

Statement of Organization - Candidate Committee

Is this statement:	
<input type="checkbox"/> New	<input checked="" type="checkbox"/> 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	
Campaign to elect Ramona Allen			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
2711 White Oak Dr Burlington NC 27217			
c. Committee Website (Optional)		f. Phone Number	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Ramona Allen		Democratic	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
2711 White Oak Dr Burlington NC 27217		Alamance County Commissioner	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
336-437-4832	ramnbcoutreach@aol.com		
<input checked="" type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Ramona Allen			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
2711 White Oak Dr Burlington NC 27217			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
336-437-4832	ramnbcoutreach@aol.com		
Send report notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of report notices	
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 (include City, State, and Zip Code)			
c. Phone Number	d. Email Address	b. Account Code	c. Type
<input type="checkbox"/> Email copy of report notices			
<p>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.</p>			
<p>_____</p> <p>Printed Name of Treasurer</p>		<p>_____</p> <p>Signature of Appointed Treasurer</p>	
<p>_____</p> <p>Printed Name of Candidate</p>		<p>_____</p> <p>Signature of Candidate</p>	
		<p>_____</p> <p>Date</p>	