

Statement of Organization - Candidate Committee

Amendment
 Yes No

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by forms CRO-3100 and CRO-3500 (when amending, only re-submit if applicable).

1. Committee Information			
a. Full Name		c. ID Number	
JOSEPH PAUL BUCHANAN		DZYKCV	
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
402 GREY LAG LANE SWANSBORO, NC 28584		11-12-15	
		e. Phone Number	
		910-330-8407	
2. Candidate Information <input type="checkbox"/> Candidate's Primary Committee			
a. Full Name		e. Candidate ID Number	f. Party Affiliation
JOSEPH PAUL BUCHANAN		DZYKCV	REP <small>(Indicate Non-partisan if applicable)</small>
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought	
402 GREY LAG LANE SWANSBORO, NC 2884		ONslow COUNTY COMMISSIONER	
c. Phone Number	d. Email Address	h. Next Election Year	i. Jurisdiction
910 330-8407	JBUCHANAN6@cc.nc.com	2016	ONslow
<input checked="" type="checkbox"/> Email copy of notices			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name		a. Full Name	
JOSEPH PAUL BUCHANAN			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
402 GREY LAG LANE SWANSBORO, NC 28584			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
910 330-8407	JBUCHANAN6@cc.nc.com		
I prefer to receive notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Email copy of notices			
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name <input type="checkbox"/> Add <input type="checkbox"/> Remove		a. Financial Institution Full Name <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	
		FIRST CITIZENS BANK	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
		CAMPAIGN	
c. Phone Number	d. Email Address	c. Account Code	d. Type
			CHECKING
<input type="checkbox"/> Email copy of notices			
CERTIFICATION			
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M 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.			
JOSEPH PAUL BUCHANAN Printed Name of Signer		Joseph Paul Buchanan Signature of Appointed Treasurer	
		11-12-15 Date	



North Carolina
 State Board of Elections
 441 N Harrington Street
 Raleigh, NC 27603

Kim Westbrook Strach
 Executive Director

Mailing Address
 PO Box 27255
 Raleigh, NC 27611-7255
 (919) 733-7173

Certification to Return to Active Status

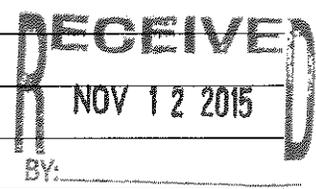
This Certification is used by Candidate, Party, PACs and Referendum Committees which have previously filed the Certification of Inactive Status and now wish to return to an active status.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

FILED BY:

Committee Name: PAUL BUCHANAN FOR COUNTY COMMISSIONER
 Treasurer Name: JOSEPH PAUL BUCHANAN
 Treasurer Address: 402 GREY LAG LANE
 (include city, state, & zip) SWANSBORO, NC 28584

 Treasurer Phone: 910-330-8407



I certify that the above named candidate/political committee, which has been of **inactive status** and exempt from filing disclosure reports, intends to accept contributions and/or make expenditures. This intention of activity alters the status of the above named candidate/political committee to **active status** and requires such committee to begin filing disclosure on the appropriate schedule. All contributions received and/or expenditures made that have not been previously reported will be disclosed on the next scheduled report and all subsequent reports will be filed as scheduled. An amended Statement of Organization (CRO-2100 A-G) must accompany this form.

11-12-15
 Date Signed

Joseph Paul Buchanan
 Signature