

# 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 <i>Committee to Elect Brian King</i>		d. ID Number <i>20-4392963</i>	
b. Mailing Address (include City, State, and Zip Code) <i>P.O. Box 1643 Concord NC 28026</i>		e. Date Organized <i>07/05/2023</i>	
c. Committee Website (Optional) <i>www.electbrianking.com</i>		f. Phone Number <i>704-786-5161</i>	
2. Candidate Information			
a. Full Name <i>William Brian King</i>		e. Party Affiliation <i>Non-Partisan Election</i>	
b. Mailing Address (include City, State, and Zip Code) <i>P.O. Box 1643 Concord NC 28026</i>		f. Office Sought <i>Concord City Council - District 2</i>	
c. Phone Number <i>704-782-0010</i>	d. Email Address <i>kingforconcord@gmail.com</i>	g. Next Election Year <i>2023</i>	h. Jurisdiction
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name <i>Michael R. Burgner</i>		a. Full Name <i>N/A</i>	
b. Mailing Address (include City, State, and Zip Code) <i>P.O. Box 368 Concord NC 28026</i>		b. Mailing Address (include City, State, and Zip Code)	
c. Phone Number <i>704-786-5161</i>	d. Email Address	c. Phone Number	d. Email Address
<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 <i>Michael R. Burgner</i>		a. Financial Institution Full Name <i>Truist</i>	
b. Mailing Address (include City, State, and Zip Code) <i>P.O. Box 368 Concord NC 28026</i>		b. Account Code <i>31 Union St, N Concord, NC 28025</i>	
c. Phone Number <i>704-786-5161</i>	d. Email Address	c. Type <i>TR-1</i>	<i>Checking</i>
<input 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> <p><i>Michael R. Burgner</i> <i>[Signature]</i> <i>7/5/23</i>                  Printed Name of Treasurer Signature of Appointed Treasurer Date</p> <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> <p><i>William Brian King</i> <i>[Signature]</i> <i>7/5/2023</i>                  Printed Name of Candidate Signature of Candidate Date</p>			