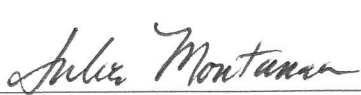


Statement of Organization - Candidate Committee

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	
Re-Elect Robin Cape			
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
334 Stratford Rd Asheville NC 28804		04/11/2009	
		e. Phone Number	
		828-216-4009	
2. Candidate Information		Candidate's Primary Committee	
a. Full Name		c. Candidate ID Number	d. Party Affiliation
Robin Cape			Nonpartisan
b. Mailing Address (include City, State, and Zip Code)		e. Office Sought	f. Jurisdiction
111 Westwood Rd Asheville NC 28801		City Council	Asheville
		<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	
Julie Montanea			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
334 Stratford Rd Asheville NC 28804			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
828-230-1646	JEMontanea@charter.net		
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
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
c. Phone Number	d. Email Address	c. Account Code	d. Type
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.			
Julie Montanea			07/28/2010
Printed Name of Signer		Signature of Appointed Treasurer	Date