Statement of Organization - Candidate Committee

\ Is this statement:		
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.

This form must be accompanied by form CRO-3300. All affici	acculoning required for each new election year.			
1. Committee Information				
a. Name of Committee	d. ID Number			
Elaine O'Meal for Mayor				
b. Mailing Address (include City, State and Zip Code) e. Date Organized				
P. D. Box 1241 Duham NC 27702 1/26/2021				
c. Committee Website (Optional) f. Phone Number				
	919801-6528			
2 Candidate Information	111000000			
2. Candidate Information a. Full Name	e. Party Affiliation			
	C. Party Ammadou			
Elaine MONDE	Democrat			
b. Mailing Address (include City, State, and Zip Code)	f. Office Sought			
Talle Theodorehore	May - and D. do-			
Durham NC 2703	Mayor Di Durran			
c . Phone Number d. Email Address	g. Next Election Year h. Jurisdiction			
919 801 elainempneala	ADAI Duhan			
☐ Email copy of report-notices	avoi Litu			
3. Treasurer Information	4. Assistant Treasurer Information			
a. Full Name	a. Full Name			
Christopher Wilson	Ellis A. O'Nea			
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City, State and Zip Code)			
112 Nutree Way	11 DId Harress Tkill			
Durham NC 27713	Durham NC			
c. Phone Number d. Email Address	c. Phone Number d. Email Address			
919000 knw 150n(1)	gigleg edned 14(9)			
8884 NOTES LOW	wag wind won			
Send report notices by email Yes No Email copy of report notices				
5. Custodian of Books Information (Keeper of Records) 6. Account Information (incl. CRO-3500)				
a. Full Name	a. Financial Institution Full Name			
Christopher Wilson	Mechanics + termens bank			
b. Mailing Address (include City, State, and Zip Code)				
	NAAH			
Dumam NC 27713	IVIAIL			
c. Phone Number d. Email Address	b. Account Code c. Type			
7879 Chuisan whroke	JAN 27 2021			
Email copy of report notices				
A	DURHAM BOE			
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.				
CHRISTOPHER A WILSON / VI-LUR A WILL WILLIAM				
Printed Name of Treasurer Signature of Appointed Treasurer Date				
Finded Name of Treasurer Signature of Appointed Treasurer 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.				
Flaire M D'Illeal Mainell Ollad 1/21. hom				
Drived Name of Condidate Signature of Condidate Date Deliver of Condidate Deliver of				
Printed Name of Candidate	Printed Name of Candidate Signature of Candidate Date			