

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
Park for Mayor	
b. Mailing Address (include City, State and Zip Code)	e. Date Organized
510 11th Av PI NW, Hickory, NC 28601	7/17/2025
c. Committee Website (Optional)	f. Phone Number
	828-244-6458

2. Candidate Information

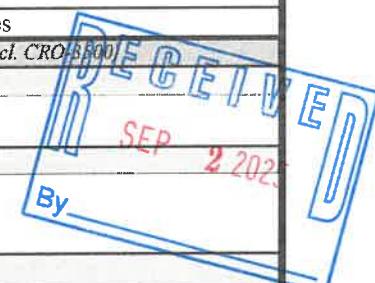
a. Full Name	e. Party Affiliation		
Park Arneson Pressly Inglefield	Non-Partisan		
b. Mailing Address (include City, State, and Zip Code)	f. Office Sought		
510 11th Av PI NW Hickory, NC 28601	Mayor		
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
828-244-6458	parkpressly@gmail.com	2025	Hickory
<input type="checkbox"/> Email copy of report notices			

3. Treasurer Information

a. Full Name	b. Mailing Address (include City, State and Zip Code)	c. Phone Number	d. Email Address
Nancy L Miller	581 30th Avenue Cir NE Hickory, NC 28601		
e. Phone Number	f. Email Address	g. Next Election Year	h. Jurisdiction
828-238-1516	nancat38@gmail.com	2025	Hickory
<input type="checkbox"/> 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)

a. Full Name	b. Financial Institution Full Name	
	First Citizens Bank	
b. Mailing Address (include City, State, and Zip Code)	c. Account Code	d. Type
	PAPI	Checking
<input type="checkbox"/> Email copy of report notices		



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.

Nancy L Miller

Printed Name of Treasurer

nancy m. m.

Signature of Appointed Treasurer

8-30-2025

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.

Park Inglefield

Printed Name of Candidate

Park Inglefield

Signature of Candidate

8-30-25

Date