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.

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. RAYMOND EURQUHART	1. Committee Information							
b. Mailing Address (include City, State, and Zip Code) 7.03C SOUTH STREET DURHAM, NC 27707 2. Candidate Information a. Full Name RAYMOND EURQUHART DURHAM, NC 27707 3. Treasurer Information a. Full Name RAYMOND EURQUHART DURHAM, NC 27707 3. Treasurer Information a. Full Name RAYMOND EURQUHART DURHAM, NC 27707 DURHAM, NC 27707 3. Treasurer Information a. Full Name RAYMOND EURQUHART D. Mailing Address (include City, State, and Zip Code) 7.03C SOUTH STREET DURHAM, NC 27707 DURHAM, NC 27707 C. Phone Number d. Email Address REUR@VERIZON. NET S. Assistant Treasurer Information a. Full Name REUR@VERIZON. NET S. Assistant Treasurer Information a. Full Name Remove RECEIVED DURHAM CO. CERTIFICATION Lecrify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22b, & 22D-22M of Chapt of Chap	a. Full Name				e. ID Number			
703C SOUTH STREET DURHAM, NC 27707 2. Candidate Information	RAYMOND EURQUHART CAMPAIGN COMMITTEE							
DURHAM, NC 27707 2. Candidate Information a. Full Name C. Candidate Serious City, State, and Zip Code) C. Office Sought C. O	b. Mailing Address (include C	ity, State and Zip Code)			d. Date Organized			
2. Candidate Information Candidate's Primary Committee 2. Candidate Information C. Candidate's Primary Committee 3. Full Name C. Candidate ID Number d. Party Affiliation 4. Party Affiliation 5. Mailing Address (include City, State, and Zip Code) 703C SOUTH STREET 5. DURHAM, NC 27707 3. Treasurer Information S. Full Name 6. Full Name 7. Full Name 7. Full Name 7. Full Name 7. Full Name 8. Full Name 9. Full					06/24/2010		06/24/2010	
2. Candidate Information a. Full Name C. Candidate In Number C. Candidate In Number C. Candidate In Number C. Candidate ID Number C. Phone N	DURHAM, NC 27707				a Phone	Numb	ine State of the S	
2. Candidate Information a. Full Name C. Candidate In Number d. Party Affiliation NON-PARTISAN b. Mailing Address (include City, State, and Zip Code) 703C SOUTH STREET DURHAM, NC 27707 (If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation 3. Treasurer Information A. Full Name RAYMOND EURQUHART b. Mailing Address (include City, State, and Zip Code) 703C SOUTH STREET DURHAM, NC 27707 c. Phone Number d. Email Address P19-682-2821 NET S. Assistant Treasurer Information A. Full Name RECEIVED D. Mailing Address (include City, State, and Zip Code) b. Mailing Address (include City, State, and Zip Code) 6. Account Information Add A. Financial Institution Full Name RECEIVED DURHAM CO. RECEIVED DURHAM CO. CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22b, & 22D-22M of Chapt fload of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certif that this report is complete, true and correct. RAYMOND EURQUHART					C. I mone			
a. Full Name RAYMOND EURQUHART QCLUCT NON-PARTISAN b. Mailing Address (include City, State, and Zip Code) 703C SOUTH STREET DURHAM, NC 27707 SWCD SUPERVISOR DURHAM CO. (If office sought is nonpartisan, write "Nonpartisan" in [d] Part Affiliation.) 3. Treasurer Information a. Full Name RAYMOND EURQUHART b. Mailing Address (include City, State, and Zip Code) 703C SOUTH STREET DURHAM, NC 27707 c. Phone Number d. Email Address 919-682-2821 R.EUR@VERIZON. NET S. Assistant Treasurer Information RECEIVED b. Mailing Address (include City, State, and Zip Code) b. Mailing Address (include City, State, and Zip Code) 6. Account Information Remove RECEIVED DURHAM COUNTY BOARD OF ELECTIONS c. Phone Number d. Email Address G. Account Code d. Type CERTIFICATION CERT								
RAYMOND EURQUHART D. Mailing Address (include City, State, and Zip Code) TO3C SOUTH STREET DURHAM, NC 27707 SWCD SUPERVISOR DURHAM CO. (If office sought is nonpartisan, write "Nonpartisan" in [d] Part Affiliation.) 3. Treasurer Information		m		Candidate's Primary Committee				
