



### North Carolina

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:		
Candidate Name:	Joycelyn V. Johnson	
Treasurer Name:	Horace Bonner.	-
Treasurer Address:	4960 N. Cherry St.	-
(include city, state, & zip)	Winston- Salem, NC 27105	-
		-
		- - - - - -
Treasurer Phone:	336744-0438	- 
		`⊡? ⊙~
the duties and responsibilitie	mation is correct, and I, as candidate, appoint said treasurer to personally fulfill is imposed upon the appointed treasurer and subject to the penalties and	111. C. 2
sanctions in Subchapter VIII General Statutes.	Regulation of Election Campaigns of Chapter 163 of the North Carolina	
	Traccovers charges it will be	and and
the existing Statement of Org	Treasurer changes, it will be necessary to certify a new treasurer and amend ganization within 10 days of the vacancy. I further understand that the above	U i
appointment according to Ar	ve training by the State Board of Elections within three months of this	
1		
4 July 2009	Janely & thison	
Date Signed	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.

a. Full Name  Committee To Elect Joyce yn Johnson  b. Mailing Address (include City, State and Zip Code)  Winston Sulem, NC. 2710)  2. Candidate Information  a. Full Name  Joyce yn Vernette Johnson  b. Mailing Address (include City, State, and Zip Code)  C. Candidate ID Number  d. Party Affiliation  Jenson  C. Candidate ID Number  d. Party Affiliation  L. Candidate ID Number  d. Party Affiliation  L. Candidate ID Number  E. Jurisdiction  C. Ly Countil Member  Ward  Ward  (If office sought is nonpartisan, write "Nonpartisan" in [a						
2426 Edison Ct.  Winston-Shiem, NC. 2710)  2. Candidate Information  a. Full Name  Joycelyn Vernette Johnson  b. Mailing Address (include City, State, and Zip Code)  2426 Edison Ct.  City Council Member  Editory 2009  e. Phone Number  336724-797  Democrat  b. Mailing Address (include City, State, and Zip Code)  2426 Edison Ct.  City Council Member  Editory  Editory  Code  City Council Member  Editory  Code  Code  City Council Member  Code						
2426 Edison Ct.  Winston-Selem, NC. 2710)  2. Candidate Information  a. Full Name  Joycelyn Vernette Johnson  b. Mailing Address (include City, State, and Zip Code)  2426 Edison Ct.  City Council Member  Editory 2009  e. Phone Number  336724-297  Democrat  b. Mailing Address (include City, State, and Zip Code)  2426 Edison Ct.  City Council Member  Editory  Edi						
2926 Zdison Cl  Winston - Sclem, NC. 2710)  2. Candidate Information  a. Full Name  C. Candidate ID Number  C. Candidate ID Number  d. Party Affiliation  Democrat  b. Mailing Address (include City, State, and Zip Code)  2426 Edison Ct.  City Council Member  Expt.						
2. Candidate Information 2. Candidate Information 2. Candidate Information 336/29-297  2. Candidate Information 2. Candidate Information 336/29-297  2. Candidate Information 4. Party Affiliation 4. Party Affiliation 5. Candidate Information 6. Candidate Information 7. Candidate Information 7. Candidate Information 7. Candidate Information 8. Ca						
2. Candidate Information  2. Candidate Information  336/29-297  2. Candidate Information  1. Candidate Information  1. Candidate Information  2. Candidate Information  2. Candidate Information  2. Candidate Information  336/29-297  2. Candidate Information  2. Candidate Information  336/29-297  33						
a. Full Name  C. Candidate ID Number  d. Party Affiliation  LOTI  b. Mailing Address (include City, State, and Zip Code)  Z426 Edison Ct.  City Council Member  Saft						
Joycelyn Vernette Johnson 1 CQ751 Democrat  b. Mailing Address (include City, State, and Zip Code)  Z426 Edison Ct.  City Council Member Sast						
b. Mailing Address (include City, State, and Zip Code)  2426 Edison Ct.  City Council Member Sast						
b. Mailing Address (include City, State, and Zip Code)  2426 Edison Ct.  City Council Member Suft						
2426 Edison Ct. City Council Member East Winston : Solom NC Weather south is nonnexticon with "Nonnext						
2710) Party Affiliation.)						
3. Treasurer Information 4. Custodian of Books Information						
a. Full Name						
HORACE BUNNER  HORACE BUNNER  Mailing Address (include City, State, and Zip Code)  Mailing Address (include City, State, and Zip Code)						
b. Mailing Address (include City, State, and Zip Code) b. Mailing Address (include City, State, and Zip Code)						
4960 N. Chenny St. Winston-Salem, V.C. 27105 Winston Salem, NG 27105						
Phone Number d. Email Address C. Phone Number d. Email Address						
c. Phone Number d. Email Address						
Assistant Treasurer Information Add 6. Account Information (incl. CRO-3500)						
Full Name Remove a. Financial Institution Full Name Remove						
Mailing Address (include City State and Tin Code)  Mailing Address (include City State and Tin Code)						
Mailing Address (include City, State, and Zip Code) b. Purpose						
Campaign Finance						
Phone Number d. Email Address c. Account Code d. Type						
244-5-62						
6RA-542 Checking.						
ERTIFICATION / G f						
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. further certify that this report is complete, true and correct.						
Joyce An V. Johnson Joseph V The 2009						
Printed Name of Signer Signature of Appointed Treasurer Date						



