

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

Thompson For Commissioner

d. ID Number

~~99-331-1234~~

b. Mailing Address (include City, State and Zip Code)

271st Ave NE, Hickory, NC 28601

e. Date Organized

12/12/19

c. Committee Website (Optional)

f. Phone Number

2. Candidate Information

a. Full Name

Richard Eric Thompson

e. Party Affiliation

Republican

b. Mailing Address (include City, State, and Zip Code)

4170 Holly Circle NE, Concord, NC 28601

f. Office Sought

Concord County Commissioner

c. Phone Number

828-228-2697

d. Email Address

2444
rthompson@charter.net

g. Next Election Year

Local

h. Jurisdiction

Catawba Co

☐ Email copy of report notices

3. Treasurer Information

a. Full Name

David Kern Blanton

4. Assistant Treasurer Information

a. Full Name

b. Mailing Address (include City, State, and Zip Code)

271st Ave NE, Hickory, NC

b. Mailing Address (include City, State and Zip Code)

c. Phone Number

828-324-1830

d. Email Address

dkblanton@charter.net

c. Phone Number

d. Email Address

Send report notices by email ☐ Yes ☐ No

☐ Email copy of report notices

5. Custodian of Books Information (Keeper of Records)

a. Full Name

David K. Blanton, TREAS

6. Account Information (incl. CRO-3500)

a. Financial Institution Full Name

First Citizens Bank

b. Mailing Address (include City, State, and Zip Code)

271st Ave NE, Hickory, NC

Campaign Act

c. Phone Number

828-324-1830

d. Email Address

dkblanton@charter.net

b. Account Code

14561

c. Type

Checking

☐ Email copy of report notices

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.

David Kern Blanton

Printed Name of Treasurer

David K. Blanton

Signature of Appointed Treasurer

12/4/19

Date

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.

Richard Eric Thompson

Printed Name of Candidate

Richard Eric Thompson

Signature of Candidate

12/04/2019

Date



NORTH CAROLINA

STATE BOARD OF ELECTIONS

Certification of Treasurer

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

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

FILED BY:

Candidate Name:

Richard E. Thompson

Treasurer Name:

David K. Blanton

Treasurer Address:

27 1st AVE NE

(include city, state, & zip)

Hickory, NC 28601

Treasurer Phone:

324-1830

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).

12/04/2019
Date Signed

Richard E. Thompson
Signature of Candidate



NORTH CAROLINA

STATE BOARD OF ELECTIONS

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: Richard E. Thompson

Committee Name: Thompson For Commissioner

Treasurer Name: David K. Blanton

If Candidate is own treasurer, designate an agent to carry out designations: _____

Committee ID #: 84-3864148

Level Registered: [State] [County] If county, specify: _____

I, Richard E. Thompson, hereby direct that in the event of my death or incapacity all
(Name of Candidate)
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 (Select from §163-278.16B(a))	Plan for Disbursement (eg. Amount or %)
1. <u>Salvation Army Wilson</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: Richard E. Thompson

Date: 12/04/2019