

# 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
Paula McCoy 4 NEW		1
b. Mailing Address (include City, State and Zip Code)		e. Date Organized
361 Ivy Park Lane, Winston-Salem, NC 27104		11/02/2023
c. Committee Website (Optional)		f. Phone Number
paulamccoy4new.com		336-757-2286

## 2. Candidate Information

a. Full Name		e. Party Affiliation	
Paula Joan McCoy		Democrat	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
4636 Old Baux Mountain Road Winston-Salem, NC 27105		City Council Northeast Ward	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
336-575-6099	paula4new@gmail.com	2024	Northeast Ward
<input checked="" type="checkbox"/> Email copy of report notices			

## 3. Treasurer Information

a. Full Name	
Jennifer Casey	
b. Mailing Address (include City, State, and Zip Code)	
361 Ivy Park Lane, Winston-Salem, NC 27104	
c. Phone Number	d. Email Address
336-813-3214	jc829168@gmail.com

## 4. Assistant Treasurer Information

a. Full Name	
b. Mailing Address (include City, State and Zip Code)	
c. Phone Number	d. Email Address

Send report notices by email  Yes  No

Email copy of report notices

## 5. Custodian of Books Information (Keeper of Records)

a. Full Name	
b. Mailing Address (include City, State, and Zip Code)	
c. Phone Number	d. Email Address
<input type="checkbox"/> Email copy of report notices	

## 6. Account Information (incl. CRO-3500)

a. Financial Institution Full Name	
Truiliant Federal Credit Union	
b. Account Code	c. Type
PM4N2020	Checking

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.

Jennifer Casey

Printed Name of Treasurer

*Jennifer Casey*  
Signature of Appointed Treasurer

01/17/2024

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.

Paula McCoy

Printed Name of Candidate

*Paula McCoy*  
Signature of Candidate

01/17/2024

Date

CRO-2100A

NC State Board of Elections

November 2019