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: TOBY BOST

Committee Name: TOBY DALE BOST

Treasurer Name: TOBY BOST

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

Committee ID #: 1CQ1PM

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

I, TOBY D. BOST, 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).

Name of Entity *(Select from §163-278.16B(a))*	Plan for Disbursement (eg. Amount or %)
1. TRIAD CHURCH	
2.	
3.	

FORSYTH COUNTY BOARD OF ELECTIONS
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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: [signature]

Date: 6/14/2022

Amended