NOTICE OF CANDIDACY (NON-PARTISAN) FOR **Burgaw Commissioner**

Date: <u>07/07/2003</u> Candidate ID: **Q4Y564**

I hereby file notice that I am a candidate for election to the office of **Burgaw Commissioner (Town of Burgaw)** in the municipal elections, to be held in **Town of Burgaw North Carolina** on

Residential Address 505 South Walker Street Street Address Burgaw NC 28425 City, State, Zip	Mailing Address (if different) PO Box 1004 Street Address Burgaw NC 28425 City, State, Zip	(Please print or type name above) Telephone Number(s) Business (910) 259-4572
505 South Walker Street Street Address Burgaw NC 28425	PO Box 1004 Street Address Burgaw NC 28425	Business
Street Address Burgaw NC 28425	Street Address Burgaw NC 28425	
Burgaw NC 28425	Burgaw NC 28425	
		(910) 259-4572
City, State, Zip	City, State, Zip	
		Home
		(910) 540-4572
	R. S. Brown	Cell
	Signature of Candidate (legal name)	
1074 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	_	o G. Ponica f Certifying Officer
My commission or in the second	10-22-04	
Manual Control	/ 0 つ つ ターーーーーーーーーーーーーーーーーーーーーーーーーーーーーーーー	ions

The Notice of Candidacy must be signed in the presence of the chairman or secretary of the Board of Elections with which he/she files or a candidate may have his/her signature on the Notice of Candidacy acknowledged and certified to by any officer authorized to administer an oath. (See NCGS § 163-106.) In signing his/her notice of candidacy the candidate may use a nickname provided the candidate complies with the requirement specified in GS § 163-106 and GS § 163-323(a).

NICKNAME AFFIDAVIT

(NCGS 163-106 (a))

I, <u>Refere</u> E. Brown, having been duly sworn, hereby state under (Legal name)
oath that I have been commonly known by the nickname,,
for at least five years and request that my name be placed on the ballot as follows:
T.E. Gene Brown. In the event that another candidate with the same last
name as mine files notice of candidacy for the same office for which I am a candidate, my name should be
listed on the ballot as follows: Refaul Especial Seres
Refere E Brown Legal Name
Sworn to and subscribed before me
this 14 day of July 2003 TARIOTARIO
farses P. Prince Property Co.
Notary Public My commission expires 10-22-07
William

Statement of Organization - Candidat	e Committee	Yes Avo
1. Committee Information		
a. Full Name		c. ID Number
Raiferi? E. Brown		241564
b. Mailing Address (include City, State and Zip Code)		d. Date Organized
8.0 Box 1004		7-7-03
Burgaw. HE 284	. 7 -	e. Phone Number
Racigaes: 113 = 37		759-4572
2. Candidate Information	Candidate's Primary Co	mmittee
a. Full Name	c. Candidate ID Number	d. Party Affiliation
Rachard E. Brown	Q41564	Democrat
b. Mailing Address (include City, State, and Zip Code)	e. Office Sought	f. Jurisdiction
P.O. Box 1004		ommis Burgan
Burgan. 7CZ84Z	(If office sought is nonpar Party	tisan, write "Nonpartisan" in [d] Affiliation.)
3. Treasurer Information	4. Custodian of Books Info	ormation
a. Full Name	a. Full Name	1
Raelan E. Brown	Report E.	Groun
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City	y, State, and Zip Code)
P.O. Bat 1004 Burgan. Mc 2842.	5 Burgan. 1	7028425
c. Phone Number d. Email Address		l Address
259-4512 RBEIGHTIQUOI	.Con	
5. Assistant Treasurer Information	6. Account Information	(incl. CRO-3500) Add
a. Full Name Remove	e a. Financial Institution Full Nar	ne Remove
	Bank y an	unica
b. Mailing Address (include City, State, and Zip Code)	b. Purpose	
Fremont Str. 28425	Campaign	,
c. Phone Number d. Email Address	c. Code d. Type	
	REB a	heaking.
CERTIFICATION		
I certify that the Committee is in compliance with all p with funds for a federal or out-of-state PAC. I further		_
Raeford E. Brown Printed Name of Signer	Carlos & Brave Signature of Appointed Treasurer	W 7-7-03 Date

Amendment



North Carolina State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook Deputy Director – Campaign Reporting Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

Fax: (919) 715-8047

Certification of Treasurer

FILED BY:		
Candidate Name:	Rasfail & Brown	
Гreasurer Name:	Nacfacil E. Braun	
Treasurer Address:	P.O. By 1004	
include city, state, & zip)	Burgaw. 70 28425	
•	7	
Treasurer Phone:	910) 259-4572	

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy.

7- 7- 03 Date Signed

Signature of Candidate



North Carolina

State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook Deputy Director – Campaign Reporting Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

Fax: (919) 715-8047

Certification of Threshold

FILED BY:	()
Committee Name:	Karlan E. Brown
Treasurer Name:	Ranford E. Brown
Treasurer Address:	P. D. Bey 1004
(include city, state, & zip)	Bushaw. nc 28425
Treasurer Phone:	(910) 259-4572
election cycle under the pro- until the end of the election expenditures during this ele of elections and file require	nittee intends to neither receive nor expend more than \$3,000 during the current cedures set forth in G.S. 163-278.10A. This certification will remain in effect cycle for this committee. If this committee exceeds \$3,000 in contributions or ction cycle, I understand that I must immediately notify the appropriate board d campaign finance reports. Certification to remain under the \$3000 threshold. I will now be required to
file the next scheduled repor	rt for all contributions and expenditures that have not been previously reported arrent election cycle. I further agree to file all future reports required.
7-1-05	Rayford E. Brown



North Carolina State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook Deputy Director – Campaign Reporting Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

Certification to Close Committee

FILED BY:		
Committee Name:	(aclano E. Brown	
Treasurer Name:	Raifred E. Brown	
Treasurer Address:	505 S. Walke St	
include city, state, & zip)	Burgaw. nc 284 25	
	, <u>, , , , , , , , , , , , , , , , , , </u>	
Treasurer Phone:	910 259-4572	

I certify that the above mentioned Committee intends to close and cease existence. Upon signing this certification, I declare that all funds have been distributed and reported (if required). In addition, no contributions will be accepted or disbursements made after the "Final Report" is filed or this form is signed. If the Committee at any future time intends to accept or spend funds in support or opposition of any candidate or ballot issue, a new political committee must be formed and registered with the Board of Elections before such activities may commence.

Committees that have filed under the \$3,000 threshold will only be required to sign this Certification. No "Final Report" will be required for committees meeting this criterion. Any Committee that did not file under the \$3,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

Mes. 10. 2003

Date Signed