

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
LYDIA FOR COUNCIL	
b. Mailing Address (include City, State and Zip Code)	e. Date Organized
35 MCMICHAEL DRIVE, PINEHURST, NC 28374	JULY 14, 2025
c. Committee Website (Optional)	f. Phone Number
www.Lydia4Council.com	910-528-4405

2. Candidate Information

a. Full Name	e. Party Affiliation		
LYDIA OWEN BOESCH	REP		
b. Mailing Address (include City, State, and Zip Code)	f. Office Sought		
35 MCMICHAEL DRIVE PINEHURST, NC 28374	PINEHURST VILLAGE COUNCIL		
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
910-528-4405	LydiaforCouncil@gmail.com	2025	
<input type="checkbox"/> Email copy of report notices			

3. Treasurer Information

a. Full Name	b. Mailing Address (include City, State and Zip Code)		
LYDIA OWEN BOESCH	35 MCMICHAEL DRIVE PINEHURST, NC 28374		
c. Phone Number	d. Email Address	e. Phone Number	f. Email Address
910-528-4405	LydiaforCouncil@gmail.com		
Send report notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of report notices	

5. Custodian of Books Information (Keeper of Records)

a. Full Name	b. Financial Institution Full Name		
LYDIA OWEN BOESCH	FIRST BANK		
b. Mailing Address (include City, State, and Zip Code)	JUL 28 2025		
35 MCMICHAEL DRIVE PINEHURST, NC 28374			
c. Phone Number	d. Email Address	b. Account Code	c. Type
910-528-4405	LydiaforCouncil@gmail.com	1A	CHECKING
<input checked="" type="checkbox"/> Email copy of report notices			

RECEIVED

MOORE BOE

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.

LYDIA OWEN BOESCH

Printed Name of Treasurer

Lydia Boesch

Signature of Appointed Treasurer

7/25/25

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.

LYDIA BOESCH

Printed Name of Candidate

Lydia Boesch

Signature of Candidate

7/25/25

Date