Statement of Organization - Candidate Committee

Amendment

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 Informat	ion			
a. Full Name		c. ID Number		
Carl Schuler for Counci			1HDV8V	
b. Mailing Address (include	City, State and Zip Code)		d. Date Organized	
102 Vintage Drive Chapel Hill, North Caro	lina, 27516		7/20/2017	
		e. Phone Nu		umber
			919-599-5234	
2. Candidate Information		Candidate's P	rimary Com	mittee
a. Full Name		e. Candidate ID Number	f. Party Affiliation	
Carl Schuler			Democratic	
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought		
102 Vintage Drive Chapel Hill, North Carolina, 27516				
c. Phone Number	d. Email Address			
919-599-5234	gocarlschulergo@outlook.com	h. Next Election Year		i. Jurisdiction
M Email copy of notice	S			
3. Treasurer Information		4. Custodian of Books Information		
a. Full Name		a. Full Name		
Carl Schuler				
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)		
102 Vintage Drive Chapel Hill, North Carolina, 27516				
c. Phone Number	d. Email Address	c. Phone Number d. Email Address		
919-599-5234	gocarlschulergo@outlook.com			
I prefer to receive my notices by email Yes No		Email copy of notices		
5. Assistant Treasurer Information Add		6. Account Information (incl. CRO-3500) Add		
a. Full Name Remove		a. Financial Institution Full Name Remove		
b. Mailing Address (include City, State, and Zip Code)		b. Purpose		
c. Phone Number	d. Email Address	c. Account Code		d. Type
☐ Email copy of notices				
CERTIFICATION				
I certify that the Committe	ee or Fund is in compliance with all atutes and that no funds are comming true and correct			
Carl Schuler		1,11 ///		7/20/2017
Printed Name of Signer		CAN CONTRACTOR OF A DECEMBER O		7/28/2017 Date
1 I IIII CU I Vai	are or organica	Signature of Appointed Treasurer		Date