

# 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	Committee to Elect Ann Petersen	d. ID Number
b. Mailing Address (include City, State and Zip Code)	545 Orchard Rd Southern Pines, NC 28387	e. Date Organized
c. Committee Website (Optional)		f. Phone Number
(910) 315-8502		

## 2. Candidate Information

a. Full Name	e. Party Affiliation		
Ann Celenida Petersen	Democrat		
b. Mailing Address (include City, State, and Zip Code)	f. Office Sought		
545 Orchard Rd Southern Pines, NC 28387	Town of Southern Pines Council Member		
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
(910)315-8502	anncpetersen@gmail.com	2025	Town of Southern Pines
<input checked="" type="checkbox"/> Email copy of report notices			

## 3. Treasurer Information

a. Full Name	4. Assistant Treasurer Information		
Clegg David Carpenter	a. Full Name		
b. Mailing Address (include City, State, and Zip Code)	RECEIVED		
565 Orchard Rd, Southern Pines, NC 28387	b. Mailing Address (include City, State and Zip Code)		
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
(910)690-1960	dcarp@me.com		MOORE BOE
<input checked="" type="checkbox"/> 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	6. Account Information (incl. CRO-3500)		
Clegg David Carpenter	a. Financial Institution Full Name		
b. Mailing Address (include City, State, and Zip Code)	First Bank		
565 Orchard Rd Southern Pines, NC 28387			
c. Phone Number	d. Email Address	b. Account Code	c. Type
(910)690-1960	dcarp@me.com		Checking
<input checked="" type="checkbox"/> 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.

Clegg David Carpenter

Printed Name of Treasurer

Clegg David Carpenter

Signature of Appointed Treasurer

07/14/2025

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.

Ann Petersen

Printed Name of Candidate

Ann Petersen

Signature of Candidate

July 14, 2025

Date