

## **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.

sanitary district board.	of board office, son & water conservation district board of supervisors, or				
This Certification is filed a are filed.	t the Board of Elections office where the committee's campaign reports				
FILED BY:					
Committee Name:	Jim Young for Grahem Jim Young 1615 Braatwa Drive Cirahum NC 27253				
Treasurer Name:	J'im Young				
Treasurer Address:	1615 Broat was Drive				
(include city, state, & zip)	Crahum NC 27253				
Treasurer Phone:	336-263-7251				
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.					
7 - 7 - 25 Date Signed	Signature				

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

Is this st	atement:	
New 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	La in Manuel				
			d. 1D Number		
b. Mailing Address (include City, State and Zip Code)					
	e. Date Organized				
1615 Broadway dr Grahun	. N)C				
c. Committee Website (Optional)	<del>/                                    </del>		f. Phone Number		
2. Candidate Information					
a. Full Name	e. Party Affiliation				
T ()	NA				
James W. MODNG					
b. Mailing Address (include City, State, and Zip Code)	f. Office Sought				
1615 Broadway D'Graham, NC					
c . Phone Number d. Email Address	g. Next Election Year	h. J	Jurisdiction		
c. Phone Number d. Email Address  3362637251 J. K. Young Qatt. net					
Email copy of report notices	4 4 4 4 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		<u>.</u>		
3. Treasurer Information a. Full Name	4. Assistant Treasu	4. Assistant Treasurer Information			
a. run (vanie	a. ruu Name				
Self					
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (in	b. Mailing Address (include City, State and Zip Code)			
c. Phone Number d. Email Address	c. Phone Number	c. Phone Number d. Email Address			
Send report notices by email Yes No	Email convert	enert notice			
5. Custodian of Books Information (Keeper of Records)	Email copy of report notices  6. Account Information (incl. CRO-3500)				
a. Full Name	a. Financial Institution Full Name				
	1				
b. Mailing Address (include City, State, and Zip Code)					
5. Walling Address (include City, State, and Zip Code)					
	<b></b>	<del></del>			
c. Phone Number d. Email Address	b. Account Code	c. Type			
	]				
☐ Email copy of report notices	<u> </u>				
I certify that the Committee is in compliance with all applica General Statutes and that no funds are commingled with pro this report is complete, true and correct.					
Printed Name of Treasurer Signature of Appointed Treasurer Date					
I certify that the information above is correct, and I, as the cap	odidate appoint said	l freacurer to	personally fulfill the		
duties and responsibilities imposed upon the appointed treasur					
163 of the NC General Statutes.	.cr and subject to inc	· penames m	Afficie 22A of Chapter		
i ll d'	4 (	/ _			
- Mams Loune /		4	1-1-26		
Printed Name of Candidate	Signiture of Candidate	`	Date		