

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		
George Will Ballou					
b. Mailing Address (include City, State and Zip Code)			d. Date Organized		
1611 N Morris Rd Morehead City NC. 28557			7-6-09		
			e. Phone Number		
			252-241-0410		
2. Candidate Information			<input type="checkbox"/> Candidate's Primary Committee		
a. Full Name		c. Candidate ID Number		d. Party Affiliation	
George Will Ballou				Non Partisan	
b. Mailing Address (include City, State, and Zip Code)		e. Office Sought		f. Jurisdiction	
1611 N Morris Rd Morehead City NC. 28557		Commissioner			
		(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		
George W Ballou					
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
1611 N Morris Rd Morehead City NC. 28557					
c. Phone Number	d. Email Address		c. Phone Number	d. Email Address	
252-241-0410	gballou@cmba-gmail.com				
5. Assistant Treasurer Information			6. Account Information (incl. CRO-3500)		
a. Full Name			a. Financial Institution Full Name		
			BIB+T		
b. Mailing Address (include City, State, and Zip Code)			b. Purpose		
			Campaign		
c. Phone Number	d. Email Address		c. Account Code	d. Type	
			A	Checking	
CERTIFICATION					
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M 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.					
George W Ballou				7-6-09	
Printed Name of Signer		Signature of Appointed Treasurer		Date	