

Federal Political Committee Statement of Organization

Amendment	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

Use this form to create a new or update an existing North Carolina Federal Political Committee
 This form must be accompanied by form CRO-3500

1. Committee Information			
a. Full Name (and Full Name of Candidate if applicable)		c. NC SBOE ID Number	
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
		e. Phone Number	
2. Parent Entity, Connected Organization, or Affiliated Committee		3. Federal ID Number (FEC ID Number)	
a. Full Name			
b. Mailing Address (include City, State, and Zip Code)		4. Type of Connected Organization	
c. Phone Number		<input type="checkbox"/> Corporation <input type="checkbox"/> Corporation without Capital Stocks <input type="checkbox"/> Labor Organization <input type="checkbox"/> Membership Organization <input type="checkbox"/> Trade Association <input type="checkbox"/> Cooperative	
d. Relationship			
If the treasurer is not a resident of North Carolina, then a North Carolina resident must be appointed as assistant treasurer.			
5. Treasurer Information		6. Custodian of Books Information	
a. Full Name		a. Full Name	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
7. Assistant Treasurer Information		8. Account Information <i>(incl. CRO-3500)</i>	
a. Full Name		a. Financial Institution Full Name	
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<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 is in compliance with all provisions of Article 22A. I further say that this report is complete, true and correct.			
_____		_____	
Printed Name of Signer		Signature of Appointed Treasurer	
		Date	