

DUE 7/27

# 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.

<b>1. Committee Information</b>			
a. Name of Committee		d. ID Number	
Committee to Elect Robin Torrence			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
923 Patricia Ave Harrisburg NC 28075		7-21-2023	
c. Committee Website (Optional)		f. Phone Number	
<b>2. Candidate Information</b>			
a. Full Name		e. Party Affiliation	
Robin Glen Torrence		unaffiliated	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
923 Patricia Ave Harrisburg NC 28075		Harrisburg Town Council	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
704-634-6051	rtorrence480h@gmail.com	2023	
<input checked="" type="checkbox"/> Email copy of report notices			
<b>3. Treasurer Information</b>		<b>4. Assistant Treasurer Information</b>	
a. Full Name		a. Full Name	
Laura Christine Torrence			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
212 Parallel Dr Harrisburg NC 28075			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
980-621-3551	lctorrence@gmail.com		
Send report notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of report notices	
<b>5. Custodian of Books Information (Keeper of Records)</b>		<b>6. Account Information (incl. CRO-3500)</b>	
a. Full Name		a. Financial Institution Full Name	
		Pinnacle	
b. Mailing Address (include City, State, and Zip Code)			
c. Phone Number	d. Email Address	b. Account Code	c. Type
		A	Checking
<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><u>Laura Christine Torrence</u> Printed Name of Treasurer</p>		<p><u>Laura Christine Torrence</u> Signature of Appointed Treasurer</p>	
		<p><u>7-21-23</u> 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><u>Robin Glen Torrence</u> Printed Name of Candidate</p>		<p><u>Robin Glen Torrence</u> Signature of Candidate</p>	
		<p><u>7-21-23</u> Date</p>	

RECEIVED IN-PERSON

JUL 27 2023

CABARRUS COUNTY BOARD OF ELECTIONS