

Statement of Organization - Political Action Committee

Use this form to create a new or update an existing political action committee (PAC).
 This form must be accompanied by form CRO-3500.

RECEIVED
 SEP 29 2016
 BY: _____

Amendment
 Yes No

1. Committee Information			
a. Full Name Concerned Citizens of Eastern NC		c. ID Number EW 81-1617562	
b. Mailing Address (include City, State and Zip Code) 521 New Bridge Street Jacksonville, North Carolina 28540		d. Date Organized 2/29/2016	
		e. Phone Number 910-548-3971	
2. Political Action Committee Information		3. Connected Organization or Affiliated Committee	
a. Category (Check only one)		a. Full Name	
<input type="checkbox"/> Banking/Finance <input type="checkbox"/> Legal <input type="checkbox"/> Building/Real Estate <input type="checkbox"/> Manufacturing <input type="checkbox"/> Conservative/Liberal <input type="checkbox"/> Minority <input type="checkbox"/> Environment <input type="checkbox"/> Political Party not part of Party <input type="checkbox"/> Get Out the Vote <input type="checkbox"/> Plan of Org. <input type="checkbox"/> Health <input type="checkbox"/> Religious <input type="checkbox"/> Information Technology / <input type="checkbox"/> Trade Telecommunications <input type="checkbox"/> Utilities <input type="checkbox"/> Insurance <input checked="" type="checkbox"/> Other / Not listed		b. Mailing Address (include City, State, and Zip Code)	
b. Type (Check only one)		c. Phone Number	d. Relationship
<input type="checkbox"/> Parent Entity <input type="checkbox"/> Economic Interest <input checked="" type="checkbox"/> Political Purpose		d. Member Definition	
c. Definition of Type			
4. Treasurer Information		5. Custodian of Books Information	
a. Full Name Louis William Sewell		a. Full Name Louis William Sewell	
b. Mailing Address (include City, State, and Zip Code) 521 New Bridge Street Jacksonville, NC 28540		b. Mailing Address (include City, State, and Zip Code) 521 New Bridge Street Jacksonville, NC 28540	
c. Phone Number 910-548-3971	d. Email Address bsewell@platinumcorral.com	c. Phone Number 910-548-3971	d. Email Address bsewell@platinumcorral.com
6. Assistant Treasurer Information		7. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
		The Little Bank	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
		PAC Checking Account	
c. Phone Number	d. Email Address	c. Account Code	d. Type
		C	Checking Account
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.			
_____ Louis W Sewell Printed Name of Signer		_____ Louis W Sewell Signature of Appointed Treasurer	
		_____ 2/29/2016 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

Confidential

Certification of Financial Account Information

This Certification is used to report confidential bank account information for all financial accounts established by the committee and must accompany the Statement of Organization Form.

FILED BY:

Committee Name: Concerned Citizens of Eastern NC
 Treasurer Name: Louis William Sewell
 Treasurer Address: 521 New Bridge Street
 (include city, state, & zip) Jacksonville, North Carolina 28540
 Treasurer Phone: 910-548-3971

I certify that the information provided below is true and accurate. I am providing all account information for the above named Committee. These account numbers include all bank accounts utilized, credit card accounts, money market or savings accounts, or any other financial account used for any purpose by the Committee.

The information provided on this form is considered confidential and is not subject to public disclosure. The information provided is only used for the purposes of an audit or investigation or as required by a court of competent jurisdiction. **Each treasurer (or candidate) must designate below an account code (any number or letter or combination of numbers and letters) by which to refer to the account number on reports.** If an account number is used as the "account code," confidentiality of the account number is presumed to have been waived.

The treasurer shall maintain all moneys of the political committee in a bank account or bank accounts used exclusively by the political committee and shall not commingle those funds with any other moneys.

