

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				IN PERSON	
a. Full Name Heidi Carter for County Commissioner			c. ID Number DEC 08 2015		
b. Mailing Address (include City, State and Zip Code) 31 Falling Water Dr Durham, NC 27713			d. Date Organized 11/3/15		
			e. Phone Number 919-225-4268		
2. Candidate Information				<input type="checkbox"/> Candidate's Primary Committee	
a. Full Name Heidi Hale Carter		c. Candidate ID Number 240-25-9283		f. Party Affiliation Democrat (Indicate Non-partisan if applicable)	
b. Mailing Address (include City, State, and Zip Code) 31 Falling Water Dr Durham, NC 27713		g. Office Sought Durham Board of County Commissioners			
c. Phone Number 919-225-4268	d. Email Address hncjag@yahoo.com	h. Next Election Year 2016		i. Jurisdiction Durham County Durham, NC	
<input type="checkbox"/> Email copy of notices					
3. Treasurer Information		4. Custodian of Books Information			
a. Full Name Jose Miguel Sandoval		a. Full Name			
b. Mailing Address (include City, State, and Zip Code) 3 Barkridge Ct Durham, NC 27713		b. Mailing Address (include City, State, and Zip Code)			
c. Phone Number 919-308-2261	d. Email Address sandoval.jm11@gmail.com	c. Phone Number		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					
5. Assistant Treasurer Information		6. Account Information			
a. Full Name		a. Financial Institution Full Name		b. Purpose	
b. Mailing Address (include City, State, and Zip Code)		c. Account Code		d. Type	
c. Phone Number		d. Email Address			
<input type="checkbox"/> Email copy of notices					
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.					
JOSE M. SANDOVAL		[Signature]		12/3/2015	
Printed Name of Signer		Signature of Appointed Treasurer		Date	



North Carolina
State Board of Elections
441 N Harrington Street
Raleigh, NC 27603

Kim Westbrook Strach
Executive Director

IN PERSON

DEC 08 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:

Heidi Carter

Treasurer Name:

Jose Miguel Sandoval

Treasurer Address:

3 Barkridge Court - Durham, NC 27713

(include city, state, & zip)

Treasurer Phone:

919-308-2261

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).

12/1/2015

Date Signed

Heidi A. Carter

Signature of Candidate



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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, how the committee's funds are to be disbursed using the eight allowable methods outlined in 163-278.16B(a).

This Designation is filed at the Board of Elections office where the committee's campaign reports are filed.

Candidate Name: Heidi Carter

Committee Name: Heidi Carter for County Commissioner

Treasurer Name: Jose Miguel Sandoval

If Candidate is own treasurer, designate an agent to carry out designations: _____

Committee ID #: _____

Level Registered: [State] [County] If county, specify: Durham

I, Heidi Carter, hereby direct that in the event of my death or incapacity all
(Name of Candidate)
funds remaining in my Campaign Committee account(s) (after payment of permitted outstanding debts or reasonable expenses for winding up the Committee or closing office) be paid in the following manner as permitted by N.C. Gen. Stat. 163-278.16B(a).

Name of Entity (Select from §163-278.16B(a))	Plan for Disbursement (eg. Amount or %)
1. <u>Student U</u>	<u>100%</u>
2. _____	_____
3. _____	_____

By signing this form, I certify that the foregoing entities are eligible beneficiaries under N.C. Gen. Statute 163-278.16B(a). A copy of this form should be maintained with the Committee records.

Signature of Candidate: Heidi H Carter

Date: 12/8/15