Statement of Organization - Candidate Committee

Is this statement: ☐ New ☒ 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 Bonita Green	
b. Mailing Address (include City, State and Zip Code)	**e. Date Organized**
831 Center Street Durham, NC 27704	July 2023
c. Committee Website (Optional)	**f. Phone Number**
	954.632.2079

2. Candidate Information

a. Full Name	e. Party Affiliation
Bonita Green	Democrat
b. Mailing Address (include City, State, and Zip Code)	**f. Office Sought**
831 Center Street Durham, NC 27704	City Council

c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
954 632 2079	bonitagreen4durham@gmail.com		Durham County

☒ Email copy of report notices

3. Treasurer Information

a. Full Name	
Bonita Green	
b. Mailing Address (include City, State, and Zip Code)	
831 Center Street Durham, NC 27704	
c. Phone Number	**d. Email Address**
(954) 632-2079	bonitagreen4durham@gmail.com

Send report notices by email ☐ Yes ☐ No

4. Assistant Treasurer Information

a. Full Name	
b. Mailing Address (include City, State and Zip Code)	
c. Phone Number	**d. Email Address**

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5. Custodian of Books Information (Keeper of Records)

a. Full Name	
Bonita Green	
b. Mailing Address (include City, State, and Zip Code)	
831 Center Street Durham, NC 27704	
c. Phone Number	**d. Email Address**
(954) 632-2079	bonitagreen4durham@gmail.com

☒ Email copy of report notices

6. Account Information *(incl. CRO-3500)*

a. Financial Institution Full Name	
First Citizens Bank	
b. Account Code	**c. Type**
	business

MAIL
JUN 12 2025
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.

Bonita Green		6/6/2025
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.

Bonita Green		6/6/2025
Printed Name of Candidate	Signature of Candidate	Date