

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	
Alexis Hughes for County Commissioner			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
12820 Cathy Court, Midland, NC 28107		12/19/2025	
c. Committee Website (Optional)		f. Phone Number	
		704-773-2117	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Alexis Hughes		Republican	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
12820 Cathy Court, Midland, NC 28107		County Commissioner	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
704-773-2117	VoteAlexisforCabCo@gmail.com	2027	Cabarrus
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Barbara Strang			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
PO Box 8133 Concord, NC, 28027			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
704-796-3771	bstrang34@gmail.com		
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	
Barbara Strang		Pinnacle Bank	
b. Mailing Address (include City, State, and Zip Code)			
PO Box 8133 Concord, NC, 28027			
c. Phone Number	d. Email Address	b. Account Code	c. Type
704-796-3771	bstrang34@gmail.com	2211	Checking
<input type="checkbox"/> Email copy of report notices			
<p>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.</p> <p>Barbara Strang Printed Name of Treasurer</p> <p><i>Barbara Strang</i> Signature of Appointed Treasurer</p> <p>12/29/2025 Date</p> <p>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.</p> <p>Alexis Hughes Printed Name of Candidate</p> <p><i>Alexis Hughes</i> Signature of Candidate</p> <p>12/29/2025 Date</p>			