

# 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).

<b>1. Committee Information</b>			
a. Full Name The Committee to Elect Scott Andree Bowen		c. ID Number	
b. Mailing Address (include City, State and Zip Code) 659 Brent St. Winston-Salem, NC 27103		d. Date Organized 10/18/2019	
		e. Phone Number 336-416-9669	
<b>2. Candidate Information</b> <input checked="" type="checkbox"/> Candidate's Primary Committee			
a. Full Name Scott Andree Bowen		e. Candidate ID Number	f. Party Affiliation Democrat (Indicate Non-partisan if applicable)
b. Mailing Address (include City, State, and Zip Code) 659 Brent St Winston-Salem, NC 27103		g. Office Sought Winston-Salem City Council	
c. Phone Number 336-416-9669	d. Email Address scottandreebowen4ws@gmail.com	h. Next Election Year 2020	i. Jurisdiction Southwest Ward
<input checked="" type="checkbox"/> Email copy of notices			
<b>3. Treasurer Information</b>		<b>4. Custodian of Books Information</b>	
a. Full Name Nicholas Badgio		a. Full Name Nicholas Badgio	
b. Mailing Address (include City, State, and Zip Code) 454 Corona St. Apt B Winston-Salem, NC 27103		b. Mailing Address (include City, State, and Zip Code) 454 Corona St. Apt B Winston-Salem, NC 27103	
c. Phone Number 704-640-6728	d. Email Address treasurerforscottandreebowen@gmail.com	c. Phone Number 704-640-6728	d. Email Address treasureforscottandreebowen@gmail.c
I prefer to receive notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Email copy of notices	
<b>5. Assistant Treasurer Information</b> <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove		<b>6. Account Information</b> (incl. CRO-3500) <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	
a. Full Name		a. Financial Institution Full Name	
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			
<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.			
Nicholas Badgio Printed Name of Signer		Nicholas Badgio Signature of Appointed Treasurer	
		10/28/2019 Date	