Statement of Organization - Candidate Committee 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

Amendment		
Yes	V	No

Board of County Commissioners	1. Committee Info		CRO-3100 and C	CRO-3500 (when ar	mending, o	only re-submit if applicable).	
D. Mailing Address (include City, State, and Zip Code) D. Candidate Information D. Candidate						c. ID Number	
1510 Woodland Drive Durham, NC 2. Candidate Information	Committee to Elect Matt Kopac			Pending			
Durham, NC 2. Candidate Information a. Full Name D. Mailing Address (include City, State, and Zip Code) Durham, NC 27701 Durham, NC 27702 Durham, NC 27701 Durham, NC 2	b. Mailing Address (inc	clude City, State and Zip (Code)			d. Date Organized	
2. Candidate Information a. Full Name c. Candidate ID Number d. Party Affiliation Matt Kopac Mon-partisan (Indicate Non-partisan if applicable) Malling Address (include City, State, and Zip Code) D. Mailing Address (include City, State, and Zip Code) D. Mailing Address (include City, State, and Zip Code) D. Mailing Address (include City, State, and Zip Code) D. Mailing Address (include City, State, and Zip Code) D. Mailing Address (include City, State, and Zip Code) D. Mailing Address (include City, State, and Zip Code) D. Mailing Address (include City, State, and Zip Code) D. Mailing Address (include City, State, and Zip Code) D. Mailing Address (include City, State, and Zip Code) D. Mailing Address (include City, State, and Zip Code) D. Mailing Address (include City, State, and Zip Code) D. Mailing Address (include City, State, and Zip Code) D. Mailing Address (include City, State, and Zip Code) D. Mailing Address (include City, State, and Zip Code) D. Mailing Address (include City, State, and Zip Code) D. Phone Number d. Email Address G. Phone Number d. Email Address G. Account Information (incl. CRO-3500) Add a. Financial Institution Full Name D. Mailing Address (include City, State, and Zip Code) D. Purpose D.		rive				6/26/2019	
2. Candidate Information a. Full Name b. Matt Kopac b. Mailing Address (include City, State, and Zip Code) c. Phone Number c. Candidate ID Number d. Email Address b. Mailing Address (include City, State, and Zip Code) b. Mailing Address (include City, State, and Zip Code) c. Phone Number d. Email Address b. Mailing Address (include City, State, and Zip Code) d. Candidate ID Number d. Party Affiliation Non-partisan (Indicate Non-partisan if 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. If Tarnya Durante D. Mailing Address (include City, State, and Zip Code) D. Mailing Address (include City, State, and Zip Code) D. Mailing Address (include City, State, and Zip Code) D. Purpose D. Mailing Address (include City, State, and Zip Code) D. Purpose D. Mailing Address (include City, State, and Zip Code) D. Purpose D. Mailing Address (include City, State, and Zip Code) D. Mailing Address (include City, State, and Zip Code) D. Purpose D. Mailing Address (include City, State, and Zip Code) D. Purpose D. Mailing Address (include City, State, and Zip Code) D. Purpose D. Mailing Address (include City, State, and Zip Code) D. Purpose	Dumam, NO					e. Phone Number	
2. Candidate Information Candidate Primary Committee a. Full Name C. Candidate ID Number C. Party Affiliation Non-partisan Non-partisan (Indicate Non-partisan if applicable b. Mailing Address (include City, State, and Zip Code) g. Office Sought 1510 Woodland Drive Durham, NC 27701 Durham, NC 27701 Board of County Commissioners							
Matt Kopac Non-partisan Non-par		mation			Candi		
Indicate Non-partisan if applicable Indicate Non-partisan if appli	a. Full Name			e. Candidate ID Nur	mber	f. Party Affiliation	
b. Mailing Address (include City, State, and Zip Code) 1510 Woodland Drive Durham, NC 27701 c. Phone Number d. Email Address mekopac@gmail.com Different or receive notices by email Deferent resurer Information Deferen	Matt Kopac					•	
Durham, NC 27701 c. Phone Number d. Email Address h. Next Election Year i. Jurisdiction Municipality A. Custodian of Books Information a. Full Name L'Tanya Durante b. Mailing Address (include City, State, and Zip Code) 1904 Cole Mill Road, Apt. 103 Durham, NC 27712 c. Phone Number d. Email Address glgdurante@gmail.com I prefer to receive notices by email Add a. Financial Institution Full Name I presson JUL 0 9 2019 c. Account Code d. Type DURHAM BOE DURHAM BOE DERTIFICATION 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. L'Tanya Durante	b. Mailing Address (inc	lude City, State, and Zip	Code)	g. Office Sought		(Indicate Non-partisan ii applicat	
