Amendment	
□ Yes	-√ No

Statement of Organization - Candidate Committee Use this form to create a new or update an existing candidate committee.

This form must be accompanied by forms CRO-3100 and CR	O-3500 (when amending,			
1. Committee Information				
a. Full Name		c. ID Number		
Dwight White Her Cunty Corb. Mailing Address (include City, State and Zip Code)	mmissioner			
b. Mailing Address (include City, State and Zip Code)		d. Date Organized		
901 Chalk Level Rd. Apt. IIs Durham, NC		10/22/15		
000		e. Phone Number		
27701		(919) 903-7788		
2. Candidate Information	✓ Cang	didate's Primary Committee		
a, Full Name	e. Candidate ID Number	f. Party Affiliation		
Divions M Whitaker II		Democrusic (Indicate Non-partisan if applicable)		
b. Mailing Address (include City, State, and Zip Code)	g. Office Sought	(Hareate 1405-partises) if applicable)		
931 Chalk level Ra Apt To Tumon, Ac	County Con	mmissioner		
c . Phone Number d. Email Address	h. Next Election Year	i. Jurisdiction		
(113) 9M-7785 White, HPC 3700 gmail. Com	2016	County		
3. Treasures Latermation	4. Custodian of Books I	nformation in the second		
a. Full Name	a. Full Name			
Janice S. Johnson				
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City, State, and Zip Code)			
12-30 Willowdale Dr	dale Dr			
Durham, NC 27107				
c. Phone Number d. Email Address	c. Phone Number d. Em	ail Address		
919-475-8937 janijoh9e aclieum	:			
I prefer to receive notices by email Yes No		Email copy of notices		
5. Assistant Treasurer Information L Add	6. Account Information (incl. CRO-3500) Add			
a. Foll Name	a. Financial Institution Full N	vame Remove		
		IN PERSON		
b. Mailing Address (include City, State, and Zip Code)	b. Purpose			
		OCT 2 2 2015		
Discovery of the state of the s	c. Account Code d. Ty	DURHAM BOE		
c. Phone Number d. Email Address	c. Account Code d. Ty	<u>ре</u>		
Email copy of notices	i			
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.				
Dwight Whitaker Ruyal Unity 10/22/15 Printed Name of Signer Signature of Appointed Treasurer Date				
Printed Name of Signer Signature of Appointed Trafasurer Date				



North Carolina

State Board of Elections

441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director

IN PERSON

OCT 2 2 2015

DURHAM BOE

Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

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:	Dwight Whitaker	
Treasurer Name:	Janiec S. Johnson	
Treasurer Address:	1230 Willowdale Dr.	
(include city, state, & zip)	Durham, NC 27707	
Treasurer Phone:	919-475-8937	
		

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).

Date Signed

Gruff Uhittyr Signature of Candidate



North Carolina

State Board of Elections

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Kim Westbrook Strach Executive Director

IN PERSON

OCT 2 2 2015

DURHAM BOE

Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

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

		ight allowable methods outlined in	
This Designation is filed		e where the committee's campai	gn reports are filed.
Candidate Name:	Dwight Whilt		
Committee Name:	Dwight Whitake	Tohnson	SSIONEC
Treasurer Name:	Janice S.	Johnson	
If Candidate is own tr	easurer, designate an agent	t to carry out designations:	
Committee ID #:			
Level Registered:	[State] (County) If county	, specify: Durham	
Name of Candidate funds remaining in m debts or reasonable e	e) y Campaign Committee ac	that in the event of my death count(s) (after payment of pothe Committee or closing of at. 163-278.16B(a).	ermitted outstanding
	of Entity §163-278.16B(a))	Plan for Disbursement (6	eg. Amount or %)
1. Village of W	isciom	50%	
2. The Men of Se	mper Ficielis.	<u>5</u> %6	
3	<u></u>		
Gen. Statute 163-278. records.	.16B(a). A copy of this for	entities are eligible beneficients should be maintained with	
Signature of Candidat	injarlie	wivwy.	****
Date: CRO-3900	Cardidate Decian	ution of Committee Funds	July 2014
しれい-3岁い	Canadade Designo	aton of committee Laims	JHIJ LUIT