

# 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).

<b>1. Committee Information</b>					
a. Full Name			c. ID Number		
COMMITTEE TO ELECT RYAN STONE ALDERMAN			TDH562		
b. Mailing Address (include City, State and Zip Code)			d. Date Organized		
227 PINE STREET BLACK MOUNTAIN, NC 28711			7/6/2011		
			e. Phone Number		
			828-273-5123		
<b>2. Candidate Information</b> <input type="checkbox"/> Candidate's Primary Committee					
a. Full Name		e. Candidate ID Number		f. Party Affiliation	
MATTHEW RYAN STONE		TDH562		NON-PARTISAN (Indicate Non-partisan if applicable)	
b. Mailing Address (include City, State, and Zip Code)			g. Office Sought		
227 PINE STREET BLACK MOUNTAIN NC, 28711			ALDERMAN - TOWN OF BLACK MOUNTAIN		
c. Phone Number	d. Email Address	h. Next Election Year		i. Jurisdiction	
828-273-5123	STONE@GMAIL.COM				
<input type="checkbox"/> Email copy of notices					
<b>3. Treasurer Information</b>			<b>4. Custodian of Books Information</b>		
a. Full Name			a. Full Name		
RICHARD B STONE JR					
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
210 PINE ST. BLACK MTN, N.C, 28711					
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address		
(828) 724-1715					
I prefer to receive notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Email copy of notices		
<b>5. Assistant Treasurer Information</b>			<b>6. Account Information</b> (incl. CRO-3500)		
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		
<input type="checkbox"/> Email copy of notices					
<b>CERTIFICATION</b>					
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.					
Richard B Stone		Richard Stone		10/09/11	
Printed Name of Signer		Signature of Appointed Treasurer		Date	



North Carolina  
 State Board of Elections  
 506 N Harrington Street  
 Raleigh, NC 27603

Kimberly Westbrook-Strach  
 Deputy Director – Campaign Reporting

Mailing Address  
 PO Box 27255  
 Raleigh, NC 27611-7255  
 (919) 733-7173  
 Fax: (919) 715-8047

**Certification of Treasurer**

This Certification is used by Candidate Committees to appoint a treasurer to the committee. This form is required and must accompany the Candidate's Statement of Organization

**FILED BY:**

Candidate Name: MATTHEW RYAN STONE

Treasurer Name: RICHARD B. STONE, JR.

Treasurer Address: 210 PINE STREET  
 (include city, state, & zip) BLACK MOUNTAIN, NC 28711

Treasurer Phone: (828)-774-1715

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).

10/10/2004  
 Date Signed

[Signature]  
 Signature of Candidate

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.



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**Certification of Threshold**

This Certification is used to declare or withdraw a committee's intent to raise or spend \$1,000 or less in the current election cycle.

This Certification is only valid for political party committees and candidates for a county office, municipal office, local school board office, soil & water conservation district board of supervisors, or sanitary district board.

**FILED BY:**

Committee Name: COMMITTEE TO ELECT RYAN STONE - ALDERMAN

Treasurer Name: BURT STONE

Treasurer Address: 210 PINE ST  
(include city, state, & zip) BLACK MTN. N.C. 28711

Treasurer Phone: (828) 774-1715

Check ~~One~~  I certify that this committee intends to neither receive nor expend more than \$1,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$1,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports.  
THIS DECLARATION CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.

I am withdrawing my Certification to remain at or under the \$1,000 threshold. I will now be required to file the next scheduled report for all contributions and expenditures that have not been previously reported from the beginning of the current election cycle. I further agree to file all future reports required.

10 09 11  
Date Signed

BURT STONE  
Signature

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.