b. Mailing Address (include City, State, and Zip Code) 703C SOUTH STREET DURHAM, NC 27707 3. Treasurer Information A. Full Name RAYMOND EURQUHART b. Mailing Address (include City, State, and Zip Code) 703C SOUTH STREET DURHAM, NC 27707 c. Phone Number d. Email Address REUR@VERIZON. NET 5. Assistant Treasurer Information A. Full Name REUR@VERIZON. NET 5. Assistant Treasurer Information A. Full Name RECEIVED b. Mailing Address (include City, State, and Zip Code) DURHAM, NC 27707 c. Phone Number d. Email Address REUR@VERIZON. NET 5. Assistant Treasurer Information Add A. Financial Institution Full Name Remove RECEIVED DURHAM COUNTY BOARD OF ELECTIONS c. Phone Number d. Email Address c. Account Code CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22b, & 22D-22M of Chapt 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certifithat this report is complete, true and correct. RAYMOND EURQUHART	TO A STATE OF THE STATE OF			c. Candidate ID Number d. F		d. Pa	arty Affiliation	
703C SOUTH STREET DURHAM, NC 27707 SWCD SUPERVISOR DURHAM CO. (If office sought is nonpartisan, write "Nonpartisan" in [d] Par Affiliation.) 3. Treasurer Information a. Full Name RAYMOND EURQUHART b. Mailing Address (include City, State, and Zip Code) 703C SOUTH STREET DURHAM, NC 27707 c. Phone Number d. Email Address R.EUR@VERIZON. NET 5. Assistant Treasurer Information a. Full Name RECEIVED b. Mailing Address (include City, State, and Zip Code) Propose BECEIVED DURHAM COUNTY BOARD OF ELECTIONS c. Phone Number d. Email Address c. Account Code CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22b, & 22D-22M of Chapt 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certif that this report is complete, true and correct. RAYMOND EURQUHART	RAYMOND EURQUHART			QCLUCT	NO		N-PARTISAN	
DURHAM, NC 27707 C. Phone Number A. Email Address C. Phone Number A. Full Name A. Full Name A. Full Name A. Email Address C. Phone Number A. Full Name A. Full Name A. Full Name A. Email Address C. Phone Number A. Email Address A.	b. Mailing Address (include C	ity, State, and Zip Code)		e. Office Sought		74	f. Jurisdiction	
(If office sought is nonpartisan, write "Nonpartisan" in [d] Para Affiliation.) 3. Treasurer Information a. Full Name RAYMOND EURQUHART b. Mailing Address (include City, State, and Zip Code) 703C SOUTH STREET DURHAM, NC 27707 c. Phone Number d. Email Address R.EUR@VERIZON. NET 5. Assistant Treasurer Information a. Full Name RECEIVED b. Mailing Address (include City, State, and Zip Code) DURHAM COUNTY BOARD OF FLECTIONS c. Phone Number d. Email Address c. Account Code RECOUNTY BOARD OF FLECTIONS c. Phone Number d. Email Address c. Account Code CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22b, & 22D-22M of Chapt 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certif that this report is complete, true and correct. RAYMOND EURQUHART	703C SOUTH STREET			SWCD SUPERVISOR				
3. Treasurer Information a. Full Name B. Mailing Address (include City, State, and Zip Code) C. Phone Number A. Email Address A. Full Name A. Full Name A. Full Name A. Full Name A. Funder Information A. Full Name A. Funder Information A. Email Address A. Email Address A. Funder Information A. Funder Information A. Email Address A. Email Address A. Funder Information A. Funder Information A. Email Address A. Funder Information A. Email Address A. Em	DURHAM, NC 27707						DURHAM CO.	
a. Full Name RAYMOND EURQUHART b. Mailing Address (include City, State, and Zip Code) 703C SOUTH STREET DURHAM, NC 27707 c. Phone Number d. Email Address R.E.UR@VERIZON. NET 5. Assistant Treasurer Information a. Full Name Remove Remove RECEIVED b. Mailing Address (include City, State, and Zip Code) DURHAM COUNTY BOARD OF ELECTIONS c. Phone Number d. Email Address c. Account Code d. Type CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22b, & 22D-22M of Chaptel 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. RAYMOND EURQUHART				1 10 00			onpartisan" in [d] Party	
RAYMOND EURQUHART b. Mailing Address (include City, State, and Zip Code) 703C SOUTH STREET DURHAM, NC 27707 c. Phone Number d. Email Address R.EUR@VERIZON. NET 5. Assistant Treasurer Information a. Full Name Remove RECEIVED b. Mailing Address (include City, State, and Zip Code) b. Purpose JUN 2 9 2010 DURHAM COUNTY BOARD OF FLECTIONS c. Phone Number d. Email Address C. Phone Number a. Financial Institution Full Name Remove RECEIVED CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22b, & 22D-22M of Chapt 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. RAYMOND EURQUHART	3. Treasurer Informatio	n	4 M S 1 E S	4. Custodian of Books Information				
