

Statement of Organization - Candidate Committee

Amendment
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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).



1. Committee Information	
a. Full Name Re Elect Tom Rowe	c. ID Number 1DU424
b. Mailing Address (include City, State and Zip Code) 827 W 6th St Newton, NC 28658	d. Date Organized 2/24/2015
	e. Phone Number 828-464-0851

2. Candidate Information		<input type="checkbox"/> Candidate's Primary Committee	
a. Full Name Tom Rowe	e. Candidate ID Number 1DU424	f. Party Affiliation Non-Partisan <small>(Indicate Non-partisan if applicable)</small>	
b. Mailing Address (include City, State, and Zip Code) 827 W 6th St Newton, NC 28658	g. Office Sought Newton City Council		
c. Phone Number 828-464-0851	d. Email Address	h. Next Election Year	i. Jurisdiction
<input type="checkbox"/> Email copy of notices			

3. Treasurer Information		4. Custodian of Books Information	
a. Full Name Nancy Rowe	a. Full Name		
b. Mailing Address (include City, State, and Zip Code) 2045 Picnic Dr, Newton, NC 28658	b. Mailing Address (include City, State, and Zip Code)		
c. Phone Number 828-291-4294	d. Email Address	c. Phone Number	d. Email Address

I prefer to receive notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of notices	
5. Assistant Treasurer Information		6. Account Information <small>(incl. CRO-3500)</small>	
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name	a. Financial Institution Full Name Peoples Bank		
b. Mailing Address (include City, State, and Zip Code)	b. Purpose Campaign Account		
c. Phone Number	d. Email Address	c. Account Code TR	d. Type Checking
<input type="checkbox"/> Email copy of notices			

CERTIFICATION

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.

 Tom Rowe
 Printed Name of Signer

 Signature of Appointed Treasurer

 7/20/2015
 Date