

# 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	
James A Knox for Mayor			
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
4811 Vernon Road Leland, NC 28451		7/12/2019	
		e. Phone Number	
		910-515-9677	
2. Candidate Information			<input type="checkbox"/> Candidate's Primary Committee
a. Full Name		c. Candidate ID Number	f. Party Affiliation
James A Knox			
		(Indicate Non-partisan if applicable)	
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought	
4811 Vernon Road Leland, NC 28451		Mayor	
c. Phone Number	d. Email Address	h. Next Election Year	i. Jurisdiction
910-515-9677	jamesknox31@gmail.com	2019	Northwest
<input checked="" type="checkbox"/> Email copy of notices			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name		a. Full Name	
James A Knox			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
4811 Vernon Road Leland, NC 28451			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
910-515-9677	jamesknox31@gmail.com		
I prefer to receive notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of notices	
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
		Self Funded	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
c. Phone Number	d. Email Address	c. Account Code	d. Type
<input type="checkbox"/> Email copy of notices			
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.			
James A. Knox Printed Name of Signer		James A. Knox Signature of Appointed Treasurer	7-12-19 Date

