

# 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		
Committee to Elect Sonya <sup>TM</sup> Monica Simmons					
b. Mailing Address (include City, State and Zip Code)			d. Date Organized		
1300 Myrtle Avenue New Bern, NC 28560 (OR) P.O. Box 13714 New Bern, NC 28561			2/1/2014		
			e. Phone Number		
			(252) 671-5439		
2. Candidate Information <input type="checkbox"/> Candidate's Primary Committee					
a. Full Name		e. Candidate ID Number		f. Party Affiliation	
Sonya <sup>TM</sup> Monica <sup>TM</sup> Simmons					
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought			
1300 Myrtle Avenue New Bern, NC 28560		1406 Neuse Blvd. New Bern, NC 28560			
c. Phone Number	d. Email Address	h. Next Election Year		i. Jurisdiction	
(252) 671-5439	cic@suddenlink.net				
<input type="checkbox"/> Email copy of notices					
3. Treasurer Information			4. Custodian of Books Information		
a. Full Name			a. Full Name		
Annette Hooten			Carolyn Williams		
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
1406 Devers Circle New Bern, NC 28560			Moore Avenue New Bern, NC 28562		
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address		
(252) 635-5195		(252) 637-2253			
I prefer to receive notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Email copy of notices					
5. Assistant Treasurer Information			6. Account Information (incl. CRO-3500)		
a. Full Name			a. Financial Institution Full Name		
Janet Cherry					
b. Mailing Address (include City, State, and Zip Code)			b. Purpose		
4521 Camden Square New Bern, NC 28562					
c. Phone Number	d. Email Address	c. Account Code	d. Type		
(252) 474-3161					
<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.					
Annette Hooten		Annette Hooten		2-1-2014	
Printed Name of Signer		Signature of Appointed Treasurer		Date	