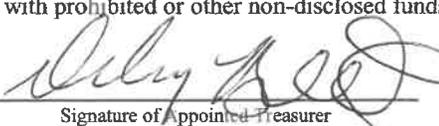
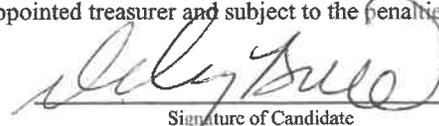


Statement of Organization - Candidate Committee

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	
Committee to Elect Dilcy Burton			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
PO Box 51901, Durham, NC 27717		12/1/25	
c. Committee Website (Optional)		f. Phone Number	
www.dilcy4durham.com		919-297-2093	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Dilcy Burton		Democrat	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
PO Box 51901, Durham, NC 27717		Durham County Board of Education District 1	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
919-297-2093	dilcy4durham@outlook.com	3/3/26	
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Dilcy Burton			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
PO Box 51901, Durham, NC 27717			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
919-297-2093	dilcy4durham@outlook.com		
Send report notices by email <input 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	
		Wells Fargo DB	
b. Mailing Address (include City, State, and Zip Code)		b. Account Code	
c. Phone Number	d. Email Address	c. Type	
			IN-PERSON DEC 11 2025 Durham County 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>Dilcy Burton</u> Printed Name of Treasurer </p> <p>  Signature of Appointed Treasurer </p> <p> <u>12/11/25</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>Dilcy Burton</u> Printed Name of Candidate </p> <p>  Signature of Candidate </p> <p> <u>12/11/25</u> Date </p>			