


Aug 2 2019

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		
Committee to Elect John A. Sweat Jr					
b. Mailing Address (include City, State and Zip Code)			d. Date Organized		
42 B Union Street South Concord NC 28025			02/11/2018		
			e. Phone Number		
			704-425-2205		
2. Candidate Information				<input checked="" type="checkbox"/> Candidate's Primary Committee	
a. Full Name		e. Candidate ID Number		f. Party Affiliation	
John Alexander Sweat, Jr.				Non-Partisan <small>(Indicate Non-partisan if applicable)</small>	
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought			
1114 Matchstick Place Concord, NC 28025		Concord City Council			
c. Phone Number	d. Email Address	h. Next Election Year		i. Jurisdiction	
704-425-2205		2023		District 7	
<input checked="" type="checkbox"/> Email copy of notices					
3. Treasurer Information			4. Custodian of Books Information		
a. Full Name			a. Full Name		
Hector Henry III			Hector Henry III		
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
1691 Old Harmony Drive Concord, NC 28027			1691 Old Harmony Drive Concord NC 28027		
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address		
980-621-3570	hectorhenry.iii@gmail.com	980-621-3570	hectorhenry.iii@gmail.com		
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 <small>(incl. CRO-3500)</small>			
a. Full Name		<input type="checkbox"/> Add <input type="checkbox"/> Remove		a. Financial Institution Full Name	
				BBÉT	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose			
		CAMPAIN TRANSACTIONS			
c. Phone Number	d. Email Address	c. Account Code	d. Type		
		HHS2	CHECKING ACCOUNT FOR CAMPAIN		
<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.					
Hector Henry III				7/19/2019	
Printed Name of Signer		Signature of Appointed Treasurer		Date	