

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	
Ian Patrick for Cabarrus			
b. Mailing Address (include City, State and Zip Code)		e. Date Organized	
5701 Manchester Ave. Harrisburg, NC 28075		11/24/2025	
c. Committee Website (Optional)		f. Phone Number	
		780-354-5622	
2. Candidate Information			
a. Full Name		e. Party Affiliation	
Ian Patrick		Republican	
b. Mailing Address (include City, State, and Zip Code)		f. Office Sought	
5701 Manchester Ave. Harrisburg, NC 28075		County Commissioner	
c. Phone Number	d. Email Address	g. Next Election Year	h. Jurisdiction
980-354-5622	connect@ianwpatrick.com	2026	Cabarrus County
<input type="checkbox"/> Email copy of report notices			
3. Treasurer Information		4. Assistant Treasurer Information	
a. Full Name		a. Full Name	
IAN PATRICK		N/A	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
5701 MANCHESTER AVE. HARRISBURG, NC 28075		CABARRUS COUNTY BOARD OF ELECTIONS	
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
980-354-5622	connect@ianwpatrick.com		DEC 11 2025
Send report notices by email <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Email copy of report notices	
5. Custodian of Books Information (Keeper of Records)		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
N/A		J	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
		Campaign Account	
c. Phone Number	d. Email Address	b. Account Code	c. Type
		J	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> <u>IAN PATRICK</u> <u>[Signature]</u> <u>12-11-2025</u> 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> <u>IAN PATRICK</u> <u>[Signature]</u> <u>12-11-2025</u> Printed Name of Candidate Signature of Candidate Date </p>			