

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.

1. Committee Information

a. Name of Committee

Regina for Winston

d. ID Number

12

b. Mailing Address (include City, State and Zip Code)

1258 Partridge Lane, Winston Salem, NC 27106

e. Date Organized

11/21/23

c. Committee Website (Optional)

www.reginaforwinston.com

f. Phone Number

571-201-3793

2. Candidate Information

a. Full Name

Regina Ford Hall

e. Party Affiliation

Democrat

b. Mailing Address (include City, State, and Zip Code)

1258 Partridge Lane
Winston Salem, NC 27106

f. Office Sought

Winston Salem City Council - Northwest Ward

c. Phone Number

571-201-3793

d. Email Address

regina@reginaforwinston.com

g. Next Election Year

2024

h. Jurisdiction

Northwest Ward

☒ Email copy of report notices

3. Treasurer Information

a. Full Name

DeWayne Hall

4. Assistant Treasurer Information

a. Full Name

Raneesha Ford

b. Mailing Address (include City, State, and Zip Code)

1258 Partridge Lane
Winston Salem, NC 27106

b. Mailing Address (include City, State and Zip Code)

10652 Hillshire Avenue
Baton Rouge, LA 70810

c. Phone Number

336-817-3064

d. Email Address

info@reginaforwinston.com

c. Phone Number

2403049262

d. Email Address

info@reginaforwinston.com

Send report notices by email ☒ Yes ☐ No

☒ Email copy of report notices

5. Custodian of Books Information (Keeper of Records)

a. Full Name

DeWayne Hall

6. Account Information (incl. CRO-3500)

a. Financial Institution Full Name

b. Mailing Address (include City, State, and Zip Code)

1258 Partridge Lane
Winston Salem, NC 27106

c. Phone Number

336-817-3064

d. Email Address

info@reginaforwinston.com

b. Account Code

c. Type

☒ Email copy of report notices

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.

DeWayne Hall

Printed Name of Treasurer

DeWayne Hall

Signature of Appointed Treasurer

11/21/23

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.

Regina Ford Hall

Printed Name of Candidate

Regina Ford Hall

Signature of Candidate

11/21/23

Date

CRO-2100A

NC State Board of Elections

November 2019



NORTH CAROLINA

STATE BOARD OF ELECTIONS

2023 NOV 21 PM 4:25

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: Regina for Winston
Treasurer Name: DeWayne Hall
Treasurer Address: 1258 Partridge Lane
(include city, state, & zip) Winston Salem, NC 27106
Treasurer Phone: 336-817-3064

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.

11/21/23

Date Signed

Regina Ford Hall
Signature



NORTH CAROLINA STATE BOARD OF ELECTIONS

NOV 21 PM 4:29

Candidate Designation of Committee Funds

This form is used by candidate committees only and allows the candidate to designate in the event of their death, how the committee's funds are to be disbursed using the eight allowable methods outlined in 163-278.16B(a).

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

Candidate Name: Regina Hall
Committee Name: Regina for Winston
Treasurer Name: DeWayne Hall

If Candidate is own treasurer, designate an agent to carry out designations: _____

Committee ID #: 12

Level Registered: Forsyth County
[State] [County] If county, specify: _____

Regina Hall

I, _____, hereby direct that in the event of my death or incapacity all
(Name of Candidate)
funds remaining in my Campaign Committee account(s) (after payment of permitted outstanding debts or reasonable expenses for winding up the Committee or closing office) be paid in the following manner as permitted by N.C. Gen. Stat. 163-278.16B(a).

	<u>Name of Entity</u> (Select from §163-278.16B(a))	<u>Plan for Disbursement (eg. Amount or %)</u>
1.	<u>YMCA of NWNC</u>	<u>50%</u>
2.	<u>Insight Human Services</u>	<u>50%</u>
3.	_____	_____

By signing this form, I certify that the foregoing entities are eligible beneficiaries under N.C. Gen. Statute 163-278.16B(a). A copy of this form should be maintained with the Committee records.

Signature of Candidate: _____

11/21/23

Date: _____