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Amendment 🚺 Yes No No

Statement of Organization - Political Action Committee Use this form to create a new or update an existing political action committee (PAC). This form must be accompanied by form CRO-3500 (when amending, only re-submit if applicable)

1. Committee Information		TD 11 -	
a. Full Name		c, ID Numbe	er ·
Forayth Black Cauce	in		21
b. Mailing Address (include City, State and Zip Code)		d. Date Org	anized - 2024
1200-2 Willie DAVIS Drive		7-15	- 2000
INTER NEWS NEW		e. Phone Nu	mber
2010 11 112 112		336	libei
Winston Salem N.C 27105		41	4-1534
2. Political Action Committee Information	3. Connected Organization	or Affiliated	Committee
. Category (Check only one)	a. Full Name		
Banking/Finance Legal			
Building/Real Estate Manufacturing Conservative/Liberal Minority	b. Mailing Address (include City, State, and Zip Code)		
Environment Political Party not part of			
Get Out the Vote Party-Plan of Org.			7 4 1
Health Religious			
Information Technology / Trade	c. Phone Number d. R	elationship	
Telecommunications Utilities			20
b. Type (Check only one) c. Definition of Type	d. Member Definition		2 7
Parent Entity			
Economic Interest			- 12 ¹
Political Purpose	5. Custodian of Books Info	www.cdlan	N
4. Treasurer Information	a. Full Name	rmation	
LUNGHIR KENCE AGOSON			i i i i i i i i i i i i i i i i i i i
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City,	, State, and Zip C	
1200-2 Willie DAVIS Drive			
Window Salex NIC 29105	1		
c. Phone Number d. Email Address	c. Phone Number d. E	mail Address 🦷	
401.000 JUANER OGNARADI JOIN JOIN OGS 100		5	and the second sec
I prefer to receive notices by email I Yes I No	Email copy of notices	3	
6. Assistant Treasurer Information	7. Account Information	(incl. CRO-3500)	Add
a. Full Name Remove	a. Financial Institution Full Nam		Remove
	DU II N		
	Hells Farad	/ <mark>-</mark>	
b. Mailing Address (include City, State, and Zip Code)	b. Purpose		
Amended	Δ.	1200	
	LAMORIAN	CARO	
c. Phone Number d. Email Address	c. Account Code / d. T	ype	
	DD DLI	1	
Email copy of notices	17274	necking	9
CERTIFICATION I certify that the Committee or Fund is in compliance with	all applicable provisions of A:	ticle 22A 22P	22D-22M of
Chapter 163 of the NC General Statutes and that no funds			
further certify that this report is complete, true and concer		a or other non-	algeresed fullus. 1
Laughha Rente Herson hunt	mai Kenerg, Alenson	_ 2-	he all
Printed Name of Signer ()	Signature of Appointed Treasurer	<i>6</i>	Date
CRO-2100D NC State B	loard of Elections		July 2014