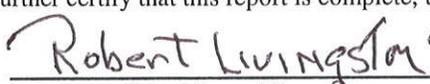
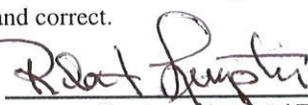


Statement of Organization - Candidate Committee

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.

1. Committee Information			
a. Full Name		c. ID Number	
Mack L. Freeze Campaign Fund			
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
1405 Phillip Ave New Bern, NC 28502		07/06/09	
		e. Phone Number	
		252-637-2055	
2. Candidate Information		<input type="checkbox"/> Candidate's Primary Committee	
a. Full Name		c. Candidate ID Number	d. Party Affiliation
Mack L. Freeze			
b. Mailing Address (include City, State, and Zip Code)		e. Office Sought	f. Jurisdiction
1405 Phillip Ave New Bern, NC 28502		New Bern Alderman, Ward 3	NB
<i>(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)</i>			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name		a. Full Name	
Robert Livingston		Robert Livingston	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
210 Nydegg Ct. New Bern, NC 28502		210 Nydegg Ct. New Bern, NC 28502	
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
252-636-1465	livingston@suddenlink.net	252-636-1465	livingston@suddenlink.net
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
n/a		Branch Banking Trust Co	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
n/a		Finance Campaign	
c. Phone Number	d. Email Address	c. Account Code	d. Type
n/a	n/a		Checking Account # 0005102692634
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	7-6-09 Date