

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	
The Committee to Re-Elect Adele Collins Adele Collins for Board of Education			
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
104 Heron Ct Newport NC 28570		2-8-2010	
		e. Phone Number	
		252-393-1555	
2. Candidate Information		<input type="checkbox"/> Candidate's Primary Committee	
a. Full Name	c. Candidate ID Number	d. Party Affiliation	
Adele Jacqueline Collins		Non Partisan	
b. Mailing Address (include City, State, and Zip Code)	e. Office Sought	f. Jurisdiction	
104 Heron Ct Newport NC 28570	Board of Education	District 1	
		(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		
Michelle Sylvant	 		
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City, State, and Zip Code)		
2202 Cambridge Downs Dr. Morehead City, NC 28557			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
(252) 342-1667b	shellepsylvant@yahoo.com		
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	<input type="checkbox"/> Add <input type="checkbox"/> Remove
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 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.			
Michelle Sylvant		Michelle Sylvant	2/2/10
Printed Name of Signer		Signature of Appointed Treasurer	Date