

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	
Committee for Eddie Marlowe for Mayor Town of Long View			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
1408 33rd St SW Hickory, NC 28602		5-1-25	
c. Committee Website (Optional)		f. Phone Number	
		828-455-8298	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Douglas Edward Marlowe Jr		Republican	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
1408 33rd St SW Hickory, NC 28602		Mayor	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
828-455-8298	marloweeddie@yahoo.com	2025	Long View
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Johnnie Blanton			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
174 23rd St NW Hickory, NC 28601			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
276-202-7747	jblanton@carolinasda.org		
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)		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
		First Horizon	
b. Mailing Address (include City, State, and Zip Code)			
c. Phone Number	d. Email Address	b. Account Code	c. Type
		DEM46	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.			
<u>Johnnie Blanton</u>		<u>Johnnie Blanton</u>	
Printed Name of Treasurer		Signature of Appointed Treasurer	
		8-12-25	
		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.			
<u>Douglas E. Marlowe Jr.</u>		<u>Douglas E. Marlowe Jr.</u>	
Printed Name of Candidate		Signature of Candidate	
		8-12-25	
		Date	