

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 <u>Roger Lee Shelton Jr</u>		d. ID Number <u>RECEIVED</u>	
b. Mailing Address (include City, State and Zip Code) <u>502 East main street Stoneville, NC</u>		e. Date Organized <u>JUL 25 2023 7-25-23</u>	
c. Committee Website (Optional) _____		f. Phone Number <u>336 613 0602</u>	
2. Candidate Information			
a. Full Name <u>Roger Lee Shelton Jr</u>		e. Party Affiliation _____	
b. Mailing Address (include City, State, and Zip Code) <u>502 East main street Stoneville NC 27048</u>		f. Office Sought <u>Town Council of Stoneville NC</u>	
c. Phone Number <u>336 6130602</u>	d. Email Address <u>Jacobshad1980@gmail.com</u>	g. Next Election Year <u>2023</u>	h. Jurisdiction <u>Stoneville</u>
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name _____		a. Full Name _____	
b. Mailing Address (include City, State, and Zip Code) _____		b. Mailing Address (include City, State and Zip Code) _____	
c. Phone Number _____	d. Email Address _____	c. Phone Number _____	d. Email Address _____
Send report notices by email <input 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 _____	
b. Mailing Address (include City, State, and Zip Code) _____		_____	
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>			
Printed Name of Treasurer _____		Signature of Appointed Treasurer _____	
_____		Date _____	
<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>			
Printed Name of Candidate <u>Roger Lee Shelton Jr</u>		Signature of Candidate <u>Roger Lee Shelton Jr</u>	
_____		Date <u>7-25-23</u>	