


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	
Barfield for Harrisburg			
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
224 Hudson Drive Harrisburg NC 28075		07/21/2017	
		e. Phone Number	
		704-685-7230	
2. Candidate Information			
<input type="checkbox"/> Candidate's Primary Committee			
a. Full Name		e. Candidate ID Number	f. Party Affiliation
Christopher A. Barfield			Republican
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought	
224 Hudson Drive Harrisburg NC 28075		Harrisburg- Mayor	
c. Phone Number	d. Email Address	h. Next Election Year	i. Jurisdiction
704-685-7230	christopher.barfield@yahoo.com	2017	Harrisburg
<input checked="" type="checkbox"/> Email copy of notices			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name		a. Full Name	
Christopher Barfield		Candidate	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
224 Hudson Drive Harrisburg NC 28075			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
704-685-7230	christopher.barfield@yahoo.com		
I prefer to receive notices by email <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Email copy of notices			
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	b. Purpose
None		Ally Bank	Campaign Funds
b. Mailing Address (include City, State, and Zip Code)		c. Account Code	d. Type
		01	Checking
<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.			
Christopher A. Barfield		07/21/2017	
Printed Name of Signer		Date	
		 Signature of Appointed Treasurer	