



FORSYTH COUNTY BOARD OF ELECTIONS

2014 JAN 28 PM 1:15

RECEIVED

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  
Fax: (919) 715-8047

**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: Keith King Committee to Elect for City Council  
Treasurer Name: Dawn Johnson  
Treasurer Address: 1980 Skycrest Drive  
Winston-Salem NC 27127  
  
Treasurer Phone: 336 624-5770

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 at or 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.

1/21/14  
Date Signed

Dawn Johnson  
Signature

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

# COPY

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

## 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			c. ID Number		
Keith King Committee to Elect For City Council			K5757		
b. Mailing Address (include City, State and Zip Code)			d. Date Organized		
418 N. Liberty Street Winston-Salem NC 27101					
			e. Phone Number		
			336-749-0365		
2. Candidate Information <input type="checkbox"/> Candidate's Primary Committee					
a. Full Name		e. Candidate ID Number		f. Party Affiliation	
Keith King		K5757		Dem. <small>(Indicate Non-partisan if applicable)</small>	
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought			
418 N. Liberty Street Winston-Salem NC 27101		Winston-Salem City Council			
c. Phone Number	d. Email Address	h. Next Election Year		i. Jurisdiction	
336-749-0365	king4citycouncil@outlook.com	2016		Northeast	
<input type="checkbox"/> Email copy of notices					
3. Treasurer Information			4. Custodian of Books Information		
a. Full Name			a. Full Name		
Dawn Johnson					
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
1980 Skycrest Drive Winston-Salem NC 27127					
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address		
336-624-5770	dawninspirations@yahoo.com				
I prefer to receive notices by email <input 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		
b. Mailing Address (include City, State, and Zip Code)			b. Purpose		
c. Phone Number	d. Email Address	c. Account Code	d. Type		
<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.					
Dawn Patterson Johnson		Dawn P. Johnson		1/21/14	
Printed Name of Signer		Signature of Appointed Treasurer		Date	

RECEIVED  
 014 JAN 28 PM 1:15  
 FORSYTH COUNTY