

# Statement of Organization - Candidate Committee

Is this statement:	
<input checked="" type="checkbox"/> New	<input type="checkbox"/> 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
Rebecca Harvard Barnes for Mayor of Durham Committee	
b. Mailing Address (include City, State and Zip Code)	e. Date Organized
2504 B Chapel Hill Rd. Durham, NC 27707	8-13-2021
c. Committee Website (Optional)	f. Phone Number
n/a	919-801-3095

2. Candidate Information			
a. Full Name		e. Party Affiliation	
Rebecca Harvard Barnes		Non-Partisan	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
2504 B Chapel Hill Rd. Durham, NC 27707		Mayor	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
919-801-3095	rebarocks3@gmail.com	2021	Municipality Durham County
<input checked="" type="checkbox"/> Email copy of report notices			

3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Rebecca Harvard Barnes			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
2504 B Chapel Hill Rd. Durham, NC 27707			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
919-801-3095	rebarocks3@gmail.com		
Send report notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> 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	
NONE		State Employees Credit Union	
b. Mailing Address (include City, State, and Zip Code)			
c. Phone Number	d. Email Address	b. Account Code	c. Type
9 2021		39756577	checking
<input type="checkbox"/> Email copy of report notices			

IN PERSON  
 AUG  
 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.

Rebecca Harvard Barnes      Rebecca Harvard Barnes      8-19-21  
 Printed 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.

Rebecca Harvard Barnes      Rebecca Harvard Barnes      8-19-21  
 Printed Name of Candidate      Signature of Candidate      Date



# NORTH CAROLINA STATE BOARD OF ELECTIONS

## Candidate Designation of Committee Funds

This form is used by candidate committees only and allows the candidate to designate in the event of their death, how the committee's funds are to be disbursed using the eight allowable methods outlined in 163-278.16B(a).

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

Candidate Name: Rebecca Harvard Barnes

Committee Name: Rebecca Harvard Barnes for Mayor of Durham Committee

Treasurer Name: Rebecca Harvard Barnes

If Candidate is own treasurer, designate an agent to carry out designations: Kirsten Ingebretsen

Committee ID #: \_\_\_\_\_

Level Registered: [State] [County] If county, specify: \_\_\_\_\_

I, Rebecca Harvard Barnes, hereby direct that in the event of my death or incapacity all funds remaining in my Campaign Committee account(s) (after payment of permitted outstanding debts or reasonable expenses for winding up the Committee or closing office) be paid in the following manner as permitted by N.C. Gen. Stat. 163-278.16B(a).

Name of Entity <i>(Select from §163-278.16B(a))</i>	Plan for Disbursement (eg. Amount or %)
1. <u>Durham Emergency Rental Assistance Program</u>	<u>100%</u>
2. _____	_____
3. _____	_____

By signing this form, I certify that the foregoing entities are eligible beneficiaries under N.C. Gen. Statute 163-278.16B(a). A copy of this form should be maintained with the Committee records.

Signature of Candidate: Rebecca Barnes **IN PERSON**

Date: 8-19-21

AUG 19 2021

DURHAM BOE