### 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 Randy Jue Rogers for Commissioner
b. Mailing Address (include City, State and Zip Code) XXX-XX-9989 d. Date Organized PO Boy 337 7/5/19 Bethania NZ 27010 e. Phone Number 336 468-7167 Candidate's Primary Committee 2. Candidate Information f. Party Affiliation a. Full Name e, Candidate ID Number Randy Joe Rogers NOW-Partiso XXX-XX-59E9 (Indicate Non-partisan if applicable) b. Mailing Address (include City, State, and Zip Code) Town Comm. ssione PO Bay 337, Bethania, No. c . Phone Number d. Email Address b. Next Election Year 336.468.7167 Randy R1112 Egmail Bethania Email copy of notices 4. Custodian of Books Information 3. Treasurer Information a. Full Name a. Full Name Randy Toe Roger Randy Jue Kogers b. Mailing Address (include City, State, and Zip Code) b. Mailing Address (include City, State, and Zip Code) POKY 337 POBEN 337 Bothania NC 27010 Battiania NE 27010 2. Phone Number d. Email Address

336 418 Rawy R1112 @ gman . Phone Number d. Email Address c. Phone Number 316 468716 Randy R1112 @ gmail. Yes No Email copy of notices I prefer to receive notices by email 6. Account Information (incl. CRO-3500) Add Add 5. Assistant Treasurer Information a. Financial Institution Full Name Remove Remove . Full Name b. Purpose b. Mailing Address (include City, State, and Zip Code) d. Email Address c. Account Code d. Type r. Phone Number 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. Printed Name of Signer



# North Carolina

#### State Board of Elections

441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

## **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.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

| FILED BY:  |   |
|--|---|
| Committee Name:  | Randy Joe Plagers for town Commissi<br>Randy Jac Pagers   |
| Treasurer Name:  | Rayung Jac Bogers   |
| Treasurer Address:   | PO B & 337<br>Bethania NC 27010   |
| (include city, state, & zip)   | Bethania HC 27010   |
|  |   |
|  |   |
| Treasurer Phone:   | 376.468-7167  |
| election cycle under the pro<br>until the end of the election<br>expenditures during this ele<br>of elections and file require | mittee intends to neither receive nor expend more than \$1,000 during the current occdures set forth in G.S. 163-278.10A. This certification will remain in effect cycle for this committee. If this committee exceeds \$1,000 in contributions or extion cycle, I understand that I must immediately notify the appropriate board d campaign finance reports.  N ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE. |
| to file the next scheduled   | Certification to remain at or under the \$1,000 threshold. I will now be required report for all contributions and expenditures that have not been previously of the current election cycle. I further agree to file all future reports required.   |
| 7/14/19  | Mage  |
| Date Signed  | Signature   |



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### **Certification of Treasurer**

This Certification is used by Candidate Committees to appoint a treasurer for the committee. This form is required and must accompany the Candidate's Statement of Organization.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

| FILED BY:                    |                    |
|------------------------------|--------------------|
| Candidate Name:              | Randy Joe Rogers   |
| Treasurer Name:              | 12 midn Joe 126145 |
| Treasurer Address:           | DO BOX 337         |
| (include city, state, & zip) | Bethania NC 27010  |
|                              | 7                  |
|                              |                    |
| Treasurer Phone:             | 336-468.7167       |
|                              | 336-468.7167       |

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).

7/14/19 Date Signed

Signature of Candidate