Statement of Organization - Candidate Committee Use this form to create a new or update an existing candidate committee.

Amendment	
✓ Yes	☐ No

	accompanied by forms CRO-3	3100 and CR	O-3500 (when ame	ending, on	ly re-submit if	applicable).	
1. Committee Info	rmation				c, ID Numb		
a. Full Name							
Committee to Elect Ericka Ellis-Stewart						2GXPTK	
b. Mailing Address (in	nclude City, State and Zip Code)				d. Date Org	ganized	
PO Box 620189, C	Charlotte, NC 28262				e. Phone Nu	mher	
10 Box 020121,	nanoue, no zozoz)4-412-8565	
2. Candidate Info	rmation		N. W. M.	***************************************	date's Primary C		
a. Full Name	MANAGORIAN TO THE TOTAL THE TOTAL TO THE TOTAL THE TOTAL TO THE TOTAL		e. Candidate ID Numb	ber	f. Party Aff		
Ericka Ellis-Stewar	rt	į	2GXPTK		Non-Parti	sam	
					(Indicate No	on-partican if applicable)	
b. Mailing Address (in	aclude City, State, and Zip Code)		g. Office Sought				
PO Box 620189, C	Charlotte, NC 28262	ļ	At-Large Board of	Educatio	n		
c . Phone Number	d. Email Address		h. Next Election Year		i. Jurisdiction		
704-412-8565	ericka4cmsboard@yahoo.co	om			1 delambare		
☐Email copy o	of notices		1	2019	Mecklenburg	County	
3. Treasurer Infor			4. Custodian of Books Information				
a. Full Name			a. Full Name	500000000000000000000000000000000000000	53000 3000 Married and a second	Septiment of the second	
Janice E. Woods							
b. Mailing Address (in	nclude City, State, and Zip Code)		b. Mailing Address (in	aclude City,	, State, and Zip C	ode)	
10233 Claybrooke	Drive, Charlotte, NC 28262				_		
c. Phone Number	d. Email Address		c. Phone Number	d. Email A	Address		
704-919-1378	jellis055@carolina.rr.com						
	e notices by email Ye						
5. Assistant Treasi	arer Information	-		6. Account Information (incl. CRO-3500)			
a. Full Name		Remove	a. Financial Institution	a Full Name	<u>e</u>	Remove	
- 25-311 - Addwage (in	. City State and Tin Code)				MEGKLENBUR	10 county	
o. Mailing Address (inc	clude City, State, and Zip Code)		b. Purpose		4	·	
				NOV 12 2015			
c. Phone Number	d. Email Address		c. Account Code	d. Type	BOARD OF E	ELECTIONS	
			1				
☐ Email copy of CERTIFICATION							
	N Committee or Fund is in compl	cliance with a	annlicable provis	ions of Ar	rtiole 22A, 22F	≥ & 22D-22M of	
•	ne NC General Statutes and that						
•	hat this report is complete, true		_	r-			
•	(٠ ٨ ٠	\cap			
	nice E. Woods	Jan	er le. Wo	ucho.		1/10/2015	
Printe	ted Name of Signer	() Sign	mature of Appointed Trea	asurer		Date	



North Carolina State Board of Elections

441 N Harrington Street Raleigh, NC 27603

North Carolina

BOARD OF ELECTIONS

MECKLENBURG COUNTY

NOV 12 2015

Kim Westbrook Strach Executive Director

Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

Certification of Treasurer

This Certification is used by Candidate Committees to appoint a treasurer to the committee. This form is required and must accompany the Candidate's Statement of Organization

FILED BY:	
Candidate Name:	Ericka Ellis-Stewart Janice Woods
Treasurer Name:	Janice Woods
Treasurer Address:	10233 Claybrooke Drive
(include city, state, & zip)	Charlotte, NC 28262
Treasurer Phone:	704-919-1378

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

11/10/15

Date Signed

Signature of Candidate

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.