

# North Carolina

#### State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director - Campaign Reporting COPY

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:			22
Candidate Name:	Dana Caudill Jones		8
Treasurer Name:	Doza Candill Joses	<u> </u>	=
Treasurer Address:	600 Susana Court	<u> </u>	20
(include city, state, & zip)	Kernewalle Ne 27284		PK
			မှာ
			#
Treasurer Phone:	336-993-5070		

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).

Signature of Candidate

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

# Statement of Organization - Candidate Committee Use this form to create a new or update an existing candidate committee

Amendment ☐ Yes

This form must be accompanied by forms CRO-3100 and CRO-3500

1.Committee Info	enerion is a constant of the c		The state of		1.00
a. Full Name	Track visit			c. ID Number	
Ke-Elect Dana Candill Jones			17372K4		
b. Mailing Address (in	clude City, State and Zip Code)			d. Date Organ	ized
	usanna Court			7/9	107
Kerner	sv:11c NC 27284			e. Phone Num	ber
			į	336-9	93-5070
2. Candidate Infor	mation	Candidate s Pri	mary Commit	tee se	90
a. Full Name		c. Candidate ID Numb	er	d. Party Affilia	المستعبد المستعبد المستخدم المستخدم المستعبد المستعد المستعد المستعد المستعد المستعبد المستعبد المستعبد المستعب
	Caudill Jones	PBYZKI	4	Non-P Republ	'LAN
b. Mailing Address (inc	lude City, State, and Zip Code)	e. Office Sought			f. Jurisdiction
600 Susanna Court		Town of Keinesville Alderman			
Kernewille NC 27284		(If office sought is nonpartisan, write "Nonpartisan" in [d]			
C-100	profile patrice some some some		Party Affil		
3. Treasurer Infor a: Full Name		4 Custodian of Bo a. Full Name	oksamorma	1000	
		0 0	<u>.</u>		<u> </u>
	laudill Jones	Vane La			
	lude City, State, and Zip Code)	b. Mailing Address (include City, State, and Zip Code)			
600 Susanna Court		600 Susanne Court			
Kernersville NC 27284		Kernewille, NC 27284			
c, Phone Number	d. Email Address	c. Phone Number	d. Email Addr	ess	
336-993-5070	dejoner@caud:115. com	336-993-5070			
5. Assistant Treasu a. Full Name	rer/information and Landing	6: Account Inform a. Financial Institution		CKC+SBLUNGS	
	MA	Southern	$\overline{C}$	Hy Baul	ctTimt
b. Mailing Address (inc	lude City, State, and Zip Code)	b. Purpose		1-3	2.20
	N/R				
c. Phone Number	d. Email Address	c. Account Code	d. Type		
MA	NA	SCB	Che	cking	· · · · · · · · · · · · · · · · · · ·
CERTIFICATION		3/			
I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete; true and correct.					
DANO /	and I Tune		1	— <i>7,</i>	12/07
Printec	I Name of Signer	nature of Appointed Trees	Surci	7	Date



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Kimberly Westbrook-Strach Deputy Director – Campaign Reporting FORSYTH FIRTHY

2007 JUL 20 PM 3: 00

RECEIVED

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

## **Certification of Threshold**

This Certification is used by Candidate and Party Committees only, to declare or withdraw the committee's intent to raise or spend under \$3,000 in the current election cycle

FILED BY:	
Committee Name:	Re Elect Dana Caudill Jones
Treasurer Name:	Dona Caudill Jones
Treasurer Address:	600 Susanna Court
(include city, state, & zip)	Kernersville NC 27284
Treasurer Phone:	336-993-5070
election cycle under the produntil the end of the election expenditures during this elections and file required	ttee intends to neither receive nor expend more than \$3,000 during the current cedures set forth in G.S. 163-278.10A. This certification will remain in effect cycle for this committee. If this committee exceeds \$3,000 in contributions or ction cycle, I understand that I must immediately notify the appropriate board campaign finance reports.  N ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.
the next scheduled report for	ertification to remain under the \$3000 threshold. I will now be required to file all contributions and expenditures that have not been previously reported from election cycle. I further agree to file all future reports required
7/19/07	
Date Signed	Signature
Note: This Certification is to	be filed at the Election Board where the committee's campaign reports are filed.



State Board of Elections 506 N Harrington Street

Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director – Campaign Reporting

FILED BY:

Committee Name: Treasurer Name:

Treasurer Address: (include city, state, & zip)

**Treasurer Phone:** 

CRO-3500

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

June 2007

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

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.

e Elect Dona Cand 11 Jones

information provided court of competent ju to provide account in	would only be used for risdiction. It will be necessary	the purposes of an auc essary to assign each acc sclosure reports. If an a	is not subject to public disclosur lit or investigation or as require count number a "account code" i account number is used as the "a waived.	ed by a n order
Type of account	Financial Institution	Address	Account Number	Account Code
Checking	Southern Commun	ts. S. Mar Ke	manile	Sc D
By signing this state provided.  Date Signed	ement, I authorize agents	of the State Board of El	ections to inspect all accounts  Signature of Candidate of Treasurer	2
	account information, I co		e will not raise or spend any mor	ney
Date Signed	<del></del>		Signature of Candidate or Treasurer	

Certification of Financial Account Information