

COUNTY BOARD OF ELECTIONS

NOTICE OF CANDIDACY
LEGISLATIVE AND COUNTY OFFICES 2006

TO THE PENDER COUNTY BOARD OF ELECTIONS:

I hereby file notice as a candidate for nomination as County Commissioner.
(Name of Office)

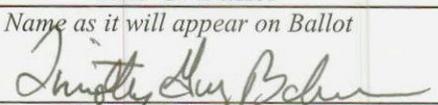
District COMMISSION #3, in the DEMOCRATIC Party PRIMARY Election scheduled for May 2, 2006.

I affiliate with the DEMOCRATIC Party, and I certify that I am now registered on the registration
(Name of Political Party)

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.

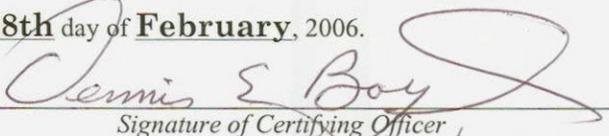
<u>2356 Clarks Landing Rd</u> <i>Residence Address</i>	<u>Tim G. Baker</u> <i>Name as it will appear on Ballot</i>	
<u>Rocky Point NC 28457</u> <i>City, State, Zip</i>	 <i>Signature of Candidate</i>	
<u></u> <i>Mailing Address</i>	<u>(910) 675-2347</u> <i>Home Telephone</i>	<u>(910) 675-1423</u> <i>Work Telephone</i>
<u></u> <i>City, State, Zip</i>	<u></u> <i>State Bar Number (Judicial Offices only)</i>	

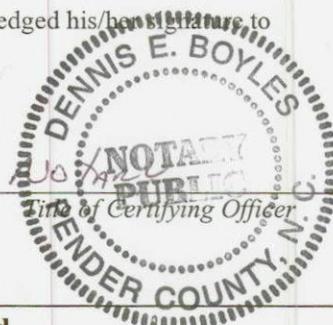
Certification of Notice of Candidacy

I hereby certify that Tim G. Baker, the candidate who signed above, personally appeared before
(Name as it will appear on Ballot)

me this day and signed his/her signature to the above Notice of Candidacy or acknowledged his/her signature to be the same.

This 28th day of February, 2006.


Signature of Certifying Officer



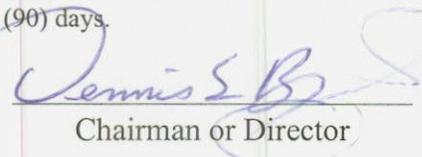
My commission expires: 2/31/2010

Verification by County Board

The undersigned has examined the voter registration records in PENDER County and found Timothy Guy Baker 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

2/28/06
Date


Chairman or Director

Affidavit Attesting to Nickname

(NCGS § 163-106(a))

I, Timothy Guy Baker have been duly sworn, hereby state under oath that I have been commonly known by the nickname, Tim G. Baker, for at least five years and request that my name be placed on the ballot as follows: Tim G. Baker. 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: Tim G. Baker.

Timothy Guy Baker
(Signature - legal name)



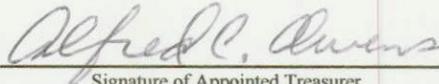
Sworn to and subscribed before me this 28th day of February, 2006.

Dennis E Boyles
Signature of Certifying Officer

My commission expires: 2/31/2010

Statement of Organization - Candidate Committee

Amendment	
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

1. Committee Information					
a. Full Name			c. ID Number		
Tim G. Baker For Commissioner			3RYRZ1		
b. Mailing Address (include City, State and Zip Code)			d. Date Organized		
5490 Horse Branch Road Watha, N. C. 28478			03/09/2006		
			e. Phone Number		
			(910) 259-7984		
2. Candidate Information		<input type="checkbox"/> Candidate's Primary Committee			
a. Full Name		c. Candidate ID Number		d. Party Affiliation	
Timothy G. Baker		3RYRZ1		Democrat	
b. Mailing Address (include City, State, and Zip Code)		e. Office Sought		f. Jurisdiction	
2356 Clarks Landing Road Rocky Point, N. C. 28457		Commissioner		3	
<i>(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)</i>					
3. Treasurer Information			4. Custodian of Books Information		
a. Full Name			a. Full Name		
Alfred C. Owens					
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
5490 Horse Branch Road Watha, N. C. 28478					
c. Phone Number		d. Email Address		c. Phone Number	
(910) 259-7984		aowens@ec.rr.com			
5. Assistant Treasurer Information		<input type="checkbox"/> Add <input type="checkbox"/> Remove		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose			
c. Phone Number		d. Email Address		c. Code	
				d. Type	
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.					
Alfred C. Owens				03/09/2006	
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:

