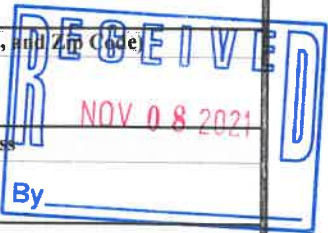


Statement of Organization - Candidate Committee

Is this statement:	
<input checked="" type="checkbox"/> New	<input 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		d. ID Number	
Patty Cook for Clerk of Superior Court			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
PO Box 579 Conover NC 28613		11/8/2021	
c. Committee Website (Optional)		f. Phone Number	
		828-464-9535	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Patricia Harrison Cook		Republican	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
PO Box 579 Conover NC 28613		Clerk of Superior Court	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
828-464-9535	pattycookforclerkofcourt@gmail.com	2022	County
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Patty Cook		N/A	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
PO Box 579 Conover NC 28613			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
828-464-9535	pattycookforclerkofcourt@gmail.com		
Send report notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of report notices	
5. Custodian of Books Information (Keeper of Records)			
a. Full Name			
N/A			
b. Mailing Address (include City, State, and Zip Code)			
c. Phone Number		d. Email Address	
<input type="checkbox"/> Email copy of report notices			
6. Account Information (incl. CRO-3500)			
a. Financial Institution Full Name			
Peoples Bank			
b. Purpose			
Campaign Account			
c. Account Code		c. Type	
CK001		Checking	
<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>Patricia H. Cook</u> <u>Patricia H. Cook</u> <u>11-8-2021</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>Patricia H. Cook</u> <u>Patricia H. Cook</u> <u>11-8-2021</u> Printed Name of Candidate Signature of Candidate Date </p>			





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: Patricia Harrison Cook

Committee Name: Patty Cook for Clerk of Superior Court

Treasurer Name: Patty Cook

If Candidate is own treasurer, designate an agent to carry out designation: James Michael Cook

Committee ID#: _____

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

I, Patricia Harrison Cook 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> <small>(Select from §163-278.16B(a))</small>	<u>Plan for Disbursement (eg. Amount or %)</u>
1. <u>Oxford Baptist Church, Claremont</u>	<u>100%</u>
2. _____	_____
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: *Patricia H. Cook*

Date: 1-8-2021