



# NOTICE OF CANDIDACY

## NORTH CAROLINA

### PENDER COUNTY

ELECTION PRIMARY

ELECTION DATE 05/06/2014

JURISDICTION

JURISDICTION  
VALUE

**FRAUDULENTLY OR FALSELY COMPLETING THIS FORM IS A CLASS 1 FELONY UNDER CHAPTER 163 OF THE NC GENERAL STATUTES.**

TO: PENDER COUNTY BOARD OF ELECTIONS

Candidate ID: EHLGID

RE: NOTICE OF CANDIDACY FOR OFFICE OF: BOARD OF COMMISSIONERS DISTRICT 2

### CANDIDATE'S NOTICE AND PLEDGE

(select appropriate checkbox and complete section based on the contest for which you are filing your notice of candidacy)

**PARTISAN  
CONTESTS**  
(Federal, State, County  
or Municipal)

☒ I hereby file notice as a candidate for nomination as BOARD OF COMMISSIONERS DISTRICT 2  
in District \_\_\_\_\_ in the REPUBLICAN party primary election to be held on 05/06/2014  
I affiliate with the REPUBLICAN party, and I certify that I am now registered on the registration records of the  
precinct in which I reside as an affiliate of the REPUBLICAN party. I further certify that I have not changed my  
political party affiliation within the past ninety (90) days, nor have I changed from "unaffiliated" status to my current  
affiliation with the past ninety (90) days. I pledge that if I am defeated in the primary, I will not run for the same office as a  
write-in candidate in the next general election.

**NON-PARTISAN  
CONTESTS**

☐ I hereby file notice as a candidate for election to the office of \_\_\_\_\_  
in District \_\_\_\_\_ in the \_\_\_\_\_ Election to be held on \_\_\_\_\_ in \_\_\_\_\_  
County.

**JUDICIAL  
CONTESTS**

☐ I hereby file notice as a candidate for election to the office of \_\_\_\_\_  
to succeed \_\_\_\_\_ (Name and District if applicable), in the regular election to be  
conducted \_\_\_\_\_. I certify that I am now registered on the registration records of the precinct in which I  
reside. I understand that if required by G.S. § 163-322, a non-partisan primary is scheduled to be conducted on  
My N.C. State Bar No. is \_\_\_\_\_.

### CANDIDATE INFORMATION

DAVID ANTHONY PIEPMAYER

Full Legal Name  
122 BROADVIEW LN

Residential Address

HAMPSTEAD, NC 28443

City, State and Zip

(910) 270-8519

Home Phone

Cell Phone

David Piepmeyer

Name to Appear on Ballot

Mailing Address

City, State and Zip

(910) 819-6863

Business Phone

Email Address

### FELONY DISCLOSURE

Have you ever been convicted of a felony? ☐ YES ☒ NO

If you have been convicted of a felony, you are required to complete the "Candidate Felony Disclosure" form within 48 hours of submitting this  
notice. GS § 163-106. The required form can be obtained from any election office or from the NC State Board of Elections website at  
[www.NCSBE.gov](http://www.NCSBE.gov). A prior felony conviction does not preclude holding elected office if rights of citizenship have been restored. Felony conviction  
need not be disclosed if the conviction was dismissed as a result of reversal on appeal or resulted in a pardon of innocence or expungement.

### AFFIDAVIT ATTESTING TO NICKNAME

I, \_\_\_\_\_ have been duly sworn, hereby state under oath that I have been commonly known by the nickname,  
\_\_\_\_\_  
Legal Name  
\_\_\_\_\_ for at least five years and request that my name be placed on the ballot as follows:  
\_\_\_\_\_  
Nickname  
\_\_\_\_\_. In the event that another candidate with the same last name as mine files notice of candidacy for the  
\_\_\_\_\_  
Name to Appear on Ballot  
same office for which I am a candidate, my name should be listed as follows: \_\_\_\_\_  
(Legal name and nickname)

### CANDIDATE'S AFFIRMATION

I swear or affirm that the statements on this form are true, correct and complete to the best of my knowledge or belief.

X

*David Piepmeyer*  
Signature of Candidate

02/10/2014

Date

# Disclosure Report Cover

Amendment  
☐ Yes ☒ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.  
 Do not use this form to update information.

## 1. Committee Information

a. Full Name	c. ID Number
Piepmeyer for Commissioner (David Anthony Piepmeyer)	EHLG1D
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
122 Broadview Lane Hampstead, NC 28443	02/10/2014
	e. Phone Number
	910-270-8519

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2014	02/10/2014	02/10/2014	Jeanine Bowden Futrell

6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<b>Municipal</b>	<b>State/County</b>
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input checked="" type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	Quarterly
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First
		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second
		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third
		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth
		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End
		<input type="checkbox"/> Special	<input type="checkbox"/> Final
			<input type="checkbox"/> Special
7. Type of Fund (if applicable, check one)		10. Special Report Name	
<input type="checkbox"/> Booster Fund			
<input type="checkbox"/> Building Fund			
<input type="checkbox"/> Other:			
8. Number of Fundraisers this Report			
0			

11. Account Information		11. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
First Citizens Bank			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
Deposit, disbursement and maintenance of funds in accordance with requirements	122807		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 0.00		\$

## CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M 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 and that I have been trained by the NC State Board of Elections.

