STATE BOARD OF ELECTIONS

441 North Harrington Street ● Raleigh, North Carolina 27603

KIM WESTBROOK STRACH
Executive Director

Mailing Address:
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TO: New Candidate Committees

FROM: Campaign Finance Office

RE: Organizational Report

The Organizational Report must be filed with the appropriate board of elections office within 10 days of whichever of these actions occurs first:

- a public declaration of candidacy; or
- receiving or spending any money in support of that candidacy (including personal funds); or
- filing a notice of candidacy or the submission of a Statement of Organization (CRO-2100A).

The Organizational Report consists of multiple forms. At a minimum, these include:

- the Statement of Organization (CRO-2100A),
- the Certification of Treasurer (CRO-3100),
- the Certification of Financial Account Information (CRO-3500),
- the Disclosure Report Cover (CRO-1000) and the Detailed Summary (CRO-1100).

Please note that some financial institutions will not set up an account for a committee until the committee is registered with the Board of Elections. If this is the case, the Board of Elections will register the committee in advance of receiving the CRO-3500; the committee must provide this form immediately after the account is established.

The candidate or treasurer should review the Detailed Summary, which describes transactions, to determine what other forms are needed. Each form required to disclose a given transaction is listed on the same line as the transaction description. For example, Contributions from Political Party Committees require a CRO-1230. Please note that all funds deposited into the campaign finance account are considered contributions. Each person's contribution must be separately documented on either a CRO-1205 ($50 or less) or a CRO-1210 (more than $50). If expenditures are made from the newly opened bank account (such as for checks), a Disbursements form (CRO-1310) is required. If expenditures for the committee are made with personal funds, then instead of a CRO-1310 one would record such a transaction on <u>both</u> a contributions form (CRO-1205 or CRO-1210) <u>and</u> a CRO-1510 ("in kind" contributions). For loans, see forms CRO-1410 and CRO-6100.

If no money (including personal funds) has been received or spent, zero ("0") should be entered on lines 12 and 19 of the Detailed Summary. (Note that all new committees begin with a zero balance on line 4).

After the Organizational Report has been filed, additional reports will be required on a schedule provided by the State Board of Elections or by the County Board of Elections (if a county/municipal candidate). The schedule is available on our website http://www.ncsbe.gov.

If you are a candidate for county or local office eligible to file a Certification of Threshold (CRO-3600), the financial disclosure part of the Organizational Report (CRO-1000 and CRO-1100) is not required. State level candidates are not eligible to file Certifications of Threshold.

Candidates for statewide, legislative and judicial offices file all paperwork at the State Board of Elections.

Candidates for county and municipal offices file all paperwork at the County Board of Elections.

State and County campaign finance staff can advise new committees on the proper forms to use for campaign finance reporting. When in doubt regarding form or form provisions, please call and inquire.

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**

I prefer to receive notices by email ☐ Yes ☐ No

4. Custodian of Books Information

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

☐ **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

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Certification of Treasurer

This Certification is used by Candidate Committees to appoint a treasurer for the committee. This form is required and must accompany the Candidate's Statement of Organization.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

FILED BY:

Candidate Name: _____

Treasurer Name: _____

Treasurer Address: _____

(include city, state, & zip) _____

_____

_____

Treasurer Phone: _____

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

_____ Date Signed

_____ Signature of Candidate

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Confidential

Certification of Financial Account Information

This Certification is used to report confidential bank account information for all financial accounts established by the committee and must accompany the Statement of Organization Form.

FILED BY:

Committee Name: _____

Treasurer Name: _____

Treasurer Address: _____

(include city, state, & zip) _____

Treasurer Phone: _____

I certify that the information provided below is true and accurate. I am providing all account information for the above named Committee. These account numbers include all bank accounts utilized, credit card accounts, money market or savings accounts, or any other financial account used for any purpose by the Committee.

The information provided on this form is considered confidential and is not subject to public disclosure. The information provided is only used for the purposes of an audit or investigation or as required by a court of competent jurisdiction. **Each treasurer (or candidate) must designate below an account code (any number or letter or combination of numbers and letters) by which to refer to the account number on reports.** If an account number is used as the "account code," confidentiality of the account number is presumed to have been waived.

The treasurer shall maintain all moneys of the political committee in a bank account or bank accounts used exclusively by the political committee and shall not commingle those funds with any other moneys.

Type of account	Financial Institution	Address	Account Number	Account Code

By signing this statement, I authorize agents of the State Board of Elections to inspect all accounts provided.

_____ Date Signed

_____ Signature of Candidate or Treasurer

For Candidate Committees Only

☐ In lieu of providing account information, I certify that this committee will not raise any money nor spend any money except that which is the candidate's personal funds. I furthermore understand that an audit or investigation could warrant the probe of any personal bank account that is being used for campaign expenditures.

By signing this statement, I authorize agents of the State Board of Elections to inspect applicable accounts.

