7/25/21

Statement of Organization - Candidate Committee

Is this statement: ☒ New ☐ 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
Dylan Fulk	
b. Mailing Address (include City, State and Zip Code)	**e. Date Organized**
788 N. Main St. Mt. Pleasant, NC 28124	7·22·21
c. Committee Website (Optional)	**f. Phone Number**
	704·223·1760

2. Candidate Information

a. Full Name	e. Party Affiliation
Dylan Brett Fulk	Republican
b. Mailing Address (include City, State, and Zip Code)	**f. Office Sought**
788 N. Main St. Mt. Pleasant, NC 28124	Town Commissioner
c. Phone Number / **d. Email Address**	**g. Next Election Year** / **h. Jurisdiction**
704/223-1760 / dfulk@consultpss.com	2021 / Cabarrus County / Mt. Pleasant
☒ Email copy of report notices	

3. Treasurer Information

a. Full Name
Dylan Brett Fulk
b. Mailing Address (include City, State, and Zip Code)
788 N. Main St. Mt. Pleasant, NC 28124
c. Phone Number / **d. Email Address**
704/223-1760 / dfulk@consultPSS.com
Send report notices by email ☒ Yes ☐ No

4. Assistant Treasurer Information

a. Full Name
NA
b. Mailing Address (include City, State and Zip Code)
NA
c. Phone Number / **d. Email Address**
NA / NA
☐ Email copy of report notices

CABARRUS COUNTY BOARD OF ELECTIONS
JUL 23 2021
RECEIVED

5. Custodian of Books Information (Keeper of Records)

a. Full Name
NA
b. Mailing Address (include City, State, and Zip Code)
NA
c. Phone Number / **d. Email Address**
NA / NA
☒ Email copy of report notices

6. Account Information *(incl. CRO-3500)*

a. Financial Institution Full Name
Uwharrie Bank
1490 S. Main St. Mt Pleasant 28124
b. Account Code / **c. Type**
A / checking

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.

Dylan Fulk — Printed Name of Treasurer | [signature] — Signature of Appointed Treasurer | 07-23-21 — Date

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.

Dylan Fulk — Printed Name of Candidate | [signature] — Signature of Candidate | 07-23-21 — Date