

#### North Carolina

#### State Board of Elections

441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

#### **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.

#### FILED BY: Committee to Re-elect David Morrow Soil & Water Supervisor Committee Name: Treasurer Name: David Lee Morrow 1037 Doolin Street Treasurer Address: Burlington, NC 27215 (include city, state, & zip) 336-261-5965 Treasurer Phone: Check One: X 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. Jouis Le Manay 6/29/2022 Date Signed

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.



### **Certification of Treasurer**

This Certification is used by Candidate Committees to appoint a treasurer for the committee. This form is required and must accompany the Candidate's Statement of Organization.

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

LITTING BY.	
Candidate Name:	David Lee Morrow
Treasurer Name:	David Lee Morrow
Treasurer Address:	1037 Doolin Street
(include city, state, & zip)	Burlington, NC 27215
	None-Management (Marches 1997)
Treasurer Phone:	336-261-5965

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

6/29/2022	Daniel Lee	Monoy	
Date Signed	Signature of Candidate		

EILED DV.



# Confidential

	Certification of Financial Account Information				
This Certification is used to report confidential bank account information for all financial accounts established by the committee and must accompany the Statement of Organization Form.					
	FILED BY:				
	Committee Name	e: Committe	Committee to Re-elect David Morrow Soil & Water Supervisor		ior
	Treasurer Name:	David I	Lee Morrow		
	Treasurer Addres	ss: 1037 D	Doolin Street		
	(include city, state, a	& zip) Burling	gton, NC 27215		
	Treasurer Phone: 336-261-5965				
nam	ned Committee. Thes	se account numbers in	s true and accurate. I am providing aclude all bank accounts utilized, of used for any purpose by the Comm	credit card accounts, r	
prov <u>Eac</u>	vided is only used for h treasurer (or can	the purposes of an a	dered confidential and is not subject audit or investigation or as required the below an account code (any	d by a court of compe number or letter or	etent jurisdiction. combination of
			account number on reports. If an presumed to have been waived.	account number is use	d as the "account
The	treasurer shall mainta	in all moneys of the p	colitical committee in a bank account those funds with any other moneys		ed exclusively by
Ty	pe of account F	inancial Institution	Address	Account Number	Account Code
By signing this statement, I authorize agents of the State Board of Elections to inspect all accounts provided.					ovided.
	Date Signed Signature of Candidate or Treasurer		<del></del>		
	For Candidate Con	nmittees Only			
· <u>X</u>	In lieu of providing account information, I certify that this committee will not raise any money nor spend any money except that which is the candidate's personal funds. I furthermore understand that an audit or investigation could warrant the probe of any personal bank account that is being used for campaign expenditures.				end any money estigation could
	By signing this statement, I authorize agents of the State Board of Elections to inspect applicable accounts.				ounts.
6/29/2027 Would't Signature of Candidate or Treasurer					

## **Statement of Organization - Candidate Committee**

	his sta	ent:
X	New	Amended

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by form CRO-35	<ol><li>An amended form is require</li></ol>	ed for each new election year.
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1. Committee Infor	mation				
a. Name of Committee Committee to Re-ele	ect David Morrow Soil & Water Supervis	<u> </u>	d. ID Number		
	lude City, State and Zip Code)	The grant of the control of the cont	a Data Oscariosa		
	Burlington, NC 27215	<u> Andreiti (1914) (1917</u>	e. Date Organized 6/29/2022		
c. Committee Website (	Optional)		f. Phone Number		
		occino, massi poesco V., Presidente, en Baltier Rollette e en Arabite.	With the state of		
2. Candidate Infor a. Full Name	mation	e. Party Affiliation			
David Lee Morrow		e. I arty Amazuon			
b. Mailing Address (inc	lude City, State, and Zip Code)	f. Office Sought			
1037 Doolin Street Burlington, NC 272	15	Alamance Co. Soil & Water Cof Supervisors	Alamance Co. Soil & Water Conservation District Board		
c . Phone Number	d. Email Address	g, Next Election Year h	. Jurisdiction		
336-261-5965	Morrow1037@gmail.com				
Email copy of re	port notices				
3. Treasurer Inform	<u> </u>	4. Assistant Treasurer Infor	mation		
a. Full Name David Lee Morrow		a. Full Name			
b. Mailing Address (inc	ude City, State, and Zip Code)	b. Mailing Address (include City, S	State and Zip Code)		
1037 Doolin Street Burlington, NC 272					
c. Phone Number	d. Email Address	c. Phone Number d. Email A	ddress		
336-261-5965	Morrow1037@gmail.com				
Send report no	tices by email 🔀 Yes 🔲 No	Email copy of report notic	es		
	kst information (Keeper of Records)	AND DISTRIBUTE OF A PROPERTY OF A SECOND O	nel. CRO-3500)		
a. Full Name		a. Financial Institution Full Name			
b. Mailing Address (incl	ude City, State, and Zip Code)				
	**************************************				
c. Phone Number	d. Email Address	b. Account Code c. Type			
			r ar in the tax to restlict to decay at		
Email copy of re	port notices				
General Statutes ar	ommittee is in compliance with all applind that no funds are commingled with plate, true and correct.				
Printed	Name of Treasurer S	Signature of Appointed Treasurer	Date		
I certify that the information above is correct, and I, as the candidate, appoint said treasurer to personally fulfill the					
duties and responsibi	lities imposed upon the appointed treas	= =			
163 of the NC Gener David Lee Morro	_	- De Ma	6/29/2022		
Printed 1	Name of Candidate	Signature of Candidate	Date		