


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 Jessica Carda-Auten			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
2012 Wa Wa Ave, Durham NC 27707		10/16/2023	
c. Committee Website (Optional)		f. Phone Number	
		919-265-4887	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Jessica Rose Carda-Auten		Nonpartisan	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
2012 Wa Wa Ave, Durham NC 27707		Board of Education	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
9192654887	jessica.carda.auten4dps@gmail.com	2024	District 3
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Samuel Rogers			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
10 Larch Court, Durham, NC, 27703			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
9192251277	srogers6036@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	
Samuel Rogers		Truist	
b. Mailing Address (include City, State, and Zip Code)		IN PERSON	
10 Larch Court, Durham, NC, 27703			
c. Phone Number	d. Email Address	b. Account Code	c. Type
9192251277	srogers6036@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>			
Samuel Rogers _____ Printed Name of Treasurer		 _____ Signature of Appointed Treasurer	
		10/16/23 _____ Date	
<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>			
Jessica Rose Carda-Auten _____ Printed Name of Candidate		 _____ Signature of Candidate	
		10/16/23 _____ Date	