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	d. ID Number
The Committee for Direct Democracy with Doug DeArros as Mayor of Oak Island	7DF08M
b. Mailing Address (include City, State and Zip Code)	**e. Date Organized**
PO Box 1, Oak Island NC 28465	July 7, 2025
c. Committee Website (Optional)	**f. Phone Number**
	910-232-2233

2. Candidate Information

a. Full Name		e. Party Affiliation	
Douglas James DeArros		Non-Partisan	
b. Mailing Address (include City, State, and Zip Code)		**f. Office Sought**	
PO Box 1, Oak Island NC 28465		Mayor	
c. Phone Number	**d. Email Address**	**g. Next Election Year**	**h. Jurisdiction**
910-232-2233	djdearros@gmail.com	2025	Oak Island
☐ Email copy of report notices			

3. Treasurer Information

a. Full Name	
Douglas James DeArros	
b. Mailing Address (include City, State, and Zip Code)	
PO Box 1, Oak Island NC 28465	
c. Phone Number	**d. Email Address**
910-232-2233	djdearros@gmail.com
Send report notices by email ☑ Yes ☐ No	

4. Assistant Treasurer Information

a. Full Name	
b. Mailing Address (include City, State and Zip Code)	
c. Phone Number	**d. Email Address**
☐ Email copy of report notices	

5. Custodian of Books Information (Keeper of Records)

a. Full Name	
b. Mailing Address (include City, State, and Zip Code)	
c. Phone Number	
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BRUNSWICK COUNTY
BOARD OF ELECTIONS

6. Account Information *(incl. CRO-3500)*

a. Financial Institution Full Name	
Truist Bank	
8905 E Oak Island Dr.	
b. Account Code	**c. Type**
DJD4OKI	Checking

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.

Printed Name of Treasurer	Signature of Appointed Treasurer	Date
Douglas James DeArros		July 17, 2025

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.

Printed Name of Candidate	Signature of Candidate	Date
Douglas James DeArros		July 17, 2025