

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 <u>Elect Rob Walter Campaign</u>		d. ID Number	
b. Mailing Address (include City, State and Zip Code) <u>2322 Lomax Ct., Concord, NC 28025</u>		e. Date Organized <u>12/16/19</u>	
c. Committee Website (Optional) <u>www.voteRobWalter.org</u>		f. Phone Number <u>704 784 9115</u>	
2. Candidate Information			
a. Full Name <u>Robert P. Walter</u>		e. Party Affiliation <u>Non Partisan</u>	
b. Mailing Address (include City, State, and Zip Code) <u>2322 Lomax Ct. Concord, NC 28025</u>		f. Office Sought <u>Cabarrus Board of Education</u>	
c. Phone Number <u>704 784 9115</u>	d. Email Address <u>Rob@VoteRobWalter.org</u>	g. Next Election Year <u>2020</u>	h. Jurisdiction
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name <u>Ann S. Holt</u>		a. Full Name <u>CABARRUS COUNTY BOARD OF ELECTIONS</u>	
b. Mailing Address (include City, State, and Zip Code) <u>135 Pointer Ct. SE Concord, NC 28025</u>		b. Mailing Address (include City, State and Zip Code) <u>DEC 16 2019</u>	
c. Phone Number <u>704-305-2381</u>	d. Email Address <u>amsholt@gmail.com</u>	c. Phone Number	d. Email Address <u>RECEIVED</u>
Send report notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" 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 <u>FENI BANK</u>	
b. Mailing Address (include City, State, and Zip Code)		b. Account Code <u>A</u>	
c. Phone Number	d. Email Address	c. Type <u>CHECKING</u>	
<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>Ann S. Holt</u> <u>Ann S. Holt</u> <u>12/16/19</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>Robert P. Walter</u> <u>Robert P. Walter</u> <u>12/16/19</u> Printed Name of Candidate Signature of Candidate Date</p>			