

Statement of Organization – Candidate Committee

Amendment	
<input type="checkbox"/> Yes	<input type="checkbox"/> 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		
Committee to Elect Kaitlyn Jackson					
b. Mailing Address (include City, State and Zip Code)			d. Date Organized		
10 Cox Street Bolivia, NC 28422			7/18/2019		
			e. Phone Number		
			3072869487		
2. Candidate Information					<input type="checkbox"/> Candidate's Primary Committee
a. Full Name		e. Candidate ID Number		f. Party Affiliation	
Kaitlyn Jackson				non-partisan	
				(Indicate Non-partisan if applicable)	
b. Mailing Address (include City, State, and Zip Code)			g. Office Sought		
10 Cox Street Bolivia, NC 28422			Alderman		
c. Phone Number	d. Email Address		h. Next Election Year		i. Jurisdiction
3072869487	kaitlyn.jackson.nc@gmail.com		2019		Bolivia
<input type="checkbox"/> Email copy of notices					
3. Treasurer Information			4. Custodian of Books Information		
a. Full Name			a. Full Name		
Kaitlyn Jackson					
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
10 Cox Street Bolivia, NC 28422					
c. Phone Number	d. Email Address		c. Phone Number	d. Email Address	
3072869487	kaitlyn.jackson.nc@gmail.com				
I prefer to receive notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Email copy of notices		
5. Assistant Treasurer Information		<input type="checkbox"/> Add	6. Account Information (incl. CRO-3500)		<input type="checkbox"/> Add
a. Full Name		<input type="checkbox"/> Remove	a. Financial Institution Full Name		<input type="checkbox"/> Remove
			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.					
Kaitlyn Jackson		Kaitlyn Jackson		7-18-19	
Printed Name of Signer		Signature of Appointed Treasurer		Date	

