

Statement of Organization - Candidate Committee

Is this statement:	
<input checked="" type="checkbox"/> New	<input type="checkbox"/> 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			
a. Name of Committee		d. ID Number	
Committee to Elect NeQueela Deas-Blanton		—	
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
35 Church St., S. Concord, NC 28025 Ste #106		1/2/2020	
c. Committee Website (Optional)		f. Phone Number	
		(704) 665-7633	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
NeQueela NeVette Deas-Blanton		Democratic	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
35 Church St., S #106 Concord, NC 28025		Cabarrus Co. School Board	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
(704) 665-7633	ndblanton_ces@yahoo.com	2020	Cabarrus
<input checked="" type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
OCTAVIUS L SEYMORE		CABARRUS COUNTY BOARD OF ELECTIONS	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
3120 Passour Ridge Lane Charlotte, NC 28269		JAN 06 2020	
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
954-592-3594	taniseymore@gmail.com		RECEIVED
Send report notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> 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	
— N/A		Woharive Bank	
b. Mailing Address (include City, State, and Zip Code)		b. Account Code	
— N/A		2020	
c. Phone Number	d. Email Address	c. Type	
— N/A	— N/A	Checking	
<input checked="" 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>OCTAVIUS L SEYMORE</u> <u>O L Seymore</u> <u>1-2-20</u> 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>NeQueela Deas-Blanton</u> <u>NeQueela Deas-Blanton</u> <u>1/2/20</u> Printed Name of Candidate Signature of Candidate Date </p>			