



# Statement of Organization - Candidate Committee

Amendment	
<input type="checkbox"/> Yes	<input type="checkbox"/> 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).

<b>1. Committee Information</b>					
a. Full Name			c. ID Number		
Committee to Elect Barbara Strang			84-2476398		
b. Mailing Address (include City, State and Zip Code)			d. Date Organized		
1332 Winecoff School Road Concord, NC 28027			7/18/2019		
			e. Phone Number		
<b>2. Candidate Information</b> <input type="checkbox"/> Candidate's Primary Committee					
a. Full Name		e. Candidate ID Number		f. Party Affiliation	
Barbara Strang				Republican	
				(Indicate Non-partisan if applicable)	
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought			
1332 Winecoff School Road Concord, NC 28027		Concord City Council - District 1			
c. Phone Number	d. Email Address	h. Next Election Year		i. Jurisdiction	
704-796-3771	bstrang34@gmail.com	2019		Concord	
<input type="checkbox"/> Email copy of notices					
<b>3. Treasurer Information</b>			<b>4. Custodian of Books Information</b>		
a. Full Name			a. Full Name		
Barbara Strang					
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
1332 Winecoff School Road Concord, NC 28027					
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address		
704-796-3771	bstrang34@gmail.com				
I prefer to receive notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Email copy of notices					
<b>5. Assistant Treasurer Information</b>		<b>6. Account Information</b> (incl. CRO-3500)			
a. Full Name		a. Financial Institution Full Name		Add <input type="checkbox"/> Remove <input type="checkbox"/>	
		BB&T			
b. Mailing Address (include City, State, and Zip Code)		b. Purpose			
		Campaign Account			
c. Phone Number	d. Email Address	c. Account Code	d. Type		
		102	Checking		
<input type="checkbox"/> Email copy of notices					
<b>CERTIFICATION</b>					
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		7/24/2019 Date	

CABARRUS COUNTY  
BOARD OF ELECTIONS

JUL 31 2019

RECEIVED