Statement of Organization - Candidate CommitteeUse this form to create a new or update an existing candidate committee.

Amendment ☐ Yes ☐ No

This form must be accompanied by forms CRO-3100 and CF	RO-3500 (when amer	nding, only re-submit if applicable).
1. Committee Information		c. ID Number
a. Full Name		c. 1D Number
Ed Harrison for Town	Council	
b. Mailing Address (include City, State and Zip Code)		d. Date Organized
58 Newton Drive		2014 8,2013
Durham, NC 27707-9	744	e. Phone Number
yor warry to be a construction of		919-490-1506
2. Candidate Information		Candidate's Primary Committee
a. Full Name	e. Candidate ID Numbe	er f. Party Affiliation
Edward C. Harrison		HON-PARTIAN
Eaward C. Harvison		(Indicate Non-partisan if applicable
b. Mailing Address (include City, State, and Zip Code)	g. Office Sought	
TO NI L. DURHOM	CHAPEL HILL	
58 Newton Drive NC 27707	TOWN C	FOUNCIL MEMBER
c . Phone Number d. Email Address	h. Next Election Year	i. Jurisdiction
919-490-1566 ed. harrison @ mindspring.	2012	TOWN OF
Email copy of notices	2013	CHAPEL HILL
3. Treasurer Information	4. Custodian of Bo	aks Information
a. Full Name	a. Full Name	
Edward C. Harrison	s de la destación de la desta	
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (inc	ciul Vie , trate, an On Vode)
50 Nouston Dicine		
Dr. Mein NC 27707-9744		JUL 17 2013
c. Phone Number d. Email Address	c. Phone Number	DURHAM BOE
919-490-1566 ed. harrison @ mindspring.com		
I prefer to receive notices by email Yes No	Email copy of	
5. Assistant Treasurer Information Add	6. Account Inform	(3.00m) ***********************************
a. Full Name Remove	a. Financial Institution	Full Name Remove
	INELLS FAR	.60
b. Mailing Address (include City, State, and Zip Code)	b. Purpose	
	TOWN COUNC	IL CAMPAIGN
c. Phone Number d. Email Address	c. Account Code	d. Type
	. 1	CHECKING
Email copy of notices	` (
I certify that the Committee or Fund is in compliance with Chapter 163 of the NC General Statutes and that no funds at I further certify that this report is complete, true and correct the Larri Son Printed Name of Signer Signer	are commingled with	prohibited or other non-disclosed funds.
	•••	



North Carolina State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director – Campaign Reporting JUL 17 2013

DURHAM BOE

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:	6 11 1 5 5 5 5 5
Candidate Name:	Ed Harrison [BALLOT NAME]
Treasurer Name:	Edward C Harrison
Treasurer Address:	58 Newton Drive
(include city, state, & zip)	Durham NC 27707-9744
Treasurer Phone:	919-490-1566

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).

July 17, 2013

Date Signed

Signature of Candidate

Signature of Candidate

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



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506 N Harrington Street Raleigh, NC 27603

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JUL 17 2013 DURHAM BOE

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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.

FILED BY:		
Committee Name:	Ed Harrison for lown Council	
Treasurer Name:	Ed Harrison for Town Council Edward C. Harrison	
Treasurer Address:	58 Newton Drive	
(include city, state, & zip)	Durham NC 27707-9744	
Treasurer Phone:	919-490-1566	
Check One: 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.		
July 17,2013	Edward Clorinson	
Date Signed	Signature	

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

CRO-3900

JUL 17 2013 DURHAM BOE

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

December 2009

Candidate Designation of Committee Funds				
This form is used by candidate committees only and allows the candidate to designate in the event of their death, how the committee's funds are to be disbursed using the nine allowable methods outlined in 163-278.16B(a).				
Candidate Name: \mathcal{E}_{c}	raid C Harrison			
Committee Name: Ed	Harrison tox Town Council			
Treasurer Name: Edward	ard C Harrison			
If Candidate is own treasurer Committee ID #:	, designate an agent to carry out designations: PATRICIA CALSTENSE (SPUSE)	EΝ		
Level Registered: [State]	[County] If county, specify: Dorham			
I, Edward C. Harrison, hereby direct that in the event of my death or incapacity all funds remaining in my Campaign Committee account(s) (after payment of permitted outstanding debts or reasonable expenses for winding up the Committee or closing office) be paid in the following manner as permitted by N.C. Gen. Stat. 163-278.16B(a).				
Name of Entite (Select from \$163-278.) 1. Church of the Holo Chapel Holl of Pustar. 200 HAYES RO. 3. MODERS - CHASEL HILL, N	(6B(a))			
PUSTAL. 200 HAYES RU, 3. MONERS - CHASEL HILL, N	HD C 27517			
By signing this form, I certify	that the foregoing entities are eligible beneficiaries under N.C. A copy of this form should be maintained with the Committee			
Date:	July 17, 2013			
Note: This Designation is to be	filed with the Election Board where the committee's campaign reports are filed.			

Candidate Designation of Committee Funds