

# Statement of Organization - Candidate Committee

Amendment

Yes  No

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by forms CRO-3100 and CRO-3500 (when amending, only re-submit if applicable).

<b>1. Committee Information</b>					
a. Full Name				c. ID Number	
Committee to Elect Steve W. Graves Catawba County Board of Commissioners					
b. Mailing Address (include City, State and Zip Code)				d. Date Organized	
Post Office Box 3741 Hickory, NC 28603-3741				10/7/2011	
				e. Phone Number	
				828-612-5800	
<b>2. Candidate Information</b> <input type="checkbox"/> Candidate's Primary Committee					
a. Full Name			e. Candidate ID Number		f. Party Affiliation
Steve Wayne Graves					Republican <small>(Indicate Non-partisan if applicable)</small>
b. Mailing Address (include City, State, and Zip Code)			g. Office Sought		
Post Office Box 3741 Hickory, NC 28603-3741			Catawba County Board of Commissioners		
c. Phone Number	d. Email Address		h. Next Election Year		i. Jurisdiction
828-439-4223	Graves4CCBoC@gmail.com		2012		Catawba County, NC
<input checked="" type="checkbox"/> Email copy of notices					
<b>3. Treasurer Information</b>			<b>4. Custodian of Books Information</b>		
a. Full Name			a. Full Name		
Lisa B. Coffey			Lisa B. Coffey		
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
Post Office Box 3741 Hickory, NC 28603-3741			Post Office Box 3741 Hickory, NC 28603-3741		
c. Phone Number	d. Email Address		c. Phone Number	d. Email Address	
828-612-5800	lcb0724@hotmail.com		828-612-5800	lcb0724@hotmail.com	
I prefer to receive notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Email copy of notices					
<b>5. Assistant Treasurer Information</b>			<b>6. Account Information</b> <small>(incl. CRO-3500)</small>		
a. Full Name			a. Financial Institution Full Name		<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
N/A			First Citizens Bank		
b. Mailing Address (include City, State, and Zip Code)			b. Purpose		
N/A			Political Account		
c. Phone Number	d. Email Address		c. Account Code	d. Type	
N/A			1555R	Checking	
<input type="checkbox"/> Email copy of notices					
<b>CERTIFICATION</b>					
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M 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.					
_____ Lisa B. Coffey Printed Name of Signer			_____ <i>Lisa B. Coffey</i> Signature of Appointed Treasurer		_____ 12/7/2011 Date