

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 Jason K. Jordan for Pender County Bd of E		c. ID Number CHLUGW
b. Mailing Address (include City, State and Zip Code) 153 ATKINSON Loop Rd Hamstead NC 28443		d. Date Filed 1-30-2026
		e. Phone Number 910-470-2874

2. Report Year 2026	3. Period Start Date (mm/dd/yy) 1-1-2026	4. Period End Date (mm/dd/yy) 1-30-2026	5. Treasurer Full Name Jason K. Jordan
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6. Type of Committee (Check One) <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Legal Expense Fund		9. Type of Report (check only one type of report from one category)		
		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 <input type="checkbox"/> 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) <input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input checked="" type="checkbox"/> Other: Campaign		10. Special Report Name		
8. Number of Fundraisers this Report 1				

11. Account Information a. Financial Institution Full Name First Citizens Bank		11. Account Information a. Financial Institution Full Name	
b. Purpose Campaign Account	c. Account Code 001	b. Purpose	c. Account Code
	d. Period Begin Balance \$500		d. Period Begin Balance \$

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 of Elections.

Jason K. Jordan Printed Name of Signer
 [Signature] Signature of Appointed Treasurer
 1-30-2026 Date

FOR OFFICE USE ONLY

Date Received: <u>2/6/2026</u>	Employee: <u>all</u>	Delivery Method <input checked="" type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed
Date Postmarked: _____	Employee: _____	
Date Scanned: _____	Employee: _____	
Date Data Entered: _____	Employee: _____	<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.

RECEIVED

FEB 06 2026

Detailed Summary

Amendment

Yes

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	
Jason K. Jordan for Pender County Board of		Campaign		C1LU8W	
Start of Election Cycle: January 1, <u>2025</u>			Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start			\$ 500 ⁰⁰		\$ 1,504 ³⁰
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$	
6) Contributions from Individuals (CRO-1210)		\$ 1,004 ³⁰		\$	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$		\$	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$		\$	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$		\$	
11e) Exempt Purchase Price Sales (CRO-1265)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 1,004 ³⁰		\$	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 1,346 ⁹⁰		\$ 1,346 ⁹⁰	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
13c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$		\$	
15) Loan Repayments (CRO-1420)		\$		\$	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$		\$	
17) In-Kind Contributions (CRO-1510)		\$		\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1,346 ⁹⁰		\$ 1,346 ⁹⁰	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 157. ⁴⁰		\$	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$			
22) Debts and Obligations owed by the Committee (CRO-1610)		\$			
23) Debts and Obligations owed to the Committee (CRO-1620)		\$			
24) Account Transfers Within the Committee (CRO-1720)		\$			
25) Administrative Support (CRO-1710)		\$		\$	
26) Forgiven Loans (CRO-1440)		\$		\$	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$		\$	
28) Contributions to be Refunded (CRO-1215)		\$		\$	

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FEB 06 2026

Contributions from Individuals

Amendment

Pg of Yes 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
Jason K. Jordan for Pender County BoF E						C11C48W
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	
Jason K. Jordan 156 Atkinson Loop Rd Hamstead NC 28442						
			c. Employer's Name/Specific Field		e. Election Sum to Date	
					\$ 157.40	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>			Campaign Sign	1-1-2026	\$ 1,004.30	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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	
			c. Employer's Name/Specific Field		e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
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	
			c. Employer's Name/Specific Field		e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1,004.30	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					\$ 1,004.30	

