Statement of Organization - Candidate Committee

Is this statement:				
New	<i>i</i> 🗀	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 Intor	mation			
a. Name of Committee	- 475	AND THE RESERVE OF THE PARTY OF	d. ID Number	
GRNEST	- BANTO			
b. Mailing Address (inc	lude City, State and Zip Code)	<u>, , , , , , , , , , , , , , , , , , , </u>	e. Date Organized	
2813 0	slude City, State and Zip Code) SSiple Fru HS+ Si	on N.C. 2724	4 7-10-23	
c. Committee Website (Optional)		f. Phone Number	
			336263.6604	
2. Candidate Infor	mation			
a. Full Name		e. Party Affiliation	(1885年) 1985年	
ERNESTLEE	BARE III	()/#	+	
b. Mailing Address (inc	lude City, State, and Zip Code)	f. Office Sought		
2513 055.6	per favory st	1		
Elan 1	JC. 27244 d. Email Address Show OSSiper C yahoo . Con eport notices	Councle	MAN	
c . Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction	
28,263-6604	Share ossiper	0	()	
Email copy of re	enort notices	2023	100	
3. Treasurer Inform	mation		information ()	
a. Full Name		a. Full Name	the control of the co	
< 1 Aug 22				
b. Mailing Address (inc	lude City, State, and Zip Code)	b. Mailing Address (include C	City, State and Zip Code)	
_			The second of	
5 A	-u-			
c. Phone Number	d. Email Address	c. Phone Number d. En	nail Address	
. Agin	1			
Send report no		Email copy of report		
	oks Information (Keeper of Records):			
a. Full Name		a. Financial Institution Full N	Name () And (
			has had had had by Sine, but	
b. Mailing Address (incl	lude City, State, and Zip Code)		MENCIALITY	
			1 A anaa	
			JUL 1 0 2023	
c. Phone Number	d. Email Address	b. Account Code c. Ty	PENNANCE COUNTY	
			ROPRO OF LEISTING TO	
Email copy of re	eport notices			
			••	
_	ommittee is in compliance with all appli-	_	-	
	nd that no funds are commingled with pr	ohibited or other non-discle	osed funds. I further certify that	
this report is comp	plete, true and correct.		·	
Printed	Name of Treasurer S	ignature of Appointed Treasurer	Date	
To the state of the		111	11 0 1011 1	
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.				
Francisco Gener	BAR-TIT S.	AQ to	7-10-23	
Printed 1	Name of Candidate	Signature of Candidate	Date	



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:	Ernst Bare]			
Treasurer Name:	self	1 .		
Treasurer Address:		·		
(include city, state, & zip)				
Treasurer Phone:			-	
Check One: I certify that this commelection cycle under the productil the end of the election of expenditures during this elections and file required THIS DECLARATION CAN I am withdrawing my Confile the next scheduled reported from the beginning of Date Signed	cedures set forth in G.S. 16 cycle for this committee. I ction cycle, I understand the campaign finance reports. N ONLY BE MADE AT TI Certification to remain at or report for all contributions of the current election cycle.	63-278.10A. This certified this committee exceed that I must immediately the BEGINNING OF All the under the \$1,000 thrests and expenditures that	ication will remain is \$1,000 in contribution the approprian NELECTION CYConold. I will now be thave not been pro-	in effect utions or te board CLE. required eviously