

# Statement of Organization - Candidate Committee

Is this statement:  
 New  Amended

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.

<b>1. Committee Information</b>			
a. Name of Committee	d. ID Number		
Taylor for Mayor (formerly Taylor Clement for Town Council)			
b. Mailing Address (include City, State and Zip Code)	e. Date Organized		
115 NE Broad Street, Southern Pines, NC 28387	07/02/2021		
c. Committee Website (Optional)	f. Phone Number		
www.TaylorClement.com	910-227-9251		
<b>2. Candidate Information</b>			
a. Full Name	e. Party Affiliation		
Taylor Clement	N/A		
b. Mailing Address (include City, State, and Zip Code)	f. Office Sought		
115 NE Broad Street Southern Pines, NC 28387	Mayor		
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
910-227-9251	Taylor.SoPines@gmail.com	2023	Southern Pines
<input checked="" type="checkbox"/> Email copy of report notices			
<b>3. Treasurer Information</b>		<b>4. Assistant Treasurer Information</b>	
a. Full Name	a. Full Name		
Frank Thigpen	Taylor Clement		
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City, State and Zip Code)		
300 Pinehurst Ave Southern Pines, NC 28387	115 NE Broad Street Southern Pines, NC 28387		
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
910-585-6518	frank@thigjenkins.com	910-227-9251	taylor.sopines@gmail.com
<input checked="" type="checkbox"/> Send report notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Email copy of report notices	
<b>5. Custodian of Books Information (Keeper of Records)</b>		<b>6. Account Information (incl. CRO-3500)</b>	
a. Full Name	a. Financial Institution Full Name		
	First Bank of North Carolina		
b. Mailing Address (include City, State, and Zip Code)	205 SE Broad Street Southern Pines, NC 28387		
c. Phone Number	d. Email Address	b. Account Code	c. Type
		1	Business Checking
<input 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.			
Frank Thigpen Printed Name of Treasurer		 JUN 14 2023 Signature of Appointed Treasurer	
		06/13/2023 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.			
MOORE BOE Taylor G. Clement Printed Name of Candidate		 Signature of Candidate	
		06/13/2023 Date	