

JUL 26 2019

Amendment
 Yes No

Statement of Organization - Candidate Committee

RECEIVED

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 <i>Citizens To RE-elect Allen Burnette</i>		c. ID Number	
b. Mailing Address (include City, State and Zip Code) <i>12707 Hwy 601 Midland, NC 28107</i>		d. Date Organized <i>7-20-19</i>	
		e. Phone Number <i>704 634-7185</i>	
2. Candidate Information <input type="checkbox"/> Candidate's Primary Committee			
a. Full Name <i>Edward Allen Burnette</i>		e. Candidate ID Number	f. Party Affiliation <i>Rep</i> <small>(Indicate Non-partisan if applicable)</small>
b. Mailing Address (include City, State, and Zip Code) <i>12707 Hwy 601 Midland NC 28107</i>		g. Office Sought <i>Midland Town Council</i>	
c. Phone Number <i>704 634-7185</i>	d. Email Address <i>midlandfire@carolina.rr.com</i>	h. Next Election Year <i>11-5-19</i>	i. Jurisdiction <i>Midland</i>
<input type="checkbox"/> Email copy of notices			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name <i>Edward Allen Burnette</i>		a. Full Name <i>Edward Allen Burnette</i>	
b. Mailing Address (include City, State, and Zip Code) <i>12707 Hwy 601 Midland NC 28107</i>		b. Mailing Address (include City, State, and Zip Code) <i>12707 Hwy 601 Midland NC 28107</i>	
c. Phone Number <i>704 634-7185</i>	d. Email Address <i>midlandfire@carolina.rr.com</i>	e. Phone Number <i>704 634-7185</i>	d. Email Address <i>midlandfire@carolina.rr.com</i>
I prefer to receive notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Email copy of notices			
5. Assistant Treasurer Information		6. Account Information <small>(incl. CRO-3500)</small>	
a. Full Name		a. Financial Institution Full Name	<input type="checkbox"/> Add <input type="checkbox"/> Remove
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
c. Phone Number	d. Email Address	c. Account Code	d. Type
<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.			
<i>Edward Allen Burnette</i> Printed Name of Signer		<i>[Signature]</i> Signature of Appointed Treasurer	<i>7-25-19</i> Date