

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
MARLENE FOR COMMISSIONER	
b. Mailing Address (include City, State and Zip Code)	e. Date Organized
140 FREEBOARD LN CAROLINA SHORES, NC 28467	07/07/2023 4-26-23
c. Committee Website (Optional)	f. Phone Number
	215-514-5691

2. Candidate Information			
a. Full Name		e. Party Affiliation	
MARLENE VANDERGRIFT		Nonpartisan	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
140 FREEBOARD LN CAROLINA SHORES, NC 28467		COMMISSIONER	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
215-514-5691	MVANDERGRIFT@CAROLINASHORESNC.COM	2023	TOWN OF CAROLINA SHORES
<input checked="" type="checkbox"/> Email copy of report notices			

3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
MARLENE VANDERGRIFT			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
140 FREEBOARD LN CAROLINA SHORES, NC 28467			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
215-514-5691	MVANDERGRIFT@CAROLINASHORESNC.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	
		PNC	
b. Mailing Address (include City, State, and Zip Code)			
c. Phone Number	d. Email Address	b. Account Code	c. Type
		MARLILLY	CHECKING
<input type="checkbox"/> Email copy of report notices			

RECEIVED

JUL 13 2023

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.

MARLENE VANDERGRIFT
 Printed Name of Treasurer

Marlene Vandergrift
 Signature of Appointed Treasurer

07/13/23
 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.

MARLENE VANDERGRIFT
 Printed Name of Candidate

Marlene Vandergrift
 Signature of Candidate

07/13/23
 Date