

# COPY

## 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).

<b>1. Committee Information</b>					
a. Full Name				c. ID Number	
Check Chuck For Clemmons					
b. Mailing Address (include City, State and Zip Code)				d. Date Organized	
175 Nottidge Court Clemmons NC 27012				5-21-13	
				e. Phone Number	
				336 766-7178	
<b>2. Candidate Information</b>					
<input type="checkbox"/> Candidate's Primary Committee					
a. Full Name		e. Candidate ID Number		f. Party Affiliation	
Earl Charles Houska					
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought			
175 Nottidge Court Clemmons NC 27012		Mayor			
c. Phone Number	d. Email Address	h. Next Election Year		i. Jurisdiction	
	cheuska@yaho.com	2013		Forsyth	
<input checked="" type="checkbox"/> Email copy of notices					
<b>3. Treasurer Information</b>			<b>4. Custodian of Books Information</b>		
a. Full Name			a. Full Name		
John D. Couch, Jr. CPA, CVA			Ronnie W. Willard		
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
3069 Trenwest Drive, Suite 101 Winston-Salem, NC 27103			910 Salem Glen Court Clemmons, NC 27012		
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address		
336 768-3438	johnapa@crunchioslyn.com	336 413-1196	Ronwillard@Salemglenn.net		
I prefer to receive notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Email copy of notices					
<b>5. Assistant Treasurer Information</b>			<b>6. Account Information (incl. CRO-3500)</b>		
a. Full Name			a. Financial Institution Full Name		
b. Mailing Address (include City, State, and Zip Code)			b. Purpose		
c. Phone Number	d. Email Address	c. Account Code	d. Type		
<input type="checkbox"/> Email copy of notices					
<b>CERTIFICATION</b>					
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.					
Earl Charles Houska		Earl Charles Houska		6-18-13	
Printed Name of Signer		Signature of Appointed Treasurer		Date	

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2013 JUN 18 AM 8:55



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

2013 JUN 18 AM 8:55

RECEIVED

Kim Westbrook Strach  
Executive Director

Mailing Address  
PO Box 27255  
Raleigh, NC 27611-7255  
(919) 733-7173  
Fax: (919) 715-8047

### Certification of Treasurer

This Certification is used by Candidate Committees to appoint a treasurer to the committee. This form is required and must accompany the Candidate's Statement of Organization

#### FILED BY:

Candidate Name:

Earl Charles Housler

Treasurer Name:

John D. Crouch

Treasurer Address:

3069 Trewest Dr. Suite 101

(include city, state, & zip)

Winston-Salem, NC 27103

Treasurer Phone:

336-768-3438

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

6.18.13

Date Signed

Earl C. Housler

Signature of Candidate

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.