## **Statement of Organization - Candidate Committee**

Is this st	atement:	
New 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 Infor	mation			医结合脉络 医多种毒性	
a. Name of Committee				d. ID Number	
Committ	ree to Elect Steve E, lude City, State and Zip Code)	um			
b. Mailing Address (include City, State and Zip Code)				e. Date Organized	
115 Avenue of Trees Elon NC 27244			7/7/25		
c. Committee Website (Optional)				f. Phone Number	
tz		Of Service and Service	336 355.844		
2. Candidate Inform	mation				
a. Full Name		e. Party Affiliation	- 1		
Steven ?	Democrat				
5 Leven Jamison Exum  b. Mailing Address (include City, State, and Zip Code)		f. Office Sought			
115 Avenue of Tres Elon, MC 2724			Town	N COUNCIL	
c . Phone Number	d. Email Address	g. Next Election Year		h. Jurisdiction	
336 355 -8444	Steve@steveexum.com				
Email copy of re		1			
3. Treasurer Inform	nation	4. Assistant Treas	urer Info	rmation	
a. Full Name		a. Full Name			
Angela	kalo lude City, State, and Zip Code)				
b. Mailing Address (inc	lude City, State, and Zip Code)	b. Mailing Address (in	clude City,	State and Zip Code)	
115 Ave	nue of Trees NC 27244 d. Email Address				
c. Phone Number	d. Email Address	c. Phone Number	d. Email A	Address	
336 355-8444	stevil exomploto, com				
Send report no	tices by email Yes No	☐ Email copy of r	eport noti	ces	
5. Custodian of Books Information (Keeper of Records)		6. Account Information (incl. CRO-3500)			
a. Full Name		a. Financial Institution Full Name			
b. Mailing Address (inc	lude City, State, and Zip Code)				
DI NAME OF THE OWNER OWNE	1 2 2 4 11	h	. T		
c. Phone Number	d. Email Address	b. Account Code	c. Type		
<b>—</b>		-			
☐ 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.					
this report is comp	ioto, irao ana correct.				
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		1 11/	F	/ .	
Steven 5. Exum 1/25					
	Printed Name of Candidate Signature of Candidate Date				

Steve @ Steveexom. com



## **Candidate Designation of Committee Funds**

how the committee's funds are to be disbursed using the eight allowable methods outlined in 163-278.16B(a).
This Designation is filed at the Board of Elections office where the committee's campaign reports are filed.
Candidate Name: Steve Exum
Committee Name: Committee to Elect Steve Exum
Committee Name: Committee to Elect Steve Exum  Angela Kalo
If Candidate is own treasurer, designate an agent to carry out designations:
Committee ID #:
Level Registered: [State] [County] If county, specify: ALAMANCE
I, Stue Exum, hereby direct that in the event of my death or incapacity all funds remaining in my Campaign Committee account(s) (after payment of permitted outstandin 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. Alamance County Denocratic Party 100% 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:
Date: 7/7/25



## 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:	_ Committee to Elect Steve Exum
Treasurer Name:	Angela Kalo
Treasurer Address:	115 Avenue of Trees
(include city, state, & zip)	Elon NC 27244
Treasurer Phone:	336 355-8444
election cycle under the produntil the end of the election of expenditures during this elections and file required THIS DECLARATION CAN I am withdrawing my to file the next scheduled recognition of the second scheduled schedul	cedures set forth in G.S. 163-278.10A. This certification will remain in effect cycle for this committee. If this committee exceeds \$1,000 in contributions or ction cycle, I understand that I must immediately notify the appropriate board campaign finance reports.  NONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.  Certification to remain at or under the \$1,000 threshold. I will now be required eport for all contributions and expenditures that have not been previously of the current election cycle. I further agree to file all future reports required.  Signature