North Carolina
State Board of Elections
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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).

Candidate Name: Barbara Lee

Committee Name: Committee to Elect Barbara Lee

Treasurer Name: Barbara Lee AND

If Candidate is own treasurer, designate an agent to carry out designations: Ms. Malia Wallace

Committee ID #: _____

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

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I, Barbara Lee (Name of Candidate), hereby direct that in the event of my death or incapacity all 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).

Name of Entity *(Select from §163-278.16B(a))*	Plan for Disbursement (eg. Amount or %)
1. Area Day Respite Ctr Inc.	
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: Barbara Lee

Date: July 13, 2009

Note: This Designation is to be filed with the Election Board where the committee's campaign reports are filed.