Type of account	Financial Institution	Address	Account Number	Account Code
Checking	The Little Bank	118 Western Blvd. Jacksonville, NC 28546	2040010965	C

By signing this statement, I authorize agents of the State Board of Elections to inspect all accounts provided.

2/29/2016

Date Signed

Louis William Sewell

Signature of Candidate or Treasurer

For Candidate Committees Only

- In lieu of providing account information, I certify that this committee will not raise any money nor spend any money except that which is the candidate's personal funds. I furthermore understand that an audit or investigation could warrant the probe of any personal bank account that is being used for campaign expenditures.

By signing this statement, I authorize agents of the State Board of Elections to inspect applicable accounts.

Date Signed

Signature of Candidate or Treasurer



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Kim Westbrook Strach
Executive Director

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PO Box 27255
Raleigh, NC 27611-7255
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Additional account numbers:

Type of Account	Financial Institution	Address	Account Number	Account Code

2/29/16
Date Signed

Kim Westbrook Strach
Signature of Candidate or Treasurer

**Political Organization
Notice of Section 527 Status**

Part I General Information

1 Name of organization

Concerned Citizens of Eastern NC

Employer identification number

81 - 1617562

2 Mailing address (P.O. box or number, street, and room or suite number)

521 New Bridge Street

City or town, state, and ZIP code

Jacksonville, NC 28540 -

3 Check applicable box: Initial notice Amended notice Final notice

4a Date established

02/29/2016

4b Date of material change

02/29/2016

5 E-mail address of organization

Bsewell@platinumcorrall.com

6a Name of custodian of records

Louis W. Sewell

6b Custodian's address

521 New Bridge Street
Jacksonville, NC 28540 -

7a Name of contact person

Louis W. Sewell

7b Contact person's address

521 New Bridge Street
Jacksonville, NC 28540 -

8 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number

521 New Bridge Street

City or town, state, and ZIP code

Jacksonville, NC 28540 -

9a Election authority

NONE

9b Election authority identification number

Part II Notification of Claim of Exemption From Filing Certain Forms (see instructions)

10a Is this organization claiming exemption from filing Form 8872, Political Organization Report of Contributions and Expenditures, as a qualified state or local political organization? Yes No

10b If 'Yes,' list the state where the organization files reports: NC

11 Is this organization claiming exemption from filing Form 990 (or 990-EZ), Return of Organization Exempt from Income Tax, as a caucus or associations of state or local officials? Yes No

Part IV List of All Related Entities (see instructions)

13 Check if the organization has no related entities

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14a Name of related entity	14b Relationship	14c Address
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Part V List of All Officers, Directors, and Highly Compensated Employees (see instructions)

15a Name	15b Title	15c Address
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Louis W. Sewell	Treasurer	521 New Bridge Street Jacksonville, NC 28540 -
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Under penalties of perjury, I declare that the organization named in Part I is to be treated as a tax-exempt organization described in section 527 of the Internal Revenue Code, and that I have examined this notice, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that I am the official authorized to sign this report, and I am signing by entering my name below.

Louis W. Sewell

02/29/2016

Sign Here

▶ Louis W. Sewell

Name of authorized official

▶ 2/29/16

Date

Part III Purpose**12 Describe the purpose of the organization**

To support issues to improve Onslow County and Eastern NC.

EIN Assistant

Your Progress: 1. Identity ✓ 2. Authenticate ✓ 3. Addresses ✓ 4. Details ✓ 5. EIN Confirmation

Congratulations! The EIN has been successfully assigned.

EIN Assigned: 81-1617562

Legal Name: **CONCERNED CITIZENS OF EASTERN NC**

The confirmation letter will be mailed to the applicant. This letter will be the applicant's official IRS notice and will contain important information regarding the EIN. Allow up to 4 weeks for the letter to arrive by mail.

We strongly recommend you print this page for your records.

Click "Continue" to get additional information about using the new EIN.

[Continue >>](#)

Help Topics

- Can the EIN be used before the confirmation letter is received?