

#### NOTICE OF CANDIDACY (Non- PARTISAN) \_\_\_

2011

Municipal/County

Election

For the office of: COMMISSIONE	ER OF ATKINSON			_
Date: <u>07/06/2011</u>	Candidate ID: IHL21J			
I hereby file notice as a candi	date for election to the office of	COMMISSIONE	ER OF ATKINSON	in the
EI	ection to be held on 11/08/2011	in _PE	ENDER	_County.
I request that my name appea	r on the ballot as follows:			
Denna Massala				
Bruce Novak Please print or type name above				
117 E HENRY ST Residential Add ress: (Street, City, ZIP)	ATKINSON,	NC 28421		
			u.	
Mailing Address if different (POB, City, Zip)			,	-
Home: (910) <u>463</u> - <u>4006</u>	Cell: (910) 540 - 1737	Business: ( )		
Have you ever been co	the following to be true, correct, an nvicted of a felony? (Felony convi	ction need not be	disclosed if the con	viction was
If you have been convicted of a hours of submitting this notice.  Signature of Candidate (legal nate)		ete the "Candidate	Felony Disclosure	form within 48
	Certification of Notice o	f Candidacy _		~~~
I hereby certify that Bruce Nov	ak will appear on ballot)	{t	ANN M. BA	LOGH signed above,
	ne this day and signed in my pre	sence.	Pender County, No	orth Carolina
Sworn and subscribed before	me this6thday of	July ,	2011 .	
Title and signature of certifyir	ng Officer:	n Balog	K	
My commission expires:	b. 27, 2016 State of N	lorth Carolina, Co	ounty of Pen	der
	Verification by County Boa	rd of Elections		
The undersigned has examine	ed the voter registration records	in PENDER	Cour	nty and found
BRUCE NOVAK	to be a registered voter in the	municipality/co	unty of <u>ATK, ~ S</u>	
County Chairman, Secretary	of Director)	5)		
,	Signature and date			

The Notice of Candidacy must be signed in the presence of the chairman, secretary or director 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 § 163-294.2.) 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).

Information about the powers, duties, and responsibilities of city and county elective offices in North Carolina is available from the School of Government of the University of North Carolina at Chapel Hill at www.sog.unc.edu/programs/cceo. The School of Government provides training, research, and consultation for state and local government officials and citizens.

# Statement of Organization - Candidate Committee Use this form to create a new or update an existing candidate committee.

Amendment ☐ No ☐ Yes

This form must be accompanied by forms CRO-3100 and CR	O-3500.		
1. Committee Information			
a. Full Name		c. ID Number	
Bruce Novak			
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
117 E Henry St Alkinson NC 28421			
17(18)11301		e. Phone Number	
		463-4006	
2. Candidate Information	Candidate's Primary Comm	ittee	
a. Full Name	c. Candidate ID Number	d. Party Affiliation	
Bruce NOVAL		who ffillcated	
b. Mailing Address (include City, State, and Zip Code)	e. Office Sought	f. Jurisdiction	
117 E Henry St	cocrue/(may		
Atkinson NC 28421	(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)		
3. Treasurer Information	4. Custodian of Books Inform		
a. Full Name	a. Full Name		
Bruce NOVAK	Bruce Nounk		
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City, State, and Zip Code)		
117 E Henry St Atkinson LC 28421	117 E Henry ST Atteinson, NC 28421		
c. Phone Number d. Email Address	c. Phone Number d. Email Address		
910 463 4006 Stohavy @ Bellsoeth net	910 463 400C Skeliary	@ bell south not	
5. Assistant Treasurer Information Add	6. Account Information (incl. CRO-3500) Add		
a. Full Name Remove	a. Financial Institution Full Name Remove		
X/A	NA		
b. Mailing Address (include City, State, and Zip Code)	b. Purpose		
c. Phone Number d. Email Address	c. Account Code d. Type		
	are commingled with prohibited of		



## North Carolina

#### State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director – Campaign Reporting

Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

# **Certification of Treasurer**

This Certification is used by Candidate Committees to appoint a treasurer to the committee. This form is required and must accompany the Candidate's Statement of Organization

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.

CRO-3100

Certification of Treasurer

June 2007



## North Carolina

#### State Board of Elections

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## **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.

Treasurer Name:  Treasurer Address:  (include city, state, & zip)  Treasurer Phone:  Check One:  I certify that this committee intends to neither receive nor expend more than \$1,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$1,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports.  THIS DECLARATION CAN 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 reported from the beginning of the current election cycle. I further agree to file all future reports required.	FILED BY:	$\Omega$
Treasurer Address:  (include city, state, & zip)  Treasurer Phone:  Check One:  I certify that this committee intends to neither receive nor expend more than \$1,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$1,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports.  THIS DECLARATION CAN 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 reported from the beginning of the current election cycle. I further agree to file all future reports required.	Committee Name:	Druce Nousk
Treasurer Phone:  Check One:  I certify that this committee intends to neither receive nor expend more than \$1,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$1,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports.  THIS DECLARATION CAN 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 reported from the beginning of the current election cycle. I further agree to file all future reports required.	Treasurer Name:	Bruce Nousk
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Signature		

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.

CRO-3600

Certification of Threshold

December 2009



## North Carolina

#### State Board of Elections

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# **Certification to Close Committee**

This Certification is used to express the intent to close the committee after all funds have been properly disbursed.

FILED BY:		
Committee Name:	Bruce NouAk	_
Treasurer Name:	Bruce NocAk	
Treasurer Address:	117 1= Henry ST	
(include city, state, & zip)		
Treasurer Phone:	(910) 463 400C	
Treasurer Thone.		

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 \$1,000 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 \$1,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

Date Signed

Signature

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.

REC'D JAN 12 2012-regular mail.

CRO-3400

Certification to Close Committee

December 2009