

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.

1. Committee Information			
a. Name of Committee		d. ID Number	
THOMAS HILL FOR CABARRUS SOIL & WATER			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
10896 Pioneer Mill Road, Concord, NC 28025		6/17/2022	
c. Committee Website (Optional)		f. Phone Number	
		704-794-5638	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
THOMAS BROWN HILL		LIBERTARIAN	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
10896 Pioneer Mill Road Concord, NC 28025		SOIL & WATER SUPERVISOR	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
704-794-5638	thomasbhill@msn.com	2022	Cabarrus
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
THOMAS HILL		N/A	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
10896 Pioneer Mill Road Concord, NC 28025			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
704-794-5638	thomasbhill@msn.com		
<input checked="" type="checkbox"/> Send report notices by email <input checked="" 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	
b. Mailing Address (include City, State, and Zip Code)		b. Account Code	
c. Phone Number	d. Email Address	c. Type	
<input type="checkbox"/> Email copy of report notices			

RECEIVED
 JUN 17 2022
 CABARRUS COUNTY
 BOARD OF ELECTIONS

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.

THOMAS HILL
 Printed Name of Treasurer

[Signature]
 Signature of Appointed Treasurer

6/17/2022
 Date

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.

THOMAS B. HILL
 Printed Name of Candidate

[Signature]
 Signature of Candidate

6/17/2022
 Date