

# Statement of Organization - Candidate Committee

Amendment

☐ Yes ☒ No

☐ 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

☐ Candidate's Primary Committee

a. Full Name Heidi Hale Carter		e. 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 hhcjog@yahoo.com	h. Next Election Year 2016	i. Jurisdiction Durham County Durham, NC

## 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.jm1@gmail.com	c. Phone Number	d. Email Address

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

## 5. Assistant Treasurer Information

## 6. Financial Institution Information

a. Full Name		a. Financial Institution Full Name	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
c. Phone Number	d. Email Address	c. Account Code	d. Type

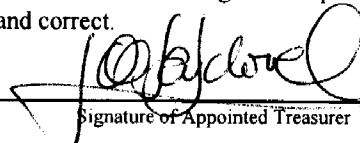
☐ Email copy of notices

## 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

Printed Name of Signer



Signature of Appointed Treasurer

12/3/2015

Date