



NOTICE OF CANDIDACY (Non- PARTISAN)

2009

Election Year

Municipal/County

Election

For the office of: TOPSAIL BEACH- COMMISSIONER

Date: 07/09/2009

Candidate ID: 7HLU74

I hereby file notice as a candidate for election to the office of TOPSAIL BEACH- COMMISSIONER in the

Election to be held on 11/03/2009

in PENDER

County.

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

William Johnson

Please print or type name above  
1521 OCEAN BLVD

TOPSAIL BEACH, NC 28445

Residential Address: (Street, City, ZIP)  
PO BOX 3284

TOPSAIL BEACH, NC 28443

Mailing Address if different (POB, City, Zip)

Home: ( ) - -

Cell: (910) 620 - 3388

Business: ( ) - -

Check "YES" or "NO" I swear to the following to be true, correct, and complete to the best of my knowledge or belief.

YES NO

Have you ever been convicted of a felony? (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.)

If you have been convicted of a felony, you are required to complete the "Candidate Felony Disclosure" form within 48 hours of submitting this notice. GS § 163-106

Signature of Candidate (legal name) *William Johnson*

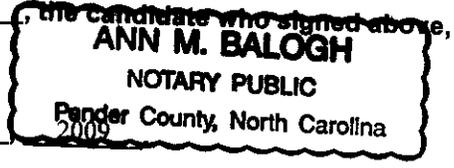
Certification of Notice of Candidacy

I hereby certify that William Johnson

(Name as it will appear on ballot)

personally appeared before me this day and signed in my presence.

Sworn and subscribed before me this 9th day of July



Title and signature of certifying Officer: *Ann M Balogh*

My commission expires: Feb 23, 2011 State of North Carolina, County of Pender

Verification by County Board of Elections

The undersigned has examined the voter registration records in PENDER County and found WILLIAM JOHNSON to be a registered voter in the municipality/county of Town of Topsail Beach

County Chairman, Secretary or Director:

*Dennis E Byrd*  
Signature and date

7/9/09

The Notice of Candidacy must be signed in the presence of the chairman, secretary or director 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 § 163-294.2.) 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).

# Statement of Organization - Candidate Committee

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.

Amendment

Yes  No

a. Full Name		c. ID Number
COMMITTEE TO ELECT WILLIAM JOHNSON		
b. Mailing Address (include City, State and Zip Code)		d. Date Organized
P.O. BOX 3284 TOPSAIL BEACH, NC 28445		7-9-07
		e. Phone Number
		910-620-3388

a. Full Name	c. Candidate ID Number	d. Party Affiliation
WILLIAM JOHNSON		
b. Mailing Address (include City, State, and Zip Code)	e. Office Sought	f. Jurisdiction
P O BOX 3284 TOPSAIL BEACH, NC 28445	COMMITTEE	
(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)		

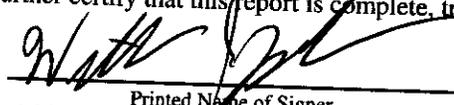
a. Full Name	b. Mailing Address (include City, State, and Zip Code)
WILLIAM JOHNSON	P.O. BOX 3284 TOPSAIL BEACH, NC 28445
c. Phone Number	d. Email Address
910-620-3388	BILLJOHNSONTI@AOL.COM

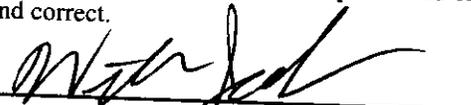
a. Full Name	b. Mailing Address (include City, State, and Zip Code)
WILLIAM JOHNSON	P O BOX 3284 TOPSAIL BEACH, NC 28445
c. Phone Number	d. Email Address
910-620-3388	BILLJOHNSONTI@AOL.COM

a. Full Name	a. Financial Institution Full Name		
b. Mailing Address (include City, State, and Zip Code)	b. Purpose		
c. Phone Number	d. Email Address	c. Account Code	d. Type

### 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.

  
Printed Name of Signer  
WILLIAM JOHNSON

  
Signature of Appointed Treasurer

7-9-07  
Date



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

Kimberly Westbrook-Strach  
 Deputy Director – Campaign Reporting

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

**Certification of Treasurer**

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

**FILED BY:**

Candidate Name: WILLIAM JOHNSON  
 Treasurer Name: WILLIAM JOHNSON  
 Treasurer Address: P O BOX 9284  
 (include city, state, & zip) TOPSAIL BEACH, NC 28445  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Treasurer Phone: 910-620-3388

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).

