

# Statement of Organization - Candidate Committee

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by forms CRO-3100 and CRO-3500 (when amending, only resubmit if applicable).

Amendment

☒ Yes

☐ No

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|   |  |                       |  |                  |   |
|---|--|-----------------------|--|------------------|---|
| <b>1. Committee Information</b>   |  |                       |  |                  |   |
| a. Full Name<br>Campaign for D.D. Adams   |  |                       | c. ID Number<br>ICQCYV                                 |                  |   |
| b. Mailing Address (include City, State and Zip Code)<br>3661 Marlave Ave<br>Winston-Salem, NC 27106  |  |                       | d. Date Organized<br>6/12/09                           |                  |   |
|   |  |                       | e. Phone Number<br>336-345-2153                        |                  |   |
| <b>2. Candidate Information</b>   |  |                       |  |                  |   |
| a. Full Name<br>Denise Darcel Adams   |  |                       | e. Candidate ID Number                                 |                  | f. Party Affiliation<br>(Indicate Non-partisan if applicable) |
| b. Mailing Address (include City, State, and Zip Code)<br>3661 Marlave Ave<br>Winston-Salem, NC 27106   |  |                       | g. Office Sought<br>City Council - North Ward          |                  |   |
| c. Phone Number<br>336-345-2153   | d. Email Address<br>dadam34@icloud.com | h. Next Election Year |  | i. Jurisdiction  |   |
| <input type="checkbox"/> Email copy of notices  |  |                       |  |                  |   |
| <b>3. Treasurer Information</b>   |  |                       | <b>4. Custodian of Books Information</b>               |                  |   |
| a. Full Name<br>Shirelle Stewart-Riddick  |  |                       | a. Full Name   |                  |   |
| b. Mailing Address (include City, State, and Zip Code)<br>3131 Stone Forest Dr<br>W-S, NC 27105   |  |                       | b. Mailing Address (include City, State, and Zip Code) |                  |   |
| c. Phone Number<br>(336) 324-1745   | d. Email Address<br>SRiddick@gmail.com | c. Phone Number       |  | d. Email Address |   |
| I prefer to receive notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |  |                       | <input type="checkbox"/> Email copy of notices         |                  |   |
| <b>5. Assistant Treasurer Information</b>   |  |                       | <b>6. Account Information (incl. CRO-3500)</b>         |                  |   |
| a. Full Name  |  |                       | a. Financial Institution Full Name<br>Wells Fargo      |                  | b. Purpose<br>checking/campaign committee                     |
| b. Mailing Address (include City, State, and Zip Code)  |  |                       | c. Account Code<br>WACH                                |                  | d. Type<br>checking   |
| c. Phone Number   | d. Email Address                       | c. Account Code       |  | d. Type          |   |
| <input type="checkbox"/> Email copy of notices  |  |                       |  |                  |   |
| <b>CERTIFICATION</b>  |  |                       |  |                  |   |
| 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.   |  |                       |  |                  |   |
| Shirelle Stewart-Riddick<br>Printed Name of Signer  |  |                       | [Signature]<br>Signature of Appointed Treasurer        |                  | 7/19/2013<br>Date   |

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RECEIVED 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  
Fax: (919) 715-8047

### 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:

Dennis D. Adams

Treasurer Name:

Shirelle Stewart Riddick

Treasurer Address:

3131 Stone Forest Drive

(include city, state, & zip)

Winston-Salem, NC 27105

Treasurer Phone:

(336) 723-2513 / (336) 324-1745

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).

7/19/13  
Date Signed

[Signature]  
Signature of Candidate

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