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Statement of Organization - Candidate Committee

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 (with amendments, only re-submit if applicable).

1. Committee Information			
a. Full Name Saif Ataya Com Mttee MOORE BOE		c. ID Number 37933354	
b. Mailing Address (include City, State and Zip Code) 735 Monticello Drive, Pinehurst, NC 28374		d. Date Organized 07/09/15	
		e. Phone Number (910) 295-2742	
2. Candidate Information			
<input type="checkbox"/> Candidate's Primary Committee			
a. Full Name Saif Ataya		e. Candidate ID Number 37933354	f. Party Affiliation Republican <small>(Indicate Non-partisan if applicable)</small>
b. Mailing Address (include City, State, and Zip Code) 735 Monticello Drive, Pinehurst, NC 28374		g. Office Sought Mayor	
c. Phone Number (910) 295-2742	d. Email Address saifataya@yahoo.com	h. Next Election Year 2015	i. Jurisdiction Moore County Pinehurst
<input checked="" type="checkbox"/> Email copy of notices			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name Saif Ataya		a. Full Name Saif Ataya	
b. Mailing Address (include City, State, and Zip Code) 735 Monticello Drive, Pinehurst, NC 28374		b. Mailing Address (include City, State, and Zip Code) 735 Monticello Drive, Pinehurst, NC 28374	
c. Phone Number (910) 295-2742	d. Email Address saifataya@yahoo.com	c. Phone Number 910 295-2742	d. Email Address saifataya@yahoo.com
I prefer to receive notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Email copy of notices	
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name  <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove		a. Financial Institution Full Name Bank of America <input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose Mayor Candidate	
c. Phone Number	d. Email Address	c. Account Code 1	d. Type 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.			
Saif Ataya Printed Name of Signer		 Signature of Appointed Treasurer	07/09/2015 Date



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

RECEIVED

JUL 09 2015

MOORE BOE

Kim Westbrook Strach  
Executive Director

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:     Saif Ataya      
Treasurer Name:     Saif Ataya      
Treasurer Address:     735 Monticello Drive      
(include city, state, & zip)     Pinehurst, NC 28374      
  
Treasurer Phone:     (910) 293-2742    

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).

    07/09/2015      
Date Signed

    [Signature]      
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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**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: Scif Ataya Committee

Treasurer Name: Scif Ataya

Treasurer Address: 735 Monticello Drive

(include city, state, & zip) Pinehurst, NC 28374

Treasurer Phone: (910) 295-2742

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.

07/09/2015  
Date Signed

[Signature]  
Signature

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



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OCT 19 2015

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Executive Director

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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.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

**FILED BY:**

Committee Name: Saif Ataya Committee  
Treasurer Name: Saif Ataya  
Treasurer Address: 735 Monticello Dr  
pinehurst, NC 28374  
  
Treasurer Phone: 910-295-2742

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.

10/19/2015  
Date Signed

[Signature]  
Signature

MOORE COUNTY PUBLIC COPY  
RECEIVED

JUL 09 2015

MOORE BOE



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

Kim Westbrook Strach  
Executive Director

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: Seif Ataya Comm  
Treasurer Name: Seif Ataya  
Treasurer Address: 735 Monticello Drive  
(include city, state, & zip) Pinehurst, NC 28374  
Treasurer Phone: (910) 295-2742

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
Checking	Bank of America	5 Village Green w, PO Box 1629, Pinehurst, NC 28370	[REDACTED]	1

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

07/09/2015  
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