

Statement of Organization - Candidate Committee

Amendment	
<input type="checkbox"/> Yes	<input checked="" 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	c. ID Number
Wetmore for Mayor	6DU11D
b. Mailing Address (include City, State and Zip Code)	d. Date Organized
PO Box 2262 Hickory, NC 28603	7/11/2017
	e. Phone Number
	828-612-0415

2. Candidate Information		<input type="checkbox"/> Candidate's Primary Committee	
a. Full Name	e. Candidate ID Number	f. Party Affiliation	
Louis Stanley Wetmore	6DU11D	Non-Partisan <small>(Indicate Non-partisan if applicable)</small>	
b. Mailing Address (include City, State, and Zip Code)	g. Office Sought		
PO Box 2262 Hickory, NC 28603	Mayor		
c. Phone Number	d. Email Address	h. Next Election Year	i. Jurisdiction
828-612-0415	lou@louwetmore.com	2017	Hickory
<input type="checkbox"/> Email copy of notices			

3. Treasurer Information		4. Custodian of Books Information	
a. Full Name	a. Full Name		
Ryan Kelly	N/A		
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City, State, and Zip Code)		
132 30th AVE NW Hickory, NC 28601			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
828-962-9370	kelly.ryanp@gmail.com		

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 (incl. CRO-3500)	
a. Full Name	<input type="checkbox"/> Add <input type="checkbox"/> Remove	a. Financial Institution Full Name	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
N/A		Capital Bank	
b. Mailing Address (include City, State, and Zip Code)	b. Purpose		
	Campaign Account		
c. Phone Number	d. Email Address	c. Account Code	d. Type
		LSW	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.

LOU WETMORE
Printed Name of Signer


Signature of Appointed Treasurer

Date



North Carolina
State Board of Elections
441 N Harrington Street
Raleigh, NC 27603

Kim Westbrook Strach
Executive Director

Mailing Address
PO Box 27255
Raleigh, NC 2761-7255
(919) 733-7173

Certification of Treasurer

This Certification is used by Candidate Committees to appoint a treasurer to the committee. This form is required and must accompany the Candidate's Statement of Organization

FILED BY:

Candidate Name: Louis Stanley Wetmore

Treasurer Name: Ryan Kelly

Treasurer Address: 132 30th AVE NW

(include city, state, & zip) Hickory, NC 28601

Treasurer Phone: 828-962-9370

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

July 11, 2017
Date Signed


Signature

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.



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Candidate Designation of Committee Funds

This form is used by candidate committees only and allows the candidate to designate in the event of their death, how the committee's funds are to be disbursed using the eight allowable methods outlined in 163-278.16B(a).

Candidate Name: Louis Stanley Wetmore
Committee Name: Wetmore for Mayor
Treasurer Name: Ryan Kelly
If Candidate is own treasurer, designate an agent to carry out designations: N/A
Committee ID#: 6DU11D
Level Registered: [State] [County] If county, speci Catawba

I, Louis Stanley Wetmore hereby direct that in the event of my
(Name of Candidate)

death or incapacity all funds remaining in my Campaign Committee account(s) (after payment of permitted outstanding debts or reasonable expenses for winding up the Committee or closing office) be paid in the following manner as permitted by N.C. Gen. Stat. 163-278.16B(a).

<u>Name of Entity</u> (Select from §163-278.16B(a))	<u>Plan for Disbursement (eg. Amount or %)</u>
--	--

- | | |
|---|-------------|
| 1. <u>Catawba County Humane Society</u> | <u>100%</u> |
| 2. _____ | _____ |
| 3. _____ | _____ |

By signing this form, I certify that the foregoing entities are eligible beneficiaries under N.C. Gen. Statute 163-278.16B(a). A copy of this form should be maintained with the Committee records.

Signature of Candidate: *Lou Wetmore*

Date: *July 11, 2017*

Note: This Designation is to be filed with the Election Board where the committee's campaign reports are filed.