Statement of Organization - Candidate Committee

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卢	New		Amended	

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

This form must be accompanied by form CRO-3500. An amended form is required for each new election year.

1. Committee Information						
a. Name of Committee	d. ID Number					
FRIENDS FOR DAN INGLE						
b. Mailing Address (incl	e. Date Organized					
6388 RASC	12/12/25					
c. Committee Website (C			f. Phone Number			
dan, 1491			336-421-9780			
2. Candidate Inform	nation					
a. Full Name	e. Party Affiliation					
DAN WINSLOW INGLE		REPUBLICAN				
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought				
6388 FRECT RV BURGINGTON, NC 27217		P-BORAT OF EDUCATION				
	d. Email Address	g. Next Election Year	ŀ	ı. Jurisdiction		
-			COUNTY			
Email copy of re		A Aggistant Tucces	non Info	motion		
3. Treasurer Inforn a. Full Name	aation	4. Assistant Treasurer Information a. Full Name				
	1.5.1	I un Mame				
Becky		1 36 22 4 11 (2	1- 1- C'+- (C4-417: C-1-)		
	ude City, State, and Zip Code)	b. Mailing Address (include City, State and Zip Code)				
P. JON 387 GRAHAM, NC 27253 c. Phone Number d. Email Address						
		c. Phone Number	d. Email A	ddress		
336727495	BECKY GCEL-CPA. CON					
Send report notices by email X Yes No		☐ Email copy of report notices				
5. Custodian of Boo	5. Custodian of Books Information (Keeper of Records)		6. Account Information (incl. CRO-3500)			
a. Full Name		a. Financial Institution Full Name				
		ii				
b. Mailing Address (incl	ude City, State, and Zip Code)					
	<u> </u>					
c. Phone Number	d. Email Address	b. Account Code	c. Type			
			• 1			
☐ Email copy of re	eport notices					
I certify that the Committee is in compliance with all applicable provisions of Article 22A 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.						
Drinted '	gnature of Appointed Trea	surer	Date			
Printed Name of Treasurer Signature of Appointed Treasurer Date						
I certify that the information above is correct, and I, as the candidate, appoint said treasurer to personally fulfill the						
duties and responsibilities imposed upon the appointed treasurer and subject to the penalties in Article 22A of Chapter						
163 of the NC General Statutes.						
DAN WENSID INGIE De mulos Clin 12/12/3625						
Printed Name of Candidate		Signature of Candidate	9			



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.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

FILED BY:	
Committee Name:	Friends of Dan Ingle
Treasurer Name:	Becky Loy
Treasurer Address:	P.O. By 387
(include city, state, & zip)	Gorhan NC 27253
Treasurer Phone:	334-227-7495
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.

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