

Statement of Organization - Candidate Committee

Is this statement:	
<input type="checkbox"/> New	<input type="checkbox"/> Amended

Use this form to create a new or update an existing candidate committee.
 This form must be accompanied by form CRO-3500. An amended form is required for each new election year.

1. Committee Information			
a. Name of Committee		d. ID Number	
Tim Furr For Cabarrus County School Board			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
3344 Muddy Creek Rd. Midland NC 28107		12/5/2019	
c. Committee Website (Optional)		f. Phone Number	
		940-521-8828	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Timothy Allen Furr		Republican	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
3344 Muddy Creek Rd. Midland NC 28107		Cabarrus County School Board	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
		2020	Cabarrus County
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Timothy Allen Furr			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
3344 Muddy Creek Rd Midland, NC 28107			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
940-521-8828	timfurr30@hotmail.com		
Send report notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of report notices	
5. Custodian of Books Information (Keeper of Records)		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
CABARRUS COUNTY BOARD OF ELECTIONS		SunTrust BANK	
b. Mailing Address (include City, State, and Zip Code)			
DEC 9 2019			
c. Phone Number	d. Email Address	b. Account Code	c. Type
		1	Checking
<input type="checkbox"/> Email copy of report notices			
<p>I certify that the Committee is in compliance with all applicable provisions of Article 22A 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.</p> <p> <u>Timothy Allen Furr</u> <u>Timothy Allen Furr</u> <u>12/10/2019</u> Printed Name of Treasurer Signature of Appointed Treasurer Date </p> <p>I certify that the information above is correct, and I, as the candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties in Article 22A of Chapter 163 of the NC General Statutes.</p> <p> <u>Timothy Allen Furr</u> <u>Timothy Allen Furr</u> <u>12/10/2019</u> Printed Name of Candidate Signature of Candidate Date </p>			