

# 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.

<b>1. Committee Information</b>			
a. Name of Committee Committee To Elect Delreese Simmons		d. ID Number FK1T5A	
b. Mailing Address (include City, State and Zip Code) 600 Oliver Street Mount Olive NC 28365		e. Date Organized 2-24-22	
c. Committee Website (Optional) Simmons4district2commissioner@gmail.com		f. Phone Number 919-394-4482	
<b>2. Candidate Information</b>			
a. Full Name Delreese Nortrenzo Simmons		e. Party Affiliation Democratic	
b. Mailing Address (include City, State, and Zip Code) 600 Oliver Street Mount Olive NC 28365		f. Office Sought MO District 2 Commissioner	
c. Phone Number 919-394-4482	d. Email Address delreese@simmons@gmail.com	g. Next Election Year 2022	h. Jurisdiction Mount Olive
<input type="checkbox"/> Email copy of report notices			
<b>3. Treasurer Information</b>		<b>4. Assistant Treasurer Information</b>	
a. Full Name Delreese Simmons		a. Full Name	
b. Mailing Address (include City, State, and Zip Code) 600 Oliver St. Mount Olive NC 28365		b. Mailing Address (include City, State and Zip Code)	
c. Phone Number 919-394-4482	d. Email Address simmons4district2commissioner@gmail.com	c. Phone Number	d. Email Address
Send report notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of report notices	
<b>5. Custodian of Books Information (Keeper of Records)</b>		<b>6. Account Information (incl. CRO-3500)</b>	
a. Full Name		a. Financial Institution Full Name	
b. Mailing Address (include City, State, and Zip Code)		b. Account Code	
c. Phone Number	d. Email Address	c. Type	
<input type="checkbox"/> 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.

Delreese Simmons  
Printed Name of Treasurer

*Delreese Simmons*  
Signature of Appointed Treasurer

3.3.22  
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.

Delreese Simmons  
Printed Name of Candidate

*Delreese Simmons*  
Signature of Candidate

3.3.22  
Date



# NORTH CAROLINA

## STATE BOARD OF ELECTIONS

### 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: Committee To Elect Delreese Simmons  
Treasurer Name: Delreese Simmons  
Treasurer Address: 600 Oliver St.  
(include city, state, & zip) MT. OLIVE N.C. 28365

Treasurer Phone: \_\_\_\_\_

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.

3-3-22

Date Signed

[Signature]

Signature



# NORTH CAROLINA

## STATE BOARD OF ELECTIONS

### 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: Delreese Simmons

Committee Name: Committee To Elect Delreese Simmons

Treasurer Name: Delreese Simmons

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

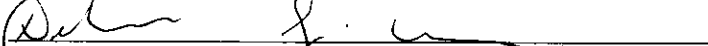
Committee ID #: \_\_\_\_\_

Level Registered: [State] [County] If county, specify: \_\_\_\_\_

I, Delreese Simmons, 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).

Name of Entity (Select from §163-278.16B(a))	Plan for Disbursement (eg. Amount or %)
1. _____	_____
2. _____	_____
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: 

Date: 3.3.22

## Nicholas Sullivan

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**From:** Nicholas Sullivan  
**Sent:** Friday, March 4, 2022 11:25 AM  
**To:** 'delreesesimmons@gmail.com'  
**Subject:** Audit Completed: Committee to Elect Delreese Simmons

Good Afternoon,

The Audit of the Committee to Elect Delreese Simmons' Statement of Organization has been completed and the following discrepancies were noted:

- Your report includes a CRO-3500 but the corresponding block 6 on your CRO-2100A was left blank.
- Your CRO-3500 lists a bank account but does not provide an account code.

Please complete an amended CRO-2100A and CRO03500 and return them to our office. As a reminder, our office is responsible for auditing all campaign finance reports so we may not assist you with completing your reports. It is required that all Treasurers complete the Campaign Finance training, but it is also highly recommended that all candidates complete it as they are ultimately responsible for their own candidate committees.

**Nicholas G. Sullivan | Deputy Director**  
Wayne County Board of Elections  
309 E. Chestnut Street  
Goldsboro, NC 27530  
919.731.1411 office | 919.731.1409 fax

*\*E-mail correspondence to/from this address may be subject to the North Carolina Public Records Law and may be disclosed to third parties.*

## Nicholas Sullivan

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**From:** Nicholas Sullivan  
**Sent:** Friday, March 11, 2022 10:43 AM  
**To:** 'delreesesimmons@gmail.com'  
**Subject:** FW: Audit Completed: Committee to Elect Delreese Simmons  
**Importance:** High

Mr. Simmons,

Please refer to the discrepancies noted in the email from last week. Corrections are necessary in order to bring your committee into compliance with North Carolina campaign finance law.

**Nicholas G. Sullivan | Deputy Director**  
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## Nicholas Sullivan

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**From:** Nicholas Sullivan  
**Sent:** Tuesday, March 29, 2022 3:36 PM  
**To:** 'delreesesimmons@gmail.com'; 'simmons4district2commissioner@gmail.com'  
**Subject:** FW: Audit Completed: Committee to Elect Delreese Simmons

**Importance:** High

Mr. Simmons,

This is the third attempt to contact you in regards to the discrepancies noted in the audit of your campaign finance documents. Please see the original email from March 4, 2022 with explanations.

**Nicholas G. Sullivan | Deputy Director**  
Wayne County Board of Elections  
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