

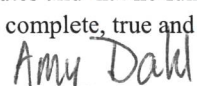

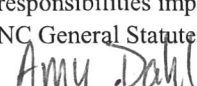
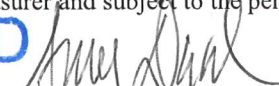
Statement of Organization - Candidate Committee

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.

1. Committee Information			
a. Name of Committee Amy 4 Moore Schools		d. ID Number	
b. Mailing Address (include City, State and Zip Code) 625 Black Hawk Road, Vass, NC 28394		e. Date Organized 12-24-2023	
c. Committee Website (Optional) amy4mooreschools.com		f. Phone Number 910 639-7479	
2. Candidate Information			
a. Full Name Amy Frost Dahl		e. Party Affiliation Unaffiliated	
b. Mailing Address (include City, State, and Zip Code) 625 Black Hawk Road, Vass NC 28394		f. Office Sought Board of Education District I	
c. Phone Number 910 639 7479	d. Email Address amy@amy4mooreschools.com	g. Next Election Year 2024	h. Jurisdiction District I Moore County
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name Amy Frost Dahl		a. Full Name Ruth Pedersen	
b. Mailing Address (include City, State, and Zip Code) 625 Black Hawk Rd, Vass, NC 28394		b. Mailing Address (include City, State and Zip Code) 232 Fire Ln, Vass NC 28394	
c. Phone Number 910 639-7479	d. Email Address amy@amy4mooreschools.com	c. Phone Number 910 695-5238	d. Email Address ruthdahl22@gmail.com
Send report notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Email copy of report notices	
5. Custodian of Books Information (Keeper of Records)		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name State Employees' Credit Union	
b. Mailing Address (include City, State, and Zip Code)			
c. Phone Number	d. Email Address	b. Account Code	c. Type Checking
<input type="checkbox"/> Email copy of report notices			
<p>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.</p> <p>  Printed Name of Treasurer  Signature of Appointed Treasurer 12-28-2023 Date </p> <p> 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. </p> <p>  Printed Name of Candidate  Signature of Candidate 12-28-2023 Date </p>			

CRO-2100A

DEL 2 NC State Board of Elections

November 2019

MOORE BOE