

# Statement of Organization - Candidate Committee

Amendment

☐ Yes ☐ No

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by forms CRO-3100 and CRO-3500 (when amending, only re-submit if applicable).

## 1. Committee Information

a. Full Name	c. ID Number
Committee to elect Nida Allam	
b. Mailing Address (include City, State and Zip Code)	d. Date Organized
321 OLIVE BRANCH RD. DURHAM, NC 27703	
	e. Phone Number
	919-247-2868

## 2. Candidate Information

☐ Candidate's Primary Committee

a. Full Name	e. Candidate ID Number	f. Party Affiliation
NIDA ALLAM		DEMOCRAT (Indicate Non-partisan if applicable)
b. Mailing Address (include City, State, and Zip Code)	g. Office Sought	
104 WELLWATER AVE. DURHAM, NC 27703	DURHAM COUNTY COMMISSIONER	
c. Phone Number	d. Email Address	h. Next Election Year
919-247-2868	NIDA@NIDAALLAM.COM	2020
<input checked="" type="checkbox"/> Email copy of notices		i. Jurisdiction

## 3. Treasurer Information

a. Full Name
NIDA ALLAM
b. Mailing Address (include City, State, and Zip Code)
104 WELLWATER AVE DURHAM, NC, 27703
c. Phone Number
919-247-2868
d. Email Address
NIDA.ALLAM@GMAIL.COM

## 4. Custodian of Books Information

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

I prefer to receive notices by email ☒ Yes ☐ No ☐ Email copy of notices

## 5. Assistant Treasurer Information

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

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

a. Financial Institution Full Name	<input type="checkbox"/> Add <input type="checkbox"/> Remove
b. Purpose	
c. Account Code	d. Type

☐ Email copy of notices

## CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M 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.

NIDA ALLAM

Printed Name of Signer



Signature of Appointed Treasurer

10/11/2019

Date

IN PERSON

OCT 15 2019

DURHAM BOE