

# 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 <i>Friends for Kristy</i>		d. ID Number <i>412836701</i>	
b. Mailing Address (include City, State and Zip Code) <i>418 Intry Way Durham NC 27703</i>		e. Date Organized <i>12/1/05</i>	
c. Committee Website (Optional)		f. Phone Number <i>(910)390-0408</i>	
2. Candidate Information			
a. Full Name <i>Kristy Moore</i>		e. Party Affiliation <i>NA</i>	
b. Mailing Address (include City, State, and Zip Code) <i>418 Intry Way Durham 27703</i>		f. Office Sought <i>Durham School Board / District 4</i>	
c. Phone Number <i>(919)697-0335</i>	d. Email Address <i>KristyforDurham@gmail.com</i>	g. Next Election Year <i>2026</i>	h. Jurisdiction
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name <i>Derevana Leach</i>		a. Full Name	
b. Mailing Address (include City, State, and Zip Code) <i>7025 San Juan Hill Ct</i>		b. Mailing Address (include City, State and Zip Code)	
c. Phone Number <i>(919)600-7395</i>	d. Email Address <i>ladyvana4@gmail.com</i>	c. Phone Number	d. Email Address
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 <i>IN-PERSON</i>	
b. Mailing Address (include City, State, and Zip Code)		<i>DEC 11 2025</i>	
c. Phone Number	d. Email Address	b. Account Code	c. Type <i>Durham County BOE</i>
<input type="checkbox"/> Email copy of report notices			
<p>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.</p> <p><i>Derevana Leach</i> _____ <i>Derevana Leach</i> _____ <i>12/10/25</i> _____                      Printed Name of Treasurer Signature of Appointed Treasurer Date</p> <p>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.</p> <p><i>Kristy Moore</i> _____ <i>Kristy Moore</i> _____ <i>12/10/25</i> _____                      Printed Name of Candidate Signature of Candidate Date</p>			