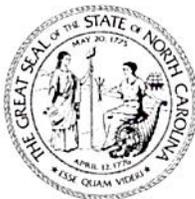


**NORTH CAROLINA
STATE BOARD OF ELECTIONS**

PO BOX 27255
RALEIGH, NC 27611
TELEPHONE 919-733-7173



**NOTICE OF CANDIDACY
COUNTY AND LEGISLATIVE**

TO THE PENDER BOARD OF ELECTIONS:

I hereby file notice as a candidate for nomination as _____ COMMISSIONER DISTRICT 1
(Name of Office)

District _____, in the REPUBLICAN Party Primary Election scheduled for May 4, 2010.
(Name of Political Party)

I affiliate with the REPUBLICAN Party, and I certify that I am now registered on the registration records of the precinct in which I reside.

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 the same office as a write-in candidate in the next general election.

Have you ever been convicted of a felony? YES NO
(This shall not apply to candidates required by G.S. 138A-22 (d) to file a Statement of Economic Interest)

If the answer is yes, provide the following:

Name of the offense: _____ Date of the conviction: _____

Date of the restoration of citizenship rights: _____ County and state of conviction: _____

The felony does not need to be disclosed if the same was dismissed as a result of reversal on appeal or resulted in a pardon of innocence or expungement.

I swear (affirm) that the statements contained on this form are true, correct and complete to the best of my knowledge or belief.

240 DORAL DR
HAMPSTEAD, NC 28443
City, State, Zip
Mailing Address, if different
City, State, Zip

David Williams
Name as it will appear on Ballot
Signature of Candidate
(910) 270-7757 (910) 489-1107
Home Telephone Work Telephone

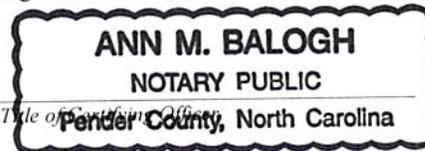
Certification of Notice of Candidacy

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

This 15th day of February, 20 10.

Ann M Balogh
Signature of Certifying Officer

Notary



My commission expires: Feb. 23, 2011

Verification by County Board

JAMES WILLIAMS JR

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

PENDER
County

2/16/10
Date

[Signature]
Chairman of Director

This form is available as a public record in the elections office where filed. A prior felony conviction does not preclude holding elected office if rights of citizenship have been restored.

Affidavit Attesting to Nickname
(NCGS § 163-106(a))

I, Some David Williams Sr. (Legal name) have been duly sworn, hereby state under oath that I have been commonly known by the nickname, David, for at least five years and request that my name be placed on the ballot as follows: David Williams.
(Name to appear on ballot)

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:

David Williams
(Legal name and nickname)

[Signature]
(Signature - legal name)

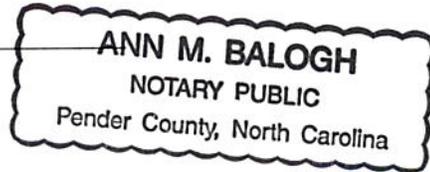
I hereby certify that David Williams, the candidate who signed above, personally signed in my presence.

Sworn to and subscribed before me this 15 day of Feb., 2010.

Notary
Title of Certifying Officer

Ann M Balogh
Signature of Certifying Officer

My commission expires: Feb. 23, 2011



Statement of Organization - Candidate Committee

Yes No

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.

1. Committee Information			
a. Full Name		c. ID Number	
DAVID WILLIAMS FOR PENDER COMMISSIONER		5HL57V	
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
240 DORAL DRIVE HAMPSTEAD, NC 28443		2/4/10	
		e. Phone Number	
		910-270-7757	
2. Candidate Information		<input checked="" type="checkbox"/> Candidate's Primary Committee	
a. Full Name	c. Candidate ID Number	d. Party Affiliation	
DAVID WILLIAMS		REPUBLICAN	
b. Mailing Address (include City, State, and Zip Code)	e. Office Sought	f. Jurisdiction	
240 DORAL DRIVE HAMPSTEAD, NC 28443	COUNTY COMMISSIONER	PENDER	
<i>(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)</i>			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name	ROBERT HURRY	a. Full Name	ROBERT HURRY
b. Mailing Address (include City, State, and Zip Code)	100 DOLPHIN CIR HAMPSTEAD NC 28443	b. Mailing Address (include City, State, and Zip Code)	100 DOLPHIN CIR HAMPSTEAD NC 28443
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
910-270-3598	RHURRY@AOL.COM	910-270-3598	RHURRY@AOL.COM
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name	<input type="checkbox"/> Add <input type="checkbox"/> Remove	a. Financial Institution Full Name	<input type="checkbox"/> Add <input type="checkbox"/> Remove
		FIRST FEDERAL	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
		CAMPAIGN DEPOSITS AND PAYMENTS	
c. Phone Number	d. Email Address	c. Account Code	d. Type
		1	CHECKING
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.			
ROBERT HURRY Printed Name of Signer		Robert Hurry Signature of Appointed Treasurer	3/23/10 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: DAVID WILLIAMS

Treasurer Name: ROBERT HURRY

Treasurer Address: 100 DOLPHIN CIR

(include city, state, & zip) HAMPSTEAD NC 28443

Treasurer Phone: 910-270-3598

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).

3/23/10
 Date Signed

Signature of Candidate

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



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

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: DAVID WILLIAMS FOR PENDER COMMISSIONER
 Treasurer Name: ROBERT HURRY
 Treasurer Address: 100 DOLPHIN CIR
 (include city, state, & zip) HAMPSTEAD NC 28443
 Treasurer Phone: 910-270-3598

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	FIRST FEDERAL		XXXXXXXXXX	1

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

3/23/10
Date Signed

Robert Hurry
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

Detailed Summary

Amendment
 Yes No

Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable) DAVID WILLIAMS FOR PENDER COMMISSIONER		2. Type of Report ORGANIZATIONAL		3. ID Number 5HLS7V	
Start of Election Cycle: January 1, 2010		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 0		\$ 0	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$	
6) Contributions from Individuals (CRO-1210)		\$ 1,000		\$ 1,000	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$		\$	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$		\$	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$		\$	
11e) Exempt Purchase Price Sales (CRO-1265)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 1,000		\$ 1,000	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$		\$	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
13c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$		\$	
15) Loan Repayments (CRO-1420)		\$		\$	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$		\$	
17) In-Kind Contributions (CRO-1510)		\$		\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 0		\$ 0	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1,000		\$ 1,000	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$			
22) Debts and Obligations owed by the Committee (CRO-1610)		\$			
23) Debts and Obligations owed to the Committee (CRO-1620)		\$			
24) Account Transfers Within the Committee (CRO-1720)		\$			
25) Administrative Support (CRO-1710)		\$		\$	
26) Forgiven Loans (CRO-1440)		\$		\$	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$		\$	
28) Contributions to be Refunded (CRO-1215)		\$		\$	

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
David Williams for Pender Commissioner					5HL57V	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Bart Lee, JR 301 Leas Lane Hampstead, N.C. 28443 270-4397			RETIRED			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			SELF EMPLOYED - COMMERCIAL FISHING+INVESTMENTS		\$ 500	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	CHECK		02/04/2010	\$ 500	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JACK LEE 14365 USHWY 17 Hampstead, N.C. 28443 270-1980			RETIRED			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			SELF EMPLOYED - COMMERCIAL FISHING+INVESTMENTS		\$ 500	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	1	CHECK		02/04/2010	\$ 500	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field		e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1000	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					\$ 1000	