Statement of Organization - Candidate Committee

| Is | this s | tatem | 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 year.

| 1. Committee Infor | mation | | | I ID Number | |
|--|---|---|------------------|-----------------------------|--|
| a. Name of Committee | | | | d. ID Number | |
| Committee to Elec | | | | Data Owner and | |
| b. Mailing Address (inc | e. Date Organized | | | | |
| | Drive; Durham, NC 27713 | | | 12/7/2015 | |
| c. Committee Website (C | | | f. Phone Number | | |
| www.tarafikes.cor | | | 919-616-1020 | | |
| 2. Candidate Infori | nation | | | | |
| | e. Party Affiliation | | | | |
| Tara Lynne Fikes | Democrat | | | | |
| b. Mailing Address (incl | f. Office Sought | | | | |
| 5113 Bridgewood Drive; Durham, NC 27713 | | Durham County Commissioner | | | |
| c . Phone Number | d. Email Address | g. Next Election Year | | h. Jurisdiction | |
| 919-616-1020 | drtlf@yahoo.com | 2020 | | Durham County | |
| | | | - 7.0 | | |
| 3. Treasurer Informa. Full Name | nation | 4. Assistant Treasurer Information a. Full Name | | | |
| Vivian Leeper Ford | | a. Pun Name | | | |
| b. Mailing Address (incl | b. Mailing Address (include City, State and Zip Code) | | | | |
| 121 Spring Valley Dr., Durham, NC 27713 | | | | - | |
| c. Phone Number | d. Email Address | c. Phone Number | d. Email | Address | |
| 919-361-5965 | vivian_ford@yahoo.com | | | | |
| Send report no | | ☐ Email copy of r | | tices | |
| 5. Custodian of Boo a. Full Name | oks Information (Keeper of Records) | 6. Account Inform | | (incl. CRREDERSON | |
| | | a. Financial Institution Full Name | | | |
| Tara Lynne Fikes | | SunTrust Bank | JAN 2 1 2020 | | |
| b. Mailing Address (include City, State, and Zip Code) 5113 Bridgewood Drive; Durham, NC 27713 | | | | DURHAM BOE | |
| c. Phone Number | d. Email Address | b. Account Code | c. Type | | |
| 919-616-1020 | drtlf@yahoo.com | | Checking Account | | |
| Email copy of re | eport notices | Cnecking A | | ing Account | |
| General Statutes at this report is comp Vivian Leeper | ommittee is in compliance with all applied that no funds are commingled with prolete, true and correct. Ford Name of Treasurer S | | -disclose | | |
| | ormation above is correct, and I, as the cilities imposed upon the appointed treas | ~ ~ | | | |
| 163 of the NC Gene | | | ponanie | o in Article 22A of Chapter | |
| Tara L. Fikes | Tan | VA DH | | 1/16/2220 | |
| Printed | Name of Candidate | Signature of Candidate | : | Date | |