

# 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)

**RECEIVED**  
 JUL 17 2017  
 CABARRUS COUNTY  
 BOARD OF ELECTIONS

1. Committee Information	
<b>a. Full Name</b> Committee to Re-Elect Eilla Mae Small	<b>c. ID Number</b>
<b>b. Mailing Address (include City, State and Zip Code)</b> 160 Boger Court, SW Concord, NC. 28025	<b>d. Date Organized</b> 7-15-2017
	<b>e. Phone Number</b> 704-786-5647

2. Candidate Information		<input type="checkbox"/> Candidate's Primary Committee
<b>a. Full Name</b> Ella Mae Small	<b>e. Candidate ID Number</b>	<b>f. Party Affiliation</b> Democrat
<b>b. Mailing Address (include City, State, and Zip Code)</b> 160 Boger court, SW Concord, NC 28025	<b>g. Office Sought</b> Concord City Council	
<b>c. Phone Number</b> 704-786-5647	<b>d. Email Address</b> epsmaill@carolina.rr.com	<b>h. Next Election Year</b> 2017
<input checked="" type="checkbox"/> Email copy of notices		<b>i. Jurisdiction</b>

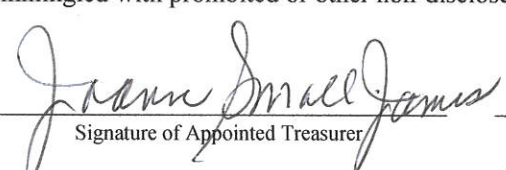
3. Treasurer Information		4. Custodian of Books Information	
<b>a. Full Name</b> Joanne Small-James	<b>a. Full Name</b>		
<b>b. Mailing Address (include City, State, and Zip Code)</b> 2988 Clover RD NW Concord, NC 28027	<b>b. Mailing Address (include City, State, and Zip Code)</b>		
<b>c. Phone Number</b> 704-788-3755	<b>d. Email Address</b> Joannejames15@gmail.com	<b>c. Phone Number</b>	<b>d. Email Address</b>

I prefer to receive my notices by email  Yes  No  Email copy of notices

5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
<b>a. Full Name</b>	<input type="checkbox"/> Add <input type="checkbox"/> Remove	<b>a. Financial Institution Full Name</b> Wells Fargo	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<b>b. Mailing Address (include City, State, and Zip Code)</b>	<b>b. Purpose</b> Campaign Transaction		
<b>c. Phone Number</b>	<b>d. Email Address</b>	<b>c. Account Code</b> 1	<b>d. Type</b> Checking
<input 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.

\_\_\_\_\_  
 Joanne Small-James  
 Printed Name of Signer

  
 Signature of Appointed Treasurer

\_\_\_\_\_  
 7/15/2017  
 Date