Statement of Organization - Candidate Committee

Is	this	statem	ent:	
	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 ye
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1. Committee Infor	mation		PALME DO				
a. Name of Committee	d. ID Number						
	surruss						
b. Mailing Address (inc		e. Date Organized					
301 S. E	1001	7/10/23					
c. Committee Website (Optional)			f. Phone Number			
		919564-9464					
2. Candidate Infor	mation						
a. Full Name		e. Party Affiliation					
Ohostilla .	Estie Bureuss	Democrate					
	lude City, State, and Zip Code)	f. Office Sought					
21		i. Office Sought					
301 S. Elm	34.# IT	Mayor.					
	n NC 21701						
c . Phone Number	d. Email Address	g. Next Election Year	h. J	urisdiction			
919)5649404	burruster egnilicon						
☐ Email copy of re	port notices						
3. Treasurer Inform	nation	4. Assistant Treas	urer Inform	ation			
a. Full Name		a. Full Name					
(handa	C. Sanders Missy"						
b. Mailing Address (inc	lude City, State, and Zip Code)	b. Mailing Address (in	clude City, Sta	te and Zip Code)			
OR Dainer	1 - 2						
00 rkimer	se Lane 110, 27573	1					
c. Phone Number	Roxboto, NC 27573 d. Email Address	c. Phone Number	d. Email Add	lress			
(919)627-3858			<u></u>				
Send report notices by email Yes No		Email copy of report notices					
5. Custodian of Books Information (Keeper of Records) a. Full Name			6. Account Information (incl. CRO-3500) a. Financial Institution Full Name				
a. Full Name		a, r manetar montanto					
	17. 61			INDE			
b. Mailing Address (inc	clude City, State, and Zip Code)	-		IN PERS			
1				W-W			
	1			JUI 1 2			
c. Phone Number	d. Email Address	b. Account Code	c. Type	^			
		4		DURHAN E			
Email copy of r	eport notices						
	Committee is in compliance with all applie						
	and that no funds are commingled with pr	ohibited or other nor	1-disclosed fi	ands. I further certify that			
this report is com	plete, true and correct.						
Printed Name of Treasurer Signature of Appointed Treasurer Date							
Loomify that the int	formation above is someon and I so the	andidata annoint asi	d transurer to	nerconally fulfill the			
	formation above is correct, and I, as the c bilities imposed upon the appointed treas						
163 of the NC Gene		urer and subject to th	e penanies n	i Anticio 22A di Chaptei			
103 of the INC Gene	Tai Statutes.	TOP	0				
CHARLitte	7 Estie Durruss/ Mail	(le) colle,	Dure	11			
Printed	Name of Candidate	Signature of Candidat	ie	Date			