

# Statement of Organization - Legal Expense Fund

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

Use this form to create a new or update an existing Legal Expense Fund.

This form must be accompanied by form CRO-3500 (when amending, only re-submit if applicable)

<b>1. Fund Information</b>			
a. Full Name		c. ID Number	
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
		e. Phone Number	
f. Purpose			
<b>2. Affiliated Entity Information</b>			
a. Candidate Name		b. Candidate's Political Committee Name	
c. Office Sought/Held		d. Any Other Affiliated Entity	
e. Mailing Address (include, City, State, and Zip Code)			
<b>3. Treasurer Information</b>		<b>4. Custodian of Books Information</b>	
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
I prefer to receive notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of notices	
<b>5. Assistant Treasurer Information</b>		<b>6. Account Information</b> (incl. CRO-3500)	
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
<input type="checkbox"/> Email copy of notices			
<b>CERTIFICATION</b>			
I certify that the Committee is in compliance with all provisions of Article 22M, including that no funds are commingled with candidate committee funds or other non-disclosed funds. I further say that this report is complete, true and correct.			
_____		_____	
Printed Name of Signer		Signature of Appointed Treasurer	
		_____	
		Date	