


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)

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1. Committee Information			
a. Full Name Connor Groce Exploratory Committee		e. ID Number 3-32	
b. Mailing Address (include City, State and Zip Code) 1841 Curraghmore Rd. Clemmons, NC 27012		f. Date Organized 4/23/2018	
		e. Phone Number (336) 831-4233	
2. Candidate Information		Candidate's Primary Committee	
a. Full Name Connor Michael Groce		e. Candidate ID Number	f. Party Affiliation Republican
b. Mailing Address (include City, State, and Zip Code) 1841 Curraghmore Rd. Clemmons, NC 27012		g. Office Sought NC House of Representatives	
c. Phone Number (336) 831-4233	d. Email Address connorgroce33@gmail.com	h. Next Election Year 2020	i. Jurisdiction District 73
<input type="checkbox"/> Email copy of notices			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name Connor Michael Groce		a. Full Name Connor Michael Groce	
b. Mailing Address (include City, State, and Zip Code) 1841 Curraghmore Rd. Clemmons, NC 27012		b. Mailing Address (include City, State, and Zip Code) 1841 Curraghmore Rd. Clemmons, NC 27012	
c. Phone Number (336) 831-4233	d. Email Address connorgroce33@gmail.com	c. Phone Number (336) 831-4233	d. Email Address connorgroce33@gmail.com
I prefer to receive my notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Email copy of notices	
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name BB&T	b. Purpose Checking Account
		c. Account Code 01	d. Type Checking
<input type="checkbox"/> Add <input type="checkbox"/> Remove		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
b. Mailing Address (include City, State, and Zip Code)			
c. Phone Number	d. Email Address		
<input type="checkbox"/> 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.			
Connor Groce Printed Name of Signer		 Signature of Appointed Treasurer	4/23/2018 Date



NORTH CAROLINA

State Board of Elections & Ethics Enforcement

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: Connor Michael Groce
Treasurer Name: Connor Michael Groce
Treasurer Address: 1841 Curraghmore Rd.
(include city, state, & zip) Clemmons, NC 27012
Treasurer Phone: (336) 831-4233

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WISSETH COUNTY
BOARD OF ELECTIONS

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).

4/23/18

Date Signed

Signature of Candidate