## **Statement of Organization - Candidate Committee**

Is	this	statement:
V	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	Γh	is f	form m	nust	be accomp	panied	by:	form	CRO	-3500.	An	amended	l f	orm i	s requi	red	fo	or each	new o	election	vear	
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1. Committee Infor	mation								
a. Name of Committee			d. ID Number						
	t Jamie Richardson		39-2899238						
	ude City, State and Zip Code)		e. Date Organized						
1500 LightHouse l	Lane, Kannapolis, NC 28081		06/30/2025						
c. Committee Website (C	Optional)		f. Phone Number						
			805-953-5336						
2. Candidate Inform	nation	Harry Committee on the Committee of the							
a. Full Name		e. Party Affiliation							
Jamie Richardson		Republican							
b. Mailing Address (incl	ude City, State, and Zip Code)	f. Office Sought							
1500 LightHouse I	Lane, Kannapolis, NC 28081	City Council							
c . Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction						
805-953-5336	jamieforkannapolis@gmail.com	2025	Kannapolis						
☐ Email copy of re									
3. Treasurer Inform	nation	4. Assistant Treasurer Information							
a. Full Name		a. Full Name							
Jamie Richardson		P. P.	ÉCEIVED						
b. Mailing Address (incl	lude City, State, and Zip Code)	b. Mailing Address (inc	lunter (Sty) State and Zip Code)						
1500 LightHouse I	Lane, Kannapolis, NC 28081	JUL	0 3 2025						
c. Phone Number	d. Email Address	c. Phone NumberABA							
805-953-5336	jamieforkannapolis@gmail.com	BOARD	OF ELECTIONS						
Send report no		☐ Email copy of re							
5. Custodian of Boo	oks Information (Keeper of Records)	6. Account Informa							
		a. Financial Institution Full Name							
Thomas Richardso		First Bank							
	lude City, State, and Zip Code)								
1500 LightHouse	Lane, Kannapolis, NC 28081								
c. Phone Number	d. Email Address	b. Account Code	с. Туре						
704-724-0228	tomforkannapolis@gmail.com								
Email copy of report notices jamie4ktown Checking									
General Statutes at this report is comp  Jamie Richard:  Printed  I certify that the info	Name of Treasurer Signormation above is correct, and I, as the ca	chibited or other non- mature of Appointed Trea	disclosed funds. I further certify that  7/3/2025  Surer Date  treasurer to personally fulfill the						
duties and responsib 163 of the NC Gene	ilities imposed upon the appointed treasu	rer and subject to the	penalties in Article 22A of Chapter						
Jamie Richards		mu loch	and 500 7/3/2025						
Printed	Name of Candidate	Signature of Candidate	Date						