

NOTICE OF CANDIDACY (NON-PARTISAN) FOR Surf City Councilman

Date: 07/08/2003

Candidate ID: 91Y2IO

I hereby file notice that I am a candidate for election to the office of Surf City Councilman (Town of Surf City) in the municipal elections to be held in Town of Surf City, North Carolina on 11/04/2003.

I request that my name appear on the ballot as follows:

William J. (Buddy) Fowler

(Please print or type name above)

Residential Address

421 Atkinson Point Rd

Street Address

Surf City NC 28445

City, State, Zip

Mailing Address (if different)

PO Box 2898

Street Address

Surf City NC 28445

City, State, Zip

Telephone Number(s)

Business

(910) 328-3896

Home

Cell

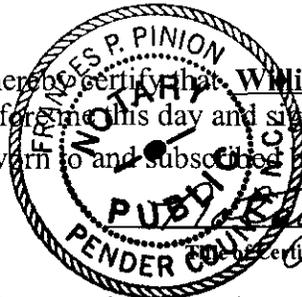
William J. Fowler

Signature of Candidate (legal name)

Certification of Notice of Candidacy

I hereby certify that William Joseph Fowler, the candidate who signed above, personally appeared before me this day and signed in my presence.

Sworn to and subscribed before me this 8th day of July, 2003, PENDER County, North Carolina.



Notary Public

Frances P. Pinion

Signature of Certifying Officer

My commission expires: 10-22-04

Verification by County Board of Elections

The undersigned has examined the voter registration records in PENDER County and found William Joseph Fowler to be a registered voter in the municipality of Surf City.

7-8-03

Date

Pender

County

Frances P. Pinion

Chairman or Director

The Notice of Candidacy must be signed in the presence of the chairman or secretary 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 § 163-106.) 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).

NICKNAME AFFIDAVIT

(NCGS 163-106 (a))

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

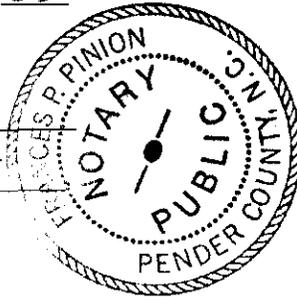
William S. (Buddy) Fowler. In the event that another candidate with the same last
name as mine files notice of candidacy for the same office for which I am a candidate, my name should be
listed on the ballot as follows: William S. (Buddy) Fowler
(Legal name and nickname)

William J. Fowler
Legal Name

Sworn to and subscribed before me

this 8th day of July, 2003.

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



Statement of Organization - Candidate Committee

Amendment
 Yes No

1. Committee Information					
a. Full Name			c. ID Number		
Fowler For Town Council			914210		
b. Mailing Address (include City, State and Zip Code)			d. Date Organized		
POB 2898 Surf City, N.C. 28445			7-1-03		
			e. Phone Number		
			910-328-3896		
2. Candidate Information			<input type="checkbox"/> Candidate's Primary Committee		
a. Full Name		c. Candidate ID Number		d. Party Affiliation	
William J. (Buddy) Fowler				Dem Non Partisan	
b. Mailing Address (include City, State, and Zip Code)		e. Office Sought		f. Jurisdiction	
POB 2898 Surf City, N.C. 28445		Town Council		Surf City	
<small>(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)</small>					
3. Treasurer Information			4. Custodian of Books Information		
a. Full Name			a. Full Name		
William J. (Buddy) Fowler			Treasurer		
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
POB 2898 Surf City, N.C. 28445					
c. Phone Number	d. Email Address		c. Phone Number	d. Email Address	
328-3896	WBuddyFowler@AOL.com				
5. Assistant Treasurer Information		<input type="checkbox"/> Add <input type="checkbox"/> Remove		6. Account Information (incl. CRO-3500) <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	
a. Full Name		a. Financial Institution Full Name		b. Purpose	
N/A		Bank of America		Checking For Campaign	
b. Mailing Address (include City, State, and Zip Code)		c. Code		d. Type	
		UP		Checking	
c. Phone Number		d. Email Address			
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.					
William J. Fowler		William J. Fowler		7-3-03	
Printed Name of Signer		Signature of Appointed Treasurer		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: William J. Fowler (Buddy)

Treasurer Name: William J. (Buddy) Fowler

Treasurer Address: POB 2895
(include city, state, & zip) Swif City, N.C. 28645

Treasurer Phone: 910-328-3896

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.

7-3-03
Date Signed

William J. Fowler
Signature of Candidate



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(919) 733-7173
Fax: (919) 715-8047

Certification of Threshold

FILED BY:

Committee Name: Fowler for Town Council

Treasurer Name: William J. Fowler

Treasurer Address: P.O. Box 2895

(include city, state, & zip) Surf City, N.C. 28045

Treasurer Phone: 910-328-3896

Check One:

I certify that this committee intends to neither receive nor expend more than \$3,000 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 \$3,000 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.

I am withdrawing my Certification to remain under the \$3000 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.

7-03-03
Date Signed

William J. Fowler
Signature



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Raleigh, NC 27611-7255
(919) 733-7173
Fax: (919) 715-8047

Certification to Close Committee

FILED BY:

Committee Name: Fowler For Town Council
 Treasurer Name: William J. Fowler
 Treasurer Address: POB 2898
 (include city, state, & zip) Surf City, N.C. 28445

 Treasurer Phone: 910-328-3896

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 \$3,000 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 \$3,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

12-13-03
Date Signed

William J. Fowler
Signature

DEC 17 2003