Statement of Organization - Candidate Committee

Is	this statement:			
	New		Amended	

	eate a new or update an existing candidate				
This form must be a	accompanied by form CRO-3500. An amer	nded form is required	l for each	n new election year.	
1. Committee Info	rmation				
a. Name of Committee	d. ID Number				
Vote	Terri Mrazek			6COUNC	
b. Mailing Address (inc	clude City, State and Zip Code)		-	e. Date Organized	
10547	Kennersville Rd &	Belew Creck	NC	12-14-2021	
c. Committee Website		2	7009	f. Phone Number	
			•	336-4302636	
2. Candidate Infor	mation				
a. Full Name		e. Party Affiliation			
TheresA	Elizabeth Mrazek	Republican			
	clude City, State, and Zip Code)	f. Office Sought			
6547 Ken	nersuive red. Pree K NC 27009	County Commissioner at large			
		County Con			
c. Phone Number	d. Email Address	g. Next Election Year		h. Jurisdiction	
336-430-	terrimmazek29mgil.com	2022			
Email copy of n		4. Assistant Treasu			
3. Treasurer Infor	MATION	a. Full Name	Reculify)LWATIOU	
	Marall	a, Pun Hame			
Terry D	aluda City State and Tin Cade)	b. Mailing Address (include City, State and Zip Code)			
b. Mailing Address (include City, State, and Zip Code) 6547 Kerner SVI'I & Rd. Belews Creek NC 27009		n. Manne van 120 fine	inue City,	State and Lip Code)	
c. Phone Number	d. Email Address	c. Phone Number	d. Email	Address	
336-430-2636	terrimrazek 2 Ogmail Con				
Send report n	otices by email Yes No	Email copy of re	port not	ices	
5. Custodian of Bo	ooks Information (Keeper of Records)	6. Account Information (incl. CRO-3500)			
a. Full Name		a. Financial Institution	Full Nam	e	
		First Na	tions	al Bank	
b. Mailing Address (in	clude City, State, and Zip Code)				
		Campai	9111	<i>funds</i>	
c. Phone Number	d. Email Address	b. Account Code	с. Туре	221122450	
☐ Email copy of report notices		041954			
Eman copy of report notices				7 3	
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.					
Terri Magzek Yonni Mhanob 12-14-2021					
Printed Name of Treasurer Signature of Appointed Treasurer Date					
I certify that the int	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					

CRO-2100A

163 of the NC General Statutes.

Printed Name of Candidate

NC State Board of Elections

Signature of Candidate

November 2019



North Carolina

State Board of Elections

441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

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 th	e Board of Elections office where the committee's campai	ign reports are filed.
Candidate Name:	Terri Mrazek	11
Committee Name:	Vote Terri Mrazek	
Treasurer Name:	Terri Mrazck	
If Candidate is own treasu	rer, designate an agent to carry out designations:	
Committee ID #:	6CQUNC	
Level Registered: [Sta	ate] [County] If county, specify:	
(Name of Candidate) funds remaining in my Ca debts or reasonable expe	hereby direct that in the event of my death ampaign Committee account(s) (after payment of purposes for winding up the Committee or closing of the hitted by N.C. Gen. Stat. 163-278.16B(a).	ermitted outstanding
2	16 Ican Women 100	
	rtify that the foregoing entities are eligible beneficients. (a). A copy of this form should be maintained with	
CRO-3900	Candidate Designation of Committee Funds	July 2014



Certification of Threshold

This Certification is used to declare or withdraw a committee's intent to raise or spend \$1,000 or less in the current election cycle.

This Certification is only valid for political party committees and candidates for a county office, municipal office, local school board office, soil & water conservation district board of supervisors, or sanitary district board.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

FILED BY:	was I am a law in
Committee Name:	Vote Terri Mrazek
Treasurer Name:	Terri Mrazek
Treasurer Address:	6547 Kennensville Rd.
(include city, state, & zip)	Beleus Creek NC 27009
Treasurer Phone:	336-430-2636
Check One: I certify that this comm	nittee intends to neither receive nor expend more than \$1,000 during the current
until the end of the election	ocedures set forth in G.S. 163-278.10A. This certification will remain in effect cycle for this committee. If this committee exceeds \$1,000 in contributions or action cycle, I understand that I must immediately notify the appropriate board
of elections and file required	d campaign finance reports.
THIS DECLARATION CA	N ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.
I am withdrawing my	Certification to remain at or under the \$1,000 threshold. I will now be required
to file the next scheduled	report for all contributions and expenditures that have not been previously
	of the current election cycle. I further agree to file all future reports required.
12-14-202	1 Jeni Mrasek
Date Signed	Signature