Statement of Organization - Candidate Committee Use this form to create a new or update an existing candidate committee.

Amendment	
☐ Yes	✓ No

This form must be a 1. Committee Info	accompanied by forms CR	O-3100 and CI	RO-3500 (when ame	ending, only	re-submit if a	pplicable).	1
a. Full Name					c. ID Number	c. ID Number	
Committee to Elect Brian King					20-4392963		
b. Mailing Address (inc			d. Date Organ	nized	i		
PO Box 1643					07/15/2019		ĺ
Concord, North Carolina 28026							
				e. Phone Num	e. Phone Number		
				704-786-5161			
2. Candidate Information				/ Candidate	s Primary Committee		1
a. Full Name			e. Candidate ID Numb	date ID Number f. Party Affiliation		ation	
William Brian King				Non-Partis	Non-Partisan Election		
				(Indicate Non-partisan if applicable)			
b. Mailing Address (inc	elude City, State, and Zip Code	2)	g. Office Sought				1
PO Box 1643 Concord, NC 28026		Concord City Council - District 2					
c . Phone Number	d. Email Address		h. Next Election Year	i. J	urisdiction		1
704-782-0010	kingb@concordnc.gov		2010				
Email copy of n	otices		2019				
3. Treasurer Infor	mation		4. Custodian of Bo	ooks Inform	ation		
a. Full Name		a. Full Name					
Michael R, Burgner		Michael R. Burgner				ı	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)					
PO Box 368 Concord, NC 28026-0368		PO Box 368 Concord, NC 28026-0368					
c. Phone Number	d. Email Address		c. Phone Number d. Email Address				
704-786-5161		704-786-5161					
I prefer to receive	notices by email	Yes No	Email copy o	f notices			
5. Assistant Treasurer Information Add			6. Account Information (incl. CRO-3500) Add				
a. Full Name		Remove	a. Financial Institution	Full Name		Remove	
b. Mailing Address (include City, State, and Zip Code)			b. Purpose			CABARRU BOARD OF	5 COUNT ELECTIO
						JUL 1	5 2019
e. Phone Number	d. Email Address		c. Account Code	d. Type			i
			2			RECE	IVED
☐ Email copy o	f notices						
CERTIFICATION I certify that the C Chapter 163 of the I further certify the	ommittee or Fund is in co NC General Statutes and at this report is complete, ael R. Burgner	that no funds a true and correct	are commingled with	prohibited	or other non-	disclosed funds.	
Printed Name of Signer Sign			mature of Appointed Frea	isurer		Date	1