

Statement of Organization - Candidate Committee

Is this statement:	
<input 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	
Shanetta 4 Durham			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
PO Box 13416 Durham NC 27709			
c. Committee Website (Optional)		f. Phone Number	
		919 520 4729	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Shanetta Burris			
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
PO Box 13416 Durham NC 27709		City Council	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
919 520 4729	Shanetta4Durham@gmail.com	2023	
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Nikki Liles			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
PO Box 13416 Durham NC 27709			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
919-428-5508	nikki.a.liles@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	
Shanetta Burris			
b. Mailing Address (include City, State, and Zip Code)		IN PERSON	
P.O. Box 13416 Durham NC 27709		FEB 06 2023	
c. Phone Number	d. Email Address	b. Account Code	c. Type
919 520 4729	Shanetta4Durham@gmail.com		DURHAM BOE
<input type="checkbox"/> Email copy of report notices			
<p>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.</p>			
<p><u>Nikki A. Liles</u> Printed Name of Treasurer</p>		<p><u>[Signature]</u> Signature of Appointed Treasurer</p>	
		<p><u>02/04/2023</u> Date</p>	
<p>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.</p>			
<p><u>Shanetta Burris</u> Printed Name of Candidate</p>		<p><u>[Signature]</u> Signature of Candidate</p>	
		<p><u>02/02/2023</u> Date</p>	