

Statement of Organization - Candidate Committee

Amendment	
<input type="checkbox"/> Yes	<input type="checkbox"/> 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	
Betsy C. Lane					
b. Mailing Address (include City, State and Zip Code)				d. Date Organized	
P.O. Box 404 SALTER PATH NC 28575				7/8/09	
				e. Phone Number	
2. Candidate Information <input type="checkbox"/> Candidate's Primary Committee					
a. Full Name		c. Candidate ID Number		d. Party Affiliation	
Betsy C. Lane					
b. Mailing Address (include City, State, and Zip Code)		e. Office Sought		f. Jurisdiction	
P.O. Box 404 SALTER PATH NC 28575					
(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		
Betsy C. Lane					
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
P.O. Box 404 SALTER PATH NC 28575					
c. Phone Number	d. Email Address		c. Phone Number	d. Email Address	
5. Assistant Treasurer Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			6. Account Information (incl. CRO-3500) <input type="checkbox"/> Add <input type="checkbox"/> Remove		
a. Full Name			a. Financial Institution Full Name		
N/A			N/A		
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.					
Betsy C. Lane		Betsy C. Lane		7-8/09	
Printed Name of Signer		Signature of Appointed Treasurer		Date	