Durham, NC 27701 c. Phone Number d. Email Address h. Next Election Year i. Jurisdiction Municipality A. Custodian of Books Information a. Full Name L'Tanya Durante b. Mailing Address (include City, State, and Zip Code) 1904 Cole Mill Road, Apt. 103 Durham, NC 27712 c. Phone Number d. Email Address glgdurante@gmail.com I prefer to receive notices by email Add a. Financial Institution Full Name I presson JUL 0 9 2019 c. Account Code d. Type DURHAM BOE DURHAM BOE DERTIFICATION 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. L'Tanya Durante		-					
mekopac@gmail.com Demail copy of notices 2020 Municipality OF	Durham, NC 27701			Board of County	y Commis	ssioners	
Email copy of notices A. Custodian of Books Information A. Full Name Same as Treasurer	c . Phone Number	d. Email Address		h. Next Election Yea	ır	i. Jurisdiction	
Email copy of notices A. Custodian of Books Information A. Full Name Same as Treasurer	719-597-9680	mekopac@gmail.com	m	2020		Municipality 6	
3. Treasurer Information a. Full Name a. Full Name b. Mailing Address (include City, State, and Zip Code) b. Mailing Address (include City, State, and Zip Code) 1904 Cole Mill Road, Apt. 103 Durham, NC 27712 c. Phone Number d. Email Address lgdurante@gmail.com I prefer to receive notices by email Yes No Email copy of notices 5. Assistant Treasurer Information Add A. Financial Institution Full Name Remove D. Mailing Address (include City, State, and Zip Code) D. Purpose IN PERSON JUL 0 9 2019 Phone Number d. Email Address c. Account Code d. Type DURHAM BOE 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. L'Tanya Durante Address Treasurer Same as Treasurer b. Mailing Address (include City, State, and Zip Code) b. Mailing Address (include City, State, and Zip Code) Jul 0 9 2019 C. Account Code A. Type DURHAM BOE	✓Email copy of no	otices		7 2020	4	DURHAM	
L'Tanya Durante b. Mailing Address (include City, State, and Zip Code) 1904 Cole Mill Road, Apt. 103 Durham, NC 27712 c. Phone Number		nation					
b. Mailing Address (include City, State, and Zip Code) 1904 Cole Mill Road, Apt. 103 Durham, NC 27712 c. Phone Number	a. Full Name			a. Full Name			
Durham, NC 27712 c. Phone Number d. Email Address c. Phone Number d. Email Address 919-599-6846 lgdurante@gmail.com	L'Tanya Durante			Same as Treasurer			
Durham, NC 27712 c. Phone Number d. Email Address c. Phone Number d. Email Address 919-599-6846 lgdurante@gmail.com	b. Mailing Address (incl	lude City, State, and Zip (Code)	b. Mailing Address (include City, State, and Zip Code)			
Section Intercept Interc						-	
I prefer to receive notices by email	c. Phone Number	d. Email Address		c. Phone Number	d. Email	l Address	
5. Assistant Treasurer Information Add A. Full Name	919-599-6846		m -				
5. Assistant Treasurer Information Add a. Full Name Add a. Financial Institution Full Name Add a. Financial Institution Full Name Remove Remove Add a. Financial Institution Full Name Remove Remo			✓ Yes			es	
D. Mailing Address (include City, State, and Zip Code) D. Purpose JUL 0 9 2019 D. Phone Number D. Phone Number D. Purpose JUL 0 9 2019 D. Phone Number D. Purpose JUL 0 9 2019 D. Phone Number D. Purpose JUL 0 9 2019 JUL 0 9 2019 D. Purpose JUL 0 9 2019 JU		rer Information		6. Account Inform	mation	(incl. CRO-3500) Add	
JUL 0 9 2019 Description 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. L'Tanya Durante JUL 0 9 2019 C. Account Code d. Type DURHAM BOE DURHAM BOE 1 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. L'Tanya Durante 7/8/2019	a. Full Name		Remove	a. Financial Institution	on Full Nam	ne Remove	
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. L'Tanya Durante T/8/2019	o. Mailing Address (inclu	ude City, State, and Zip C	(ode)	b. Purpose		IN PERSON	
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. L'Tanya Durante 7/8/2019				1	,		
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. L'Tanya Durante T/8/2019	e. Phone Number	d. Email Address		c. Account Code	d. Type	DURHAM BOE	
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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. L'Tanya Durante 7/8/2019		ommittee or Fund is in	compliance with	all applicable provi	sions of A	Article 22A. 22B & 22D-22M of	
L'Tanya Durante Lanya Privante 7/8/2019	Chapter 163 of the	NC General Statutes a	and that no funds a	are commingled wit	th prohibit	ted or other non-disclosed funds	
- Sand rivante	I further certify that	this report is complet	te, true and correc	et.			
Printed Name of Signer Signature of Appointed Treasurer Date	L'Tan	ıya Durante	Lin	mild DIV	son 1	7/8/2019	
AL VALUE	Printed	Name of Signer	Sig	gnature of Appointed Tre	easurer	Date	



