

Statement of Organization - Candidate Committee

Is this statement:
 New 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		
<i>Committee to Elect Bridgette C. Cowan</i>			
b. Mailing Address (include City, State and Zip Code)	e. Date Organized		
<i>505 Weaver Drive; Goldsboro, NC 27530</i>		1/19/24	
c. Committee Website (Optional)	f. Phone Number		
<i>N/A</i>		919-221-0853	
2. Candidate Information			
a. Full Name	e. Party Affiliation		
<i>Bridgette Courtnie Cowan</i>		<i>Democrat Nonpartisan</i>	
b. Mailing Address (include City, State, and Zip Code)	f. Office Sought		
<i>505 Weaver Drive; Goldsboro NC 27530</i>		<i>Board of Education (Wayne County)</i>	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
919-221-0853	<i>preecowan1360@gmail.com</i>	2024	Ward 3
<input type="checkbox"/> Email copy of report notices			
3. Financial Institution Information			
a. Full Name	a. Full Name		
<i>Shanise (Miller) Jacobs</i>		<i>RECEIVED</i>	
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City, State and Zip Code)		
<i>108 Jenkins Place 27530</i>		FEB 02 2024	
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
919-221-2866	<i>sjjacobs@gmail.com</i>		<i>NCBOE</i>
<input checked="" type="checkbox"/> Send report notices by email		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Email copy of report notices			
4. Candidate Information			
a. Full Name	a. Financial Institution Full Name		
<i>Shanise Jacobs</i>		<i>United Bank</i>	
b. Mailing Address (include City, State, and Zip Code)			
		<i>2801 Cashwell Drive; Goldsboro</i>	
c. Phone Number	d. Email Address	b. Account Code	c. Type
		<i>A</i>	<i>Checking</i>
<input checked="" 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><i>Shanise Jacobs</i> <i>Shanise Jacobs</i> <i>1-22-2024</i></p> <p>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><i>1-22-24</i></p> <p>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: Brigette Courtney Cowan

Committee Name: Committee to Elect Brigette C. Cowan

Treasurer Name: Shanise (Miller) Jacobs

If Candidate is own treasurer, designate an agent to carry out designations: _____

Committee ID #: _____

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

I, Brigette C. Cowan, (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 <small>(Select from §163-278.16B(a))</small>	•	Plan for Disbursement (eg. Amount or %)
<u>Committee to Elect Richard Taylor</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: Brigette C. Cowan

Date: 1/22/2024