

IN PERSON

JUL 24 2017

Amendment
 Yes No

Statement of Organization - Candidate Committee

Use this form to create a new or update an existing candidate committee. **DURHAM BOE**
 This form must be accompanied by forms CRO-3100 and CRO-3500 (when amending, only re-submit if applicable).

1. Committee Information					
a. Full Name			c. ID Number		
CALLAWAY FOR CITY COUNCIL					
b. Mailing Address (include City, State and Zip Code)			d. Date Organized		
307 GRESHAM AVE DURHAM, NC 27704			7/24/17		
			e. Phone Number		
			919.695.3232		
2. Candidate Information <input type="checkbox"/> Candidate's Primary Committee					
a. Full Name		e. Candidate ID Number		f. Party Affiliation	
BRIAN CALLAWAY		XLL687		NON-PARTISAN (Indicate Non-partisan if applicable)	
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought			
307 GRESHAM AVE DURHAM, NC 27704		DURHAM CITY COUNCIL - WARD 1			
c. Phone Number	d. Email Address	h. Next Election Year		i. Jurisdiction	
919.695.3232	brian@callawayfordurham.com	2017		DURHAM	
<input checked="" type="checkbox"/> Email copy of notices					
3. Treasurer Information			4. Custodian of Books Information		
a. Full Name			a. Full Name		
LAUREN MAXEY			LAUREN MAXEY		
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
14336 CAMP KANATA ROAD WAKE FOREST, NC 27587			14336 CAMP KANATA ROAD WAKE FOREST, NC 27587		
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address		
919.342.8791	lauren@callawayfordurham.com	919.342.8791	lauren@callawayfordurham.com		
I prefer to receive notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			<input checked="" type="checkbox"/> Email copy of notices		
5. Assistant Treasurer Information			6. Account Information (incl. CRO-3500)		
a. Full Name			a. Financial Institution Full Name		<input type="checkbox"/> Add <input type="checkbox"/> Remove
					<input type="checkbox"/> Add <input type="checkbox"/> Remove
b. Mailing Address (include City, State, and Zip Code)			b. Purpose		
c. Phone Number	d. Email Address	c. Account Code	d. Type		
<input type="checkbox"/> Email copy of notices					
CERTIFICATION					
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M 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.					
Lauren Maxey		Lauren Maxey		7/24/17	
Printed Name of Signer		Signature of Appointed Treasurer		Date	