

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	
ELECT ALAN HOLDEN MAYOR			
b. Mailing Address (include City, State and Zip Code)		c. Date Organized	
128 OCEAN BLVD WEST HOLDEN BEACH, NC 28462		07/10/2023	
c. Committee Website (Optional)		f. Phone Number	
		910-279-5938	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
JOHN WAYNE ALAN HOLDEN		Nonpartisan	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
128 OCEAN BLVD WEST HOLDEN BEACH, NC 28462		MAYOR	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
910-279-5938	ALAN@ALANHOLDENREALTY.COM	2023	TOWN OF HOLDEN BEACH
<input checked="" type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
JOHN WAYNE ALAN HOLDEN			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
128 OCEAN BLVD WEST HOLDEN BEACH, NC 28462			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
910-279-5938	ALAN@ALANHOLDENREALTY.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	
		SELF FUNDED	
b. Mailing Address (include City, State, and Zip Code)			
		RECEIVED JUL 10 2023	
c. Phone Number	d. Email Address	b. Account Code	c. Type
			BRUNSWICK COUNTY BOARD OF ELECTIONS
<input type="checkbox"/> Email copy of report notices			

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.

John Wayne Alan Holden John Wayne Alan Holden 7/10/23
 Printed Name of Treasurer Signature of Appointed Treasurer 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.

John Wayne Alan Holden John Wayne Alan Holden 7/10/23
 Printed Name of Candidate Signature of Candidate Date