Statement of Organization - Candidate Committee

Is this sta	atem	ent:	
New		Amended	

Use this form to create a new or update an existing candidate. This form must be accompanied by form CRO-3500. An amount of the companied by form CRO-3500.		ed for each ne	ew election vear.		
Is Committee Information					
a. Name of Committee	<u> </u>		d. ID Number		
b. Mailing Address (include City, State and Zip Code)			4/A		
	4		e. Date Organized		
2359 James Buswell Road	<u> </u>		10/16/2	02-3	
c. Committee Website (Optional)			f. Phone Number		
4)/A			336-578-	3836	
2: Candidate information					
a. Full Name	e. Party Affiliation				
Theodore Howard					
b. Mailing Address (include City, State, and Zip Code)	f. Office Sought				
2359 James Boswell Road	Councilman				
	Counc	ilman	\mathcal{O}		
Burlington, MC, 27217 c. Phone Number d. Email Address	g. Next Election Year		urisdiction		
	6 - 54				
36-518-38 36	2024				
☐ Email copy of report notices 3. Treasurer Information	 21-:Assistant Trea	der transmission service samples			
a. Full Name	a. Full Name		ALIVIDA		
and the state of	m.jps:mi#201.125.246.77 - 1				
Dhesdore Howard b. Mailing Address (include City, State, and Zip Code)	n. már seguil Aldia	organisa da de la composición de la co	4. 20.000000	4.7 (8)	
B359 James Buswell Rd.	b. Mailing Address (i	nctude City, Sta	те аща Zip Соче)		
***	1				
Burlington 47C 37217 c. Phone Number d. Email Address		1. =			
c. Phone Number d. Email Address	c. Phone Number	d. Email Add	ress	* .	
<i>336-518 38</i> 36					
Send report notices by email Yes No	Email copy of	report notices	3		
5. Custodian of Books Information (Keeper of Records)			l CRO-3500)		
a. Full Name	a. Financial Institutio	n Full Name			
		The Commerce	L'A M. M. A. Mark Market	ì	
b. Mailing Address (include City, State, and Zip Code)		NUL	DIVED		
	5	ሰ ሮፕ 1	17 2023		
		. ואט	L & ZUZJ		
c. Phone Number d. Email Address	b. Account Code	с Туре			
	1955	A A Section of the se	namena an ann an]	
☐ Email copy of report notices					
I certify that the Committee is in compliance with all applic	•		-		
General Statutes and that no funds are commingled with pro	ohibited or other nor	n-disclosed fu	nds. I further cer	tify that	
this report is complete, true and correct.				,	
Theodore Howard Thos Printed Name of Treasurer Si	dore House	ard	10/16/	2023	
Printed Name of Treasurer Signature	gnature of Appointed Tre	asurer	Pate	;	
I certify that the information above is correct, and I, as the ca	andidate appoint asi	A traggurar to	nerconally fulfill	the	
duties and responsibilities imposed upon the appointed treasu			-		
163 of the NC General Statutes.	nor and budgeon to th	o Politimos III	THUOID BEFT OF C	·pvoi	
Printed Name of Candidate	Signature of Candidate Date				
	-0				