

COPY

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 (when amending, only re-submit if applicable).

1. Committee Information					
a. Full Name			c. ID Number		
Pick Nick Nelson for Mayor					
b. Mailing Address (include City, State and Zip Code)			d. Date Organized		
110 Rustinburg Ct. Clemmons NC 27012			6/5/13		
			e. Phone Number		
			336 926 9722		
2. Candidate Information <input type="checkbox"/> Candidate's Primary Committee					
a. Full Name		e. Candidate ID Number		f. Party Affiliation	
Nicholas Brett Nelson				N/P	
				(Indicate Non-partisan if applicable)	
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought			
110 Rustinburg Ct Clemmons NC 27012		Mayor Village of Clemmons			
c. Phone Number	d. Email Address	h. Next Election Year		i. Jurisdiction	
336 926 9722	nnelson@clemmons.org	2013		Clemmons	
<input checked="" type="checkbox"/> Email copy of notices					
3. Treasurer Information			4. Custodian of Books Information		
a. Full Name			a. Full Name		
Catherine Hesko Nelson					
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
110 Rustinburg Ct.					
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address		
336 926 9722	nnelson@clemmons.org				
I prefer to receive notices by email <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Email copy of notices					
5. Assistant Treasurer Information			6. Account Information (incl. CRO-3500)		
a. Full Name		<input type="checkbox"/> Add	a. Financial Institution Full Name		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove	Wells Fargo		<input type="checkbox"/> Remove
b. Mailing Address (include City, State, and Zip Code)			b. Purpose		
			Campaign Finance		
c. Phone Number	d. Email Address	c. Account Code	d. Type		
		5678	checking		
<input type="checkbox"/> Email copy of notices					
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.					
Catherine Hesko		Catherine Hesko		6/5/13	
Printed Name of Signer		Signature of Appointed Treasurer		Date	

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North Carolina
State Board of Elections
441 N Harrington Street
Raleigh, NC 27603

Kim Westbrook Strach
Executive Director

Mailing Address
PO Box 27255
Raleigh, NC 27611-7255
(919) 733-7173
Fax: (919) 715-8047

Certification of Treasurer

This Certification is used by Candidate Committees to appoint a treasurer to the committee. This form is required and must accompany the Candidate's Statement of Organization

FILED BY:

Candidate Name: Nickolas Nelson
Treasurer Name: Catherine Herko
Treasurer Address: 110 Rustinburg Ct.
(include city, state, & zip) Clemmons NC 27012

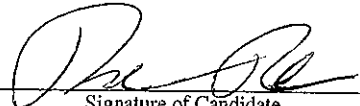
Treasurer Phone: 336 682 3446

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I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

6/5/13
Date Signed


Signature of Candidate

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.