

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 Elect Steve Sciascia			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
2265 Sweet Pea Ln. Harrisburg, NC 28075		7/18/2025	
c. Committee Website (Optional)		f. Phone Number	
		704-236-5719	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Steve Sciascia		Non-Partisan	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
2265 Sweet Pea Ln. Harrisburg, NC 28075		Mayor	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
704-236-5719	steve.sciascia@gmail.com	2025	Town of Harrisburg
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Steve Sciascia		N/A	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
2265 Sweet Pea Ln. Harrisburg, NC 28075			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
704-236-5719	steve.sciascia@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	
N/A		N/A	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
c. Phone Number	d. Email Address	b. Account Code	c. Type
<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>Steven Sciascia</u> <u>[Signature]</u> <u>7-18-25</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>Steven Sciascia</u> <u>[Signature]</u> <u>7-18-25</u> Printed Name of Candidate Signature of Candidate Date</p>			