IN-PERSON

Statement o	of Organization - (Candidate	Committee	JUL 17		_		e serrence
Use this form to c	create a new or update an ear accompanied by forms Commation	existing candida	ite committee.	IDLIAN	l DC	\r □ v	es 🔯 No	Marie comes en
1. Committee Int	e accompanied by forms C	RO-3100 and (CRO-3500 (when an	nending, o	only re) = e-submit if	applicable).	
a. Full Name	建					1300		
COMMITTEE TO RE-ELECT ARCHIE SMITH						c. ID Number		
b. Mailing Address (i	SI/II (H			94-3422486				
508 EVE					d. Date Organized			
DURHAM NC 27701						e. Phone Number		
						919 688-8445		
2. Candidate Info	Candidate'			s Primary Committee				
a. Full Name			e. Candidate ID Number			f. Party Affiliation		
HKCHIE L.	ARCHIE L. SMITH III					D		
						(Indicate Non-partisan if applicable)		
b. Mailing Address (include City, State, and Zip Code)			g. Office Sought			(andreate Hon-partisan if applicable)		
508 EVERETT PLACE			CSC					
DURHAM, N.C. 27701 c. Phone Number d. Email Address								
					i. Juri	Jurisdiction		
919 688 8445 ARCHIELL SMITH & NCCOURTS.O			PC -					
Libitian copy of notices								1
3. Treasurer Information			4. Custodian of B	ooks Info	rmat	ion	14.400	Allena Allena
a. Full Name E · DUDLEY ROBINSON			a. Full Name					
			sec (2)					
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)					
3500 WESTGATE DE. SUITE 900								\exists
DUEHAM, NC 27707								
c. Phone Number d. Email Address			c. Phone Number	d. Email	Addres	·e		-[
919 489-5566 DUDLEY & RANDFCPA . COM				G. Sainta Address				
			☐ Email copy of notices					
S. Assistant Tracerrant L. Committee and			6. Account Information (incl. CRO-3500) Add					
- TO 11 A. T. C.			a. Financial Institution Full Name Remove					
			PNC					
b. Mailing Address (include City, State, and Zip Code)			b. Purpose					
			CAMPAIGH CONTRIBUTIONS					
. Phone Number	d. Email Address		c. Account Code	I. m				_
				d. Type				4
			5323147165	CHECK	cine	-		1
Email copy of notices CERTIFICATION								ł
				_				7
Chapter 163 of the	ommittee or Fund is in cor NC General Statutes and	npilance with a	Il applicable provisi	ons of Ar	ticle 2	22A, 22B &	೬ 22D-22M o	f
I further certify that	at this report is complete, t	rue and correct	. Commingica with	promotte	u or c	uner non-d	isclosed fund	s.
		11 1 -						
Printed Name of Signer & Dud			& Sulini			7-17	B	
Printed	Name of Signer	Sign	ature of Appointed Treas	surer		I	Date	