Statement of Organization – Candidate Committee

Is this statement: ☐ New ☐ 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
Committee to Elect Tammie Galloway	
b. Mailing Address (include City, State and Zip Code)	**e. Date Organized**
84 Varnamtown Road Supply, NC 28462	7/12/2021
c. Committee Website (Optional)	**f. Phone Number**
	910-619-9813

2. Candidate Information

a. Full Name		e. Party Affiliation	
Tammie Galloway		nonpartisan	
b. Mailing Address (include City, State, and Zip Code)		**f. Office Sought**	
84 Varnamtown Road Supply, NC 28462		Alderman	
c. Phone Number	**d. Email Address**	**g. Next Election Year**	**h. Jurisdiction**
910-619-9813	tammiegalloway@gmail.com	2021	Varnamtown
☐ Email copy of report notices			

3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		**a. Full Name**	
Tammie Galloway			
b. Mailing Address (include City, State, and Zip Code)		**b. Mailing Address (include City, State, and Zip Code)**	
84 Varnamtown Road Supply, NC 28462			
c. Phone Number	**d. Email Address**	**c. Phone Number**	**d. Email Address**
	tammiegalloway@gmail.com		
Send report notices by email ☒ Yes ☐ No		☐ 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**	
		self funded	
b. Mailing Address (include City, State, and Zip Code)			
c. Phone Number	**d. Email Address**	**b. Account Code**	**c. Type**
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BRUNSWICK COUNTY
BOARD OF ELECTIONS

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.

Tammie Galloway — Printed Name of Treasurer
Tammie Galloway — Signature of Appointed Treasurer
7-12-21 — Date

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.

Tammie Galloway — Printed Name of Candidate
Tammie Galloway — Signature of Candidate
7-12-21 — Date