

# 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	d. ID Number
OSCAR4KIDS	
b. Mailing Address (include City, State and Zip Code)	e. Date Organized
50 LAKE FOREST DR SW, PINEHURST, NC 28374	12/06/2023
c. Committee Website (Optional)	f. Phone Number
	910-295-6628

## 2. Candidate Information

a. Full Name	e. Party Affiliation		
OSCAR CARL ROMINE	REPUBLICAN		
b. Mailing Address (include City, State, and Zip Code)	f. Office Sought		
525 SHAW RD CAMERON, NC 28326	BOARD OF EDUCATION, DIST 1		
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
910-322-0634	OSCAR.ROMINE@YAHOO.COM	2024	MOORE COUNTY
<input type="checkbox"/> Email copy of report notices			

## 3. Treasurer Information

a. Full Name	b. Mailing Address (include City, State and Zip Code)		
N. CAROL WHEELDON	50 LAKE FOREST DR SW PINEHURST, NC 28374		
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
910-295-6628	CWHEELDO2@GMAIL.COM		
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)

a. Full Name	b. Mailing Address (include City, State and Zip Code)		
N. CAROL WHEELDON	50 LAKE FOREST DR SW PINEHURST, NC 28374		
c. Phone Number	d. Email Address	b. Account Code	c. Type
910-295-6628	CWHEELDO2@GMAIL.COM	A	CHECKING
<input type="checkbox"/> Email copy of report notices			

RECEIVED

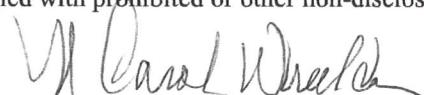
DEC 11 2023

MOORE BOE

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.

N. CAROL WHEELDON

Printed Name of Treasurer



Signature of Appointed Treasurer

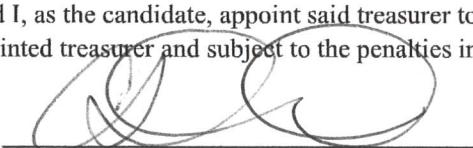
Date

11/11/2023

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.

OSCAR CARL ROMINE

Printed Name of Candidate



Signature of Candidate

Date

11 DEC 23

CRO-2100A

ID 725595

NC State Board of Elections

November 2019