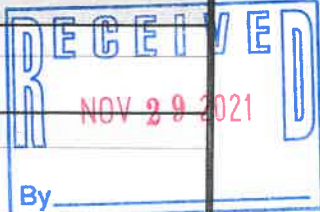


Statement of Organization - Candidate Committee

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	
Derek Slaughter for Sheriff			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
908 3rd St PI NE Conover, NC 28613		11/19/2021	
c. Committee Website (Optional)		f. Phone Number	
		828-320-7518	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Derek Luther Slaughter		UNA	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
908 3rd St PI NE Conover, NC 28613		Sheriff	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
828-320-7518	leniorrhyn23@outlook.com	2022	Catawba County
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Pam Slaughter		N/A	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
103 Canter Ln Mooresville, NC 28115			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
(828) 244-1524	slaughter.pamela@icloud.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)		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
N/A		State Employees Credit Union	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
		Campaign Account	
c. Phone Number	d. Email Address	b. Account Code	c. Type
		DLS23	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> <p> <u>Pam Slaughter</u> <u>Pam Slaughter</u> <u>11/28/21</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>Derek Slaughter</u> <u>Derek Slaughter</u> <u>11/28/21</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: Derek Luther Slaughter

Committee Name: Derek Slaughter for Sheriff

Treasurer Name: Pam Slaughter

If Candidate is own treasurer, designate an agent to carry out designation: N/A

Committee ID#: _____

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

I, Derek Luther Slaughter 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>Catawba County Schools</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: 

Date: 11/28/21