

# 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	
COMMITTEE TO RE-ELECT ARCHIE SMITH		94-3422486	
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
13302 QUARTERHORSE RD ROUGEMONT, NC 27572		2-27-2008	
		e. Phone Number	
		919 688 8445	
2. Candidate Information <input type="checkbox"/> Candidate's Primary Committee			
a. Full Name		e. Candidate ID Number	f. Party Affiliation
ARCHIE L. SMITH III		94-3422486	DEMOCRAT <small>(Indicate Non-partisan if applicable)</small>
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought	
13302 QUARTERHORSE RD ROUGEMONT, N.C. 27572		CLERK OF COURT	
c. Phone Number	d. Email Address	h. Next Election Year	i. Jurisdiction
919 688 8445		2018	DURHAM COUNTY
<input type="checkbox"/> Email copy of notices			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name		a. Full Name	
KIM E. ANGLIN, CPA		ARCHIE L. SMITH III	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
3608 SHANNON ROAD SUITE 105 DURHAM NC 27707		13302 QUARTERHORSE RD ROUGEMONT, NC 27572	
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
919 493-2603	Kimebeans2count.com	919 688 8445	
I prefer to receive notices by email <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Email copy of notices			
5. Assistant Treasurer Information		6. Account Information <small>(incl. CRO-3500)</small>	
a. Full Name		a. Financial Institution Full Name	
		PNC BANK	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
		CHECKING-CAMPAIGN FUNDS	
c. Phone Number	d. Email Address	c. Account Code	d. Type
		17165	CHECKING
<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.			
KIM E. ANGLIN <small>Printed Name of Signer</small>		Kim E. Anglin <small>Signature of Appointed Treasurer</small>	2/09/2018 <small>Date</small>

IN PERSON  
 FEB 12 2018