

Statement of Organization - Candidate Committee

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 Charlie Reece For Durham	c. ID Number PCL-388
b. Mailing Address (include City, State and Zip Code) 3604 Darwin Road Durham, NC 27707	d. Date Organized 7/2/2015
IN PERSON JAN 28 2019 DURHAM BOE	
e. Phone Number (919) 599-1357	

2. Candidate Information		<input checked="" type="checkbox"/> Candidate's Primary Committee	
a. Full Name Charlie Reece	e. Candidate ID Number	f. Party Affiliation Non-partisan	
b. Mailing Address (include City, State, and Zip Code) 3604 Darwin Road Durham, NC 27707	g. Office Sought Durham City Council (at large)		
c. Phone Number (919) 599-1357	d. Email Address charlie@charliefordurham.com	h. Next Election Year 2019	i. Jurisdiction City of Durham
<input checked="" type="checkbox"/> Email copy of notices			

3. Treasurer Information		4. Custodian of Books Information	
a. Full Name Phillip Seib	a. Full Name Charlie Reece		
b. Mailing Address (include City, State, and Zip Code) 618 E. Hammond Street Durham, NC 27704	b. Mailing Address (include City, State, and Zip Code) 3604 Darwin Road Durham, NC 27707		
c. Phone Number (919) 696-4932	d. Email Address Phil4CharlieReece@gmail.com	c. Phone Number (919) 599-1357	d. Email Address charlie@charliefordurham.com

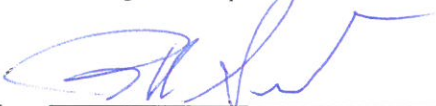
I prefer to receive my notices by email Yes No Email copy of notices

5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name	<input type="checkbox"/> Add <input type="checkbox"/> Remove	a. Financial Institution Full Name Mechanics and Farmers Bank	<input type="checkbox"/> Add <input type="checkbox"/> Remove
b. Mailing Address (include City, State, and Zip Code)	b. Purpose campaign receipts and expenditures		
c. Phone Number	d. Email Address	c. Account Code CR01	d. Type checking
<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.

 Printed Name of Signer: Phillip Seib

 Signature of Appointed Treasurer: 

 Date: 1/28/2019