Statement of Organization - Candidate Committee

Is this st	atement:	
☐ New	☐ Amended	

Use this form to create a new or update an existing candidate committee.					
This form must be accompanied by form CRO-3500. An amended form is required for each new election year.					
1. Committee Information	als to				
a. Name of Committee					
NC State Board of Elections					
Committee To Elect Kanika Brou b. Mailing Address (include City, State and Zip Code)	e. Date Organized				
1.4 01					
1549 Pleasant Street, Winston	7 12-1-2029				
c. Committee Website (Optional)	f. Phone Number				
2. Candidate Information					
a. Full Name	e. Party Affiliation				
12. 11 Q		0 11			
Kanika Brown	Democratic Party f. Office Sought				
b. Mailing Address (include City, State, and Zip Code)	I. Office Sought				
1549 Pleasant Street Winston-Salen	Stere House representive				
NC,27107	1				
c . Phone Number d. Email Address	g. Next Election Year	h. Jurisdiction			
336-995-766 Kanikabrown 18 @ gmailicm	2020	Winston-Salem			
Email copy of report notices					
3. Treasurer Information	4. Assistant Treasurer Information				
a. Full Name	a. Full Name				
Vamela Jackson					
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City, State and Zip Code)				
$\omega \in \mathcal{U}$	214 Azalea Terrace dowt				
3116 Asheton Grove Ct 2912	27/05				
c. Phone Number d. Email Address	c. Phone Number d. Email Address				
336-6151380 pamytacksono anai)	336 918-2468				
Send report notices by email MYes No	☐ Email copy of report notices				
5. Custodian of Books Information (Keeper of Records)	6. Account Information (incl. CRO-3500)				
a, Full Name	a. Financial Institution Full Name				
Selvyn L. Jordan	Trullant Federal Credit Union				
b. Mailing Address (include City, State, and Zip Code)	33 44 3 2 410 2				
Gloo Noxbury Cti	Checking Acoust for Committee				
Kernersville, M.C. 27284					

I certify that the Committee is in compliance with all applicable provisions of Article 22A 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 Treasurer

d. Email Address

Selvynij@small . com

Signature of Appointed Treasurer

b. Account Code

1.

c. Type

checking

12/12/19 Date

I certify that the information above is correct, and I, as the candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties in Article 22A of Chapter 163 of the NC General Statutes.

Printed Name of Candidate

Signature of Candidate

November 2019

c. Phone Number

336682-5130

Email copy of report notices



North Carolina

State Board of Elections

441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

Certification of Threshold

This Certification is used to declare or withdraw a committee's intent to raise or spend \$1,000 or less in the current election cycle.

This Certification is only valid for political party committees and candidates for a county office, municipal office, local school board office, soil & water conservation district board of supervisors, or sanitary district board.

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

FILED BY: Committee Name: Treasurer Name: Treasurer Address: (include city, state, & zip) 336-615-1386 Treasurer Phone: Check One: _ I certify that this committee intends to neither receive nor expend more than \$1,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$1,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports. THIS DECLARATION CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE. I am withdrawing my Certification to remain at or under the \$1,000 threshold. I will now be required to file the next scheduled report for all contributions and expenditures that have not been previously reported from the beginning of the current election cycle. I further agree to file all future reports required.