Statement of Organization - Political Action Committee Use this form to create a new or update an existing political action committee (PAC). This form must be accompanied by form CRO-3500 (when amending, only re-submit if a

Amendment		
✓ Yes	No	

TANKS OF THE RESERVE OF THE PARTY OF THE PAR		y form CRC)- 3500 (when a	imending, only re-subm	ut if applicable)		= 1
1. Committee Information					I may		
a. Full Name					c. ID Numbe	ėl r	
Building Leaders An	nong Commur	nity PAC					
Mailing Address (in a	hade City Ptoto	and 7in Code			d Data Over		4
b. Mailing Address (include City, State and Zip Code)					d. Date Orga		
PO Box 3344				03/07/2023	3		
Durham, NC 27702					- 70L AT		
					e. Phone Nu		
					919-225-09	9/5	
2 Delitical Astion				12 Compared Owner	inging on ACClintal	C	
	2. Political Action Committee Information			3. Connected Organization or Affiliated Committee			
a. Category (Cha Banking/Finance	eck only one)	T resul		a. Full Name			
Building/Real Estat		Legal		1			
Conservative/Libera		Manufact	uring	h Malling Address Grad	and of the state and state of	. 1 \	
CONTRACT OF THE PARTY OF THE PA	31	THE PARTY OF THE P		b. Mailing Address (inch	b. Mailing Address (include City, State, and Zip Code)		
Environment Get Out the Vote		Party Plan	Party not part of	1			
			-				
Health		Religious Trade		- 701 NT1	Landensia		
Information Techno Telecommunication		Utilities		c. Phone Number	d. Relationship		
2000	ıs	Delicated .		1			
Insurance		Outer/11	ot listed				
b. Type (Check only or				d. Member Definition			
Parent Entity			e candidates	Individuals and organizations committed to equity			
Economic Interest	committe	ed to equity					
	Political Purpose						
4. Treasurer Information			5. Custodian of Books Information				
a. Full Name		a. Full Name					
Eileen J Morgan				Eileen J Morgan			
		150 60 1					
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)				
PO Box 3344		PO Box 3344					
Durham, NC 27702				Durham, NC 27702			
c. Phone Number	d. Email Addre			c. Phone Number		d. Email Address	
919-225-0975	ejtjmorgan46	@gmail.cor	n	919-225-0975	ejtjmorgan46@gma	ail.com	
I prefer to receive	notices by an	nail 🗹 Y	es 🗖 No	Email copy of n	enticon		
			-				
6. Assistant Treasu	rer Informat	ion	Add		7. Account Information (incl. CRO-3500)		
a. Full Name			Remove	a. Financial Institution Full Name Remove			10
				First Horizon Bank			
				 		IA L EX	POOL
b. Mailing Address (include City, State, and Zip Code)		b. Purpose IN PERS			FRSOI		
		Deposit contributions and pay expenses					
						MAY	0 9 2023
						יאויו	O 9 LULS
c. Phone Number	d. Email Addre	ess		c. Account Code	d. Type		
				B100	Checking	DURH	AM BO
				-			
Email copy of:	notices						
CERTIFICATION					_		
		und is in co	ompliance with	all applicable provision	ns of Article 22A 22B	& 22D-22M of	
· ·			_	are commingled with p			
further certify that			_	7 1 1	TOTAL OF CHIEF HOLE	and to sour runus.	
Eileen J Morgan	ans report is	complete, t	i uo and confect	le VIII	01/1/202	23	
	d Name of Signe	r	- ta	ignature of Appointed Treas		Date	
				- FAM - CONTROLLE - CONT			411