## 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.

of the second	accompanied by form CRO-5500. All	anonaca ionii is required	i for each new creetion year.	
1. Committee Information				
a. Name of Committee			d. ID Number	
Holden	tor Kanapolis			
b. Mailing Address (include City, State and Zip Code)			e. Date Organized	
803 Sprucewood St Kennopolis NC 8000 04/20/202				
c. Committee Website (Optional)				
c. Committee website	e (Optional)		1. Phone Number 2092	
			704 699 000	
2. Candidate Info	ormation			
a. Full Name		e. Party Affiliation		
L Ida.	Brat Sides			
FIDILLE DYAT SILVES				
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought		
8773 SPIL	I CONDOD St 1 CONDA POLIS NC 200 d. Email Address	0 0		
000	Nannalis MC 22	SALLITY C	GLACI	
c . Phone Number	d. Email Address	g Next Election Year	h. Jurisdiction	
/				
104 499 009	2 sides h b94 Cychou. a	on D.n2	Kennepolis	
Email copy of	report notices	0000	1 concepoirs	
		4. Assistant Treasu	4. Assistant Treasurer Information	
a. Full Name		a. Full Name		
Holde	Silv		C DECENTED	
Mollin			RECEIVED	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (inc	clude City, State and Zip Code)	
803 Spiu	rewood St		APR 2 1 2023	
1600000	lis NC 28087			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address CABARRUS COUNT	
			BOARD OF ELECTION	
104 049 209	2 Sides hb 94 C yeho	U. Com		
Send report notices by email Ves No 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	a. Financial Institution Full Name	
		Dubari	Duharrik Bank	
b. Mailing Address (include City, State, and Zip Code)		Universit	Universe anic	
b. Manning Address (include City, State, and Zip Code)		DE Dalas	25 Palaside Dr	
		29 PUILS	inc vi	
		( onco	12 NC 78083	
c. Phone Number	d. Email Address	b. Account Code	1. МС ДУОД5 с. Туре	
		1		
Email copy of	report notices		Economy Checking	
		· ·		
Loortify that the	Committee is in compliance with all ap	anliaghla provisions of Ar	tials 22A of Chapter 162 of the NC	
	and that no funds are commingled with	n prohibited or other non-	disclosed funds. I further certify that	
this report is con	plete, true and correct.	KR	1/2/22	
Holden Jiden 11 7 0 4120123				
Printe	ed Name of Treasurer	Signature of Appointed Treas	surer Date	
I certify that the in	formation above is correct, and I, as the	ne 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.				
	Cida	ns -	4120122	
Tolus	Sides	10	110 10 3	
		Signature of Candidate	Date	
CRO-2100A	NC Stat	e Board of Elections	November 2019	