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

Amendment	
Yes	□ No

This form must be accompanied by forms CRO-5100 and Cr	NO-3300 (When all	ichumg, on	ny ic-subilit il applicable).
1. Committee Information			
a. Full Name	INI		c. ID Number
Davis for Durham Committee	"A PE	ERSON	
and specification and a second of the filter and specification and the second second specification and the second	JUN 1	· · · · · · ·	1 Det Occapiend
b. Mailing Address (include City, State and Zip Code)		2 2010	d. Date Organized
4707 V-II D	DURHAM		
1707 Valley Run	DURHAM	BOE	e. Phone Number
Durham, NC 27707			
			513-607-9298
2. Candidate Information		Candid	ate's Primary Committee
a. Full Name	e. Candidate ID Nun		f. Party Affiliation
1 41 1			Unaff-Nonpartisan
Laura Marie Davis			
7: Codo)	Oce - Caught		(Indicate Non-partisan if applicable)
b. Mailing Address (include City, State, and Zip Code)	g. Office Sought	0	None wat
1707 Valley Run, Durham, NC 27707	/1		ion District
	12 13(13)		
c . Phone Number d. Email Address	h. Next Election Year	r	i. Jurisdiction
513-607-9298 lauramoriedaris 1@gnail.com		1	
Email copy of notices	1	1	
3. Treasurer Information	4. Custodian of H	Rooks Info	rmation
a. Full Name	a. Full Name	JUONO LIL	Imation
Laura Marie Davis	1		2211
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City,	State, and Zip Code)
1707 Valley Run, Durham, NC 27707	1		
c. Phone Number d. Email Address	c. Phone Number	d. Email A	Address
513-607-9298 lauramaniedans 1@gmail.com	1		
	Email copy	of notices	
I prefer to receive notices by email Yes No 5. Assistant Treasurer Information	6. Account Infor	THE RESERVE OF THE PERSON NAMED IN COLUMN	(incl. CRO-3500) Add
a. Full Name	a. Financial Institution		
a. Pun Name	a. I mm.	JII A C	
b. Mailing Address (include City, State, and Zip Code)	b. Purpose		
c. Phone Number d. Email Address	c. Account Code	d. Type	
☐ Email copy of notices	4		
CERTIFICATION			
I certify that the Committee or Fund is in compliance with a	all applicable prov	isions of Ar	rticle 22A 22B & 22D-22M of
Chapter 163 of the NC General Statutes and that no funds a			
I further certify that this report is complete, true and correct		W. P	74 01 00000
Paul	pa Mare Da	111	- 2010/
Laura Manie Davis July	Mar wond a	uc	June 11, 2018
	gnature of Appointed Tre	easurer	Date