

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 Pete Larkin			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
453 Lake Shore Drive Sunset Beach, NC 28468		7/7/2023	
c. Committee Website (Optional)		f. Phone Number	
www.votepetelarkin.com		443-994-4242	
2. Candidate Information			
a. Full Name		c. Party Affiliation	
Peter E. Larkin		Nonpartisan	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
453 Lake Shore Drive Sunset Beach, NC 28468		Councilman	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
443-994-4242	Plarkin64@outlook.com	2023	Sunset Beach
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Lou DeVita			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
223 Crooked Gully Circle Sunset Beach, NC 28468			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
910-579-2780	deesatplay@atmc.net		
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	
		United Bank	
b. Mailing Address (include City, State, and Zip Code)			
		840 SUNSET BLVD N SUNSET BEACH N.C. 28468	
c. Phone Number	d. Email Address	b. Account Code	c. Type
		PETE	Checking
<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.			
<u>LOU DEVITA</u> Printed Name of Treasurer		<u><i>Lou DeVita</i></u> Signature of Appointed Treasurer	<u>7/9/2023</u> 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.			
<u>PETER LARKIN</u> Printed Name of Candidate		<u><i>Pete Larkin</i></u> Signature of Candidate	<u>7/7/2023</u> Date

RECEIVED
 JUL 17 2023
 BRUNSWICK COUNTY
 BOARD OF ELECTIONS