



STATE OF NORTH CAROLINA
 COUNTY OF _____
 NOTICE OF CANDIDACY

ELECTION _____
 ELECTION DATE _____
 JURISDICTION _____ JURISDICTION VALUE _____

TO: _____
 RE: NOTICE OF CANDIDACY FOR OFFICE OF: _____
 DATE: _____ SEAT NAME (judicial contests only): _____

CANDIDATE INFORMATION

<u>Eugene Mulligan</u> <small>Full Legal Name</small>		<u>Eugene Mulligan</u> <small>Name to Appear on Ballot</small>	
<u>318 S. Walker St.</u> <small>Residential Address</small>		<u>318 S. Walker St</u> <small>Mailing Address</small>	
<u>Burgaw NC</u> <small>City, State and Zip</small>	<u>Pender</u> <small>County</small>	<u>Burgaw, NC 28425</u> <small>City, State and Zip</small>	
<u>910-262-6574</u> <small>Campaign Phone Number</small>	_____ <small>Campaign Email Address</small>	_____ <small>NC State Bar No. (Judicial and District Attorney Candidates only)</small>	

CANDIDATE'S PLEDGE

Complete only if filing for a partisan office (including judicial): I hereby file notice as a candidate for nomination as _____ in the _____ party primary election to be held on _____ I affiliate with the _____ 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 _____ party.) 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. I further certify that I have not changed my political party affiliation within the past 90 days, nor have I changed from "unaffiliated" status to my current affiliation within the past 90 days.

Complete only if filing for a non-partisan office: I hereby file notice that I am a candidate for election to the office of Town of Burgaw Commissioner (at-large) (for the _____ Ward/District) in the regular municipal election to be held in Burgaw, NC on November 7, 2017

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 a "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. 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

(complete only if you would like an acceptable nickname to appear on the ballot in lieu of your legal name)

I, _____, have been duly sworn, hereby state under 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: _____

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 as: _____

CANDIDATE'S CERTIFICATION AND PLEDGE

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

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

X Eugene Mulligan _____ June 30 -17
Signature of Candidate Date

Each candidate shall sign the notice of candidacy in the presence of the chairman or secretary of the board of elections, State or county, with which the candidate files. In the alternative, a candidate may have the candidate's signature on the notice of candidacy acknowledged and certified to by an officer authorized to take acknowledgments and administer oaths, in which case the candidate may mail or deliver by commercial courier service the candidate's notice of candidacy to the appropriate board of elections.

CERTIFICATION OF AFFIDAVIT OF NICKNAME

(complete only if candidate would like an acceptable nickname to appear on the ballot in lieu of their legal name)

STATE OF NORTH CAROLINA, _____ COUNTY

I hereby certify that, _____ the candidate who signed the AFFIDAVIT ATTESTING TO NICKNAME, personally appeared before me this day and signed this document in my presence.

Sworn to and subscribed before me this _____ day of _____.

X

Notary Signature

Printed Name

My Commission Expires

ACKNOWLEDGMENT OF NOTICE OF CANDIDACY

Each candidate shall sign the notice of candidacy in the presence of the chairman or secretary of the board of elections, State or county, with which the candidate files. In the alternative, a candidate may have the candidate's signature on the notice of candidacy acknowledged and certified to by an officer authorized to take acknowledgments and administer oaths (Notary Public), in which case the candidate may mail or deliver by commercial courier service the candidate's notice of candidacy to the appropriate board of elections.

STATE OF NORTH CAROLINA, New Hanover COUNTY

I hereby certify that, Eugene Mulligan, the candidate who signed this NOTICE OF CANDIDACY, personally appeared before me this day and signed this document in my presence or acknowledged his/her signature to be the same.

Date: 06-30-17



X

Barbara Jill Vale
Signature of Certifying Officer (or Notary)

Barbara Jill Vale
Printed Name of Certifying Officer (or Notary)

Notary Public
Title of Certifying Officer

11-24-18
My Commission Expires

VERIFICATION BY COUNTY BOARD OF ELECTIONS

Candidates required to file their notice of candidacy with the State Board of Elections shall file along with their notice a certificate signed by the chairman of the board of elections or the director of elections of the county in which they are registered to vote, stating that the person is registered to vote in that county, stating the party with which the person is affiliated, and that the person has not changed his affiliation from another party or from unaffiliated within 90 days prior to the filing deadline.

The undersigned has examined the voter registration records in Pender COUNTY and found that _____

- Is a registered voter in this county.
- Municipal Contests Only: Is a registered voter in the municipality of Burgaw
- Partisan Contests Only: Is affiliated with _____ party and has not changed his/her political party affiliation within the past ninety (90) days.

Director
Title of County Official

X [Signature]
Signature of Board Chair or Director of Elections (GS 163-106(f))

7/21/17
Date

Statement of Organization - Candidate Committee

Amendment
 Yes No

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).

1. Committee Information			
a. Full Name		c. ID Number	
Eugene Mulligan		GHLB9Q	
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
318 S. Walker St. Burgaw, NC 28425		6-30-17	
		e. Phone Number	
		910-262-6574	
2. Candidate Information			
<input type="checkbox"/> Candidate's Primary Committee			
a. Full Name		e. Candidate ID Number	f. Party Affiliation
Eugene Mulligan			non-partisan <small>(Indicate Non-partisan if applicable)</small>
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought	
318 S. Walker St, Burgaw		Commissioner	
c. Phone Number	d. Email Address	h. Next Election Year	i. Jurisdiction
262-6574	eugene.mulligan@tmail	2017	
<input type="checkbox"/> Email copy of notices			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name		a. Full Name	
Eugene Mulligan		Eugene Mulligan	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
318 S. Walker St, Burgaw		318 S. Walker St, Burgaw, NC	
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
262-6574		262-6574	
I prefer to receive notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Email copy of notices			
5. Assistant Treasurer Information		6. Account Information <small>(incl. CRO-3500)</small>	
a. Full Name		a. Financial Institution Full Name	b. Purpose
b. Mailing Address (include City, State, and Zip Code)		c. Account Code	
		d. Type	
c. Phone Number	d. Email Address		
<input type="checkbox"/> Email copy of notices			
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.			
Eugene Mulligan			6-30-17
Printed Name of Signer		Signature of Appointed Treasurer	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

Certification of Treasurer

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

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

FILED BY:

Candidate Name: EUGENE MULLIGAN

Treasurer Name: EUGENE MULLIGAN

Treasurer Address: 318 S WALKER ST

(include city, state, & zip) BUREAU, NC 28425

Treasurer Phone: 910-262-6574

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).

6/30/14
 Date Signed

Signature of Candidate



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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.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

FILED BY:

Committee Name: EUGENE MULLIGAN

Treasurer Name: EUGENE MULLIGAN

Treasurer Address: 318 S. WALKER ST.

(include city, state, & zip) BURGAW, NC. 28425

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.

6/30/17
 Date Signed

Eugene Mulligan
 Signature

1/3/12



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

RECEIVED JAN 08 2012

Kim Westbrook Strach
Executive Director

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

Certification to Close Committee

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

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

FILED BY:

Committee Name:

EUGENE MULLIGAN

Treasurer Name:

EUGENE MULLIGAN

Treasurer Address:

318 S WALKER ST.

(include city, state, & zip)

R. E. JAW NC 28425

Treasurer Phone:

710 - 262 - 6574

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.

JAN 3RD '12
Date Signed

Eugene Mulligan
Signature