

# STATE OF NORTH CAROLINA COUNTY OF PENDER NOTICE OF CANDIDACY

TOTAL	107	-	ren	LTB.

JURISDICTION

MUNICIPAL

ELECTION DATE 11/0

11/07/2017 MUNI

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JURISDICTION VALUE

TO: PENDER COUNTY BOARD OF ELECTIONS RE: NOTICE OF CANDIDACY FOR OFFICE OF: TOWN OF WATHA MAYOR DATE: SEAT NAME (judicial contests only): 07/13/2017 CANDIDATE INFORMATION NEEDHAM CROWELL HALL Needham C. Hall Name to Appear on Ballot Full Legal Name 1059 CAMP KIRKWOOD RD Residential Address Mailing Address WILLARD, NC 28478 PENDER City, State and Zip City, State and Zip NC State Bar No. (Indictal and District Attorney Candidates only) Campaign Email Address Campaign Phone Number 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. K Complete only if filing for a non-partisan office: I hereby file notice that I am a candidate for election to the office of \_\_\_ (at-large) (for the \_\_\_\_\_ Ward/District) in the TOWN OF WATHA MAYOR regular municipal election to be held in WATHA on 11/07/2017 FELONY DISCLOSURE Have you ever been convicted of a felony? YES X 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. AFFEDAVIT ATTESTING TO NICKNAME (complete only if you would like an acceptable nickname to appear on the ballot in lieu of your legal name) , 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 I 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. Signature of Candidate

Each candidate shall sign the notice of condidacy 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.

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

☐ Yes ☐ No

Amendment

This form must be	accompanied by forms CRO-3100 and C	RO-3500 (when am	ending, only	y re-submit if applicable).	
1. Committee Info	rmetion				
a. Full Name			c. ID Number		
Needham C Hall				5HLJHA	
b. Mailing Address (in	clude City, State and Zip Code)			d. Date Organized	
1059 Camp With wood Rd				7-13-2017	
watha	, WC. 28478			2. Phone Number	
2 ( 112 1-2					
2. Candidate Info	rmation	- diametric vin vin		te's Primary Committee	
	- 11:1	e. Candidate ID Num	per	f. Party Affiliation	
Needhan	n C Hote			Non Posti Son (Indicate Non-partisan if applicable)	
b. Mailing Address (in	clude City, State, and Zip Code)	g. Office Sought		(Amazona 1400 pontanti A appronoto)	
1059 (0	mp Kirkword Rd				
Watha	NC 29478	May	or		
		h. Next Election Year	L,	Jurisdiction	
7/0 5225677 Email copy of n	Nhall 5879 E Act Com	2017			
3. I reasurer laser					
e. Full Name	(9.98702		4. Custodian of Books Information		
4 -	em C Hall	Needhom C Holl			
b. Mailing Address (inc	Stude City, State, and Zip Code)	b. Mailing Address (include City, State, and Zip Code)			
1059 CQ	Clude City, State, and Zip Code)				
wath we 28478		1059 Camp Kirkundfo			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Ad	dress	
11052056m	Nhall 5671 @ Aolican	9105205627	What	15670 C Address	
I prefer to receive		Email copy of			
5. Assistant Treasu			6. Account Information (mel. CRC-3399) Add		
a, Full Name	Remove	e. Fluencial Institution	Full Name	Resmove	
). Malling Address (inc	lude City, State, and Zip Code)	b. Purpose			
. Phone Number	d. Email Address	c. Account Code	d. Type		
Email copy of	f notices				
	ommittee or Fund is in compliance with	ill applicable	one of Audi	ole 22 A 22D & 20D 2014 -6	
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 the same and the					
Printed Name of Signer  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:	Newham C Hell	
Treasurer Name:	Nacham C Hall	
Treasurer Address:	1059 camp Kinkerowo Rd	
(include city, state, & zip)	wathanc 28478	
Treasurer Phone:	910 520 5677	

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).

7-/3-20/2 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.

<b>FILED BY:</b>	
Committee Name:	Ncedham C Hazz
Treasurer Name:	Neadham C Hall
Treasurer Address:	1059 Camp Kirtuno Rd
(include city, state, & zip)	Watha NC 78478
Treasurer Phone:	910 520 5677
election cycle under the pro until the end of the election expenditures during this ele of elections and file required	nittee intends to neither receive nor expend more than \$1,000 during the current occdures set forth in G.S. 163-278.10A. This certification will remain in effect cycle for this committee. If this committee exceeds \$1,000 in contributions or action cycle, I understand that I must immediately notify the appropriate board a campaign finance reports.  N ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.
to file the next scheduled	Certification to remain at or under the \$1,000 threshold. I will now be required report for all contributions and expenditures that have not been previously of the current election cycle. I further agree to file all future reports required.
7-13-2017	Michael
Date Signed	Signature



# RECEIVED DEC 29 2017

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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 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:	Noedham C Holl
Treasurer Name:	Needham C Hall
Treasurer Address:	1059 Camp Kithwood Rd
(include city, state, & zip)	watha MC 28478
Tunanuman Dhamas	3
Treasurer Phone:	910-5205677

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.

Dec 79,7017
Date Signed

Signature Signature