Tim G. Baker

Treasurer Name:

Tim G. Baker

Treasurer Address:

2356 Clarke Landing Rd.

(include city, state, & zip)

Reddy Point NC 28457

Treasurer Phone:

910-675-2347

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.

2-28-06

Date Signed

Tim G. Baker

Signature of Candidate

MAR 09 2006

Statement of Organization - Candidate Committee

Amendment	
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

1. Committee Information	
a. Full Name	c. ID Number
TIM G. BAKER FOR COMMISSIONER	3RYRZ1
b. Mailing Address (include City, State and Zip Code)	d. Date Organized
5490 HORSE BRANCH RD WATHA, N.C. 28478	3-9-06
	e. Phone Number
	910-259-7984

2. Candidate Information		<input type="checkbox"/> Candidate's Primary Committee
a. Full Name	c. Candidate ID Number	d. Party Affiliation
TIMOTHY G. BAKER	3RYRZ1	DEMOCRAT
b. Mailing Address (include City, State, and Zip Code)	e. Office Sought	f. Jurisdiction
2356 CLARKS LANDING RD ROCKY POINT, NC 28457	COMMISSIONER	3
	<i>(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)</i>	

3. Treasurer Information		4. Custodian of Books Information	
a. Full Name	a. Full Name		
ALFRED C. OWENS			
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City, State, and Zip Code)		
5490 HORSE BRANCH RD, WATHA, N.C. 28478			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
910-259-7984	rowens@ec.ny.com		

5. Assistant Treasurer Information		<input type="checkbox"/> Add	6. Account Information <i>(incl. CRO-3500)</i>		<input type="checkbox"/> Add
a. Full Name	<input type="checkbox"/> Remove		a. Financial Institution Full Name	<input type="checkbox"/> Remove	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose			
c. Phone Number	d. Email Address	c. Code	d. Type		

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.

ALFRED C. OWENS Alfred C. Owens 3/9/06
 Printed Name of Signer Signature of Appointed Treasurer Date



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

MAR 09 2006

Kimberly Westbrook
 Deputy Director – Campaign Reporting

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

Confidential

Certification of Financial Account Information

FILED BY:

Committee Name: TIM G. BAKER FOR COMMISSIONER
 Treasurer Name: AL OWENS
 Treasurer Address: 5490 HORSE BRANCH RD.
 (include city, state, & zip) WATHA, N.C. 28478
 Treasurer Phone: 910-259-7984

I certify that the information provided below is true and accurate. I am providing all account information for the above named Committee. These account numbers include all bank accounts utilized, credit card accounts, money market or savings accounts, or any other financial account used for any purpose by the Committee.

The information provided on this form is considered confidential and is not subject to public disclosure. The information provided would only be used for the purposes of an audit or investigation or as required by a court of competent jurisdiction. It will be necessary to assign each account number a "code" in order to provide account information on required disclosure reports. If an account number is used as the "code", confidentiality of the account number is presumed to have been waived.

Type of account	Financial Institution	Address	Account Number	Code
CHECKING	FIRST CITIZENS	BURGAW, NC		9C

By signing this statement, I authorize agents of the State Board of Elections to inspect all accounts provided.

3/9/06
 Date Signed

Al C. Owens
 Signature of Candidate or Treasurer

In lieu of providing account information, I certify that this committee will not raise or spend any money except for the filing fee. (Only candidates may choose this option.)

 Date Signed

 Signature of Candidate or Treasurer