

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	
JERAMY HOOPER FOR PINEHURST COUNCIL			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
PO BOX 5187, PINEHURST, NC		7/18/25	
c. Committee Website (Optional)		f. Phone Number	
www.hooperforpinehurst.com		910-603-1901	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
JERAMY HOOPER		REPUBLICAN	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
5 McDonald Rd W, PINEHURST NC 28374		PINEHURST VILLAGE COUNCIL	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
910-603-1901	jeramy.hooper@gmail.com	2025	
<input checked="" type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
BECKY MANNING			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
40 Beddington Lane Carthage, NC 28327			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
2406919527	manningbecky3@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)		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
		WELLS FARGO	
b. Mailing Address (include City, State, and Zip Code)			
c. Phone Number	d. Email Address	b. Account Code	c. Type
			SEP 23 2025
<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><u>Becky Manning</u> _____ <u>8/30/25</u></p> <p>Printed Name of Treasurer Signature of Appointed Treasurer 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><u>JERAMY HOOPER</u> _____ <u>8/29/25</u></p> <p>Printed Name of Candidate Signature of Candidate Date</p>			

RECEIVED

MOORE BOE