY L	DIXON OTHER	2 W Defen	<i>)</i>	2-24-12	
Printer	d Name of Signer	nature of Appointed Treasur	er	Date	



North Carolina State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director - Campaign Reporting

RECEIVED

FEB 2 4 REC'D

DURHAM COUNTY BOARD OF ELECTIONS

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:	LARRY W DIXON	
Treasurer Name:	LARRY W DIXON	
Treasurer Address:	2714 ROSS ROAD	
(include city, state, & zip)	DURHAM NC 27703	
Treasurer Phone:	919-957-0766	

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).

2-24-12
Date Signed

Signature of Candidate

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



North Carolina

State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director – Campaign Reporting

RECEIVED

FEB 2 4 RECT

DURHAM COUNTYBOARD OF ELECTIONS

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

Certification of Threshold

This Certification is used to declare or withdraw a committee's intent to raise or spend \$1,000 or less in the current election cycle.

This Certification is only valid for political party committees and candidates for a county office, municipal office, local school board office, soil & water conservation district board of supervisors, or sanitary district board.

Committee Name: LARRY W DIKON Treasurer Address: ATH ROSS ROAD (include city, state, & zip) DURHAM NC 27703

Treasurer Phone: 919 - 957 - 0766

Check One.

FILED BY:

I certify that this committee intends to neither receive nor expend more than \$1,000 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 \$1,000 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 at or under the \$1,000 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.

2 - 24 - 12 Date Signed

Signature /

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