Statement of Organization - Candidate Committee

is this stat	ement:
X 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 Inf	The state of the s				
a. Name of Committee				d. ID Number	
Committee to Ele	ct Rob Cerulo				
b. Mailing Address (include City, State and Zip Code)				e. Date Organized	
9884 Flower Bonnet Ave. NW Concord, NC 28027			12/14/2023		
c. Committee Website (Optional)			f. Phone Number		
	But at the Difference of a Difference of a	NA SECTION SEE WILLIAM CONTRACTOR	err was errored the	309-696-1232	
2. Candidate Inf	ormation				
a. Full Name	SECTION TO AN ACCIDED TO A REAL ACTOR	e. Party Affiliation			
Robert Jeffrey Ce	rulo	Democr		crat	
b. Mailing Address (include City, State, and Zip Code)	f. Office Sought			
9884 Flower Bon	net Ave. NW	Board o		d of Education	
Concord, NC 280					
c . Phone Number	d. Email Address	g. Next Election Year	h.	Jurisdiction	
	rob.cerulo1@gmail.com	2024 Cabarrus		Cabarrus County Schools	
☐ Email copy o		a Valvadinena musika	SUCH THE	motion and makes as a little late.	
3. Treasurer Inf a. Full Name	ormation	a. Full Name	4. Assistant Treasurer Information		
	*	a, run ivanic			
Robert Jeffrey Co			N/A RECEIVE		
The second of th	(include City, State, and Zip Code)	b. Mailing Address (include City, State, and Zphode) N-PERSO			
9884 Flower Bor				DEC 2 2 2	
Concord, NC 280	d. Email Address	c. Phone Number	d. Email Ac	ldress :	
		the same to	di Emanti	CABARRUS CO BOARD OF ELE	
309-696-1232	rob.cerulo1@gmail.com				
Send report not	tices by email X Yes No	☐ Email copy of			
	Books Information (Keeper of R	ec 6. Account Inform	ation (ii	ncl. CRO-3500)	
a. Full Name			a. Financial Institution Full Name		
	N/A	Nuharr	Uwharrie Bank		
b. Mailing Address	(include City, State, and Zip Code)	b. Purpose			
		Campaign Account			
c. Phone Number	d. Email Address	b. Account Code	c. Type		
				Charling	
☐ Email copy	of report notices		ř	Checking	
I certify that the	of report notices Committee is in compliance with Statutes and that no funds are con hat this report is complete, true and	nmingled with prohib	ons of Arti	er non-disclosed funds. 1	
Roh (Perulo 16	ar Ceny		[7/22/23] Date	
	Name of Treasurer	Signature of Appointed Tre	asurer	Date	
the duties and re	information above is correct, and sponsibilities imposed upon the ap of the NC General Statutes.	I, as the candidate, ap pointed treasurer and	subject to t	treasurer to personally fulfil the penalties in Article 22A	
100	Name of Candidate	Signature of Candidat		Date	