Jeanine Bowden Futrell      Jeanine Bowden Futrell      02/15/2014  
 Printed Name of Signer      Signature of Appointed Treasurer      Date

## FOR OFFICE USE ONLY

Date Received: 2/18/14	Employee: JB	Delivery Method
Date Postmarked: _____	Employee: _____	<input type="checkbox"/> Normal Mail
Date Scanned: _____	Employee: _____	<input type="checkbox"/> Registered Mail
Date Data Entered: _____	Employee: _____	<input checked="" type="checkbox"/> Hand Delivered
		<input type="checkbox"/> Electronically Filed
		<input type="checkbox"/> Signer has not received mandatory training

**Please Note:** This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.  
 You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.



# Statement of Organization - Candidate Committee

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by forms CRO-3100 and CRO-3500 (when amending, only re-submit if applicable).

Amendment

☐ Yes

☒ No

## 1. Committee Information

a. Full Name	c. ID Number
Piepmeyer for Commissioner	EHLG ID
b. Mailing Address (include City, State and Zip Code)	d. Date Organized
122 Broadview Lane Hampstead, NC 28443	02/10/2014
	e. Phone Number
	910-270-8519

## 2. Candidate Information

☐ Candidate's Primary Committee

a. Full Name	e. Candidate ID Number	f. Party Affiliation
David Anthony Piepmeyer	EHLG ID	Republican (Indicate Non-partisan if applicable)
b. Mailing Address (include City, State, and Zip Code)	g. Office Sought	
122 Broadview Lane Hampstead, NC 28443	County Commissioner-Pender	
c. Phone Number	d. Email Address	h. Next Election Year
910-270-8519	david.piepmeyer@gmail.com	2014
<input checked="" type="checkbox"/> Email copy of notices		i. Jurisdiction
		Pender County-District 2

## 3. Treasurer Information

a. Full Name	a. Full Name
Jeanine Bowden Futrell	Jeanine Bowden Futrell
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City, State, and Zip Code)
807 Factory Road Hampstead, NC 28443	807 Factory Road Hampstead, NC 28443
c. Phone Number	d. Email Address
910-620-7251	jbf@matthewtdill.com

I prefer to receive notices by email ☒ Yes ☐ No ☒ Email copy of notices

## 5. Assistant Treasurer Information

a. Full Name	<input type="checkbox"/> Add <input type="checkbox"/> Remove
None	
b. Mailing Address (include City, State, and Zip Code)	b. Purpose
	Deposit, disbursement and maintenance of funds in accordance with requirements
c. Phone Number	d. Email Address
<input type="checkbox"/> Email copy of notices	

## 6. Account Information (incl. CRO-3500)

a. Financial Institution Full Name	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
First Citizens Bank	
b. Purpose	
Deposit, disbursement and maintenance of funds in accordance with requirements	
c. Account Code	d. Type
122807	Checking

## CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M 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.

Jeanine Bowden Futrell Jeanine Bowden Futrell

Printed Name of Signer

Signature of Appointed Treasurer

2/15/14

Date



North Carolina  
State Board of Elections  
441 N Harrington Street  
Raleigh, NC 27603

Kim Westbrook Strach  
Executive Director

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

**FILED BY:**

Candidate Name: DAVID ANTHONY PIERMEYER

Treasurer Name: Jeanine Bowden Futrell

Treasurer Address: 807 Factory Road

(include city, state, & zip) Hampstead, NC 28443

Treasurer Phone: 910-620-7251

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. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

2/15/2014  
Date Signed

David Anthony Piermeyer  
Signature of Candidate

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





North Carolina  
State Board of Elections

441 N Harrington Street  
Raleigh, NC 27603

Kim Westbrook Strach  
Executive Director

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

**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).

Candidate Name: David A. Piepmeyer

Committee Name: Piepmeyer for Commissioner

Treasurer Name: Jeanine Bowden Futrell

If Candidate is own treasurer, designate an agent to carry out designations: \_\_\_\_\_

Committee ID #: EHL GID

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

I, David A. Piepmeyer, 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. <u>Pender County Republican Party</u>	<u>50%</u>
2. <u>American Cancer Society</u>	<u>25%</u>
3. <u>Hampstead UMC</u>	<u>25%</u>

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: 

Date: 2/15/2014

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