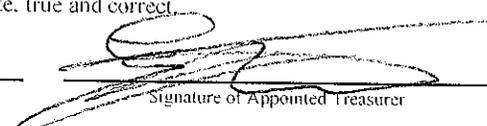


Statement of Organization - Candidate Committee

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	
Egon Lippert		8CDB01	
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
106 Sextant Ct. New Bern, NC 28562		7-14-11	
		e. Phone Number	
		672-0060	
2. Candidate Information			
<input type="checkbox"/> Candidate's Primary Committee			
a. Full Name		e. Candidate ID Number	f. Party Affiliation
Egon Lippert		8CDB01	
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought	
106 Sextant Ct. New Bern, NC 28562		Council Member (River Bend)	
c. Phone Number	d. Email Address	h. Next Election Year	i. Jurisdiction
672-0060		2012	River Bend
<input type="checkbox"/> Email copy of notices			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name		a. Full Name	
Same		N/A	
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			
5. Assistant Treasurer Information		6. Account Information <small>(incl. CRO-3500)</small>	
a. Full Name		a. Financial Institution Full Name	<input type="checkbox"/> Add <input type="checkbox"/> Remove
N/A		N/A	
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			
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.			
EGON LIPPERT			
Printed Name of Signer		Signature of Appointed Treasurer	
		07/14/11	
		Date	