

RECEIVED

FEB 09 2026

Amendment
[X] Yes [] No

Disclosure Report Cover

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: TATE FOR PENDER
b. Mailing Address: 807 S. TOPSAIL DR, SURF CITY, NC 28445
c. ID Number
d. Date Filed: 01/27/2026
e. Phone Number: (910) 554-7399
2. Report Year: 2025
3. Period Start Date: 07/01/2025
4. Period End Date: 12/31/2025
5. Treasurer Full Name: JUSTIN W MAY
6. Type of Committee: Candidate Campaign
9. Type of Report: Year End
7. Type of Fund: Other
8. Number of Fundraisers: 0
3. Account Information: FIRST CITIZENS BANK
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...
FOR OFFICE USE ONLY: Date Received: 02/09/2026, Employee: all, Delivery Method: Normal Mail

Statement of Organization - Candidate Committee

Is this statement:	
<input type="checkbox"/> New	<input checked="" type="checkbox"/> 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 <i>Tate for Pender</i>		d. ID Number	
b. Mailing Address (include City, State and Zip Code) <i>807 S. Topsail Dr. Surf City, NC 28445</i>		e. Date Organized <i>APR 1 2025</i>	
c. Committee Website (Optional)		f. Phone Number <i>910 554-7399</i>	
2. Candidate Information			
a. Full Name <i>Jimmy Terrell Tate</i>		e. Party Affiliation <i>Republican</i>	
b. Mailing Address (include City, State, and Zip Code) <i>5514 NC Highway 11 Willard NC 28478</i>		f. Office Sought <i>County Commissioner</i>	
c. Phone Number <i>910 287-252-734-9885</i>	d. Email Address <i>tatej99@gmail.com</i>	g. Next Election Year <i>2026</i>	h. Jurisdiction <i>District 4</i>
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name <i>Justin W. May</i>		a. Full Name	
b. Mailing Address (include City, State, and Zip Code) <i>807 S. Topsail Dr. Surf City, NC 28445</i>		b. Mailing Address (include City, State and Zip Code)	
c. Phone Number <i>910 554-7399</i>	d. Email Address <i>Justin.W.May.2002@gmail.com</i>	c. Phone Number	d. Email Address
<input type="checkbox"/> Send report notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of report notices	
5. Custodian of Books Information (Keeper of Records)		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name <i>First Citizens</i>	
b. Mailing Address (include City, State, and Zip Code)		<i>28 Merchants Circle Hampstead NC 28443</i>	
c. Phone Number	d. Email Address	b. Account Code <i>001</i>	c. Type <i>checking</i>
<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> <p> <u><i>Justin W. May</i></u> <u><i>Justin W. May</i></u> <u><i>12/17/25</i></u> Printed Name of Treasurer Signature of Appointed Treasurer Date </p> <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> <p> <u><i>Jimmy T. Tate</i></u> <u><i>Jimmy T. Tate</i></u> <u><i>12/17/25</i></u> Printed Name of Candidate Signature of Candidate Date </p>			



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: Tate For Pender

Treasurer Name: Justin W. May

Treasurer Address: 807 S. Topsail Dr

(include city, state, & zip) Surf City, NC 28545

Treasurer Phone: 910 554-7399

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.

12/17/25
Date Signed

Justin W. May
Signature