

# 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.

<b>1. Committee Information</b>			
a. Full Name		c. ID Number	
Perry Morris Campaign		6 CD 8 A 3	
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
810 Piney Neck Rd Vanceboro, NC 28586		8-8-2010	
		e. Phone Number	
		252-244-0178	
<b>2. Candidate Information</b>		<input type="checkbox"/> Candidate's Primary Committee	
a. Full Name	c. Candidate ID Number	d. Party Affiliation	
Perry Morris		Dem	
b. Mailing Address (include City, State, and Zip Code)	e. Office Sought	f. Jurisdiction	
810 Piney Neck Rd. Vanceboro, NC 28586	County Commissioner District 1	1	
<i>(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)</i>			
<b>3. Treasurer Information</b>		<b>4. Custodian of Books Information</b>	
a. Full Name		a. Full Name	
Perry Morris		n/a	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
810 Piney Neck Rd. Vanceboro, NC 28586			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
252-244-0178	pgmorris@suddenlink.net		
<b>5. Assistant Treasurer Information</b>		<b>6. Account Information</b> <i>(incl. CRO-3500)</i>	
a. Full Name		a. Financial Institution Full Name	
n/a		Wachovia	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
		Campaign	
c. Phone Number	d. Email Address	c. Account Code	d. Type
		1	Checking
<b>CERTIFICATION</b>			
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.			
Perry L. Morris		Perry L. Morris 2-8-10	
Printed Name of Signer		Signature of Appointed Treasurer	
		Date	

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