_____ Date Signed

_____ Signature of Candidate or Treasurer

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Additional account numbers:

Type of Account	Financial Institution	Address	Account Number	Account Code

Date Signed

Signature of Candidate or Treasurer

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Candidate Designation of Committee Funds

This form is used by candidate committees only and allows the candidate to designate in the event of their death, 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: _____

Committee Name: _____

Treasurer Name: _____

If Candidate is own treasurer, designate an agent to carry out designations:_____

Committee ID #: _____

Level Registered: [State] [County] If county, specify:_____

I, _____, hereby direct that in the event of my death or incapacity all
(Name of Candidate)
funds remaining in my Campaign Committee account(s) (after payment of permitted outstanding 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. _____	_____
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: _____

Disclosure Report Cover

Amendment ☐ Yes ☐ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

1. Committee Information

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

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name

6. Type of Committee (Check One)

- ☐ Candidate Campaign
- ☐ Party
- ☐ PAC
- ☐ Referendum
- ☐ Independent Expenditure
- ☐ Joint Fundraiser
- ☐ Legal Expense Fund

7. Type of Fund *(if applicable, check one)*

- ☐ Booster Fund
- ☐ Building Fund
- ☐ Other:

8. Number of Fundraisers this Report

9. Type of Report *(check only one type of report from one category)*

Municipal	State/County	Referendum
☐ Organizational	☐ Organizational	☐ Organizational
☐ Thirty-five day	Quarterly	☐ Pre-referendum
☐ Pre-primary	☐ First	☐ Final
☐ Pre-election	☐ Second	☐ Supplemental Final
☐ Pre-runoff	☐ Third	☐ Annual
Semi-annual	☐ Fourth	☐ Special
☐ Mid Year	Semi-annual	
☐ Year End	☐ Mid Year	
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

10. Special Report Name

11. Account Information

a. Financial Institution Full Name	
b. Purpose	**c. Account Code**
	d. Period Begin Balance
	$

11. Account Information

a. Financial Institution Full Name	
b. Purpose	**c. Account Code**
	d. Period Begin Balance
	$

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 and that I have been trained by the NC State Board of Elections.

Printed Name of Signer	Signature of Appointed Treasurer	Date

FOR OFFICE USE ONLY

Date Received:	_____	Employee:	_____
Date Postmarked:	_____	Employee:	_____
Date Scanned:	_____	Employee:	_____
Date Data Entered:	_____	Employee:	_____

Delivery Method

- ☐ Normal Mail
- ☐ Registered Mail
- ☐ Hand Delivered
- ☐ Electronically Filed

☐ Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.
You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

Amendment ☐ Yes ☐ No

Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number

Start of Election Cycle: January 1, _____		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$	$
RECEIPTS			
5) Aggregated Contributions from Individuals	*(CRO-1205)*	$	$
6) Contributions from Individuals	*(CRO-1210)*	$	$
7) Contributions from Political Party Committees	*(CRO-1220)*	$	$
8) Contributions from Other Political Committees	*(CRO-1230)*	$	$
9) Loan Proceeds	*(CRO-1410)*	$	$
10) Refunds/Reimbursements to the Committee	*(CRO-1240)*	$	$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	*(CRO-1250)*	$	$
11b) Contributions from Not-For-Profit Organizations	*(CRO-1250)*	$	$
11c) Outside Sources of Income	*(CRO-1250)*	$	$
11d) Legal Expense Fund - Other Sources	*(CRO-1270)*	$	$
11e) Exempt Purchase Price Sales	*(CRO-1265)*	$	$
12) **TOTAL RECEIPTS** (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		$	$
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	*(CRO-1310)*	$	$
13b) Contributions to Candidates/Political Committees	*(CRO-1310)*	$	$
13c) Coordinated Party Expenditures	*(CRO-1310)*	$	$
14) Aggregated Non-Media Expenditures	*(CRO-1315)*	$	$
15) Loan Repayments	*(CRO-1420)*	$	$
16) Refunds/Reimbursements from the Committee	*(CRO-1320)*	$	$
17) In-Kind Contributions	*(CRO-1510)*	$	$
18) **TOTAL EXPENDITURES** (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$	$
19) **Cash on Hand at End** (Add lines 4 and 12 together, then subtract line 18)		$	$
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	*(CRO-1330)*	$	
21) Outstanding Loans (incl. ones from other campaigns)	*(CRO-1430)*	$	
22) Debts and Obligations owed by the Committee	*(CRO-1610)*	$	
23) Debts and Obligations owed to the Committee	*(CRO-1620)*	$	
24) Account Transfers Within the Committee	*(CRO-1720)*	$	
25) Administrative Support	*(CRO-1710)*	$	$
26) Forgiven Loans	*(CRO-1440)*	$	$
27) 48-Hour Notice Reports Sum	*(CRO-2220)*	$	$
28) Contributions to be Refunded	*(CRO-1215)*	$	$