Statement of Organization - Candidate Committee

Amendment			
XYes	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

1. Committee Information						
a. Full Name			c. ID Number			
Nathan Hefner for City Council Ward 3						
	lude City, State and Zip Code)			d. Date Organized		
253 5th St SE Hickory, NC 28602				6/27/2019		
,				e. Phone Number		
				828-244-0455		
2. Candidate Infor	mation	V		date's Primary Committee		
a. Full Name		e. Candidate ID Nu	mber	f. Party Affiliation		
Nathan Jeremy Hefner				Non-Partisan (Indicate Non-partican if applicable)		
b. Mailing Address (incl	lude City, State, and Zip Code)	g. Office Sought				
253 5th St SE		City Council				
Hickory, NC 28602		City Cou		Journell		
c . Phone Number	d. Email Address	h. Next Election Yea	ır	i. Jurisdiction		
828-244-0455	njhefner@msn.com	2019 Hickory, Ward #3		Hickory, Ward #3		
X Email copy of						
3. Treasurer Inform	nation	4. Custodian of Books Information				
a. Full Name		a. Full Name				
Jeffrey Vierra		N/A				
	lude City, State, and Zip Code)	b. Mailing Address	b. Mailing Address (include City, State, and Zip Code)			
306 3rd Ave Dr Se Hickory, NC 28602						
c. Phone Number	d. Email Address	c. Phone Number	d. Email A	ddress		
828-328-4381	njhefner@msn.com					
	e notices by email X Yes No	Email copy of notices				
5. Assistant Treasu		6. Account Information (incl. CRO-3500) X Add				
a. Full Name	Remove	a. Financial Institution Full Name Remove				
N/A		State Employees Credit Union				
b. Mailing Address (incl	lude City, State, and Zip Code)	b. Purpose				
			Campaig	n Account		
c. Phone Number	d. Email Address	c. Account Code	d. Type			
		NJH		Checking		
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. Mathematical Printed Name of Signer Pri						



Certification of Treasurer

This Certification is used by Candidate Committees to appoint a treasurer to the committee. This form is

This Cerification is filed at the Board of Elections office where the committee's campaign reports are filed.

FILED BY:

Candidate Name: Nathan Jeremy Hefner

Treasurer Name: Jeffrey Vierra

Treasurer Address: 306 3rd Ave Dr Se

(include city, state, & zip) Hickory, NC 28602

Treasurer Phone: 828-328-4381

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).

Date Signed

ignature



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).

This Designation is filed at the Board of Elections office where the committee's campaign reports are filed.

Candidate Name:	Nathan Jeremy Hefner				
Committee Name:	Nathan Hefner for City Council Ward 3				
Treasurer Name:	Jeffrey Vierra				
If Candidate is own treasurer, designate an agent to carry out designation Heather Dellinger					
Committee ID#:					
Level Registered:	[State] [County] If county, spec	eify: Catawba			
I, Nathan Jeremy Hefner hereby direct that in the event of my 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). Name of Entity Plan for Disbursement (eg. Amount or %)					
1. ASPCA	om §163-278.16B(a))	50%			
2. St Judes		50%			
3.					
		· · · · · · · · · · · · · · · · · · ·			
Gen. Statute 163-278.1 records.		ies are eligible beneficiaries under N.C. ould be maintained with the Committee			
Signature of Candidate: Date:	10/25/19	frit			