

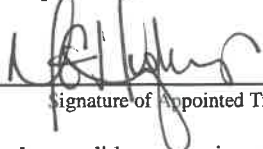
Statement of Organization - Candidate Committee

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	
Elijah King for Durham		133-UW5391-C-001	
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
8 Osprey Place, Durham, North Carolina 27712			
c. Committee Website (Optional)		f. Phone Number	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Elijah King		Democratic	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
8 Osprey Place, Durham, North Carolina 27712		Durham City Council	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
984.309.8697	elijahemking@gmail.com	November 2027	City of Durham
☒ Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Matt Hughes			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
PO Box 1406 Hillsborough, North Carolina			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
919.928.4480	mhughes@churtonstrat.com		
Send report notices by email ☒ Yes ☐ No		☐ 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	
Matt Hughes			
b. Mailing Address (include City, State, and Zip Code)			
PO Box 1406 Hillsborough, North Carolina			
c. Phone Number	d. Email Address	b. Account Code	c. Type
919.928.4480	mhughes@churtonstrat.com		
☐ Email copy of report notices			
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. Matt Hughes Printed Name of Treasurer  Signature of Appointed Treasurer 07/31/2026 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.  Printed Name of Candidate  Signature of Candidate Date			