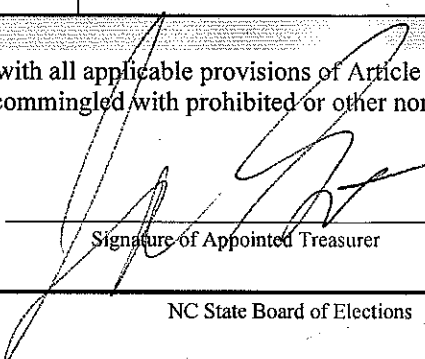


Statement of Organization - Candidate Committee

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.

1. Committee Information			
a. Full Name		c. ID Number	
The Committee to Elect Gordon Smith			
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
108 Hillside St Asheville, NC 28801		01/15/2009	
		e. Phone Number	
		828-712-2610	
2. Candidate Information		<input checked="" type="checkbox"/> Candidate's Primary Committee	
a. Full Name	c. Candidate ID Number	d. Party Affiliation	
Gordon Smith		Nonpartisan	
b. Mailing Address (include City, State, and Zip Code)	e. Office Sought	f. Jurisdiction	
49 Euclid Blvd Asheville, NC 28806	City Council	Municipality	
<i>(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)</i>			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name	a. Full Name		
Joel Schechet	Joel Schechet		
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City, State, and Zip Code)		
108 Hillside St Asheville, NC 28801	108 Hillside St Asheville, NC 28801		
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
828-712-1610	jdschechet@yaho	828-712-1610	jdschechet@yaho
5. Assistant Treasurer Information		6. Account Information <small>(incl. CRO-3500)</small>	
a. Full Name	<input type="checkbox"/> Add <input type="checkbox"/> Remove	a. Financial Institution Full Name	<input type="checkbox"/> Add <input type="checkbox"/> Remove
		Asheville Savings Bank	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
		All checking and banking needs of the campaign.	
c. Phone Number	d. Email Address	c. Account Code	d. Type
		1	Checking
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.			
Joel Schechet Printed Name of Signer		 Signature of Appointed Treasurer	01/15/2009 Date