

# Statement of Organization - Political Action Committee

Amendment  
 Yes  No

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 applicable)

<b>1. Committee Information</b>			
a. Full Name Mom On Mission (M.O.M) PAC		c. ID Number	
b. Mailing Address (include City, State and Zip Code) 9 Ridgeway Ave Apt F Durham, NC 27701		d. Date Organized 1/1/2017	
		e. Phone Number 919-591-6309	
<b>2. Political Action Committee Information</b>		<b>3. Connected Organization or Affiliated Committee</b>	
a. Category (Check only one)		a. Full Name	
<input type="checkbox"/> Banking/Finance <input type="checkbox"/> Building/Real Estate <input type="checkbox"/> Conservative/Liberal <input type="checkbox"/> Environment <input type="checkbox"/> Get Out the Vote <input type="checkbox"/> Health <input type="checkbox"/> Information Technology / Telecommunications <input type="checkbox"/> Insurance <input type="checkbox"/> Legal <input type="checkbox"/> Manufacturing <input type="checkbox"/> Minority <input type="checkbox"/> Political Party not part of Party Plan of Org. <input type="checkbox"/> Religious <input type="checkbox"/> Trade <input type="checkbox"/> Utilities <input type="checkbox"/> Other / Not listed		b. Mailing Address (include City, State, and Zip Code)	
b. Type (Check only one)		c. Phone Number	
<input type="checkbox"/> Parent Entity <input type="checkbox"/> Economic Interest <input checked="" type="checkbox"/> Political Purpose		d. Relationship	
c. Definition of Type Community Advocates for good Government		d. Member Definition Residents of Public Housing for good government	
<b>4. Treasurer Information</b>		<b>5. Custodian of Books Information</b>	
a. Full Name Ora Mae Smith		a. Full Name	
b. Mailing Address (include City, State, and Zip Code) 9 Ridgeway Ave Apt F Durham, NC 27701		b. Mailing Address (include City, State, and Zip Code)	
c. Phone Number 919-591-6309		c. Phone Number	
d. Email Address Gistoramae@yahoo.com		d. Email Address	
I prefer to receive notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of notices	
<b>6. Assistant Treasurer Information</b>		<b>7. Account Information (incl. CRO-3500)</b>	
a. Full Name Jacqueline D. Wagstaff		a. Financial Institution Full Name NA	
b. Mailing Address (include City, State, and Zip Code) 1156 Fiske St Durham, NC 27703		b. Purpose Political Endorsements and PAC Contributions	
c. Phone Number 919-699-4568		c. Account Code NA	
d. Email Address jwagstaff1958@gmail.com		d. Type NA	
<input checked="" type="checkbox"/> Email copy of notices			
<b>CERTIFICATION</b>			
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.			
Ora Mae Smith Printed Name of Signer		Ora Mae Smith Signature of Appointed Treasurer	7/27/17 Date

IN PERSON  
 JUL 27 2017  
 DURHAM BOE