

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	
FRANKLIN MAINELL BLUNT			
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
2517 E. FOREST DR NEWPORT, N.C. 28570		7-13-07	
		e. Phone Number	
		223-5025	
2. Candidate Information			<input type="checkbox"/> Candidate's Primary Committee
a. Full Name		c. Candidate ID Number	d. Party Affiliation
FRANKLIN MAINELL BLUNT			
b. Mailing Address (include City, State, and Zip Code)		e. Office Sought	f. Jurisdiction
SAME			
(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	
FRANKLIN MAINELL BLUNT			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
SAME			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name		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.			
FRANKLIN MAINELL BLUNT		Scott M Blunt	
Printed Name of Signer		Signature of Appointed Treasurer	
		Date	