

7/25/2021

Statement of Organization - Candidate Committee

Is this statement:	
<input checked="" type="checkbox"/> New	<input type="checkbox"/> 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	
James F. Litaker for Kannapolis City Council			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
313 S Main St, Suite 110, Kannapolis NC 28081		07/21/2021	
c. Committee Website (Optional)		f. Phone Number	
www.JamesFLitakerDC.com		704-467-4808	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
James Floyd Litaker		Democrat	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
313 S Main St. Suite 110 Kannapolis NC 28081		City Council (Kannapolis)	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
704 467 4808	JLitaker55@gmail.com	2021	Cabarrus County Kannapolis SD
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Ira Lillian Litaker			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
1501 RIDING TRAIL LN CONCORD NC 28027			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
7044674950	Ira Anderson 62@gmail		
<input type="checkbox"/> Send report notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No			
<input type="checkbox"/> 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 Full Name	
		BB+T	
b. Mailing Address (include City, State, and Zip Code)			
c. Phone Number	d. Email Address	b. Account Code	c. Type
		A	Checking
<input checked="" type="checkbox"/> Email copy of report notices			
<p>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.</p>			
Ira Litaker		[Signature]	7/21/2021
Printed Name of Treasurer		Signature of Appointed Treasurer	Date
<p>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.</p>			
JAMES F. LITAKER		[Signature]	7.21.2021
Printed Name of Candidate		Signature of Candidate	Date

CABARRUS COUNTY
BOARD OF ELECTIONS
 JUL 22 2021
RECEIVED