

Statement of Organization - Candidate Committee

Is this statement:	
<input type="checkbox"/> New	<input checked="" type="checkbox"/> 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	
Clif Cheek Campaign		BDFQ7B	
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
PO Box 7661, Ocean Isle Beach, NC 28469		7/23/2025	
c. Committee Website (Optional)		f. Phone Number	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Clif Cheek		Republican	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
PO Box 7661 Ocean Isle Beach, NC 28469		County Commissioner	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
	clif@clifcheek.com	2026	District 1
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
Greg Fornshell			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State and Zip Code)	
PO Box 80172 Raleigh, NC 27623			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
704-770-5992	greg@pacmanagementservices.com		
Send report notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of report notices	
5. Custodian of Books Information (Keeper of Records)		6. Account Information <small>(incl. CRO-3500)</small>	
a. Full Name		a. Financial Institution Full Name	
		First Citizens	
b. Mailing Address (include City, State, and Zip Code)			
c. Phone Number	d. Email Address	b. Account Code	c. Type
		01	Checking
<input 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> Greg Fornshell 12/9/2025 </p> <p style="text-align: center;"> 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> Clif Cheek 12/9/2025 </p> <p style="text-align: center;"> Printed Name of Candidate Signature of Candidate Date </p>			