

COPY

Statement of Organization - Candidate Committee

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).

Amendment

☐ Yes

☐ No

1. Committee Information

a. Full Name

ELECT JOHN McDERMON

c. ID Number

OCQV3M

b. Mailing Address (include City, State and Zip Code)

PO BOX 503
RURAL HALL, NC 27045

d. Date Organized

7/8/11

e. Phone Number

336 969 5029

2. Candidate Information

☐ Candidate's Primary Committee

a. Full Name

JOHN NATHAN McDERMON

e. Candidate ID Number

OCQV3M

f. Party Affiliation

Non-Part.

(Indicate Non-partisan if applicable)

b. Mailing Address (include City, State, and Zip Code)

PO BOX 503
RURAL HALL, NC 27045

g. Office Sought

RURAL HALL COUNCILMAN

c. Phone Number

336 969 5029

d. Email Address

john@mcdermon.com

h. Next Election Year

2011

i. Jurisdiction

RURAL HALL

☐ Email copy of notices

3. Treasurer Information

a. Full Name

JOHN N McDERMON

4. Custodian of Books Information

a. Full Name

JOHN N McDERMON

b. Mailing Address (include City, State, and Zip Code)

PO BOX 503
RURAL HALL, NC 27045

b. Mailing Address (include City, State, and Zip Code)

PO BOX 503
RURAL HALL, NC 27045

c. Phone Number

336 969 5029

d. Email Address

john@mcdermon.com

c. Phone Number

336 969 5029

d. Email Address

john@mcdermon.com

I prefer to receive notices by email ☐ Yes ☒ No

☐ Email copy of notices

5. Assistant Treasurer Information

a. Full Name

b. Mailing Address (include City, State, and Zip Code)

c. Phone Number

d. Email Address

☐ Email copy of notices

6. Account Information (incl. CRO-3500)

a. Financial Institution Full Name

~~SUNTRUST~~ N/A

b. Purpose

~~CHECKING~~ N/A

c. Account Code

d. Type

~~CHECKING~~
N/A

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.

JOHN N McDERMON

Printed Name of Signer

John N McDermon

Signature of Appointed Treasurer

7/12/11

Date



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

Kimberly Westbrook-Strach
Deputy Director – Campaign Reporting

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: JOHN NATHAN MCDERMON
Treasurer Name: JOHN N MCDERMON
Treasurer Address: PO BOX 503
(include city, state, & zip) 244 BRITTANY RD
RURAL HALL, NC 27045
Treasurer Phone: 336 969-5029

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).

7/12/11
Date Signed

John N McDermion
Signature of Candidate

RECEIVED

2011 JUL 13 AM 9:56

FORSYTH COUNTY
BOARD OF ELECTIONS

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



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

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Certification of Threshold

This Certification is used to declare or withdraw a committee's intent to raise or spend \$1,000 or less in the current election cycle.

This Certification is only valid for political party committees and candidates for a county office, municipal office, local school board office, soil & water conservation district board of supervisors, or sanitary district board.

FILED BY:

Committee Name: ELECT JOHN MCDERMON
Treasurer Name: JOHN N MCDERMON
Treasurer Address: PO BOX 503
(include city, state, & zip) 244 BRITTANY RD
RURAL HALL, NC 27045
Treasurer Phone: 336 969-5029

Check One:

☒ I certify that this committee intends to neither receive nor expend more than \$1,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$1,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports.

THIS DECLARATION CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.

☐ I am withdrawing my Certification to remain at or under the \$1,000 threshold. I will now be required to file the next scheduled report for all contributions and expenditures that have not been previously reported from the beginning of the current election cycle. I further agree to file all future reports required.

7/12/11
Date Signed

John N McDermott
Signature

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

FORSTYTH COUNTY
BOARD OF ELECTIONS

2011 JUL 13 AM 9:56
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