

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
<i>JAS</i>	WK 1TC 2
b. Mailing Address (include City, State and Zip Code)	e. Date Organized
540 Barris Chapel Rd LaGrange NC 28551	7-9-21
c. Committee Website (Optional)	f. Phone Number
	252-566-5366

2. Candidate Information

a. Full Name	e. Party Affiliation
James Allen Sutton Jr	R
b. Mailing Address (include City, State, and Zip Code)	f. Office Sought
540 Barris Chapel Rd LaGrange NC 28551	Eastern Wayne Water
c. Phone Number	d. Email Address
252-566-5366	MSUTTON4@COMCAST.COM
<input type="checkbox"/> Email copy of report notices	
g. Next Election Year	
2021	
h. Jurisdiction	
Wayne	

3. Treasurer Information

a. Full Name	b. Mailing Address (include City, State and Zip Code)		
Michelle Earp Taylor	218 Bartlett Ave Goldsboro, NC 27530		
c. Phone Number	d. Email Address	e. Phone Number	f. Email Address
919-731-2310	Michelle@wayne waterdistricts.com		
<input type="checkbox"/> Send report notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> 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	d. Email Address	b. Account Code	c. Type
<input type="checkbox"/> Email copy of report notices		RECEIVED WAYNE BD OF ELECTIONS JUL 13 2021	

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.

Michelle Earp Taylor

Printed Name of Treasurer

Michelle Earp Taylor

Signature of Appointed Treasurer

7/12/21

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.

James Allen Sutton Jr

Printed Name of Candidate

Signature of Candidate

7-13-21

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:

JAS

Treasurer Name:

Michelle Sarp Taylor

Treasurer Address:

218 Bartlett Ave

(include city, state, & zip)

Goldsboro, NC 27530

Treasurer Phone:

919-731-2310

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.

7/12/21

Date Signed

Michelle Sarp Taylor

Signature

