



### North Carolina State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook Deputy Director – Campaign Reporting

FILED BY:

Date Signed

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

### **Certification of Treasurer**

Candidate Name:	Jeff Frankin.
Treasurer Name:	Jest Fronkin
Treasurer Address:	317 ASHFORD CT.
(include city, state, & zip)	Winstonsalem, NC 27/03
Treasurer Phone:	336-774-1075
the duties and responsibilitie	nation is correct, and I, as candidate, appoint said treasurer to personally fulfill s imposed upon the appointed treasurer and subject to the penalties and Regulation of Election Campaigns of Chapter 163 of the North Carolina
I understand that if the above the existing Statement of Org	Treasurer changes, it will be necessary to certify a new treasurer and amend anization within 10 days of the vacancy.
2-27-06	7127

OBAIRORN

IE: ON WY 878349007
Certification of Treasurer

FORSYTH COUNTY

Signature of Candidate

	TO OI Gamizati	on - Candidat	e Committee		L Yes	No	
	ee Information		*				
a. Fuli Name	a. Full Name				c. ID Number		
Commo	thee to Elect	Jef Frank	h to WS/FC				
	ress (include City, State and				d. Date Organ	ized	
- ' '	ASHFORD		2-28-			3-06	
MC	NC 2710;	}			e. Phone Number		
					779-1	075	
2. Candidate	Information		☐ Candidate's	s Primary Com	mittee		
a. Full Name			c. Candidate ID N	· · · · · · · · · · · · · · · · · · ·	d. Party Affilia	tion	
Jest			136434	11	Republi	can	
b. Maung Addre	ss (include City, State, and	Zip Code)	e. Office Sought		1 1	. Jurisdiction	
Sar	e		130. of	Educat	ion	FC	
		•	(If office sough	t is nonpartisa	n, write "Nonpa	rtisan" in [d]	
2 T				Party Aff	iliation.)		
3. Treasurer II a. Full Name	Hormation		4. Custodian of	Books Inform	ation		
·		<u> </u>	a. Full Name		- <del>:</del>		
	Frontin				n From	lais	
<u> </u>	(include City, State, and Zi	p Code)	b. Mailing Address	(Include City, Sta	tte, and Zip Code)		
Sant			Same				
. Phone Number	d. Email Address		c. Phone Number	d. Email Add	ress	<del></del>	
	Electveffet	riad. N.com		Elect-	Teffetrios	.M.can	
	surer Information	Add	6. Account Infor	mation (incl	L CRO-3500)	Add	
Full Name		☐ Remove	a. Financial Institutio	n Full Name		Remove	
•			Bank o	f Grani	He		
Mailing Address (i	nclude City, State, and Zip	Code)	b. Purpose				
Phone Number	d. Email Address		. Code	d Type			
	ElectJeffeti	rad.M. can					
RTIFICATIO	Y		<del></del>	<del></del>			
certify that the ( rith funds for a fo	Committee is in complia ederal or out-of-state PA	nce with all provision	ns of Article 22A,	including that	no funds are con	nmingled	
-Hat	Emlin	a amount buy that		proint, true and	フ		
Printe	d Name of Signer	Signat	ure of Appointed Treas	eurer	Date:	7-06	
		•					

NC State Board of Elections

CRO-2100A

Amendment



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

Kimberly Westbrook Deputy Director - Campaign Reporting

FILED BY:

CRO-3500

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

March 2003

#### Confidential

# **Certification of Financial Account Information**

Treasurer Name:  Treasurer Address:  (include city, state, & zip)  Treasurer Phone:  Treasurer Name Institution Address Account Number Code  Treasurer In lieu of providing account information, I certify that this committee will not raise or spend any money except for the filling fee. (Only candidates may choose this option.)  Treasurer Phone:  Treasurer Name Institution Address Phone Institute Treasurer  In lieu of providing account information, I certify that this committee will not raise or spend any money except for the filling fee. (Only candidates may choose this option.)  Treasurer Phone:  Tre	Committee Nam	ne: <u>(</u>	onmib	tee to	Elect	Jeff From	lah.	
Treasurer Phone:  Treasurer Ph	Treasurer Name	: <u>_</u>	Jel	From	lein			
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 a "code" in order to provide account information on required disclosure reports. If an account number is used as the "code", confidentiality of the account number is presumed to have been waived.  Type of account Financial Institution Address Account Number Code  Work Rank & Gronk 79   Jourshow Signature of Treasurer  In lieu of providing account information, I certify that this committee will not raise or spend any money except for the filing fee. (Only candidates may choose this option.)	Treasurer Addre	ss: _	31-	7 Ashfa	and Ct.	WS,NC2	7103	
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 a "code" in order to provide account information on required disclosure reports. If an account number is used as the "code", confidentiality of the account number is presumed to have been waived.  Type of account  Financial Institution  Address  Account Number  Code  Would Sank & Grank Top Joneshan  Signature of Treasurer  In lieu of providing account information, I certify that this committee will not raise or spend any money except for the filing fee. (Only candidates may choose this option.)	(include city, state,	& zip)	-					
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Certification of Financial Account Information



Kimberly Westbrook Deputy Director - Campaign Reporting

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## **Certification of Threshold**

FILED BY:	
Committee Name:	Committee to Elect Jest Frunkin
Treasurer Name:	Jeff Frontin
Treasurer Address:	317 Ashford Ct.
(include city, state, & zip)	Winston-Salen, NC 22103
•	
Treasurer Phone:	774-1075
until the end of the election cy expenditures during this election of elections and file required of THIS DECLARATION CAN  I am withdrawing my Cellie the next scheduled report f	ttee intends to neither receive nor expend more than \$3,000 during the current dures set forth in G.S. 163-278.10A. This certification will remain in effect rele for this committee. If this committee exceeds \$3,000 in contributions or ion cycle, I understand that I must immediately notify the appropriate board campaign finance reports.  ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.  rtification to remain under the \$3000 threshold. I will now be required to for all contributions and expenditures that have not been previously reported ant election cycle. I further agree to file all future reports required.
2-27-06 Date Signed	Signature