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

Kimberly Westbrook-Strach Deputy Director – Campaign Reporting

FILED BY:

Committee Name: Treasurer Name:

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

Heasurer Addre	SS: <u>7/60</u>	10. Cherry	$\mathcal{J}$ .		
(include city, state,	& zip) Winst	in- Salem.	N.C	77105	
Treasurer Phone	: <u>336</u> 7	744-0438			
the above named Con	imittee. These account i	is true and accurate. I am numbers include all bank er financial account used	accounts utilized	credit card are	ounts =
The information provided information provided court of competent just to provide account information provided	ided on this form is cons would only be used for risdiction. It will be nec- formation on required di	sidered confidential and is r the purposes of an audi essary to assign each acco isclosure reports. If an ac s presumed to have been we	s not subject to p it or investigation ount number a "a ecount number is	public disclosure on or as require	The by a
The treasurer shall material exclusively by the pol-	aintain all moneys of the	e political committee in a ll not commingle those fu	bank account on the bank with any oth	or bank accounts aer moneys.	s used
Type of account	Financial Institution	Address	Acc	ount Number	Account Code
Checking.	Mechanics & Farmu	\$ 770 M.L. K.ng B WSNC 27/01	Block The		CRA-542
By signing this state provided.		of the State Board of Ele	ctions to inspect	all accounts	
Date Signed In lieu of providing a	,	ertify that this committee ay choose this option.)	Signature of Cand will not raise or	//	·y
Date Signed		· 	Signature of Cand	idate or Treasurer	
CRO-3500	Certification o	f Financial Account Infor	mation	August	2008



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## **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:	Committee to Elect Toxcelyn	Johnson
Treasurer Name:	HORACE Bonner	
Treasurer Address:	4960 N. ChERRY ST.	
(include city, state, & zip)	Ninston- Salam, N. C 2710.	5
Treasurer Phone:	336-744-0438	
until the end of the election expenditures during this ele of elections and file required THIS DECLARATION CA  I am withdrawing my file the next scheduled repo	mittee intends to neither receive nor expend more than \$3,000 during occdures set forth in G.S. 163-278.10A. This certification will remove cycle for this committee. If this committee exceeds \$3,000 in contection cycle, I understand that I must immediately notify the approxication cycle, I understand that I must immediately notify the approxication of the comparison of the provided and the comparison of the comparison of the comparison of the cycle of the	nain in effect ntributions or opriate boate CYCLE. e required to usly reported
15 July 2009 Date Signed	Jonesly V. John S. Signature	? m
Note: This Certification is to	be filed at the Election Board where the committee's campaign repor	ts are filed.

CRO-3600

Certification of Threshold

June 2007