

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 <u>Committee to Elect Robin Calcutt</u>		d. ID Number <u>7H 42YM</u>	
b. Mailing Address (include City, State and Zip Code) <u>2325 E. Indiana Av. Southern Pines NC 28387</u>		e. Date Organized <u>12/4/2023</u>	
c. Committee Website (Optional)		f. Phone Number <u>910-690-9562</u>	
2. Candidate Information			
a. Full Name <u>Teresa Robin Calcutt</u>		e. Party Affiliation	
b. Mailing Address (include City, State, and Zip Code) <u>2325 E. Indiana Ave Southern Pines NC 28387</u>		f. Office Sought	
c. Phone Number <u>910-690-9562</u>	d. Email Address	g. Next Election Year	h. Jurisdiction
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name <u>Robin Calcutt</u>		a. Full Name	
b. Mailing Address (include City, State, and Zip Code) <u>2325 E. Indiana Ave Southern Pines, NC 28387</u>		b. Mailing Address (include City, State and Zip Code)	
c. Phone Number	d. Email Address <u>robincalcutt4BOE@gmail.com</u>	c. Phone Number	d. Email Address
<input type="checkbox"/> Send report notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of report notices	
5. Custodian of Books Information (Keeper of Records)		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
b. Mailing Address (include City, State, and Zip Code)		b. Account Code	
c. Phone Number	d. Email Address	c. Type	
<input type="checkbox"/> Email copy of report notices			
<p>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.</p> <p><u>Teresa Robin Calcutt</u> Printed Name of Treasurer <u>Teresa Robin Calcutt</u> Signature of Appointed Treasurer <u>12-4-23</u> Date</p> <p>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.</p> <p><u>Robin Calcutt</u> Printed Name of Candidate <u>Robin Calcutt</u> Signature of Candidate <u>12-4-23</u> Date</p>			