RECEIVED

FEB 06 2026

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	
Jason K. Jordan for Pender County BOE		CHLUSW	
b. Mailing Address (include City, State and Zip Code)		d. Date Filed	
153 Atkinson Loop Rd. Hamstead NC 28443		12-31-2025	
		e. Phone Number	
		910-470-2874	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2025	12-23-2025	12-31-2025	Jason K. Jordan
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"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser <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 <input type="checkbox"/> 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 checked="" type="checkbox"/> Other: Campaign			
8. Number of Fundraisers this Report			
0			
11. Account Information		11. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
First Citizens Bank			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
Campaign Account	001		
	d. Period Begin Balance		d. Period Begin Balance
	12-23-2025		
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 of Elections.			
_____		_____	
Printed Name of Signer		Signature of Appointed Treasurer	
_____		_____	
		Date	
FOR OFFICE USE ONLY			
Date Received: _____	Employee: _____	Delivery Method	
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 Yes 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	
Start of Election Cycle: January 1, <u>2025</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start			
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)		
6) Contributions from Individuals	(CRO-1210)	500 ⁰⁰	500 ⁰⁰
7) Contributions from Political Party Committees	(CRO-1220)		
8) Contributions from Other Political Committees	(CRO-1230)		
9) Loan Proceeds	(CRO-1410)		
10) Refunds/Reimbursements to the Committee	(CRO-1240)		
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)		
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)		
11c) Outside Sources of Income	(CRO-1250)		
11d) Legal Expense Fund – Other Sources	(CRO-1270)		
11e) Exempt Purchase Price Sales	(CRO-1265)		
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)			
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)		
13b) Contributions to Candidates/Political Committees	(CRO-1310)		
13a) Coordinated Party Expenditures	(CRO-1310)		
14) Aggregated Non-Media Expenditures	(CRO-1315)		
15) Loan Repayments	(CRO-1420)		
16) Refunds/Reimbursements from the Committee	(CRO-1320)		
17) In-Kind Contributions	(CRO-1510)		
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)			
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)			
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)		
22) Debts and Obligations owed by the Committee	(CRO-1610)		
23) Debts and Obligations owed to the Committee	(CRO-1620)		
24) Account Transfers Within the Committee	(CRO-1720)		
25) Administrative Support	(CRO-1710)		
26) Forgiven Loans	(CRO-1440)		
27) 48-Hour Notice Reports Sum	(CRO-2220)		
28) Contributions to be Refunded	(CRO-1215)		

Contributions from Individuals

Pg 1 of 1

Amendment

Yes 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	
Jason K. Jordan for Pender County Bd of E						CHCUGW	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
Bert Lee Jr. 530 Leas Lane Hampstead NC 28443							
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	001	check		12-23-2025	\$ 500.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
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	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
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	
				c. Employer's Name/Specific Field		e. Election Sum to Date	
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 500.00	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>						\$ 500.00	

Statement of Organization – Candidate Committee

Is this statement:
 New Amended

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

This form must be accompanied by form CRO-3500. An amended form is required for each new election year.

1. Committee Information			
a. Name of Committee		d. ID Number	
Jason K. Jordan for Pender Co. BOE		CHLUBW	
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
153 Atkinson Loop Rd. Hampstead, NC 28443		12-16-2025	
c. Committee Website (Optional)		f. Phone Number	
		(910) 470-2874	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Jason K Jordan		Republican	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
153 Atkinson Loop Rd. Hampstead NC 28443		Board of Education	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
(910) 470-2874	jkjworks@yahoo.com	2026	
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Jason K Jordan			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
153 Atkinson Loop Rd Hampstead NC			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
(910) 470-2874	jkjworks@yahoo.com		
Send report notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
5. Custodian of Books Information (Keeper of Records)		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
Melanie S. Jordan		First Citizens Bank	
b. Mailing Address (include City, State, and Zip Code)		b. Account Code	
153 Atkinson Loop Rd Hampstead NC 28443		28 Merchants Cir Hampstead NC 28443	
c. Phone Number	d. Email Address	b. Account Code	c. Type
(910) 5404304	msjkjordan@yahoo.com	001	Checking
<input type="checkbox"/> Email copy of report notices			
<p>I certify that the Committee is in compliance with all applicable provisions of Article 22A 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.</p>			
<u>Jason K. Jordan</u> Printed Name of Treasurer		<u>[Signature]</u> Signature of Appointed Treasurer	
		12-21-2025 Date	
<p>I certify that the information above is correct, and I, as the candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties in Article 22A of Chapter 163 of the NC General Statutes.</p>			
<u>Jason K. Jordan</u> Printed Name of Candidate		<u>[Signature]</u> Signature of Candidate	
		12-21-2025 Date	



NORTH CAROLINA

STATE BOARD OF ELECTIONS

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.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

FILED BY:

Committee Name: Jason K. Jordan For Pender County BOPE

Treasurer Name: Jason K. Jordan

Treasurer Address: 156 Atkinson Loop Rd.

(include city, state, & zip) Hampstead NC 28443

Treasurer Phone: 910-470-2874

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.

12-23-2025
Date Signed

[Signature]
Signature