## Statement of Organization - Candidate Committee Use this form to create a new or update an existing candidate committee. This form must be accommanied by forms CRO-3100 and CRO-3500 (when

Amendment Yes No No

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		
	TTEE TO EL	LECT "	DON MOF	FITT	-	
b. Mailing Address (inc	lude City, State and Zip Code)				d. Date Organized	
2110 ENGLEWOOD AVE					JANUARY 9,2008	
DURHAM NC 27705					e. Phone Number	
DONALLION DE LIOS					919 286-3584	
2. Candidate Inform	mation			Candida	nte's Primary Committee	
a. Full Name			e. Candidate ID Numbe	e. Candidate ID Number f. Party Affiliation		
DON L.	MOFFITT				Candicate Non-partisan if applicable)	
b. Mailing Address (inc	lude City, State, and Zip Code)		g. Office Sought			
	LSON ST		BOARD	OF		
	AM NC 277	05			imissioners	
c . Phone Number	d. Email Address		h. Next Election Year		Jurisdiction	
			II. ITEM ANDONO.			
	<u></u>				Durtham	
☐ Email copy of no						
3. Treasurer Inform	nation		4. Custodian of Boo	oks Infor	mation	
a. Full Name			a. Full Name			
MARILYNBUTTER					IN DEDCON	
b. Mailing Address (incl	lude City, State, and Zip Code)		b. Mailing Address (inc	lude City, S	SULPERSON	
2110 ENGLEWOODAYE				JUL <b>2 5</b> 2011.		
	1 NC 2770	3 <u>5</u>				
c. Phone Number	d. Email Address		c. Phone Number	d. Email A	49thRHAM BOE	
919 286-3584 botler marily no gmail.com						
I prefer to receive	notices by email Y	Yes No	Email copy of			
5. Assistant Treasu	rer Information		6. Account Information (incl. CRO-3500) Add			
a. Full Name	L	Remove	a. Financial Institution	Full Name	Remove	
			MECHANIC	SOF	FARMERS BANK	
b. Mailing Address (include City, State, and Zip Code)			b. Purpose			
			CAMPAIGN ACCOUNT			
c. Phone Number	d. Email Address		c. Account Code	d. Type		
			101	CHE	ECKING	
Email copy of notices						
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.						
Printed Name of Signer   Manufacture of Appointed Treasurer Date						