

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	d. ID Number	
Amy 4 Moore Schools		
b. Mailing Address (include City, State and Zip Code)	e. Date Organized	
625 Black Hawk Road, Vass, NC 28394	12-24-2023	
c. Committee Website (Optional)	f. Phone Number	
amy4mooreschools.com	910 639-7479	

2. Candidate Information

a. Full Name	e. Party Affiliation		
Amy Frost Dahl	Unaffiliated		
b. Mailing Address (include City, State, and Zip Code)	f. Office Sought		
625 Black Hawk Road, Vass NC 28394	Board of Education District I		
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
910 639 7479	amy@amy4mooreschools.com	2024	District I Moore County
<input type="checkbox"/> Email copy of report notices			

3. Treasurer Information

a. Full Name	b. Mailing Address (include City, State and Zip Code)		
Amy Frost Dahl	232 Fire Ln, Vass NC 28394		
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
910 639-7479	amy@amy4mooreschools.com	910 695-5238	ruthdahl22@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	

5. Custodian of Books Information (Keeper of Records)

a. Full Name	b. Mailing Address (include City, State, and Zip Code)		
	State Employees' Credit Union		
c. Phone Number	d. Email Address	b. Account Code	c. Type
			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.

Amy Dahl

Printed Name of Treasurer

Signature of Appointed Treasurer

12-28-2023

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.

Amy Dahl

Printed Name of Candidate

RECEIVED

Signature of Candidate

12-28-2023

Date