

# Statement of Organization - Candidate Committee

Is this statement:

☐ 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.

<b>1. Committee Information</b>			
a. Name of Committee		d. ID Number	
Committee to Elect Mishell Williams			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
PO Box 1151 Harrisburg, NC 28075		12/05/2025	
c. Committee Website (Optional)		f. Phone Number	
		980-288-6179	
<b>2. Candidate Information</b>			
a. Full Name		e. Party Affiliation	
Mishell Williams		Democratic	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
PO Box 1151 Harrisburg, NC 28075		Board of Education	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
980-288-6179	mishellwilliams2@gmail.com	2026	Cabarrus County Schools
<input type="checkbox"/> Email copy of report notices			
<b>3. Treasurer Information</b>		<b>4. Assistant Treasurer Information</b>	
a. Full Name		a. Full Name	
Sonya Rorie			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
5213 Butternut Dr. Charlotte, NC 28215			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
704-965-9038	sonyarorie7@gmail.com		
Send report notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of report notices	
<b>5. Custodian of Books Information (Keeper of Records)</b>		<b>6. Account Information (incl. CRO-3500)</b>	
a. Full Name		a. Financial Institution Full Name	
b. Mailing Address (include City, State, and Zip Code)		b. Account Code	
		CABARRUS COUNTY BOARD OF ELECTIONS	
c. Phone Number	d. Email Address		
<input type="checkbox"/> Email copy of report notices			
<p>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.</p> <p> <u>Sonya Rorie</u>      <u>Sonya Rorie</u>      12.5.25  Printed Name of Treasurer      Signature of Appointed Treasurer      Date </p> <p>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.</p> <p> <u>Mishell Williams</u>      <u>Mishell Williams</u>      12/5/25  Printed Name of Candidate      Signature of Candidate      Date </p>			