

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 Atrayus O. Goode			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
PO Box 308, Durham, NC 27702		12/12/2023	
c. Committee Website (Optional)		f. Phone Number	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Atrayus Omar Goode		Democrat	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
3311 Tarleton E, Durham, NC 27713		At-Large School Board	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
919-213-0628	atrayus@atrayusgoode.com	2024	
<input checked="" type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Lolita Wynn			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
5850 Fayetteville Rd, Ste 206, Durham, NC 27713			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
919-423-9399	lolita@lawynnpa.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	
L.A. Wynn, PA		Pinnacle Financial Partners	
b. Mailing Address (include City, State, and Zip Code)			
5850 Fayetteville Rd, Ste 206, Durham, NC 27713			
c. Phone Number	d. Email Address	b. Account Code	c. Type
919-973-0714	lolita@lawynnpa.com	01	Checking
<input type="checkbox"/> Email copy of report notices			

IN PERSON
 DEC 22 2023
 DURHAM BOE

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.

Lolita Wynn _____ 12/21/2023
 Printed Name of Treasurer Signature of Appointed Treasurer Date

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.

Atrayus O. Goode _____ 12/21/2023
 Printed Name of Candidate Signature of Candidate Date