



**NOTICE OF CANDIDACY
FOR LEGISLATIVE & COUNTY OFFICES
2002**

TO THE Pender COUNTY BOARD OF ELECTIONS:

I hereby file notice as a candidate for nomination as Et Sheriff Pender County
(Name of Office)

District _____, in the Democratic Party Primary Election scheduled for May 7, 2002*. I
(Name of Political Party)
affiliate with the Democratic 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 Democratic 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 within the past ninety (90) days.

I pledge that if I am defeated in the primary, I will not run for any office as a write-in candidate in the next
general election.

222 Winnie Pearl Lane
Residence Address

Hampstead NC 28443
City, State, Zip

P.O. Box 1595
Mailing Address

Burgaw NC 28425
City, State, Zip

Chris Thomas
Name as it will appear on Ballot

[Signature]
Signature of Candidate

910-270-5037
Home Telephone

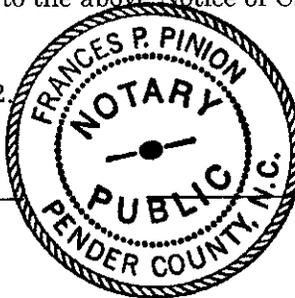
910-259-1431
Work Telephone

Certification of Notice of Candidacy

I hereby certify that Chris Thomas, the candidate who signed above, personally appeared
(Name as it will appear on Ballot)
before me this day and signed his/her signature to the above Notice of Candidacy or acknowledged his/her
signature to be the same.

This 18th day of February, 2002.

Frances P. Pinion
Signature of Certifying Officer



Notary
Title of Certifying Officer

My commission expires: 10-22-04

Verification by County Board

The undersigned has examined the voter registration records in Pender County and found
Chris Thomas to be a registered voter, affiliated with the Democratic Party and
that subject candidate has not changed his/her political party affiliation within the past ninety (90) days.

Pender
County

2-18-02
Date

Frances P. Pinion
Chairman or Director

**If pre-clearance of the Congressional, State Senate and State House District plans is not received by 10:00 a.m.
February 18, 2002, the State Board of Elections shall postpone the filing period and the primary.*

NICKNAME AFFIDAVIT

(NCGS 163-106 (a))

I, Christopher David Thomas, having been duly sworn, hereby state under
(Legal name)
oath that I have been commonly known by the nickname, Chris Thomas,
for at least five years and request that my name be placed on the ballot as follows:

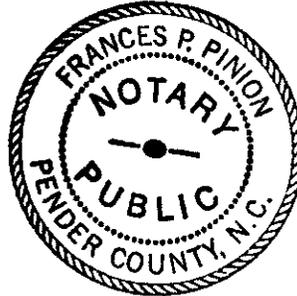
Chris Thomas. In the event that another candidate with the same last
name as mine files notice of candidacy for the same office for which I am a candidate, my name should be
listed on the ballot as follows: C. D. "Chris" Thomas.
(Legal name and nickname)

Christopher David Thomas
Legal Name

Sworn to and subscribed before me

this 18th day of February, 2002.

Frances P. Pinion
Notary Public
My commission expires 10-22-04.



