


Statement of Organization - Candidate Committee

Amendment
 Yes No

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)

1. Committee Information			
a. Full Name		c. ID Number	
Committee to Elect DeDreana Freeman			
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
P.O. Box 222 Durham, NC 27702-0222		01/12/2017	
<p style="text-align: center;">IN PERSON</p> <p style="text-align: center;">JAN 13 2017</p> <p style="text-align: center;">DURHAM BOE</p>		e. Phone Number	
		(919) 886-5448	
2. Candidate Information		Candidate's Primary Committee	
a. Full Name		e. Candidate ID Number	f. Party Affiliation
Mrs. DeDreana Freeman			Democrat
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought	
P.O. Box 222 Durham, NC 27702-0222		City Council	
c. Phone Number	d. Email Address	h. Next Election Year	i. Jurisdiction
(919) 886-5448	dedreana@yahoo.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	
Eileen J Morgan		Eileen Morgan	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
P.O. Box 222 Durham, NC 27702-0222		P.O. Box 222 Durham, NC 27702-0222	
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
(919) 225-0975	ejtjmorgan46@gmail.com	(919) 225-0975	ejtjmorgan46@gmail.com
I prefer to receive my 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	b. Purpose
b. Mailing Address (include City, State, and Zip Code)		c. Account Code	
c. Phone Number	d. Email Address	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.			
Eileen J Morgan Printed Name of Signer		 Signature of Appointed Treasurer	1/13/17 Date