	COBV	
Statement of Organization - Candidate C	Amendment	
Use this form to create a new or update an existing candidate		
This form must be accompanied by forms CRO-3100 and CR		
Le committe information alle average av		
a, Full Name	c. ID Number	
JOC PINNIX For Board OF Ald	ermen) Comm, He e Economy	
P. 0. Box 878	7/19/13	
Kernersville, N.C.	e. Phone Number	
27285	336- 993 - 5642	
ac 1 2 6 3	11 978 9004	
2 Candidate Information	Conditates Princes Computer	
a Full Name Joseph Leax Pinnixor.	e. Candidate ID Number 1. Party Affiliation	
	Now Partisas	
(RUNNING QS JOE PINNIK)	$\frac{2}{2}CCE7x$ (Indicate Non-partican if applicable	
b. Mailing Address (include City, State, and Zip Code)	g. Office Sought	
POBOX 878	ALDEDNOVAN	
Kerweisville nc 27283	ALDERMAN	
c: Phone Number d. Email Address	h. Next Election Year i. Jurisdiction	
	INas. con	
Email copy of notices	2013 Kerversvillenc	
3. Jreasurer Information	45 Custodian of Books Information + 1948 IF # 1946	
a. Full Name	a. Full Name	
Larry Duque Long		
b. Mailing Address (include City, State, and Aip Code)	b. Mailing Address (include City, State, and Zip Code)	
311 South Main Street	m S .	
Kernersville, NC 27284		
c. Phone Number	c. Phone Number Id. Email Address	
Star Star Andrew Margan and Care and Ca		
5664 insurance. Com	9	
I prefer to receive notices by email 🛛 Yes 🗖 No		
S. Assistant Urcasnic: Informational and a state of a s	6: Account Informations : 2162 CROS200 : Courses	
	WELLS FARG-D	
b. Mailing Address (include City, State, and Zip Code)	b: Purpose	
	CAMPAIGN REPORTING	
c. Phone Number d. Email Address	c. Account Code d. Type	
	878 CHECKING	
Email copy of notices		
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.		
	A the shalan	
Dies Ne Long Signature of Appointed Treasurer Date		
	· · · · · · · · · · · · · · · · · · ·	

CRO-2100A

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North Carolina State Board of Elections 441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director

2013 JUL 23 AM II: 39 RECEIVED 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

TOE PINNIX

FILED BY:

Treasure

Treasure

(include ci

	\mathbf{U}	
r Name: L.	Duane Long	
r Address:	311 South Main Street	
ty, state, & zip)	Kernersville, NC 27284	
	, .	
r Phone:	336-992-5664	

Treasure

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).

7/19/13 Date Signed

Signature of andidate

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

CRO-3100

Certification of Treasurer



2013 JUL 23 AM 11: 39

North Carolina State Board of Elections 441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director RECEIVED Mailing Address PO Box 27255

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

Certification of Threshold

This Certification is used to declare or withdraw a committee's intent to raise or spend \$1,000 or less in the current election cycle.

This Certification is only valid for political party committees and candidates for a county office, municipal office, local school board office, soil & water conservation district board of supervisors, or sanitary district board.

FILED BY:

Committee Name:	Joe Pinuix for Board of AlDermed
Treasurer Name:	Duance Long
Treasurer Address:	Juane Long 311 South Maid Street
(include city, state, & zip)	Kernersvolle, N.C 27284
	· · ·

Treasurer Phone:

336-992-5664

Check One:

V I certify that this committee intends to neither receive nor expend more than \$1,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$1,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports.

THIS DECLARATION CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.

I am withdrawing my Certification to remain at or under the \$1,000 threshold. I will now be required to file the next scheduled report for all contributions and expenditures that have not been previously reported from the beginning of the current election cycle. I further agree to file all future reports required.

<u>13</u>

Signature

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

CRO-3600

Certification of Threshold