

# Statement of Organization - Candidate Committee

Is this statement:	
<input checked="" type="checkbox"/> New	<input 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	
LYNN MCDOWELL FOR OKI			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
PO Box 133, Oak Island, NC 28465		7-13-21	
c. Committee Website (Optional)		f. Phone Number	
		910-278-7252	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Lynn H. McDowell		Nonpartisan	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
PO Box 133, Oak Island, NC 28465		Oak Island Council	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
910-278-7252	lynnhmc11@gmail.com	2021	Oak Island
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Lynn H. McDowell		NONE	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
PO Box 133, Oak Island, NC 28465			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
910-278-7252	lynnhmc11@gmail.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	
Robert P. McDowell II		Branch Banking and Trust Company	
b. Mailing Address (include City, State, and Zip Code)			
lynnhmc11@gmail.com			
c. Phone Number	d. Email Address	b. Account Code	c. Type
910-278-7252	rpmcdii@gmail.com	LHM2021	Checking
<input checked="" 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>Lynn H. McDowell _____ <i>Lynn H McDowell</i> _____ 7-14-21                  Printed Name of Treasurer Signature of Appointed Treasurer Date</p> <p>I certify that the information above is correct, and I, as the candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties in Article 22A of Chapter 163 of the NC General Statutes.</p> <p>Lynn H. McDowell _____ <i>Lynn H McDowell</i> _____ 7-14-21                  Printed Name of Candidate Signature of Candidate Date</p>			

RECEIVED

JUL 14 2021

BRUNSWICK COUNTY BOARD OF ELECTIONS