

Statement of Organization - Candidate Committee

Is this statement:

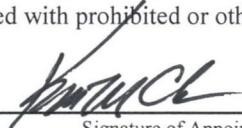
New Amended

Use this form to create a new or update an existing candidate committee.

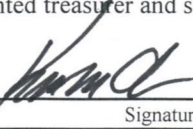
This form must be accompanied by form CRO-3500. An amended form is required for each new election year.

1. Committee Information					
a. Name of Committee			d. ID Number		
Kevin Clark for Kannapolis School Board					
b. Mailing Address (include City, State and Zip Code)			e. Date Organized		
316 Cottage Drive, Kannapolis, NC 28083			12/2015		
c. Committee Website (Optional)			f. Phone Number		
			704-932-6414		
2. Candidate Information					
a. Full Name			e. Party Affiliation		
Kevin Mark Clark			Non Partisan		
b. Mailing Address (include City, State, and Zip Code)			f. Office Sought		
316 Cottage Drive, Kannapolis, NC 28083			Kannapolis Board of Education		
c. Phone Number		d. Email Address		g. Next Election Year	h. Jurisdiction
704-932-6414		kevin.clark2227@gmail.com		2024	KCS District
<input type="checkbox"/> Email copy of report notices					
3. Treasurer Information			4. Assistant Treasurer Information		
a. Full Name			a. Full Name		
Kevin Mark Clark					
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State and Zip Code)		
316 Cottage Drive, Kannapolis, NC 28083					
c. Phone Number		d. Email Address		c. Phone Number	
704-932-6414		kevin.clark2227@gmail.com			
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)					
c. Phone Number		d. Email Address		b. Account Code	
704-932-6414		kevin.clark2227@gmail.com			
<input type="checkbox"/> Email copy of report notices					

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.

<u>Kevin M. Clark</u> Printed Name of Treasurer	 Signature of Appointed Treasurer	<u>12-13-2023</u> Date
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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.

<u>Kevin M. Clark</u> Printed Name of Candidate	 Signature of Candidate	<u>12-13-2023</u> Date
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