

Statement of Organization - Candidate Committee

Amendment
 Yes No

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		c. ID Number	
Jackie For Durham City Council			
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
803 South Roxboro Street # 204 Durham NC 27707		03-05-19	
		e. Phone Number	
		(919) 699-4568	
2. Candidate Information <input type="checkbox"/> Candidate's Primary Committee			
a. Full Name		e. Candidate ID Number	f. Party Affiliation
Jacqueline Denise Wagstaff			Democrat <small>(Indicate Non-partisan if applicable)</small>
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought	
1154 Fiske St Durham, NC 27703		NA	
c. Phone Number	d. Email Address	h. Next Election Year	i. Jurisdiction
919-699-4568	jackie4durham@gmail.com	2019	Durham City
<input checked="" type="checkbox"/> Email copy of notices			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name		a. Full Name	
Rhonda D. Willis		n/a	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
803 South Roxboro Street # 204 Durham NC 27707			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
984-244-3504	Jackie 4 Durham @ gmail . com		
I prefer to receive notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Email copy of notices			
5. Assistant Treasurer Information		6. Account Information <small>(incl. CRO-3500)</small>	
a. Full Name		a. Financial Institution Full Name	
n/a		Pending	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
		Political expend.	
c. Phone Number	d. Email Address	c. Account Code	d. Type
<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.			
Rhonda D. Willis		Rhonda Willis	
Printed Name of Signer		Signature of Appointed Treasurer	
		3/5/19	
		Date	

IN PERSON
 MAR 05 2019
 DURHAM BOE



NORTH CAROLINA

State Board of Elections & Ethics Enforcement

Certification of Treasurer

This Certification is used by Candidate Committees to appoint a treasurer for the committee. This form is required and must accompany the Candidate's Statement of Organization.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.


FILED BY:

Candidate Name: Jacqueline D. Wagstaff
Treasurer Name: Rhonda D. Willis
Treasurer Address: 803 South Roxboro Street
(include city, state, & zip) # 204
Durham NC 27707
Treasurer Phone: 984-244-3504

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

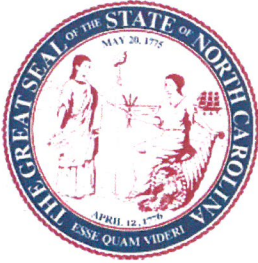
3/5/19
Date Signed


Signature of Candidate

IN PERSON

MAR 05 2019

DURHAM BOE



NORTH CAROLINA

State Board of Elections & Ethics Enforcement

Candidate Designation of Committee Funds

This form is used by candidate committees only and allows the candidate to designate in the event of their death, how the committee's funds are to be disbursed using the eight allowable methods outlined in 163-278.16B(a).

This Designation is filed at the Board of Elections office where the committee's campaign reports are filed.

Candidate Name: Jacqueline D. Wagstaff

Committee Name: Jackie For Durham City Council

Treasurer Name: Rhonda D. Willis

If Candidate is own treasurer, designate an agent to carry out designations: _____

Committee ID #: _____

Level Registered: [State] [County] If county, specify: Durham

I, Jacqueline Wagstaff , hereby direct that in the event of my death or incapacity all
(Name of Candidate)
funds remaining in my Campaign Committee account(s) (after payment of permitted outstanding debts or reasonable expenses for winding up the Committee or closing office) be paid in the following manner as permitted by N.C. Gen. Stat. 163-278.16B(a).

<u>Name of Entity</u> <small>(Select from §163-278.16B(a))</small>	<u>Plan for Disbursement (eg. Amount or %)</u>
1. _____	_____
2. _____	_____
3. _____	_____

By signing this form, I certify that the foregoing entities are eligible beneficiaries under N.C. Gen. Statute 163-278.16B(a). A copy of this form should be maintained with the Committee records.

Signature of Candidate: *[Signature]*
Date: 3/5/19

IN PERSON
MAR 05 2019
DURHAM BOE