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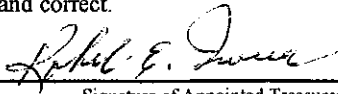
JUN 28 2011

# 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).

<b>1. Committee Information</b>					
a. Full Name				c. ID Number	
NANCY FOR MAYOR CAMPAIGN COMMITTEE				[REDACTED]	
b. Mailing Address (include City, State and Zip Code)				d. Date Organized	
185 EVERETT ROAD PINEHURST, NC 28374				06/17/2011	
				e. Phone Number	
				(910)-295-0534	
<b>2. Candidate Information</b> <input type="checkbox"/> Candidate's Primary Committee					
a. Full Name			e. Candidate ID Number		f. Party Affiliation
NANCY FIORILLO			030-38-4658		NON-PARTISAN <small>(Indicate Non-partisan if applicable)</small>
b. Mailing Address (include City, State, and Zip Code)			g. Office Sought		
185 EVERETT ROAD PINEHURST, NC 28374			MAYOR-VILLAGE OF PINEHURST		
c. Phone Number		d. Email Address		h. Next Election Year	i. Jurisdiction
(910)-295-0534		NANCYROYL@EARTHLINK.NET		2011	PINEHURST
<input checked="" type="checkbox"/> Email copy of notices					
<b>3. Treasurer Information</b>			<b>4. Custodian of Books Information</b>		
a. Full Name			a. Full Name		
ROBERT E. TWEED			ROBERT E. TWEED		
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
65 LAKE POINT DRIVE PINEHURST, NC 28374			65 LAKE POINT DRIVE PINEHURST, NC 28374		
c. Phone Number		d. Email Address		c. Phone Number	
(910)-295-3199		RRETWEED@AOL.COM		(910)-295-3199	
<input checked="" type="checkbox"/> Email copy of notices					
<input checked="" type="checkbox"/> I prefer to receive notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
<b>5. Assistant Treasurer Information</b>			<b>6. Account Information</b> <small>(incl. CRO-3500)</small>		
a. Full Name			a. Financial Institution Full Name		<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			CRESCENT STATE BANK		
b. Mailing Address (include City, State, and Zip Code)			b. Purpose		
			CHECKING ACCOUNT FOR CAMPAIGN RECEIPTS AND DISBURSEMENTS		
c. Phone Number		d. Email Address		c. Account Code	d. Type
				1	CHECKING
<input type="checkbox"/> Email copy of notices					
<b>CERTIFICATION</b>					
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.					
ROBERT E. TWEED					06/27/2011
Printed Name of Signer			Signature of Appointed Treasurer		Date



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

RECEIVED

JUN 24 2011

MOORE ROE

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: Nancy Fiorillo

Treasurer Name: Robert E. Tweed

Treasurer Address: 65 Lake Point Dr  
 (include city, state, & zip) Pinehurst, NC, 28374

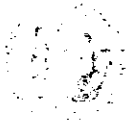
Treasurer Phone: (910)-295-3199

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).

06/24/2011

Nancy Fiorillo

  
**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.

**FILED BY:**

Committee Name: Nancy for Mayor Campaign Committee  
 Treasurer Name: Robert E. Tweed  
 Treasurer Address: 65 Lake Point Dr  
 (include city, state, & zip) Pinehurst, NC, 28374  
 Treasurer Phone: (910)-295-3199

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
Checking	Crescent State Bank	185 West Morganton Road, Southern Pines, NC, 28387	<del>XXXXXXXXXX</del>	1

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

06/24/2011

*Robert E. Tweed*