

Statement of Organization - Candidate Committee

Amendment
 Yes No

Use this form to create a new or update an existing candidate committee

This form must be accompanied by forms CRO-3100 and CRO-3500

1. Committee Information			
a. Full Name		c. ID Number	
ARNOLD PAUL ASDENTI			
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
P.O. BOX 411 HARKERS ISLAND, NC. 28531		17 JULY 07	
		e. Phone Number	
		(252) 228-5045	
2. Candidate Information		<input type="checkbox"/> Candidate Primary Committee	
a. Full Name		c. Candidate ID Number	d. Party Affiliation
ARNOLD PAUL ASDENTI			
b. Mailing Address (include City, State, and Zip Code)		e. Office Sought	f. Jurisdiction
P.O. BOX 411 HARKERS ISLAND, NC. 28531		SANITARY DISTRICT BOARD HARKERS ISLAND	
(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name		a. Full Name	
ARNOLD PAUL ASDENTI			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
P.O. BOX 411 HARKERS ISLAND, NC 28531			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
(252) 228-5045			
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name		<input type="checkbox"/> Add <input type="checkbox"/> Remove	a. Financial Institution Full Name
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
c. Phone Number	d. Email Address	c. Account Code	d. Type
CERTIFICATION			
I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct.			
ARNOLD PAUL ASDENTI			17 JULY 07
Printed Name of Signer		Signature of Appointed Treasurer	Date