

# 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	
Beth Freshwater Smith for Judge		STA-R81JM7-C-001	
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
PO Box 5, Wilson, NC 27894		10/1/2015	
c. Committee Website (Optional)		f. Phone Number	
www.votefreshwatersmith.com		252-399-9451	

## 2. Candidate Information

a. Full Name		e. Party Affiliation	
Elizabeth Freshwater Smith		Republican	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
309 Lafayette Dr. Wilson, NC 27893		Court of Appeals Judge	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
252-236-7770	bethfreshwatersmith@gmail.com	2022	State of North Carolina
<input type="checkbox"/> Email copy of report notices			

## 3. Treasurer Information

a. Full Name	
Georgia M. Thomas	
b. Mailing Address (include City, State, and Zip Code)	
2205 Sulgrave Dr. Wilson, NC 27896	
c. Phone Number	d. Email Address
252-399-9451	gamthomas1@aol.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	
Georgia M. Thomas	
b. Mailing Address (include City, State, and Zip Code)	
2205 Sulgrave Dr. Wilson, NC 27896	
c. Phone Number	d. Email Address
252-399-9451	gamthomas1@aol.com
<input checked="" type="checkbox"/> Email copy of report notices	

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

a. Financial Institution Full Name	
BB&T (Truist)	
b. Account Code	c. Type
Fresh 309	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.

Georgia M. Thomas

Printed Name of Treasurer

*Georgia M. Thomas*

Signature of Appointed Treasurer

8/31/2021

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.

Elizabeth Freshwater Smith

Printed Name of Candidate

*Elizabeth Freshwater Smith*

Signature of Candidate

8-31-2021

Date

CRO-2100A SC 9/2/2021 09



SMT

P.O. Box 2848  
Wilson, NC 27894



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