

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		
Howie for Council					
b. Mailing Address (include City, State and Zip Code)			d. Date Organized		
4430 Stallings Road Harrisburg, NC, 28075					
			e. Phone Number		
			704 773 2215		
2. Candidate Information <input type="checkbox"/> Candidate's Primary Committee					
a. Full Name		e. Candidate ID Number		f. Party Affiliation	
Courtney Ida Howie					
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought			
4430 Stallings Road Harrisburg, NC 28075		Harrisburg Town Council			
c. Phone Number		d. Email Address		h. Next Election Year	
704 773 2215				2017	
				i. Jurisdiction	
				Harrisburg	
<input type="checkbox"/> Email copy of notices					
3. Treasurer Information			4. Custodian of Books Information		
a. Full Name			a. Full Name		
Courtney I. Howie			Courtney Howie		
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
4430 Stallings Road Harrisburg, NC, 28075			4430 Stallings Road Harrisburg, NC, 28075		
c. Phone Number		d. Email Address		c. Phone Number	
704 773 2215				704 773 2215	
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		<input type="checkbox"/> Add <input type="checkbox"/> Remove
None			RECEIVED		
b. Mailing Address (include City, State, and Zip Code)			b. Purpose		
			JUL 21 2017		
			CABARRUS COUNTY		
c. Phone Number		d. Email Address		c. Account Code	
				BOARD OF ELECTIONS	
<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.					
Printed Name of Signer		Signature of Appointed Treasurer		Date	
Courtney Howie		Courtney Howie		7-18-17	