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

Amendme	nt
Yes	XNo

Use this form to create a new or update an existing candidate committee.				
	3500 (when amending, o	only re-subm	nit if applicable).	
rmation				
			c. ID Number	
Danny Lee Kiser				
clude City, State and Zip Code)			d. Date Organized	
			7/5/2019	
			e. Phone Number	
			828-461-5011	
mation		✓ Cand	idate's Primary Committee	
	e. Candidate ID N	amber	f. Party Affiliation	
			Non-Partisan	
Juda City State and Zin Cade)	~ Office Sought		(Indicate Non-partican if applicable)	
ade City, State, and Zip Couc,	g. Office Sought			
		Cor	uncil	
d. Email Address	h. Next Election Yo	agr	i. Jurisdiction	
bhifiremedic@hotmail.com				
	2019	1	Maiden	
mation	4 Custodian of	Rooks In	Formation	
Hatiya	a. Full Name	HOURS L.	(Ot insinor	
		N	Ī/A	
lude City, State, and Zip Code)	b. Mailing Address	(include Cit	tv. State, and Zip Code)	
			,	
d. Email Address	c. Phone Number	d. Email Ac	ddress	
bhifiremedic@hotmail.com				
e notices by email X Yes No	Email copy	of notice	PG	
rer Information Add	The second secon			
☐ Remove				
N/A		N	/A	
ude City, State, and Zip Code)	b. Purpose			
			BEIWEI	
d. Email Address	c. Account Code	d. Type		
042		Ву		
Email copy of notices  CERTIFICATION				
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M 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.				
Danny LEE KISER Dee Troin 7/5/2019  Printed Name of Signer Signature of Appointed Treasurer Date				
	Danny Lee Kiser  Clude City, State and Zip Code)  Inde City, State, and Zip Code)	Danny Lee Kiser  Plude City, State and Zip Code)    d. Email Address	Danny Lee Kiser  Danny Lee Kiser  Danny Lee Kiser  Dande City, State and Zip Code)  Danny Lee Kiser  Danny L	



# Certification of Treasurer

This Certification is used by Candidate Committees to appoint a treasurer to the committee. This form is

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

#### **FILED BY:**

Candidate Name:	Danny Lee Kiser	
Treasurer Name:	Danny Lee Kiser	
Treasurer Address:	1030 E Main St	
(include city, state, & zip)	Maiden, NC 28650	
		DEGELVE
		JUL 05 ZU19
Treasurer Phone:	828-461-5011	Ву

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).

7 5 2019 Date Signed Signature



## **Certification of Threshold**

This Certification is used to delcare or whithdraw 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:	Committee to Elect Danny Lee Kiser	
Treasurer Name:	Danny Lee Kiser	
Treasurer Address:	1030 E Main St	FROE DY FO
(include city, state, & zip)	Maiden, NC 28650	
		JUL 05 2319 (P)
Treasurer Phone:	828-461-5011	By

#### 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 eleciton 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 DISCLAIMER CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.

I am withdrawing my Certification to remain 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 from the beginning of the current election cycle. I further agreee to file all future reports required.

7 5 2019 Date Signed

Cae Kus Signature



## **Candidate Designation of Committee Funds**

This form is used by candidate committees only and allows the candidate to designate in the event of their death, how the committee's funds are to be disbursed using the eight allowable methods outlined in 163-278.16B(a).

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

Candidate Name:	Danny Lee Kiser			
Committee Name:	Committee to Elect Danny Lee Kiser			
Treasurer Name:	Danny Lee Kiser			
If Candidate is own tre	asurer, designate an agent to carry out designation Brandy Kiser			
Committee ID#:				
Level Registered:	[State] [County] If county, specify: Catawba			
I, Danny L				
funds remaining in my Campaign Committee account(s) (after payment of permitted outstanding debts or reasonable expenses for winding up the Committee or closing office) be paid in the following manner as permitted by N.C. Gen. Stat. 163-278.16B(a).				
	ne of Entity  Plan for Disbursement (eg. Amount or %)  Plan for Disbursement (eg. Amount or %)			
1. North Carolina Masor	nic Organization 100%			
2.				
3.				
	certify that the foregoing entities are eligible beneficiaries under N.C. 6B(a). A copy of this form should be maintained with the Committee			