Statement of Organization - Candidate Committee

Is this statement:						
\(\vert{1}\)	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.
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1. Committee Infor	mation		BILL				
a. Name of Committee			0	d. ID Number			
Committee to Elect Joy Harrell for DPS Board of Education b. Mailing Address (include City, State and Zip Code) e. Date Organized							
				12-19-2023			
c. Committee Website (rst. Ourham, NC 27	+04	11	f. Phone Number			
c. Commutee website (opuonari						
2 C 111 4 7 F			211 10	919 358 9554			
2. Candidate Informa. Full Name	пацоп	e. Party Affiliation					
Joy C. H	1102201						
	lude City, State, and Zip Code)	f. Office Sought					
		200 2	J 25 /	di adian			
	er St. Durham, AC 27704	DF 3 00000					
c . Phone Number	d. Email Address	g. Next Election Year	h. J	urisdiction			
919 358 955 4 Email copy of re	Bringby to DPS egmail.com	2024	1	Durham			
3. Treasurer Inform		4. Assistant Treasu					
a. Full Name		a. Full Name					
Samue/ I	7. Roger S			11/1			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (inc	clude City, Sta	te and Zip Code PERSO!			
10 LARCH Court Durham N.C. 27703							
	d. Email Address	c. Phone Number	d. Email Add	DEC 2 8 2023			
	Spores 6036 Ogmail.com	C. Fhone Number	o. Elian Adu	DURHAM BOI			
		G E					
Send report no	oks Information (Keeper of Records)	Email copy of report notices 6. Account Information (incl. CRO-3500)					
a. Full Name		a. Financial Institution Full Name					
b. Mailing Address (inc	lude City, State, and Zip Code)			Top Xapring			
c. Phone Number	d. Email Address	b. Account Code	c. Type	STATE OF THE PERSON OF			
80-007151-00			fee inchestion				
Email copy of r	eport notices	1					
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.							
Samuel Printed	12 18 - 2023 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.							
Low Harre 11 Jan Alanell 12-18-2023							
Printed	Name of Candidate	Signature of Candidate	4	Date			