

Statement of Organization - Candidate Committee

Is this statement:	
<input checked="" type="checkbox"/> New	<input type="checkbox"/> 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	
LEO for Durham			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
4029 Livingston Pl, Durham, NC 27707		7/20/2023	
c. Committee Website (Optional)		f. Phone Number	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Leonardo "Leo" Williams		Democratic	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
4029 Livingston Pl, Durham, NC 27707		Mayor	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Phil Serbo			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
618 E. Hammond St, Durham, NC			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
	phil4leo@gmail.com		
Send report notices by email <input 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	
b. Mailing Address (include City, State, and Zip Code)			
c. Phone Number	d. Email Address	b. Account Code	c. Type
<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>Phil Serbo Printed Name of Treasurer</p>		<p> Signature of Appointed Treasurer</p>	
		<p>7/20/2023 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>_____ Printed Name of Candidate</p>		<p>_____ Signature of Candidate</p>	
		<p>_____ Date</p>	

IN PERSON
 JUL 20 2023
 DURHAM BOE