7-9-09  
 Date Signed

[Signature]  
 Signature of Candidate

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.



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**Certification of Threshold**

This Certification is used by Candidate and Party Committees only, to declare or withdraw the committee's intent to raise or spend under \$3,000 in the current election cycle

**FILED BY:**

Committee Name: To Elect WM JOHNSON  
 Treasurer Name: WILLIAM JOHNSON  
 Treasurer Address: P O BOX 3784  
 (include city, state, & zip) TOPSAIL BEACH, NC 28445  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Treasurer Phone: 910-620-3989

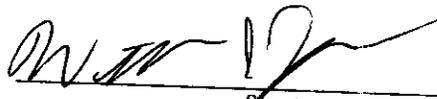
Check One:

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.  
**THIS DECLARATION CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.**

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.

7-9-09

Date Signed



Signature

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.



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**Candidate Designation of Committee Funds**

This form is used by candidate committees only and allows the candidate to designate in the event of their death, how the committee's funds are to be disbursed using the eight allowable methods outlined in 163-278.16B(a).

Candidate Name: WILLIAM JOHNSON

Committee Name: COMMITTEE TO ELECT WM JOHNSON

Treasurer Name: WILLIAM JOHNSON

If Candidate is own treasurer, designate an agent to carry out designations: MAURA JOHNSON

Committee ID #: \_\_\_\_\_

Level Registered: [State] [County] If county, specify: \_\_\_\_\_

I, WILLIAM JOHNSON, hereby direct that in the event of my death or incapacity all funds remaining in my Campaign Committee account(s) (after payment of permitted outstanding debts or reasonable expenses for winding up the Committee or closing office) be paid in the following manner as permitted by N.C. Gen. Stat. 163-278.16B(a).

Name of Entity <small>(Select from §163-278.16B(a))</small>	Plan for Disbursement (eg. Amount or %)
1. <u>TOWN OF TAPPAH BEACH</u>	<u>100%</u>
2. _____	_____
3. _____	_____

By signing this form, I certify that the foregoing entities are eligible beneficiaries under N.C. Gen. Statute 163-278.16B(a). A copy of this form should be maintained with the Committee records.

Signature of Candidate: [Handwritten Signature]

Date: 11-9-08

Note: This Designation is to be filed with the Election Board where the committee's campaign reports are filed.



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State Board of Elections

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**Confidential**

**Certification of Financial Account Information**

This Certification is used to report confidential bank account information for all financial accounts established by the committee and must accompany the Statement of Organization Form

**FILED BY:**

Committee Name: COMMITTEE TO ELECT WILLIAM JOHNSON  
 Treasurer Name: WILLIAM J. JOHNSON  
 Treasurer Address: P.O. BOX 3284  
 (include city, state, & zip) TOPSAIL BEACH, NC 28445  
 Treasurer Phone: 910-620-3388

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 "account code" in order to provide account information on required disclosure reports. If an account number is used as the "account code", confidentiality of the account number is presumed to have been waived.

The treasurer shall maintain all moneys of the political committee in a bank account or bank accounts used exclusively by the political committee and shall not commingle those funds with any other moneys.

Type of account	Financial Institution	Address	Account Number	Account Code
CHECKING	BANK OF AMERICA	300 US Hwy 17 NORTH HOLLY BIRCH, NC 28445		WJ

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

11-15-09  
Date Signed

William J. Johnson  
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



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**Certification to Close Committee**

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

**FILED BY:**

Committee Name: COMM TO ELECT WILLIAM JOHNSON  
 Treasurer Name: WILLIAM I JOHNSON  
 Treasurer Address: 1521 OCEAN BLVD  
 (include city, state, & zip) P O BOX 3284  
TOPSAIL BEACH, NC 28445  
 Treasurer Phone: 910-620-3388

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.

12-15-09  
 Date Signed

[Signature]  
 Signature

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.