Certification of Treasurer

This Certification is used by Candidate Committees to appoint a treasurer for the committee. This form is required and must accompany the Candidate's Statement of Organization.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

FILED BY:	
Candidate Name:	Marti Kapac
Treasurer Name:	L'Itanya Durante
Treasurer Address:	1904 Care Mill Rd., #103
(include city, state, & zip)	Duyban, NC 27712
Treasurer Phone:	919-599-6846

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

Signature of Candidate

IN PERSON

JUL 09 2019

DURHAM BOE

THE THE DAY



Candidate Designation of Committee Funds

This form is used by candidate committees only and allows the candidate to designate in the even how the committee's funds are to be disbursed using the eight allowable methods outlined in 163	nt of their death, 3-278.16B(a).
This Designation is filed at the Board of Elections office where the committee's campaign r	eports are filed.
Candidate Name: Matt Kopac	
Committee Name: Committee to Elect Matt Kopa	C
Candidate Name: Matt Kopac Committee Name: Committee to Elect Matt Kopa Treasurer Name: L'Tanya Durante	
If Candidate is own treasurer, designate an agent to carry out designations:	114
Committee ID #:	
Level Registered: [State] [County] If county, specify: Duham (ounty
I, Mart Lopac, hereby direct that in the event of my death or in (Name of Candidate) funds remaining in my Campaign Committee account(s) (after payment of permit debts or reasonable expenses for winding up the Committee or closing office following manner as permitted by N.C. Gen. Stat. 163-278.16B(a).	itted outstanding be paid in the
Name of Entity (Select from §163-278.16B(a)) Plan for Disbursement (eg. A	Amount or %)
1. Habitat for Humanity Ducham 100%	
2	
3	
By signing this form, I certify that the foregoing entities are eligible beneficiaries Gen. Statute 163-278.16B(a). A copy of this form should be maintained with the records.	
Signature of Candidate:	
Date: + 8 19	IN PERSON
	JUL 0 9 2019

DURHAM BOE