Statement of Organization - Candidate Committee

Is this s	tatem	ent:	
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.

1. Committee Information		
a. Name of Committee		d. ID Number
Committee to elect Leonard	lo Willia	, WS
b. Mailing Address (include City, State and Zip Code)		e. Date Organized
4029 Livingstone Plan, Du	irham NC	277046/16/2021
c. Committee Website (Optional)		f. Phone Number
Leonardo Williams, com		919 806 975
2. Candidate Information		
a. Full Name	e. Party Affiliation	
Leonardo Quan Williams	Democr	at
b. Mailing Address (include City, State, and Zip Code)	f. Office Sought	
NC 2770	7	
4029 Livingstone Place Durbam		uncil ward 3
c . Phone Number d. Email Address	g. Next Election Year	h. Jurisdiction
9198069759 Contact@Leonardo Williams	com 2021	Ward 3
Email copy of report notices	204	700
3. Treasurer Information a. Full Name	4. Assistant Treasu	ntel Tutolmation
Curey Savage	1 26 11 22 22	
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (in	clude City, State and Zip Code)
Durham NC 27703		
2025 Copper leaf Pakuy # 205		·
c. Phone Number d. Email Address	c. Phone Number	d. Email Address
3366694953 Corey TSavage @ 9 mail.	lu A	
Send report notices by email ves No	☐ Email copy of r	enort notices
5. Custodian of Books Information (Keeper of Records)	6. Account Information (incl. CRO-3500)	
a. Full Name	a. Financial Institution	Full Name
Chi Vo	Mechanics & Farmers	
b. Mailing Address (include City, State, and Zip Code)	THE CHILATION	CL ICA TVIOLO
NL 27713		
4703 (arlton Cossing Dr. Dyrnam	1	
c. Phone Number d. Email Address	lb. Account Code	c. Type
919 (667474 Chivones & Gmail. Con	1	
Email copy of report notices	1191986	Business
	•	
I certify that the Committee is in compliance with all applic		
General Statutes and that no funds are commingled with pro-	ohibited or other non-	-disclosed funds. I further certify that
this report is complete, true and correct.	0	
Corey Savage Low	y Javaer	6/16/2024
Printed Name of Treaturer	gnature of Appointed Frea	asurer Date
	313 4	
I certify that the information above is correct, and I, as the calculation and responsibilities improved when the appointed treasure.		d treasurer to personally fulfill the
duties and responsibilities imposed upon the appointed treasu		a manulting in Article 22 A of Chanton
duties and responsibilities imposed upon the appointed treasures of the NC General Statutes.		d treasurer to personally fulfill the e penalties in Article 22A of Chapter
duties and responsibilities imposed upon the appointed treasu		Chi 6/16/2021

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