Statement of Organization - Candidate Committee

Is	this st	atement:	
	New	Amended	

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

This form must be accompa	nied by form	CRO-3500. Ar	amended form is	required for each	n new election year.
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I IIID IVIIII IIIUSC OU	accompanied by form CRO-3300. An and	vilueu ioiill is legui.	rea for each hely cit	otton year.		
1. Committee Info	rmation	A THE RESERVE OF THE	angel en alter			
a. Name of Committee				Number		
Committee to Ele	ct Dr. Monique Holsey-Hyman for Dur	ham City Council				
	clude City, State and Zip Code)		e. Da	ite Organized		
PMB 4711 Hope	Valley Road, #813, Durham, NC 2771	3	11/2	22/2022		
c. Committee Website	(Optional)		f. Ph	one Number		
			718	-414-5987		
2. Candidate Info	mation					
a. Full Name	mation	e. Party Affiliation				
Monique Holsey-I	-lyman	Nonpartisan				
L ME20 - A 114 2 -	1.1.04.04.1.17.0.13	·				
	clude City, State, and Zip Code)	f. Office Sought				
PIVIE 4/11 Hope	Valley Rd., #813, Durham, NC 27713	City Council				
c . Phone Number	d. Email Address	g. Next Election Yea	r h. Jurisdi	ction		
714-414-5987	candidatedrmoniqueholseyhyman@gmail.com	2023	Municip	al		
☑ Email copy of r	eport notices	1				
3. Treasurer Infor		4. Assistant Trea	4. Assistant Treasurer Information			
a, Full Name		a. Full Name				
L'Tanya Durante						
b. Mailing Address (in	clude City, State, and Zip Code)	b. Mailing Address (include City, State and	Zip Code)		
3309 Oriskony W	ay, Durham, NC 27703		· · · · · · · · · · · · · · · · · · ·			
c. Phone Number	d. Email Address	c, Phone Number d. Email Address				
919-599-6846	lgdurante@gmail.com					
	otices by email Ves No	Email copy of		2 4 6 6 1		
5. Custodian of Books Information (Keeper of Records)		6. Account Information (incl. CRO-3500) a. Financial Institution Full Name				
L'Tanya Durante		Truist Bank				
	1.00 00 100	Traict Barit				
	clude City, State, and Zip Code) ay, Durham, NC 27703					
3309 Oliskolly VV	ay, Dumam, NC 27703	1				
c. Phone Number	d. Email Address	b. Account Code	c. Type	TAL DES		
919-599-6846	lgdurante@gmail.com	1908	Checking	IN PER		
Email copy of	report notices					
I certify that the C General Statutes a	Committee is in compliance with all applicand that no funds are commingled with proplete, true and correct	cable provisions of	Article 22A of Chapon-disclosed funds.	FEB 2: oter 163 of the NC		
this report is com	plete, true and correct.			DURHAN		
L'Tanya Duran	te Q1	(- /)	\ 	02/14/2023		
Printed	Name of Treasurer	gnature of Appointed Ti	neasurer	Date		
I certify that the int	formation above is correct, and I, as the ca	andidate, annoint se	uid treasurer to ners	onally fiilfill the		
	bilities imposed upon the appointed treasu					
163 of the NC Gene		0 1/ /	//	J		
Monique Holse	6 1 7 1	y Heli	#	2/5/200		
	Name of Candidate	Signature of Candill		Date		
Tillicu	Control of Carididate	Dignature of Callulu	arc.	Date		