

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.

a. Name of Committee McKayla Alves Committee		d. ID Number 6K173F	
b. Mailing Address (include City, State and Zip Code) PO Box 545		e. Date Organized 7/16/25	
c. Committee Website (Optional)		f. Phone Number 919-223-0341	

a. Full Name McKayla Wallace Alves		e. Party Affiliation Republican	
b. Mailing Address (include City, State, and Zip Code) PO Box 545 Pikeville NC 27863		f. Office Sought Mayor of Pikeville	
c. Phone Number 919-223-0341	d. Email Address McKaylaAlves@yahoo.com	g. Next Election Year 2025	h. Jurisdiction Wayne

☒ Email copy of report notices

a. Full Name McKayla Wallace Alves		a. Full Name Wayne County Board of Elections	
b. Mailing Address (include City, State, and Zip Code) PO Box 545 Pikeville NC 27863		b. Mailing Address (include City, State and Zip Code) AUG 05 2025	
c. Phone Number 919-223-0341	d. Email Address McKaylaAlves@yahoo.com	c. Phone Number	d. Email Address Received By

Send report notices by email ☒ Yes ☐ No ☐ Email copy of report notices

a. Full Name (same as above)		a. Financial Institution Full Name NA	
b. Mailing Address (include City, State, and Zip Code)			
c. Phone Number	d. Email Address	b. Account Code	c. Type

☐ 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.

McKayla Alves Printed Name of Treasurer **McKayla Alves** Signature of Appointed Treasurer **8/1/25** 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.

McKayla Alves Printed Name of Candidate **McKayla Alves** Signature of Candidate **8/1/25** 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:

McKayla Alves Committee

Treasurer Name:

McKayla Alves

Treasurer Address:

201 NW Railroad St

(include city, state, & zip)

Pikeville NC 27863

Treasurer Phone:

919-223-0341

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.

8/1/25

Date Signed

McKayla Alves

Signature