

Statement of Organization - Candidate Committee

Amendment
 Yes No

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by forms CRO-3100 and CRO-3500 (when amending, only re-submit if applicable).

1. Committee Information			
a. Full Name		c. ID Number	
Committee to Elect Alfred M. Braun, Jr.			
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
100 Grove Ave NW Concord, NC 28025		7-10-17	
		e. Phone Number	
		704-786-0335	
2. Candidate Information			
a. Full Name		c. Candidate ID Number	
Alfred Monroe Braun, Jr.			
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought	
Same		Mayor of Concord	
c. Phone Number	d. Email Address	h. Next Election Year	i. Jurisdiction
Same	1973yellowbug@gmail.com	2017	Concord
<input type="checkbox"/> Email copy of notices		<input type="checkbox"/> Candidate's Primary Committee	
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name		a. Full Name	
Pamela Clark York			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
226 Vance Dr. NE Concord, NC 28025			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
704-707-2222	pcyork17@gmail.com		
I prefer to receive notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of notices	
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
		State Employees Credit Union	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
		Campaign Funds	
c. Phone Number	d. Email Address	c. Account Code	d. Type
		1950	Checking
<input checked="" type="checkbox"/> Email copy of notices			
CERTIFICATION			
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M 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.			
Pamela C. York		Daniel C. York	
Printed Name of Signer		Signature of Appointed Treasurer	
		7-10-17	
		Date	