

Statement of Organization - Candidate Committee

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

This form must be accompanied by forms CRO-3100 and CRO-3500 (when amending, only re-submit if applicable).

Amendment	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
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1. Committee Information	
a. Full Name	c. ID Number
Committee to Re-Elect Dave Plyler, Commissioner	
b. Mailing Address (include City, State and Zip Code)	d. Date Organized
116-C South Cherry Street Kernersville, NC 27284	9-4-15
	e. Phone Number
	336-996-4700

2. Candidate Information		<input type="checkbox"/> Candidate	<input checked="" type="checkbox"/> Primary Committee
a. Full Name	e. Candidate ID Number	f. Party Affiliation	
David Ray Plyler		Republican	
b. Mailing Address (include City, State, and Zip Code)	g. Office Sought		
211 HARMON LANE Kernersville, NC 27284	Forsyth County Commissioner		
c. Phone Number	d. Email Address	h. Next Election Year	i. Jurisdiction
336-996-4625	plylerdavid@aol.com	2016	Forsyth County "B"
<input type="checkbox"/> Email copy of notices			

3. Treasurer Information		4. Custodian of Books Information	
a. Full Name	a. Full Name	b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City, State, and Zip Code)
Raymond Drake Thomas	Raymond Drake Thomas	116-C South Cherry St. Kernersville, NC 27284	116-C South Cherry St. Kernersville, NC 27284
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
336-996-4700	RTHOMAS@THOMASAND BENNETT.COM	336-996-4700	RTHOMAS@THOMASAND BENNETT.COM

I prefer to receive notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Email copy of notices	
5. Assistant Treasurer Information		6. Account Information	
a. Full Name	a. Financial Institution Full Name	b. Purpose	
	New Bridge Bank	Checking Account for Committee	
b. Mailing Address (include City, State, and Zip Code)	c. Account Code	d. Type	
	A1	checking	
c. Phone Number	d. Email Address		
<input type="checkbox"/> 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.	
Raymond D. Thomas	9/4/15
Printed Name of Signer	Date
Signature of Appointed Treasurer	



North Carolina
State Board of Elections
441 N Harrington Street
Raleigh, NC 27603

Kim Westbrook Strach
Executive Director

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

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.

FILED BY:

Committee Name: Com to Re-Elect Dave Plyler, Commisisoner

Treasurer Name: Raymond D. Thomas

Treasurer Address: 116-C S. Cherry St.

(include city, state, & zip) Kernersville, NC 27284

Treasurer Phone: 336-996-4700

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 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.

9-14-2015
Date Signed

Raymond D. Thomas
Signature

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.



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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: DAVID R. PLYLER

Committee Name: Committee to Re-Elect Dave Plyler, Commissioner

Treasurer Name: RAYMOND D. THOMAS

If Candidate is own treasurer, designate an agent to carry out designations: _____

Committee ID #: _____

Level Registered: [State] [County] If county, specify: _____

I, DAVID R. PLYLER, hereby direct that in the event of my death or incapacity all
(Name of Candidate)

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).

Name of Entity (Select from §163-278.16B(a))	Plan for Disbursement (eg. Amount or %)
1. <u>MAINSTREET UMC</u>	<u>1/3</u>
2. <u>YMCA OF NW NC</u>	<u>1/3</u>
3. <u>UPS Industries for Blind</u>	<u>1/3</u>

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.

Signature of Candidate: [Signature]

Date: 09/14/2015