

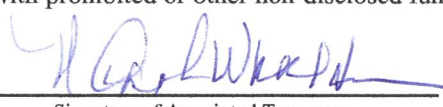
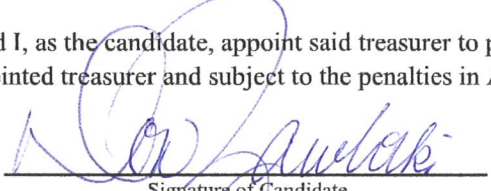
Statement of Organization - Candidate Committee

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 COACH Z 4 SCHOOLS		d. ID Number RECEIVED	
b. Mailing Address (include City, State and Zip Code) 50 LAKE FOREST DR SW, PINEHURST, NC 28374		e. Date Organized DEC 9 0 2023 12/12/2023	
c. Committee Website (Optional) MOORE BOE		f. Phone Number 910-295-6628	
2. Candidate Information			
a. Full Name DONALD IGNATIUS ZAWLOCKI		e. Party Affiliation REPUBLICAN	
b. Mailing Address (include City, State, and Zip Code) 111 PINE BRAE LANE ABERDEEN, NC 28315		f. Office Sought MOORE CO SCHOOL BOARD DIST V	
c. Phone Number 260-610-4170	d. Email Address	g. Next Election Year 2024	h. Jurisdiction MOORE COUNTY
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name N. CAROL WHEELDON		a. Full Name	
b. Mailing Address (include City, State, and Zip Code) 50 LAKE FOREST DR SW PINEHURST, NC 28374		b. Mailing Address (include City, State and Zip Code)	
c. Phone Number 910-295-6628	d. Email Address CWHEELDO2@GMAIL.COM	c. Phone Number	d. Email Address
Send report notices by email <input checked="" 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 N. CAROL WHEELDON		a. Financial Institution Full Name FIRST BANK	
b. Mailing Address (include City, State, and Zip Code) 50 LAKE FOREST DR SW PINEHURST, NC 28374			
c. Phone Number 910-295-6628	d. Email Address CWHEELDO2@GMAIL.COM	b. Account Code A	c. Type CHECKING
<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>N. CAROL WHEELDON Printed Name of Treasurer</p> <p> Signature of Appointed Treasurer</p> <p>12/20/23 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>DONALD IGNATIUS ZAWLOCKI Printed Name of Candidate</p> <p> Signature of Candidate</p> <p>12-20-23 Date</p>			