Statement of Organization - Candidate Committee

Is this state	emen	t:	
New	X	Amended	

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

	e accompanied by form CRO-3500	. An amended form	is required to	or each new ele	ection year.	
1. Committee In				LIDNI		
a. Name of Committ	SWAN			d. ID Number		
Jay Moore 4 Com						
	include City, State and Zip Code)			e. Date Organiz	ed	
4167 E Maiden R				12/4/	2025	
Maiden, NC 2865				f. Phone Numbe	or .	
c. Committee Websi	е (Орионаі)			828-21		
2. Candidate Inf	ormation			020-21	7-1043	
a. Full Name	OI Macion	e. Party Affiliation				
Jason Dean Moor	Φ.		Republ	ican		
Personal Company of the Company of t	include City, State, and Zip Code)	f. Office Sought				
4167 E Maiden R			County Com	missioner		
Maiden, NC 2865		- Nort Flories Vess		Jurisdiction		
c . Phone Number	d. Email Address	g. Next Election Year	11.	our isulction		
828-217-1045	jaymore249@gmail.com	2026		Catawba (County	
☐ Email copy o	f report notices					
3. Treasurer Inf	ormation	4. Assistant Trea	surer Infor	mation		
a. Full Name		a. Full Name				
Jason Dean Moor	re		N/A			
	include City, State, and Zip Code)	b. Mailing Address (i	include City, S	tate, and Zip Cod	le)	
4167 E Maiden F						
Maiden, NC 286	50		Secretario Company Wood			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Ad	ldress		
828-217-1045	jaymore249@gmail.com					
Send report no	ices by email X Yes No	☐ Email copy of	of report noti	ices	8 10	
5. Custodian of	Books Information (Keeper of R			cl. CRO-3500)		
a. Full Name		a. Financial Instituti	on Full Name			
	N/A		First Citize	ens Bank		
b. Mailing Address	(include City, State, and Zip Code)	b. Purpose				
		Campaign Account				
c. Phone Number	d. Email Address	b. Account Code	c. Type		DEPE	n w
					Mr m	n m
☐ Fmail conv	of report notices	JAY		Checking	DEC D	1 2 3
Linui copy	or report notices					4 CUE
I certify that the	e Committee is in compliance with	all applicable provis	sions of Artic	cle 22A of Cha	pter 163 of	
the NC Genera	Statutes and that no funds are cor	nmingled with prohil	bited or other	r non-disclosed	funds. I	
further certify t	hat this report is complete, true an	d correct.			į.	
1	- Adams	1 Dun Me	m.	12-04	1-25	
Printed	Name of Treasurer	Juna Quan Me Bignature of Appointed To	reasurer	_ 18 0 .	Date	
	U/					
	information above is correct, and					
	sponsibilities imposed upon the ap	pointed treasurer and	d subject to the	he penalties in	Article 22A	
of Chapter 163 o	f the NC General Statutes.	1				
= Tosau N	es Mar	Land Our MA	our	12-04	-25	
	Name of Candidate	Signature of Candida	ate		Date	



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.

Committee Name: Jay Moore 4 Commissioner
Treasurer Name: Jason Dean Moore
If Candidate is own treasurer, designate an agent to carry out designations: Amy Moore
Committee ID#:
Level Registered: [State] [County] If county, specify: Catawba
I, Jason Dean Moore hereby direct that in the event of my death or incapacity al
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).
ionowing mainer as permitted by N.C. Gen. Stat. 103-278.10B(a).
ionowing mainer as permitted by N.C. Gen. Stat. 103-278.10B(a).
Name of Entity (Select from §163-278.16B(a)) Plan for Disbursement (eg. Amount or %)
Name of Entity Plan for Disbursement (eg. Amount or %)
Name of Entity (Select from §163-278.16B(a)) 1. Tri-City Baptist Church Plan for Disbursement (eg. Amount or %) 100%
Name of Entity (Select from §163-278.16B(a)) 1. Tri-City Baptist Church Plan for Disbursement (eg. Amount or %) 1. 100%
Name of Entity (Select from §163-278.16B(a)) 1. Tri-City Baptist Church 1. 100% 1. 100%
Name of Entity (Select from §163-278.16B(a)) 1. Tri-City Baptist Church 2
Name of Entity (Select from §163-278.16B(a)) 1. Tri-City Baptist Church 1. 100% 1. 100%
Name of Entity (Select from §163-278.16B(a)) 1. Tri-City Baptist Church 2. By signing this form, I certify that the foregoing entities are eligible beneficiaries under N.C. Gen. Statute 163-278.16B(a). A copy of this form should be maintained with the Committee records.
Name of Entity (Select from §163-278.16B(a)) 1. Tri-City Baptist Church 2. By signing this form, I certify that the foregoing entities are eligible beneficiaries under N.C. Gen. Statute 163-278.16B(a). A copy of this form should be maintained with the Committee