b. Mailing Address (include City, State, and Zip Code) 703C SOUTH STREET DURHAM, NC 27707 c. Phone Number d. Email Address P19-682-2821 R.EUR@VERIZON. NET 5. Assistant Treasurer Information Remove Remove Remove Remove Remove RECEIVED b. Mailing Address (include City, State, and Zip Code) b. Purpose JUN 2 9 2010 DURHAM COUNTY BOARD OF FLECTIONS c. Phone Number d. Email Address c. Account Code CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22b, & 22D-22M of Chapt 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. RAYMOND EURQUHART	1. The standing of the standard of the standar			a. Full Name				
703C SOUTH STREET DURHAM, NC 27707 c. Phone Number d. Email Address 919-682-2821 R.EUR@VERIZON. NET S. Assistant Treasurer Information Add A. Financial Institution Full Name Remove RECEIVED b. Mailing Address (include City, State, and Zip Code) b. Purpose JUN 2 9 2010 DURHAM COUNTY BOARD OF ELECTIONS c. Phone Number d. Email Address c. Account Code d. Type 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. RAYMOND EURQUHART	RAYMOND EURQUHA	ART						
c. Phone Number d. Email Address 919-682-2821 R.EUR@VERIZON. NET 5. Assistant Treasurer Information a. Full Name Remove Remove Remov	b. Mailing Address (include C	City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)				
S. Assistant Treasurer Information a. Full Name Remove Remove Remove Remove Remove RECEIVED DURHAM COUNTY BOARD OF ELECTIONS c. Phone Number d. Email Address c. Account Code CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22b, & 22D-22M of Chaptel 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. RAYMOND EURQUHART								
5. Assistant Treasurer Information a. Full Name Remove Remov	c. Phone Number	d. Email Address	TELS DO ST	c. Phone Number	d. Email	Addre	ess	
a. Full Name Remove Remove Remove RECEIVED b. Mailing Address (include City, State, and Zip Code) b. Purpose JUN 2 9 2010 DURHAM COUNTY BOARD OF FLECTIONS c. Phone Number d. Email Address c. Account Code CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22b, & 22D-22M of Chapte 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. RAYMOND EURQUHART	919-682-2821							
b. Mailing Address (include City, State, and Zip Code) b. Purpose JUN 2 9 2010 DURHAM COUNTY BOARD OF ELECTIONS c. Phone Number d. Email Address c. Account Code CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22b, & 22D-22M of Chapte 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. RAYMOND EURQUHART	5. Assistant Treasurer I	nformation	Add	6. Account Information	(incl. CRi	0-3500) Add	
b. Mailing Address (include City, State, and Zip Code) DURHAM COUNTY BOARD OF ELECTIONS c. Phone Number d. Email Address c. Account Code CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22b, & 22D-22M of Chapte 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. RAYMOND EURQUHART	a. Full Name		Remove	a. Financial Institution Full Nam	ie		Remove	
b. Mailing Address (include City, State, and Zip Code) DURHAM COUNTY BOARD OF ELECTIONS c. Phone Number d. Email Address c. Account Code CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22b, & 22D-22M of Chapte 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. RAYMOND EURQUHART					F	RE	CEIVED	
C. Phone Number d. Email Address c. Account Code CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22b, & 22D-22M of Chapt 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. RAYMOND EURQUHART	b. Mailing Address (include C	ity, State, and Zip Code)		b. Purpose	IIIN 9 0 2010			
C. Phone Number d. Email Address c. Account Code d. Type 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.						JUN	2 9 2010	
CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22b, & 22D-22M of Chapt 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. RAYMOND EURQUHART					DU BO	RH/	AM COUNTY	
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. RAYMOND EURQUHART	c. Phone Number	d. Email Address		c. Account Code		d.	Туре	
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. RAYMOND EURQUHART				Ē.				
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. RAYMOND EURQUHART	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 Date	29 June 10							



