

Statement of Organization - Candidate Committee

Amendment

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Yes

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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

Chris Thompson for Alderman

c. ID Number

SCQ279

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

PO Box 351 Kernersville NC 27285

d. Date Organized

7/7/2017

e. Phone Number

336-345-3679

2. Candidate Information

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Candidate's Primary Committee

a. Full Name

John Christopher Thompson

e. Candidate ID Number

SCQ279

f. Party Affiliation

Non Partisan

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

PO Box 351 Kernersville NC 27285

g. Office Sought

Kernersville Alderman

c. Phone Number

336-345-3679

d. Email Address

jctchristthompson@gmail.com

h. Next Election Year

2017

i. Jurisdiction

KE

☐ Email copy of notices

3. Treasurer Information

a. Full Name

Kevin Bugg

4. Custodian of Books Information

a. Full Name

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

1325 HWY 66S Suite F
Kernersville NC 27284

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

c. Phone Number

336-996-2681

d. Email Address

kevin@bugginsurance.com

c. Phone Number

d. Email Address

I prefer to receive my notices by email ☒ Yes ☐ No☐ Email copy of notices

5. Assistant Treasurer Information

☐ Add☐ Remove

a. Full Name

6. Account Information (incl. CRO-3500)

☐ Add☐ Remove

a. Financial Institution Full Name

BBandT

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

b. Purpose

Checking Account for Committee

c. Phone Number

d. Email Address

c. Account Code

100

d. Type

Checking

☐ 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.

Kevin Bugg

Printed Name of Signer

Signature of Appointed Treasurer

7/19/2017

Date



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.

FILED BY:

Committee Name: Chris Thompson for Alderman
Treasurer Name: Kevin Bugg
Treasurer Address: 1325 HWY 66S Suite F
(include city, state, & zip) Kernersville NC 27284

Treasurer Phone: 336-996-2681

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 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.

07/19/2017

Date Signed


Signature

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



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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: J. Chris Thompson
Treasurer Name: Kevin Bugg
Treasurer Address: 1325 HWY 66S, Suite F
(include city, state, & zip) Kernersville, NC 27284

Treasurer Phone: 336-996-2681

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).

07/19/17

Date Signed

J. Chris Thompson
Signature of Candidate

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