

Statement of Organization - Candidate Committee

Is this statement:	
<input checked="" type="checkbox"/> New	<input type="checkbox"/> 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	
Susan Waleed for Leland Town Council			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
1218 Dalton Way Leland, NC 28451		7/11/2025	
c. Committee Website (Optional)		f. Phone Number	
		856-278-8839	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Susan Waleed		Non-Partisan	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
1218 Dalton Way Leland, NC 28451		Council Member	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
856-278-8839	ven1995@aol.com	2025	Leland
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Susan Waleed		Salim Waleed	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
1218 Dalton Way Leland, NC 28451		1218 Dalton Way Leland, NC 28451	
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
856-278-8839	ven1995@aol.com	856-495-9246	swaleeds@aol.com
Send report notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
5. Custodian of Books Information (Keeper of Records)		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
Susan Waleed		Woodforest National Bank	
b. Mailing Address (include City, State, and Zip Code)		b. Account Code	
1114 New Point Blvd Leland, NC 28451		SW	
c. Phone Number	d. Email Address	c. Type	
		Checking	
<input type="checkbox"/> Email copy of report notices			
<p>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.</p> <p>Susan Waleed _____</p> <p>Printed Name of Treasurer</p>			
		<p>7/11/25</p> <p>Date</p>	
<p>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.</p> <p>Susan Waleed _____</p> <p>Printed Name of Candidate</p>			
		<p>7/11/25</p> <p>Date</p>	

RECEIVED

JUL 21 2025

BRUNSWICK COUNTY
BOARD OF ELECTIONS