Committee Inform	nation	FORSY	THEOLOGY TO THE PROPERTY OF TH		c. ID Number	
Full Name SUARD O) <u>** *** * ***</u>		7 4 4	4/13/13	
Myron N	larion	7003 ALIC	-5 AH 8: 18		d. Date Organiz	ed
Mailing Address (inclu	ide City, State and Zip Code	<u> </u>			7/23/	103
P. O. Bex 3					e, Phone Numbe	
Kins, NC	7 7051				(334) 983	
- III A. V. Form	nation .		Primary Candid	ate Committ	ee	
. Candidate Inforn	IIATIVII				b. Candidate II	
Full Name	rayne Marion				18740 246 84	12-13
			d. District/County/Mun	icipality	c. Party Affilia	tion
V: 1145c C	ouncil		Tobaccov: 11	<u> </u>	Nonpar	tisian -
(If office sought	is nonpartisan, write "N	onpartisan" in [e] Party Affiliation.)	-1 To-Samu	otion.	
. Treasurer Inform	nation		4. Custoutan of Boots			
Full Name			2. Full Name			
Myron Wayne Marion			Myron wayne Marion			
Mailing Address (inc	lude City, State, and Zip Co	de)	b. Mailing Address (include City, State, and Zip Code)			
P.O. Boy 23			P.O. Box 2 King, NC			
King, NL 2				d. Email Ad	dress	
	d. Email Address		(336) 983-7804	 		haloret
(336) 983-7804	mmarion@attglo	hel net	· i`		ncl. CRO-3500)	Add
5. Assistant Treast		Add	6. Account Inform		EL CRO-3500)	Remove
s. Full Name		Remove	a. Financial Institution	I Lifti Lixenc		
N 14			NIA			
L Mailing Address fin	clude City, State, and Zip C	ode)	b. Purpose			
D. Winning Address (1.2			,		·	
Di NL	d. Email Address		c. Code	d. Type		
c. Phone Number	At States target pas					:
CERTIFICATION I certify that the with funds for a	N Committee is in compliated federal or out-of-state Page 1	unce with all prov	visions of Article 22A v that this report is co	, including	that no funds a	re commingle
2						13/03 _

CRO-2100A

NC State Board of Elections

March 2003

Amendment



State Board of Elections 506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook Deputy Director - Campaign Reporting COPY

Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

Certification of Threshold

	•
FILED BY:	
Committee Name:	Myron Marion
Treasurer Name:	Myron Marion
Treasurer Address:	P.O. Box 2361
(include city, state, & zip)	King, NC 27021
	(2.4) 922 780V
Treasurer Phone:	(336) 983-780Y
election cycle under the pro- until the end of the election expenditures during this ele- of elections and file require	nittee intends to neither receive nor expend more than \$3,000 during the current cedures set forth in G.S. 163-278.10A. This certification will remain in effect cycle for this committee. If this committee exceeds \$3,000 in contributions or ction cycle, I understand that I must immediately notify the appropriate board d campaign finance reports.
	Certification to remain under the \$3000 threshold. I will now be required to rt for all contributions and expenditures that have not been previously reported urrent election cycle. I further agree to file all future reports required.
813103	my 2. mi
Date Signed	Signature



COPY

North Carolina State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook Deputy Director - Campaign Reporting

FILED BY:

Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

Certification of Treasurer

Candidate Name:	Myron Marion
Treasurer Name:	Myro- Maxion
Treasurer Address:	P.O. Box 2361
(include city, state, & zip)	King, NC 27021
Treasurer Phone:	(336) 983->804
the duties and responsibilities sanctions in Subchapter VII General Statutes.	mation is correct, and I, as candidate, appoint said treasurer to personally fulfill es imposed upon the appointed treasurer and subject to the penalties and I. Regulation of Election Campaigns of Chapter 163 of the North Carolina
I understand that if the above the existing Statement of O	e Treasurer changes, it will be necessary to certify a new treasurer and amend rganization within 10 days of the vacancy.
0/5/65	my 2. 92-
Date Signed	Signature of Candidate



State Board of Elections 506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook Deputy Director - Campaign Reporting

Mailing Aderess PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

Confidential

Certification of Financial Account Information

FILED BY:					
Committee Name:	Myron	Marin			
Treasurer Name:	Myro	Mario			
Treasurer Address:	P.O. Box	2361		<u> </u>	
(include city, state, & z	rip) <u>King</u> , N	12021			<u> </u>
Treasurer Phone:					
for the above named C accounts, money mark Committee. The information provi a court of competent j	nation provided below is the committee. These accounts act or savings accounts, or ded on this form is considited would only be used four is diction. It will be necessation on required discloss account number is presumation to the committee of	ered confidential or the purposes of essary to assign essure reports. If a	and is not subject to f an audit or investigated account number is	ny purpose by to public disclosu ation or as requ a "code" in ord used as the "cod	re. ired by er to e",
Type of account	Financial Institution	Address	Account N		de
Checking	REC Centura	P: 1 6+ M + 1	VC 27641	1	_
By signing this staten provided.	nent, I authorize agents of	the State Board	of Elections to inspec	t all accounts	
8/2460			my a 9	n:	
R/2 Y (0) Date Signed			Num 2 9 Signature of	Treasurer	



Raleigh, NC 27603

Kimberly Westbrook Deputy Director - Campaign Reporting Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

Certification to Close Committee

FILED BY:	
Committee Name:	Myron W. Mario
Treasurer Name:	Myca w. Macca
Treasurer Address:	P. C. Box 2361
(include city, state, & zip)	King, NC 23021
Treasurer Phone:	(336) 983-7804
certification, I declare that a contributions will be accept signed. If the Committee at any candidate or ballot issue Elections before such activi	under the \$3,000 threshold will only be required to sign this Certification. No ired for committees meeting this criterion. Any Committee that did not file must submit a "Final Report" with this Certification. This report must have a
11/10/03	My 4. M. Signature