

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
THE COMMITTEE TO ELECT JAMES LYONS FOR MAYOR	
b. Mailing Address (include City, State and Zip Code)	d. Date Organized
PO BOX 110491 DURHAM, NC 27709	
	e. Phone Number

2. Candidate Information

☐ Candidate's Primary Committee

a. Full Name	e. Candidate ID Number	f. Party Affiliation
James L. Lyons		DEMOCRATIC (Indicate Non-partisan if applicable)
b. Mailing Address (include City, State, and Zip Code)	g. Office Sought	
P.O. BOX 110491 DURHAM, NC 27709	MAYOR	
c. Phone Number	d. Email Address	h. Next Election Year
919-627-3207	info@jameslyonsformayor.com	2015
<input type="checkbox"/> Email copy of notices		i. Jurisdiction

3. Treasurer Information

a. Full Name
Tammy Lyons
b. Mailing Address (include City, State, and Zip Code)
PO BOX 110491 DURHAM, NC 27709
c. Phone Number
919-627-3207
d. Email Address
tammy.lyons1220@gmail.com

4. Custodian of Books Information

a. Full Name
IN PERSON
b. Mailing Address (include City, State, and Zip Code)
MAR 25 2015
DURHAM BOE
c. Phone Number
d. Email Address

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

5. Assistant Treasurer Information

a. Full Name	<input type="checkbox"/> Add <input type="checkbox"/> Remove
b. Mailing Address (include City, State, and Zip Code)	
c. Phone Number	d. Email Address
<input type="checkbox"/> Email copy of notices	

6. Account Information (incl. CRO-3500)

a. Financial Institution Full Name	<input type="checkbox"/> Add <input type="checkbox"/> Remove
b. Purpose	
c. Account Code	d. Type

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.

James Lyons
Printed Name of Signer

Signature of Appointed Treasurer

3/25/15
Date