

Statement of Organization - Candidate Committee

Amendment

☐ Yes

☐ 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).

1. Committee Information

a. Full Name	c. ID Number
b. Mailing Address (include City, State and Zip Code)	d. Date Organized
	e. Phone Number

2. Candidate Information

☐ Candidate's Primary Committee

a. Full Name	e. Candidate ID Number	f. Party Affiliation	
		(Indicate Non-partisan if applicable)	
b. Mailing Address (include City, State, and Zip Code)	g. Office Sought		
c. Phone Number	d. Email Address	h. Next Election Year	i. Jurisdiction
☐ Email copy of notices			

3. Treasurer Information

a. Full Name	
b. Mailing Address (include City, State, and Zip Code)	
c. Phone Number	d. Email Address

4. Custodian of Books Information

a. Full Name	
b. Mailing Address (include City, State, and Zip Code)	
c. Phone Number	d. Email Address

I prefer to receive notices by email ☐ Yes ☐ No

☐ Email copy of notices

5. Assistant Treasurer Information

☐ Add

☐ Remove

a. Full Name	
b. Mailing Address (include City, State, and Zip Code)	
c. Phone Number	d. Email Address

☐ Email copy of notices

6. Account Information (incl. CRO-3500)

☐ Add

☐ Remove

a. Financial Institution Full Name	
b. Purpose	
c. Account Code	d. Type

CERTIFICATION

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.

Printed Name of Signer

Signature of Appointed Treasurer

Date