

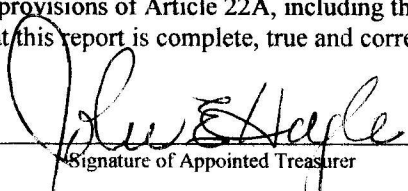

Statement of Organization - Candidate Committee

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	
Citizens to Elect John Hagle			
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
1111 Hammock Lane Beaufort NC 28516		July 7 2007	
		e. Phone Number	
		252-504-3494	
2. Candidate Information		<input type="checkbox"/> Candidate's Primary Committee	
a. Full Name	c. Candidate ID Number	d. Party Affiliation	
John E Hagle	K3YY9N	Non partisan	
b. Mailing Address (include City, State, and Zip Code)	e. Office Sought	f. Jurisdiction	
1111 Hammock Lane Beaufort NC 28516	Beaufort Commissioner	Beaufort NC	
<i>(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)</i>			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name	a. Full Name		
John E Hagle			
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City, State, and Zip Code)		
1111 Hammock Lane Beaufort NC 28516			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
252-504-3494	Haglejp@aol.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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
		Wachovia Bank	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
		Campaign Account	
c. Phone Number	d. Email Address	c. Account Code	d. Type
		A	Checking
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.			
John E Hagle			
Printed Name of Signer		Signature of Appointed Treasurer	Date