

# 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

<b>1. Committee Information</b>			
a. Full Name		c. ID Number	
Nita Gardner Hedreen			
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
8709 Plantation Dr Emerald Isle NC 28594		9 July 2007	
		e. Phone Number	
		252.354.3273	
<b>2. Candidate Information</b>			
<input type="checkbox"/> Candidate's Primary Committee			
a. Full Name		c. Candidate ID Number	d. Party Affiliation
Nita Gardner Hedreen			
b. Mailing Address (include City, State, and Zip Code)		e. Office Sought	f. Jurisdiction
8709 Plantation Dr Emerald Isle NC 28594		Commissioner	Emerald Isle
<i>(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)</i>			
<b>3. Treasurer Information</b>		<b>4. Custodian of Books Information</b>	
a. Full Name		a. Full Name	
Nita Gardner Hedreen		Nita Gardner Hedreen	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
Same		Same	
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
Same	nhedreen@clis.com	Same	
<b>5. Assistant Treasurer Information</b>		<b>6. Account Information</b> (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	b. Purpose
N/A		N/A	
b. Mailing Address (include City, State, and Zip Code)		c. Account Code	
		d. Type	
c. Phone Number	d. Email Address		
<b>CERTIFICATION</b>			
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.			
Nita Gardner Hedreen		Nita Gardner Hedreen	9 July 2007
Printed Name of Signer		Signature of Appointed Treasurer	Date