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 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:

RAYMOND EURQUHART

Treasurer Name:

RAYMOND EURQUHART

Treasurer Address:

703C SOUTH STREET

(include city, state, & zip)

DURHAM, NC 27707

Treasurer Phone:

919-682-2821

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).

Date Signed

RECEIVED

JUN 2 9 2010

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

DURHAM COUNTY

BOARD 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

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.

FI	L	Еl	D.	R	Y	9

Committee Name:

RAYMOND EURQUHART CAMPAIGN COMMITTEE

Treasurer Name:

RAYMOND EURQUHART

Treasurer Address:

3703C SOUTH STREET

(include city, state, & zip)

DURHAM, NC 27707

Treasurer Phone:

919-682-2821

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 would only be used for the purposes of an audit or investigation or as required by a court of competent jurisdiction. It will be necessary to assign each account number an "account code" in order to provide account information on required disclosure 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 monies 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 monies.

Type of account	Financial Institution	Address	Account Number	Account Code
	F	RECEIVED		
		JUN 2 9 2010		

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

BOARD OF ELECTIONS

Date Signed

Signature of Candidate or Treasurer

In lieu of providing account information, I certify that this committee will not raise or spend any money filing fee. (Only candidates may choose this option.)

Date Signed

ature of Candidate or Trea

CRO-3500

Certification of Financial Account Information

December 2009



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 \$1,000 in the current election cycle.

FILED BY:		
Committee Name:	RAYMOND EURQUHART CAMPAIGN	COMMITTEE
Treasurer Name:	RAYMOND EURQUHART	
Treasurer Address:	703C SOUTH STREET	
(include city, state, & zip)		
Treasurer Phone:	919-682-2821	
election cycle under the produntil the end of the election of expenditures during this elections and file required	tee intends to neither receive nor expend medures set forth in G.S. 163-278.10A. This cycle for this committee. If this committee tion cycle, I understand that I must immedicampaign finance reports. I ONLY BE MADE AT THE BEGINNING	certification will remain in effect exceeds \$1,000 in contributions or lately notify the appropriate board
the next scheduled report for	rtification to remain under the \$1,000 thresh all contributions and expenditures that have election cycle. I further agree to file all future	not been previously reported from
20 Poate Signed	JUN 2 9 2010	Signature
Note: This Certification is to	be RUBITHA MecGO BLAFT Viere the comm	ittee's campaign reports are filed.

CRO-3600

Certification of Threshold

December 2009