

Statement of Organization - Candidate Committee

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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
Committee to Elect Jim Sells 2019	
b. Mailing Address (include City, State and Zip Code)	d. Date Organized
P.O. Box 427 Mt. Pleasant, NC 28214	07/25/2019
	e. Phone Number
	980-248-3341

2. Candidate Information		<input checked="" type="checkbox"/> Candidate's Primary Committee
a. Full Name	e. Candidate ID Number	f. Party Affiliation
James Edward Sells		Non-partisan <small>(Indicate Non-partisan if applicable)</small>
b. Mailing Address (include City, State, and Zip Code)	g. Office Sought	
P.O. Box 427 Mt. Pleasant, NC 28124	Mount Pleasant Town Council	
c. Phone Number	d. Email Address	h. Next Election Year
980-248-3341	sellsj@ctc.net	2019
<input checked="" type="checkbox"/> Email copy of notices		i. Jurisdiction
		Mount Pleasant

3. Treasurer Information		4. Custodian of Books Information	
a. Full Name		a. Full Name	
Lisa P. Eudy		Lisa P. Eudy	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
788 Williamsburg Road Concord, NC 28025		788 Williamsburg Road Concord, NC 28025	
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
(704)788-2999	greneco1@gmail.com	(704)788-2999	greneco1@gmail.com


I prefer to receive notices by email Yes No Email copy of notices

5. Assistant Treasurer Information		<input type="checkbox"/> Add	6. Account Information (incl. CRO-3500)		<input type="checkbox"/> Add
a. Full Name	<input type="checkbox"/> Remove		a. Financial Institution Full Name	<input type="checkbox"/> Remove	
N/A			5/3 Bank		
b. Mailing Address (include City, State, and Zip Code)			b. Purpose		
N/A			2019 election funds		
c. Phone Number	d. Email Address		c. Account Code	d. Type	
N/A	N/A		1	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.

Lisa P. Eudy
Printed Name of Signer


Signature of Appointed Treasurer

CABARRUS COUNTY BOARD OF ELECTIONS
07/28/2019
Date

RECEIVED