Statement of Organization Condition Consults		Amendment
Statement of Organization - Candidate Use this form to create a new or update an existing candid		Yes No
This form must be accompanied by forms CRO-3100 and		e-submit if applicable).
1. Committee Information		
a. Full Name		c. ID Number
Committee to Elect Bartie	l)	
		d. Date Organized
224 HWD SON AT		W15/19
b. Mailing Address (include City, State and Zip Code)  224 HWD SON AC  HARRISBURG WC 280 75		e. Phone Number
		2046857230
2. Candidate Information	☐ Candidate's	Primary Committee
a. Full Name	e, Candidate ID Number	F. Party Affiliation NOW PARTSAN
Christophy Bartield		NOW HARTDAN
CIPOTOPOU DEFEIG		(Indicate Non-partisan if applicable
b. Mailing Address (include City, State, and Zip Code)	g. Office Sought	
224 Auson Dr farashurg NC	Harrisbury Tax	in Guacil
c . Phone Number d. Email Address	Willest Election Lent	risdiction
(285 7230 christophen butteld cyallo	Dar O	1 1. 11
Pmail copy of notices	- 2019 A	HARLISBANG-
3. Treasurer Information	4. Custodian of Books Informa	tion
a. Full Name	a. Full Name	- 0 01
Christopher Bartield	don't date Box 80	
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City, State	e, and Zip Code)
SAME	SAME	
c. Phone Number d. Email Address	c. Phone Number d. Email Addr	ess
I prefer to receive notices by email Yes Z	No Email copy of notices	
5. Assistant Treasurer Information  Add	6. Account Information (incl.	CRO-3500)
a. Full Name Remove	a. Financial Institution Full Name	Remove
ê.	_	
b. Mailing Address (include City, State, and Zip Code)	b. Purpose	
A Francisco (menute entry states, and exp estate)		
	NIX	
	1 1 1 1	
d. Email Address	c. Account Code d. Type	
	, ,	
☐ 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 commingted with prohibited or other non-disclosed funds.  I further certify that this report is complete, true and dorrect.		
CABARRUS COUNTY 125/1		
Christipher Fartiel (1) CABARRUS COUNTY 25/19		
Printed Name of Signer Signature of Appointed Treasurer Date		
.ILIL <b>2 9</b> 2019		