Statement of Organization

1. Name of Committee Thomas For Sheriff				7. Date 2-18-02	
2. Address of Committee P.O. Box 1595				8. ID Number	
3. City Burgaw	4. State NC	5. Zip 28425	6. Phone 910-270-5037	9. Amendment <input type="checkbox"/> Yes <input type="checkbox"/> No	
Type of Committee (Check one and complete the respective information required below.)					
<input checked="" type="checkbox"/> 10. Candidate Committee			<input type="checkbox"/> Primary Candidate Committee		
<i>(If office sought is nonpartisan, write "Nonpartisan" in (d) Party Affiliation.)</i>					
a. Name of Candidate Chris Thomas	b. Candidate ID Number	c. Office Sheriff	d. Party Affiliation Democrat	e. Dist/Cty/Mun	
<input type="checkbox"/> 11. Joint Candidate Committee or Fundraiser			<input type="checkbox"/> Primary Candidate Committee		
a. If Fundraiser, Name of Event		b. If Fundraiser, Event Location			
c. Candidate Names		d. Candidate ID Number	e. Office	f. Party Affiliation	g. Share of Profits
					%
					%
					%
					%
<input type="checkbox"/> 12. Party Committee					
a. Type (Check one)			b. Party		
<input type="checkbox"/> National <input type="checkbox"/> State <input checked="" type="checkbox"/> Subordinate			Democrat		
<input type="checkbox"/> 13. General Political Committee					
a. Category (Check one)					
<input type="checkbox"/> Banking/Finance		<input type="checkbox"/> Conservative/Liberal		<input type="checkbox"/> Health	
<input type="checkbox"/> Building/Real Estate		<input type="checkbox"/> Environment		<input type="checkbox"/> Insurance	
<input type="checkbox"/> Religious		<input type="checkbox"/> Get Out the Vote		<input type="checkbox"/> Legal	
<input type="checkbox"/> Political Party not part of the Party Plan of Organization		<input type="checkbox"/> Manufacturing		<input type="checkbox"/> Trade	
<input type="checkbox"/> Other:		<input type="checkbox"/> Minority		<input type="checkbox"/> Utilities	
<input type="checkbox"/> Information Tech/Telecommunications		<input type="checkbox"/> Other:			
b. Type (Check one)			c. Definition of Type		
<input type="checkbox"/> Parent Entity <input type="checkbox"/> Political Purpose					
<input type="checkbox"/> Economic Interest					
d. Member Definition					
----- Connected Organization or Affiliated Committee -----					
e. Name		f. Mailing Address (include city, state, & zip)		g. Relationship	
<input type="checkbox"/> 14. Referendum Committee					
a. Name of Referendum		b. Referendum Date		c. Declaration (Check one)	
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose	

Statement of Organization

15. Treasurer Information						
a. Name	b. Address	c. City	d. State	e. Zip	f. Phone	
Chris Thomas	P.O. Box 1595	Burgaw	NC	28425	270-5037	
g. Email Address						
16. Assistant Treasurer Information						
a. Name	b. Address	c. City	d. State	e. Zip	f. Phone	
NONE						
g. Email Address						
17. Custodian of Books Information						
a. Name	b. Address	c. City	d. State	e. Zip	f. Phone	
Chris Thomas	P.O. Box 1595	Burgaw	NC	28425	270-5037	
g. Email Address						
18. Bank/Depository/Credit Account Information						
a. Name	b. Address	c. City	d. State	e. Zip	f. Acct Type & Number	
Thomas For Sheriff	P.O. Box 522	Hampstead	NC	28443	Checking	
g. Purpose				h. Code		
Election						
g. Purpose				h. Code		
19. Certification of Threshold <i>(for Candidate and Party Committees Only)</i>						
<input checked="" type="checkbox"/> I certify that this committee intends to neither receive nor expend more than \$3,000 during the campaign under the procedures set forth in G.S. 163-278.10A. This certification will remain until the end of the election cycle for this committee. I further understand that should the above circumstances change at any time during the election cycle, it will be necessary for the person responsible for filing financial reports to immediately notify the appropriate Board of Elections Campaign Reporting Office and to commence filing campaign reports with the next scheduled report; such report to include all funds received and spent since the beginning of the committee's current election cycle. By checking this box, I am not required to file an organizational report.						
<input type="checkbox"/> I am amending this Statement of Organization to withdraw my Certification to remain under the \$3000 threshold. I will now be required to file a report of all contributions and expenditures from the beginning of the election cycle that have not been previously reported. This report will be referred to as a "Threshold Report". I further agree to file all future reports required.						
CERTIFICATION						
I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct.						
 Signature of Appointed Treasurer or Candidate				2-18-02 Date		



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: Chris Thomas
 Treasurer Name: Chris Thomas
 Treasurer Address: P.O. Box 1595
 (include city, state, & zip) Burgaw NC 28425

 Treasurer Phone: 910-270-5037

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.

2-18-2002
 Date Signed


 Signature of Candidate