

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			
Committee to Re-Elect Dianne Berry							
b. Mailing Address (include City, State and Zip Code)				e. Date Organized			
532 China Grove Rd. Kannapolis, NC 28083				7/7/2025			
c. Committee Website (Optional)				f. Phone Number			
				704-699-4800			
2. Candidate Information							
a. Full Name				e. Party Affiliation			
Dianne P. Berry				Non-Partisan			
b. Mailing Address (include City, State, and Zip Code)				f. Office Sought			
532 China Grove Rd. Kannapolis, NC 28083				Council			
c. Phone Number		d. Email Address		g. Next Election Year		h. Jurisdiction	
704-699-4800		dpberry1@carolina.rr.com		2025		City of Kannapolis	
<input type="checkbox"/> Email copy of report notices							
3. Treasurer Information				4. Assistant Treasurer Information			
a. Full Name				a. Full Name			
Dianne P. Berry				N/A			
b. Mailing Address (include City, State, and Zip Code)				b. Mailing Address (include City, State, and Zip Code)			
532 China Grove Rd. Kannapolis, NC 28083							
c. Phone Number		d. Email Address		c. Phone Number		d. Email Address	
704-699-4800		dpberry1@carolina.rr.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			
N/A				N/A			
b. Mailing Address (include City, State, and Zip Code)				b. Purpose			
				JUL 07 2025			
c. Phone Number		d. Email Address		b. Account Code		c. Type	
						RECEIVED	
<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>Dianne P. Berry</u> <u>Dianne P. Berry</u> <u>7-7-2025</u> 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> <u>Dianne P. Berry</u> <u>Dianne P. Berry</u> <u>7-7-2025</u> Printed Name of Candidate Signature of Candidate Date </p>							