Statement of Organization - Candidate Committee

Is	this	staten	ien	t:
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 Info a. Name of Committee	rmation					
a. Manie of Committee				d. ID Number		
Committee to D1				u. ID Number		
Committee to Elect						
b. Mailing Address (in PO Box 883	clude City, State and Zip Code)		e. Date Organized		ed	
Concord, NC 2802	6		7/7/2025		025	
c. Committee Website				f. Phone Number		
				704-819)-5357	
2. Candidate Infor	mation					
a. Full Name		e. Party Affiliation			56.41.392	
Betty Stocks		Non-Partisan				
b. Mailing Address (in	clude City, State, and Zip Code)	f. Office Sought				
PO Box 883			ouncil Mand-	District 2		
Concord, NC 28026	5		ouncil Member	District 5		
c . Phone Number	I. Email Address	g. Next Election Year	h. Ju	risdiction		
	tocks4concordnc@gmail.com	2025		City of Concord		
☐ Email copy of report notices		ļ		19-10 of * 0.000 mode to 1.000 cm -0.00		
3. Treasurer Infor	mation	4. Assistant Treas	urer Inform	ation		
a. Full Name		a. Full Name				
Betty Stocks		N/A				
	clude City, State, and Zip Code)	b. Mailing Address (include City, State, and Zip Code)				
PO Box 883						
Concord, NC 28026		ni v	lin niii			
7 2-11 20 22 10 19 12 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	. Email Address	c. Phone Number	d. Email Add	ress		
704-819-5357 si	tocks4concordnc@gmail.com					
Send report notic	es by email X Yes No	☐ Email copy of	report notice	es		
5. Custodian of Bo	oks Information (Keeper of Rec			. CRO-3500)		
. Full Name		a. Financial Institution	n Full Name	F	RECEI IN-PER	
	N/A	F&M Bank				
. Mailing Address (inc	clude City, State, and Zip Code)	b. Purpose		+75	JUL 1	
			Campaign A	ccount	CABARRUS BOARD OF F	
. Phone Number d.	Email Address	b. Account Code	c. Type		DONNU UF C	
		0		Charleina		
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