

# Statement of Organization - Candidate Committee

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by forms CRO-3100 and CRO-3500 (when amending, only re-submit if applicable).

<b>1. Committee Information</b>			
a. Full Name		c. ID Number	
Laurie Venzon for Town Board		VGX8SQ	
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
13816 Tributary Ct. Davidson, NC 28036		7/14/11	
		e. Phone Number	
		704-975-1615	
<b>2. Candidate Information</b> <input checked="" type="checkbox"/> Candidate's Primary Committee			
a. Full Name		e. Candidate ID Number	f. Party Affiliation
Laurie A. Venzon		VGX8SQ	Republican <small>(Indicate Non-partisan if applicable)</small>
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought	
13816 Tributary Ct Davidson, NC 28036		Commissioner, Davidson, NC	
c. Phone Number	d. Email Address	h. Next Election Year	i. Jurisdiction
704-975-1615	LAVenzon@gmail.com	2011	Davidson (Town)
<input checked="" type="checkbox"/> Email copy of notices			
<b>3. Treasurer Information</b>		<b>4. Custodian of Books Information</b>	
a. Full Name		a. Full Name	
Laurie A. Venzon		Same as treasurer	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
same as above			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
above	above		
I prefer to receive notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of notices	
<b>5. Assistant Treasurer Information</b>		<b>6. Account Information</b> <small>(incl. CRO-3500)</small>	
a. Full Name	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	a. Financial Institution Full Name	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
N/A		Fifth Third Bank	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
		Campaign expenses	
c. Phone Number	d. Email Address	c. Account Code	d. Type
			checking
<input type="checkbox"/> Email copy of notices			
<b>CERTIFICATION</b>			
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.			
Laurie A. Venzon		Laurie A. Venzon	7/19/11
Printed Name of Signer		Signature of Appointed Treasurer	Date



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: Laurie A. Venzon

Treasurer Name: Laurie A. Venzon

Treasurer Address: 13816 Tributary Ct.

(include city, state, & zip) Davidson, NC 28036

Treasurer Phone: 704-975-1615

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).

7/16/11  
 Date Signed

Laurie A. Venzon  
 Signature of Candidate

MECKLENBURG COUNTY

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

JUL 25 2011  
 BOARD OF ELECTIONS



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 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: Laurie Venzon for Town Board

Treasurer Name: Laurie A. Venzon

Treasurer Address: 13816 Tributary Ct.

(include city, state, & zip) Davidson, NC 28036

Treasurer Phone: 704-975-1615

Check One:  
 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.

7/16/11 Date Signed  
 MECKLENBURG COUNTY  
 JUL 25 2011  
 BOARD OF ELECTIONS  
Laurie A. Venzon Signature

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



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

**Candidate Designation of Committee Funds**

This form is used by candidate committees only and allows the candidate to designate in the event of their death, how the committee's funds are to be disbursed using the eight allowable methods outlined in 163-278.16B(a).

Candidate Name: Laurie A. Venzon  
Committee Name: Laurie Venzon for Town Board  
Treasurer Name: Laurie A. Venzon  
If Candidate is own treasurer, designate an agent to carry out designations: \_\_\_\_\_  
Committee ID #: VGX8SQ  
Level Registered: [State] [County] If county, specify: \_\_\_\_\_

I, Laurie Venzon, hereby direct that in the event of my death or incapacity all  
(Name of Candidate)  
funds remaining in my Campaign Committee account(s) (after payment of permitted outstanding debts or reasonable expenses for winding up the Committee or closing office) be paid in the following manner as permitted by N.C. Gen. Stat. 163-278.16B(a).

Name of Entity (Select from §163-278.16B(a))	Plan for Disbursement (eg. Amount or %)
1. <u>Spirit &amp; Truth Ministries</u> <u>3647 Waterview Lake, Terrell, NC 28692</u>	<u>100%</u>
2. _____	_____
3. _____	_____

By signing this form, I certify that the foregoing entities are eligible beneficiaries under N.C. Gen. Statute 163-278.16B(a). A copy of this form should be maintained with the Committee records.

Signature of Candidate: Laurie A. Venzon  
Date: 7/16/11

MECKLENBURG COUNTY  
JUL 25 2011  
BOARD OF ELECTIONS