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 file	ed at the Board of Elect	ions office where the committee's campaign reports are filed.
Candidate Name:		
Committee Name:		
Treasurer Name:		
If Candidate is own	treasurer, designate	an agent to carry out designations:
Committee ID #:		
Level Registered: [State] [County] If county, specify:		
funds remaining in a debts or reasonable following manner as Nam	my Campaign Commexpenses for winds permitted by N.C. e of Entity	y direct that in the event of my death or incapacity all nittee account(s) (after payment of permitted outstanding ing up the Committee or closing office) be paid in the Gen. Stat. 163-278.16B(a). Plan for Disbursement (eg. Amount or %)
(Select fro	om §163-278.16B(a))	
2		
By signing this form	n, I certify that the fo	regoing entities are eligible beneficiaries under N.C. this form should be maintained with the Committee
Signature of Candid	ate:	
Date:		