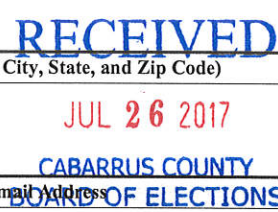


Statement of Organization - Candidate Committee

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	
Jane L Sellers for City Council		District 4 not used by County BOE	
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
439 Harris St NW Concord NC 28025		7/18/17	
		e. Phone Number	
		704 425 7123	
2. Candidate Information			
<input type="checkbox"/> Candidate's Primary Committee			
a. Full Name		e. Candidate ID Number	f. Party Affiliation
Jane Long Sellers		not used by the County BOE	Republican (Indicate Non-partisan if applicable)
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought	
439 Harris St NW Concord NC 28025		City Council member District 4	
c. Phone Number	d. Email Address	h. Next Election Year	i. Jurisdiction
704 425 7123	jsellers1@ctc.net	2017	not used by the County BOE
<input checked="" type="checkbox"/> Email copy of notices			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name		a. Full Name	
Jane Long Sellers		N/A	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
439 Harris St NW Concord NC 28025			
c. Phone Number	d. Email Address		
704 425 7123	jsellers1@ctc.net	c. Phone Number	d. Email Address
<input checked="" type="checkbox"/> I prefer to receive notices by email <input checked="" 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	
N/A		Fifth Third Bank	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
		Campaign Transactions	
c. Phone Number	d. Email Address	c. Account Code	d. Type
		1	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.			
Jane Long Sellers Printed Name of Signer		Jane Long Sellers Signature of Appointed Treasurer	7/26/17 Date