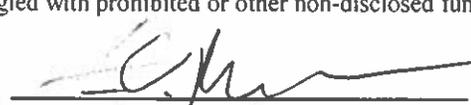
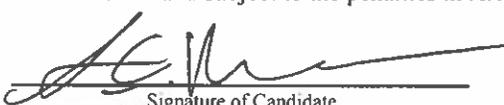


Statement of Organization - Candidate Committee

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	
Committee to Elect Scott Monticelli			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
4020 Barnes Bluff Dr, Southport, NC 28461		07/15/25	
c. Committee Website (Optional)		f. Phone Number	
		619-884-8434	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Scott Monticelli		Non-Partisan	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
4020 Barnes Bluff Dr, Southport, NC 28461		Commissioner (Unexpired)	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
619-884-8434	scott.a.monticelli@gmail.com	2025	SE Brunswick Sanitary Di
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Scott Monticelli		Shaunna Monticelli	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
4020 Barnes Bluff Dr, Southport, NC 28461		4020 Barnes Bluff Dr, Southport, NC 28461	
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
619-884-8434	scott.a.monticelli@gmail.com	760-219-2009	shaunna.monticelli@gmail.com
<input checked="" type="checkbox"/> Send report notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" 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	
None		Self-Funded	
b. Mailing Address (include City, State, and Zip Code)			
c. Phone Number	d. Email Address	b. Account Code	c. Type
			BRUNSWICK COUNTY BOARD OF ELECTIONS
<input 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>Scott Monticelli</p> <p>Printed Name of Treasurer</p>		 <p>Signature of Appointed Treasurer</p>	<p>07/15/25</p> <p>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>Scott Monticelli</p> <p>Printed Name of Candidate</p>		 <p>Signature of Candidate</p>	<p>07/15/25</p> <p>Date</p>

RECEIVED

JUL 15 2025

BRUNSWICK COUNTY
BOARD OF ELECTIONS