

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

Amendment ☐ Yes

LEWISVILLE, NC 27023 (If office sought is nonpartisan, write "Nonpartisan Party Affiliation.) 3. Treasurer Information a. Full Name JOHN P. SANGIMINO b. Mailing Address (include City, State, and Zip Code) P.O. BOX 1059 LEWISVILLE. NC 27023 c. Phone Number d. Email Address c. Phone Number d. Email Address c. Phone Number d. Email Address s. Assistant Treasurer Information a. Full Name G. Account Information (incl. CRO-3500) Remove Remove Remove Remove						
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CAMPAIGN FINANCE						
. Phone Number d. Email Address c. Account Code d. Type						
144 DDA = CHECKI	NG					
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22 Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed further certify that this report is complete, true and correct. OHN ANG-MINO Signature of Appointed Treaturer Date	funds. I					



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

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:	1 1	
Candidate Name:	JOHN 1. JANGIMINO	
Treasurer Name:	JOHN P. PANGIMINO	
Treasurer Address:	10. Box 1059	218
(include city, state, & zip)	LEWISVILLE, NC 27023	<u>م</u>
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	grand	-1-
Treasurer Phone:	(336) 946-1410	-

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).

7-14-09 Date Signed

Signature of Canadate

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 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:	SANGIMINO FOR COUNC	ـ ر د	
Treasurer Name:	JOHN P. SANGIMINO		
Treasurer Address:	P.O. Box 1059		
(include city, state, & zip)	LEWISVILLE NC 27023		2
	•	2362 2568	<u></u>
		Cues.	Michaeles
Treasurer Phone:	(336) 946-1410		#
election cycle under the procuntil the end of the election of expenditures during this election of elections and file required THIS DECLARATION CAN I am withdrawing my file the next scheduled report	nittee intends to neither receive nor expend more than \$3,000 during the cedures set forth in G.S. 163-278.10A. This certification will remain cycle for this committee. If this committee exceeds \$3,000 in contribution cycle, I understand that I must immediately notify the appropria campaign finance reports. NONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE Certification to remain under the \$3000 threshold. I will now be rest for all contributions and expenditures that have not been previously trent election cycle. I further agree to file all future reports required.	n in effections into book interest. CLE. Equired	or or ord
7-14-09 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:

CRO-3500

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

August 2008

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

			^	
Committee Name	e: <u> </u>	VGIMINO FOR	DUNCIL	
Treasurer Name:	JOH	NP SANGIA	LINU	
Treasurer Addres	ss: <u>P.O.</u>	Box 1059		
(include city, state, &	& zip) LEW	ISVILLE NC	27023	
Treasurer Phone:	_	946-1410		
the above named Comi	mittee. These account n	s true and accurate. I am providing numbers include all bank accounts uer financial account used for any pur	tilized, credit card acc	opunts,
information provided of court of competent juri to provide account info code", confidentiality of	would only be used for sdiction. It will be nece ormation on required dis of the account number is	idered confidential and is not subjet the purposes of an audit or investessary to assign each account numbers closure reports. If an account number presumed to have been waived.	tigation or as require er a "account code" in tiber is used as the "a	d by a forder
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Certification of Financial Account Information





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

Additional account numbers: (NONE AT THS THE)						
Type of Account	Financial Institution	Address		Account Number	Account Code	

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7-14-09

Signature of Candidate or Treasurer