Statement of Organization - Candidate Committee

	statement:	
New	Amended	

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

This forms must be accommonical by for	CDO 2500 As assessed	dad famo is nagazinad fan	anah massi alaatian siaan
This form must be accompanied by for	orm CRO-3300. An amend	dea form is reduired for	each new election year.

	ccompanied by form CRO-35	500. An amer	ided form is required	for eac.	h new election year.	
1. Committee Information						
a. Name of Committee					d. ID Number	
(ammit	too to Slock I	210010	1 0 Mis			
b. Mailing Address (incl	lude City, State and Zip Code)	200100	CC 441-		e. Date Organized	
	• /	With the second			12/12/23	
		ulhan,	NC 277	01		
c. Committee Website (Optional)				f. Phone Number	
					119 353 3655	
2. Candidate Infori	mation	H STIPLE		23 5 Eu		ĺ
a. Full Name			e. Party Affiliation			
~	V			- 721 14	1	
	b. Mailing Address (include City, State, and Zip Code)		Democrat			
b. Mailing Address (incl	iude City, State, and Zip Code)		f. Office Sought			
c . Phone Number	d. Email Address	Solvan NC	g. Next Election Year	onty	h. Jurisdiction	
22		-				
919 35334655	Elect Jovonia Lewis	(a) amail.	com	111		
Email copy of re	port notices)	00			
3. Treasurer Inform	nation		4. Assistant Treasu	rer Info	ormation	
a. Full Name			a. Full Name			
Dollin	Davis					
b. Mailing Address (incl	lude City, State, and Zip Code)		b. Mailing Address (inc	lude City	. State and Zip Code)	
	,, , _F ,				,,	ł
2.1	11. 11. 11.					
125 Str	JUNG Way Durha	m 2770	<u>/</u>			
c. Phone Number	d. Email Address		c. Phone Number	d. Email	Address	
5. 5 . 5 . 5 . 1 la	111111111	1				
	delvia1976@gr		[] F!1		.	
			Email copy of report notices 6. Account Information (incl. CRO-3500)			
5. Custodian of Books Information (Keeper of Records) a. Full Name		a. Financial Institution Full Name				
	_					
Delvin	Davis		First F	tori	201	
b. Mailing Address (inc	lude City, State, and Zip Code)					
125 5 trol	ly Way Durhan	NC 27707	Campaga		27 Hod intra	
			b. Account Code	с. Туре		
919 824 2410		nou licen				1
Email copy of re	eport notices		WIIN 2024			1
General Statutes at this report is comp	ommittee is in compliance wind that no funds are comming plete, true and correct. Name of Treasurer	gled with pro		disclose	A of Chapter 163 of the NC and funds. I further certify that 12-/8-23 Date	
I certify that the infe	ormation above is correct, an	nd I, as the ca	ndidate, appoint said	treasur	er to personally fulfill the	1
duties and responsibilities imposed upon the appointed treasurer and subject to the penalties in Article 22A of Chapter					1	
A 14 17 G 1 G 1 G 1 G 1 G 1 G 1 G 1 G 1 G 1						
_	1 .		1 L	2	101.01.01	PERSON
000		Non	oma of Al	eus	12(18/23)	1
	Name of Candidate	1000 =	Signature of Candidate		Date	0007
CRO-2100A NC State Board of Elections November 2019					DEC 1 9 2023	