

Statement of Organization - Candidate Committee

Is this statement:
☒ New ☐ Amended

RECEIVED

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.

DEC 16 2019

Beaufort County
Board of Elections

1. Committee Information	
a. Name of Committee Hood Richardson for Commissioner	d. ID Number MOCR2Z
b. Mailing Address (include City, State and Zip Code) 102 Dudley Place, Washington, NC 27889	e. Date Organized 12/14/19
c. Committee Website (Optional) N/A	f. Phone Number

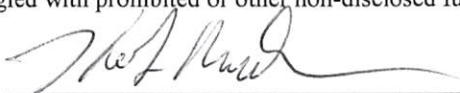
2. Candidate Information			
a. Full Name Hood Lane Richardson		e. Party Affiliation Republican	
b. Mailing Address (include City, State, and Zip Code) 102 Dudley Place, Washington, NC 27889		f. Office Sought County Commissioner	
c. Phone Number 975-3472	d. Email Address hrichardsonpa@embargo.mail.com	g. Next Election Year 2020	h. Jurisdiction County
<input checked="" type="checkbox"/> Email copy of report notices			

3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name Hood L. Richardson		a. Full Name	
b. Mailing Address (include City, State, and Zip Code) 102 Dudley Place, Washington, NC 27889		b. Mailing Address (include City, State, and Zip Code)	
c. Phone Number 975-3472	d. Email Address hrichardsonpa@embargo.mail.com	c. Phone Number	d. Email Address
Send report notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of report notices	

5. Custodian of Books Information (Keeper of Records)		6. Account Information (incl. CRO-3500)	
a. Full Name Hood L. Richardson		a. Financial Institution Full Name None	
b. Mailing Address (include City, State, and Zip Code) 102 Dudley Place, Washington, NC 27889			
c. Phone Number 975-3472	d. Email Address hrichardsonpa@embargo.mail.com	b. Account Code	c. Type
<input checked="" type="checkbox"/> Email copy of report notices			

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.

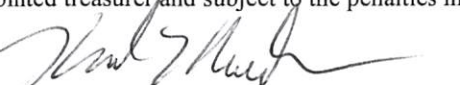
Hood L. Richardson
Printed Name of Treasurer


Signature of Appointed Treasurer

12/14/19
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.

Hood Richardson
Printed Name of Candidate


Signature of Candidate

12/14/19
Date