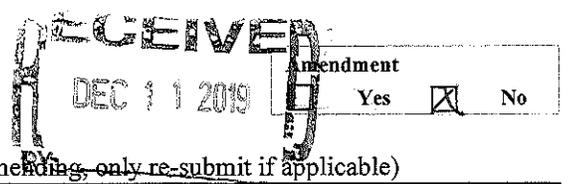


Statement of Organization - Candidate Committee

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)

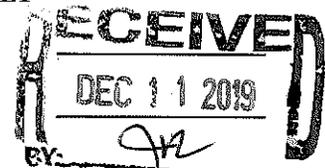


1. Committee Information			
a. Full Name Committee to Elect Walter J. Scott		c. ID Number 1HCP8K	
b. Mailing Address (include City, State and Zip Code) 134 Bessie Foy Road Richlands, NC 28574		d. Date Organized 12/2/2019	
		e. Phone Number 910-389-3306	
2. Candidate Information		<input type="checkbox"/> Candidate's Primary Committee	
a. Full Name Walter J. Scott		e. Candidate ID Number	f. Party Affiliation Republican
b. Mailing Address (include City, State, and Zip Code) 134 Bessie Foy Road Richlands, NC 28574		g. Office Sought County Commissioner	
c. Phone Number 910-389-3306	d. Email Address wjscott45@gmail.com	h. Next Election Year 2020	i. Jurisdiction Onslow
<input checked="" type="checkbox"/> Email copy of notices			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name GARY R. PETERS		a. Full Name	
b. Mailing Address (include City, State, and Zip Code) 360 NINE MILE ROAD, RICHLANDS NC 28454		b. Mailing Address (include City, State, and Zip Code)	
c. Phone Number 910-389-5456	d. Email Address	c. Phone Number	d. Email Address
I prefer to receive my notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of notices	
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name Navy Federal credit Union	b. Purpose Campaign Funds
b. Mailing Address (include City, State, and Zip Code)		c. Account Code WS	d. Type 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.			
GARY R. PETERS Printed Name of Signer		 Signature of Appointed Treasurer	12/10/19 Date

Disclosure Report Cover

Amendment
 Yes No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

1. Committee Information			
a. Full Name		c. ID Number	
COMMITTEE TO ELECT WALTER J. SCOTT		1HCP8K	
b. Mailing Address (include City, State and Zip Code)		d. Date Filed	
134 BESSIE FOY ROAD RICHLANDS, NC 28574-5130		12/10/2019	
		e. Phone Number	
		(910) 389-3306	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2020	12/02/2019	12/10/2019	GARY PETERS
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
		State/County <input checked="" type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
		Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special	
7. Type of Fund (if applicable, check one)		10. Special Report Name	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:			
8. Number of Fundraisers this Report			
0			
3. Account Information		3. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
NAVY FEDERAL CREDIT UNION			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
CAMPAIGN FUNDING	WS		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 0.00		\$
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 and that I have been trained by the NC State Board			
 Printed Name of Signer		 Signature of Appointed Treasurer	
		12/10/2019 Date	
FOR OFFICE USE ONLY			
Date Received:		Employee: _____	<u>Delivery Method</u>
Date Postmarked:		Employee: _____	<input type="checkbox"/> Normal Mail
Date Scanned:		Employee: _____	<input type="checkbox"/> Registered Mail
Date Data Entered:		Employee: _____	<input type="checkbox"/> Hand Delivered
			<input type="checkbox"/> Electronically Filed
			<input type="checkbox"/> Signer has not received mandatory training
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.			
You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.			

