

Statement of Organization - Candidate Committee

Is this statement:

☐ New

☒ Amended

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by form CRO-3500. An amended form is required for each new election year.

1. Committee Information

a. Name of Committee

The Committee to Elect Steve Wood

d. ID Number

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

PO Box 55 Tobaccoville NC 27050

e. Date Organized

3/11/22

c. Committee Website (Optional)

f. Phone Number

336.689.6313

2. Candidate Information

a. Full Name

STEPHEN WRAY WOOD

e. Party Affiliation

Republican

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

PO Box 55 Tobaccoville NC 27050

f. Office Sought

WSFCS Board

c. Phone Number

336.689.6313

d. Email Address

tobytowne@gmail.com

g. Next Election Year

2022

h. Jurisdiction

District 2

☒ Email copy of report notices

3. Treasurer Information

a. Full Name

STEPHEN WRAY WOOD

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

PO Box 55 Tobaccoville NC 27050

c. Phone Number

336.689.6313

d. Email Address

tobytowne@gmail.com

Send report notices by email

☒ Yes ☐ No

5. Custodian of Books Information (Keeper of Records)

a. Full Name

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

c. Phone Number

d. Email Address

☐ Email copy of report notices

4. Assistant Treasurer Information

a. Full Name

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

c. Phone Number

d. Email Address

☐ Email copy of report notices

6. Account Information (incl. CRO-3500)

a. Financial Institution Full Name

Truist Bank

2815 Reynolda Rd
WS NC 27106

b. Account Code

SW 4855

c. Type

Checking

I certify that the Committee is in compliance with all applicable provisions of Article 22A 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.

STEPHEN WRAY WOOD

Printed Name of Treasurer

Signature of Appointed Treasurer

3/22/22

Date

I certify that the information above is correct, and I, as the candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties in Article 22A of Chapter 163 of the NC General Statutes.

STEPHEN WRAY WOOD

Printed Name of Candidate

Signature of Candidate

3/22/22

Date