Detailed Summary

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
COMMITTEE TO ELECT WALTER J. SCOTT		2020 Organizational		J4CP8K	
Start of Election Cycle: January 1, 2019			Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start			\$ 0.00		\$ 0.00
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 0.00		\$ 0.00	
6) Contributions from Individuals (CRO-1210)		\$ 598.70		\$ 598.70	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00		\$ 0.00	
9) Loan Proceeds (CRO-1410)		\$ 0.00		\$ 0.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00		\$ 0.00	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00		\$ 0.00	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00		\$ 0.00	
11c) Outside Sources of Income (CRO-1250)		\$ 0.00		\$ 0.00	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00		\$ 0.00	
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00		\$ 0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 598.70		\$ 598.70	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 116.00		\$ 116.00	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00		\$ 0.00	
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00		\$ 0.00	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 48.15		\$ 48.15	
15) Loan Repayments (CRO-1420)		\$ 0.00		\$ 0.00	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00		\$ 0.00	
17) In-Kind Contributions (CRO-1510)		\$ 0.00		\$ 0.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 164.15		\$ 164.15	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 434.55		\$ 434.55	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0.00			
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 0.00			
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0.00			
24) Account Transfers Within the Committee (CRO-1720)		\$ 0.00			
25) Administrative Support (CRO-1710)		\$ 0.00		\$ 0.00	
26) Forgiven Loans (CRO-1440)		\$ 0.00		\$ 0.00	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0.00		\$ 0.00	
28) Contributions to be Refunded (CRO-1215)		\$ 0.00		\$ 0.00	

Contributions from Individuals

Pg 1 of 1

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT WALTER J. SCOTT				14CP8K	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
WALTER J SCOTT 134 BESSIE FOY ROAD RICHLANDS, NC 28574-5130 (910) 389-4685		c. Employer's Name/Specific Field		e. Election Sum to Date \$ 598.70	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	WS	Electric Funds Tran		12/02/2019	\$ 198.70
<input type="checkbox"/>	WS	Electric Funds Tran		12/02/2019	\$ 400.00
<input type="checkbox"/>					\$
4. Total only this Page					\$ 598.70
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 598.70

Disbursements

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

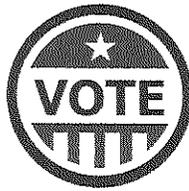
1. Committee Full Name (and Fund if applicable)				2. ID Number	
COMMITTEE TO ELECT WALTER J. SCOTT				14CP8K	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments
ONSLOW COUNTY BOARD OF ELECTIONS 246 GEORGETOWN RD JACKSONVILLE, NC 28540 (910) 455-4484					
			c. Level Registered (Specify)		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
					\$ 116.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
WS	Check	H	12/02/2019	\$ 116.00	REGISTRATION FEE
				\$	
5. Total only this Page					\$ 116.00
6. Total of ALL CRO-1310 Pages					\$ 116.00
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					
7. Purpose Codes (List detailed expenditure code in (h.) above)					
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate		
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses		
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund		
O* Other					
* Codes require detailed explanation in required remarks field (k)					

Aggregated Non-Media Expenditures

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Optional form used to report NC Non-Media Expenditures of \$50 or less.

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO ELECT WALTER J. SCOTT					1 HCP8K	
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	WS	Check	B	12/10/2019	\$ 48.15	NAME BADGES
4. Total only this Page					\$	48.15
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$	48.15
6. Purpose Codes (List detailed expenditure code in (d) above)						
B* - Printing		C* - Fundraising		D - To Another Candidate		
E - Salaries		F* - Equipment		G - Political Party		
I - Postage		J - Penalties		H* - Holding Public Office Expenses		
O* - Other		K* - Office Expenses		Q* - Donations to Legal Expense Fund		
* Codes require detailed explanation in required remarks field (g)						



NORTH CAROLINA STATE BOARD OF ELECTIONS

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: Walter J. Scott

Committee Name: Committee to Elect Walter J. Scott

Treasurer Name: Gary R. Peters

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

Committee ID #: 1HCP8K

Level Registered: [State] [County] If county, specify: County of Onslow

I, Walter J. Scott, 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).

<u>Name of Entity</u> <i>(Select from §163-278.16B(a))</i>	<u>Plan for Disbursement (eg. Amount or %)</u>
1. <u>O.C. Partnership for Children</u>	<u>50%</u>
2. <u>O.C. Special Olympics</u>	<u>50%</u>
3. _____	_____

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: Walter J. Scott

Date: 12/10/2019